

ARIZONA STATE TRAUMA REGISTRY (ASTR)

2008-2010 DATA DICTIONARY - FULL DATA SET - Version 1.5 Last updated 8-3-09

REQUIRED DATA ITEMS/FORMAT SPECIFICATIONS FOR DESIGNATED LEVEL I, LEVEL II & LEVEL III TRAUMA CENTERS SUBMITTING DATA TO THE ARIZONA STATE TRAUMA REGISTRY

(LEVEL IV TRAUMA CENTERS, NON-DESIGNATED HOSPITALS & ALS BASE HOSPITALS MAY SUBMIT THE FULL OR REDUCED DATA SET)

Effective for ED/Hospital Arrival Dates January 1, 2008 - December 31, 2010

Supplement with database information from vendor specifications. Please refer to the Appendices and Index at the end of this document for more information on ASTR.

ASTR Database Information / Limitations:

Only patients meeting the ASTR Trauma Patient Inclusion Definition are included in the ASTR database. ASTR inclusion criteria were changed in 2008. (See Appendix I for criteria.)

The ASTR database does not contain all fatal and non-fatal injury events within Arizona. Injured patients are NOT captured in the ASTR database if they:

1) Died at the scene and were not transferred to a trauma center, 2) Were treated only at a non-reporting hospital, or 3) Patient did not meet the ASTR trauma patient inclusion criteria.

A limited number of Arizona hospitals submit data to ASTR, but all designated trauma centers report data to ASTR. (Refer to Appendix A1 for list of ASTR reporting hospitals.)

Designated Level I, Level II, and Level III Trauma Centers are required to submit to ADHS the full data set as outlined in this data dictionary. (See Appendix J.)

Level IV Trauma Centers, Non-Designated Hospitals, and ALS Base Hospitals may collect the full data set, but do have the option of submitting a reduced data set (See Appendix J).

Duplicate records may exist in the ASTR database for patients who transferred from one reporting hospital to another during the course of their injury management.

Many required data element definitions and drop down menus were changed for 2008. It is important to account for these changes when comparing trauma registry data from multiple years.

This dictionary pertains to records with ED/Hospital Arrival Dates 2008-2010. A separate ASTR data dictionary exists for records with ED/Hospital Arrival Dates 2005-2007.

For questions regarding the ASTR database (including what quality checks have been run on the data received), please contact the ASTR Trauma Registry Manager at 602-542-1245.

For more information on the Arizona State Trauma Registry, please go to the ADHS website link: <http://www.azdhs.gov/bems/TraumaRegistry.htm>

Column Descriptions (for this document):

Data elements shaded in gray are ASTR-only database fields and are NOT required for submission by reporting hospitals.

Data Element Description = Name of ASTR required data element. **Please use data element name when submitting an ASTR data request.**

To assist users with reporting on multiple years of data, a text box was added (below data element description) to document ASTR data changes. Differences between the 2005-2007 and 2008 ASTR data dictionary are documented to assist users with reporting. Changes from reporting years 2008 to 2009 are also documented in text boxes under data element description.

Table Name = ASTR Oracle table name in which the data element values are stored (Note: If a Care Phase applies, it will be listed in parenthesis after table name. See Care Phase info below.)

****Note on ASTR Trauma One® Oracle tables:** In the ASTR Oracle database, "**ACCTNO**" is the common key field and the MAINDATA table is the primary table.

The "ACCTNO" field is auto-generated by the ASTR Trauma One database.

Carephase = Reporting constraints exist for data elements that are stored with the same table and field name (Example: Vital sign data from different data entry pages require a carephase)

Attention to carephase constraint is only needed if using NON-Trauma One software to report on data. The Trauma One reporting module already accounts for carephase.

Field Name = Field name as stored in ASTR database. *Database field names may not correspond to the type of data being recorded - refer to data element description instead.

Copy Field = **This information is important for both Trauma One & non-Trauma One reporting methods.** For some data elements, multi-copy data is stored in the same data field. User must select which data values (1st, 2nd, etc.) that the report should query to get the intended results. Not all fields are copy fields, but it is important to pay attention to the ones that are.

If a number is listed under Copy Field, the number indicates which copy should be selected to report on that specific data element.

Copy Field Example 1: Method of payment is stored as a copy field. The first and second method of payment are stored in order in the same location of the database. If you want to report only the **primary** method of payment, you must indicate to report software that you want FIRST value. Otherwise, your report will contain both primary and secondary payer information.

Copy Field Example 2: When querying data fields for First and Second Referring fields, you must indicate to the software if you want 1st or 2nd. Otherwise, your report will contain both.

Field Type = Indicates whether the data value requires a Character, Numeric, Date, Time or Memo type of data entry response.

Field Width = The maximum amount of characters or numbers (including spaces and punctuation) that the database will accept for that specific data field

NTDS refers to the National Trauma Data Standard, the format specifications for submission of data to the National Trauma Data Bank (NTDB). For more info: <http://www.ntdsdictionary.org/>

NTDS Data Element # = National data element number in the NTDS Data Dictionary version 1.2.5, revised November 2008. If no NTDS # is listed, that element is not a national requirement.

Picklist? (Yes/No) = Indicates whether there is an ASTR required picklist (drop-down menu) associated with the data element.

Data Value = Indicates the actual data values (short text) stored in database for reporting. Data values submitted to ASTR must match the state-required picklist values and **must be UPPERCASE**.

Primary/Subpicklist Descriptions = Long text description of the picklist values, as users view them on the data entry screen. When mapping data for interfacing, use the data values (short text).

When the registrar selects a long text description from the data entry screen, the corresponding short text data value is stored in the database for reporting purposes.

Definition & Comments = Brief definition of the data element, including important data entry instructions for registrars entering the trauma data. Also includes comments on acceptable Null Values.

"Single picklist entry" indicates that the user may select only one data value from the list. "Multiple entry picklist" indicates that the user may select more than one value from the list.

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)
DEMOGRAPHIC SECTION - "DEMOGRAPHICS" PAGE IN ASTR DATABASE										
Account Number**	MAINDATA	ACCTNO		Numeric	9		No			<p>Unique account number generated by the database for each record.</p> <p>In the ASTR database, this is referred to as the Lancet Account No. or Patient Account No.</p> <p>**ASTR Reporting note: ACCTNO is the common key field in the ASTR Oracle tables. MAINDATA is the primary table.</p> <p>Automatically generated by system. ASTR Account Number will <u>not</u> be the same number in reporting hospital databases. A "State Unique ID" field was created to help ASTR and hospitals communicate regarding specific records (see below).</p>
Registration Number	MAINDATA	EMRNUM		Character	15		No			<p>Unique number assigned by your hospital <u>for this specific episode of care</u>.</p> <p>May also be referred to in hospital billing as "Patient Control Number", "Patient Account Number" or "Patient Encounter Number". It is the unique number for this hospital visit. For linking purposes, this number should match what your facility submits to HDD. Do not add leading zeros or trailing zeros unless they are an official part of your hospital numbering system.</p> <p>Not Documented and Not Applicable should not be used.</p>

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Medical Record Number	MAINDATA	MEDRECNUM		Character	15		No			Hospital record number through which the patient's hospital medical history can be retrieved.
										May also be referred to as the " Patient Health Record Number ". Number is unique for the patient, but not unique for this hospital visit. For linking purposes, this number should match what your facility submits to HDD. Do not add leading or trailing zeros unless they are an official part of your hospital numbering system.
										Not Documented and Not Applicable should not be used.
ED/Hospital Arrival Date*	TRA	TR_ENT_DT		Date	8	ED_01	No	mmddyyyy	This field is found on both the ASTR Demographic and ED/Trauma page. Editing either field should update the other.	First recorded arrival date into the emergency department of your facility.
										If patient did not enter your hospital through the ED (e.g., direct admit), enter the date of first contact with the patient for this injury event.
										*Determines the case date range for data submission and for ASTR data reporting. Valid entry is required for all records.
										System will autocalculate Patient Age from entry of ED/Hospital Arrival Date and Date of Birth.
										Not Documented and Not Applicable should not be used. Field should not be left blank.
Hospital Admission Date	MAINDATA	ADMDATE		Date	8		No	mmddyyyy		Date of inpatient admission at your facility.

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										Field is used to calculate Hospital Admission LOS. Not Documented should not be used. Not Applicable should be used if patient was not admitted as an inpatient to your facility.
Admission Status at Reporting Facility	STAT2008	INP_STATUS		Character	10		Yes	ED_ADMIT	Admitted through ED at your hospital	Admission status of the patient at your facility. (This field indicates to ASTR whether the patient had ED care, inpatient care or both.)
<i>2008 change: New field.</i>								DIR_ADMIT	Direct Admit at your hospital	Single entry picklist.
								ED_TRANSFR	Seen in your ED then transferred out by EMS	Not Documented should not be used.
								ED_RELEASE ED_DEATH	Seen in your ED and released (or refer priv. vehicle) DOA or Died in ED	Not Applicable should not be used. If patient was not admitted, enter one of the ED choices from picklist. If patient left AMA before admission, select "Seen in your ED and released..."
Patient Last Name	MAINDATA	LASTNAME		Character	25		No			Patient's last name as it appears in medical record.
										Not Documented may be used. Not Applicable should not be used.
Patient First Name	MAINDATA	FIRSTNAME		Character	12		No			Patient's first name as it appears in medical record.
										Not Documented may be used. Not Applicable should not be used.
Patient Middle Initial	MAINDATA	MIDINIT		Character	1		No			Patient's middle initial as it appears in medical record.
										Not Documented and Not Applicable may be used.
Social Security Number	PERHIST	PT_SSN		Character	11		No	9 digit number XXXXXXXXX		Patient's Social Security Number as it appears in medical record.
										Not Documented should be used when patient has a SSN, but number is unknown.

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										Not Applicable should be used if patient does not have a SSN.
Patient Date of Birth	PERHIST	BIRTHDAY		Date	8	D_07	No	mmddyyyy		The patient's date of birth (DOB).
										System will autocalculate Patient Age from entry of DOB and ED/Hospital Arrival Date.
										If DOB is unknown, enter Not Documented for DOB and then enter an estimated age for patient.
										Not Applicable should not be used.
Patient Age	PERHIST	AGE		Numeric	3	D_08	No	Values 1-120		The patient's age upon arrival at your facility. If DOB is unknown, enter best approximation of age.
<p>2008 changes: Patient Age now autocalculated using ED/Hospital Arrival Date, not Admit Date. Updated instructions for 2008: Not Documented and Not Applicable will not be accepted - enter best approximation of age if DOB is unknown.</p>										System will autocalculate patient Age and Age Units when ED/Hospital Arrival Date and DOB are entered. If Age is entered in months, days or hours, the user may need to manually enter the age and units.
										<p>Registrar note: If pt age is < 1 day, enter Age in "Hours". If pt age is >= 1 day but < 1 month, use "Days". If patient age is >= 1 month but <1 year, use "Months". If age is 13 - 23 months, you may enter the age in months or as 1 year. Age 2 or older must be entered in "Years".</p>
										Not Documented and Not Applicable should not be used.
Units of Age	PERHIST	AGE_UNIT		Character	2	D_09	Yes	Y	Years	The units used to document the patient's age (Years, Months, Days or Hours).
<p>2008 change: Picklist updated. YE, ME, DE removed from list. Added H (Hours).</p>										
								M	Months	Single entry picklist.

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								D	Days	Registrar note: If pt age is < 1 day, enter Age in "Hours". If pt age is >= 1 day but < 1 month, use "Days". If patient age is >= 1 month but <1 year, use "Months". If age is 13 - 23 months, you may enter the age in months or as 1 year. Age 2 or older must be entered in "Years".
								H	Hours	Not Documented and Not Applicable should not be used.
**Age (Years)	PERHIST	MONTH_INC		Numeric	5		No	If "Age" is <12 months, <365 days, or entered in hours, "Age (Years)" will populate as 0. If "Age Units" is entered as months and "Age" is >12, Age (Years) will be calculated as the closest age with no rounding.	Example of Age (Years) calculation: If patient age is 5 Hours, Age (Years) = 0. If patient age is 11 Months, Age (Years) = 0. If patient age is 19 Months, Age (Years) = 1. If patient age is entered in Years, Age (Years) will be equal to the age entered.	The patient's age, converted by ASTR database into an Age (Years) value for reporting purposes.
										ASTR system only. Automatically populated by ASTR database at import.
Gender	PERHIST	SEX		Character	1	D_12	Yes	M	Male	The patient's gender.
2008 change: Picklist updated. U (unknown) removed from list.								F	Female	Single entry picklist.
										Not Documented may be used if gender is unknown or unable to be determined.
										Not Applicable should not be used. Patients who have undergone reassignment should be coded using the current assignment.
Race (Primary)	PERHIST	RACE		Character	16	D_10	Yes	WHITE	White	The patient's <u>primary</u> race.
2008 changes: Picklist updated. UNKNOWN removed from list. Secondary race added as a separate field.								BLACK	Black or African American	Per NTDS, up to 2 races can be reported per patient. This field refers to patient's primary reported race.
								AMER IND/ALASKA	American Indian or Alaska Native	Per NTDS, patient race should be based upon self report or as identified by a family member.

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								HAWAII/PACIFIC	Native Hawaiian or Other Pacific Islander	Note: Hispanic/Latino refers to patient ethnicity and is captured in a separate field.
								ASIAN	Asian	Not Documented may be used if race is not recorded or unknown.
								OTHER	Other Race	Not Applicable should not be used.
Race (Secondary)	PERHIST	EMPLY_TYPE		Character	20	D_10	Yes	WHITE	White	Secondary race information for patients that are reported to be more than one race.
<i>2008 change: New field.</i>								BLACK	Black or African American	Per NTDS, up to 2 races can be reported per patient. This field captures any secondary race information reported by patient or family member.
								AMER IND/ALASKA	American Indian or Alaska Native	Not Documented should be used if secondary race information is not recorded or unknown.
								HAWAII/PACIFIC	Native Hawaiian or Other Pacific Islander	Not Applicable should be used if patient is only of one race.
								ASIAN	Asian	
								OTHER	Other Race	
Ethnicity	PERHIST	ELGBL_ALIN		Character	1	D_11	Yes	H	Hispanic or Latino	The patient's ethnicity. Identifies if patient is of a Hispanic or Latino ethnic group. A person of Hispanic ethnicity may be of any race.
<i>2008 change: Picklist updated. U (unknown) removed from list.</i>								N	Not Hispanic or Latino	Single entry picklist.
										Patient ethnicity should be based upon self report or identified by a family member.
										Not Documented may be used if patient's ethnic origin is not recorded or unknown.
										Not Applicable should not be used. "Not Hispanic or Latino" should be selected if patient is not Hispanic.

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Street Address of Residence	PERHIST	PT_STREET		Character	40		No		Suggested abbreviations: North = N, South = S, West = W, East = E, Street = ST, Apartment = APT, Avenue = AVE, Road = RD, Drive = DR, Circle = CIR, Boulevard = BLVD, Suite = STE, Highway = HWY	Street address of patient's primary residence.
2008 change: New field (OPTIONAL).										Submission of this data field is optional.
										ASTR preference is to enter actual street address for the patient's residence. If only the mailing information is available, enter the PO Box. If patient is homeless, enter HOMELESS.
										Not Documented may be used.
										Not Applicable should not be used.
Alternate Home Residence (if no ZIP)	STAT2008	ALT_RES		Character	25	D_06	Yes	1	Homeless	Documentation of the type of patient <u>without</u> a home ZIP code. (Per NTDS, only complete this field if zip code is Not Applicable.)
2008 change: New field.								2	Undocumented Citizen	Single entry picklist.
								3	Migrant	Not Documented may be used if no residence information is available for this patient.
								4	Foreign Visitor	Not Applicable should be used if patient has a valid home ZIP code.
										For definitions of these picklist choices, please refer to Appendix H - NTDS Glossary of Terms.

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										Reporting Note: This field does not capture every homeless patient, undocumented citizen, migrant or foreign visitor. Patients who report a zip code to the hospital will not be counted, even if they might be homeless or undocumented.
ZIP Code of Residence	PERHIST	PT_ZIP		Character	6	D_01	Yes	Standard U.S. ZIP code list		The patient's home ZIP code of primary residence.
<i>2008 change: Lancet ZIP updates.</i>										
										Single entry picklist.
										Registrar should make attempts (using EMS documentation and internet resources) to identify ZIP code. Not Documented may be used if ZIP code cannot be determined.
										Not Applicable should only be used if patient is homeless or resides outside of the U.S. For *NA zip codes, please submit a value for the NTDS field "Alternate Home Residence".
"+4" ZIP Code extension (of Residence)	PERHIST	PER_ZIPPLS		Character	4	D_01 (2) - optional	No	Standard U.S. ZIP code 4 digit extension.		4 digit extension for the patient's home ZIP code. (OPTIONAL)
<i>2008 change: New field (OPTIONAL).</i>										
										NTDS requests submission of 5 digit or 9 digit ZIP code. Submission of the 4 digit ZIP extension is optional.
										Field may be left blank. Not Documented and Not Applicable may be used.
City of Residence	PERHIST	PT_CITY		Character	30	D_05	Yes	See Appendix B for AZ city data values. Other cities may be manually entered by user.		The patient's primary city (or township or village) of residence.
<i>2008 change: Picklist updated. UNKNOWN removed from list.</i>										
										Single entry picklist.
										Not Documented may be used.

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										Not Applicable should not be used. If city is outside of the U.S., manually enter city name. Automatically populated when ZIP code is entered. Make sure the database populates the correct city, as some zip codes represent multiple cities. Cities not on the picklist may be manually entered. Please be careful to enter correct spelling.
County of Residence	PERHIST	PT_CNTY		Character	9	D_04	Yes	APACHE	Apache	The patient's primary county of residence.
<i>2008 changes: Picklist updated. UNKNOWN and OTHER removed from list. OTHER US and OOC added to list.</i>										
								COCHISE	Cochise	Single entry picklist.
								COCONINO	Coconino	Only valid entries from picklist should be entered or autofilled. If patient resides outside of AZ, select either "Other U.S. County (not AZ)" or "Outside of U.S."
								GILA	Gila	
								GRAHAM	Graham	Not Applicable should not be used. If county is outside of the U.S., select "Outside of U.S." from picklist.
								GREENLEE	Greenlee	Automatically populated when ZIP code is entered.
								LA PAZ	La Paz	
								MARICOPA	Maricopa	
								MOHAVE	Mohave	
								NAVAJO	Navajo	
								PIMA	Pima	
								PINAL	Pinal	
								SANTA CRU	Santa Cruz	
								YAVAPAI	Yavapai	
								YUMA	Yuma	
								OTHER US	Other U.S. County (not AZ)	
								OOC	Outside of U.S.	

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State of Residence	PERHIST	PT_STATE		Character	3	D_03	Yes	See Appendix C for data values.		The patient's primary state of residence (or territory, province, District of Columbia).
2008 change: Picklist updated. *U (unknown) removed from list.										
										Single entry picklist.
										Not Documented may be used.
										Not Applicable should not be used. If State is outside of U.S., select "Other - Out of Country" from picklist.
										Automatically populated when valid ZIP code is entered.
Country of Residence	PERHIST	PT_CNTRY		Character	3	D_02	Yes	See Appendix D for data values.	Country codes in 2008 were updated to ISO 3166 standard 2 digit values.	The patient's primary country of residence.
2008 change: The 2005-2007 three digit country codes were removed and replaced with ISO 3166 two digit values (ex: USA changed to US). Unknown option is no longer on list - use *ND.										
										Not Documented may be used.
										Not Applicable should not be used.
										US automatically populates as country code when valid ZIP is entered.
Co-Morbid Conditions (Pre-Existing Factors)	PRECONDS	PRE_HIST	(multiple entry picklist)	Character	22	DG_01	Yes		Note: Please refer to the 2008 and 2009 change notes for information that affects data reporting.	Pre-existing co-morbid factors present before patient arrival at your ED/hospital.
2008 changes: The 2005-2007 picklist options were removed from list. Implemented new NTDS co-morbidity list in Jan 2008 with new system codes (data values). When querying multiple years of data, pay attention to old and new data values!										
							2008 list only ->	NO_NTDS	No NTDS co-morbidities are present	Multiple entry picklist. User may select up to 5 conditions.

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<p>2009 change1: NO_NTDS was removed from picklist for 2009 data entry. OTHER was added to list in 2009. Note: In 2008, user was instructed to enter NO_NTDS if patient had no co-morbidities OR if patient only had co-morbidities not on the picklist. For 2009, user was instructed to enter OTHER when patient had other co-morbidities not on picklist. If patient did not have any co-morbidities at all, user was instructed to enter Not Applicable (*NA).</p>								ALCOHOLISM	Alcoholism	Not Documented may be used if it is unknown whether patient has any of the conditions on this picklist.
<p>2009 change2: Added PREGNANCY back to state co-morbidity list. Note: PREGNANCY was not a picklist option for 2008 data. This picklist option was previously removed, per NTDS, on Jan. 1, 2008. However, TRUG decided this option is important so the choice was added back on Jan 1, 2009.</p>								ASCITES	Ascites within 30 days	Not Applicable (*NA) should be used if patient had no co-morbidities at all.
								BLDDISORD	Bleeding disorder	Picklist based on NTDS list. If your hospital needs to collect other co-morbidities, please do so in a separate co-morbidity field.
								CHEMO	Chemotherapy for cancer within 30 days	NTDS list. Definitions of co-morbidities (and applicable ICD-9 codes) can be found in Appendix H (Glossary of NTDS Terms).
								BIRTHDEF	Congenital Anomalies	
								CHF	Congestive heart failure	
								SMOKER	Current smoker	
								DIALYSIS	Currently requiring or on dialysis	
								CVA	CVA/residual neurological deficit	
								DIABETES	Diabetes mellitus	
								DISSCANCER	Disseminated cancer	
								DNR	Do Not Resuscitate (DNR) status	
								ESOPHVAR	Esophageal varices	
								FUNCTDEP	Functionally dependent health status	

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								ANGINA	History of angina within past 1 month	
								MYOCARDINF	History of myocardial infarction within past 6 months	
								PVDREVASC	History of revascularization / amputation for PVD	
								HYPERTENS	Hypertension requiring medication	
								IMPAIRSENS	Impaired sensorium	
								PREGNANCY	Pregnancy	
								PREMATURE	Prematurity	
								OBESITY	Obesity	
								RESPDIS	Respiratory Disease	
								STEROID	Steroid use	
								OTHER	OTHER CO-MORBIDITIES EXIST (not on this list)	
Co-Morbid Conditions (Text Only)	PRECONDS	PH_TEXT		Character	50		No			Corresponding text for the pre-existing co-morbid conditions entered above.
										Autofilled from co-morbid conditions codes selected above. For data entry view only. Do not use this field for reporting.
State Unique ID	MAINDATA	FULLNAME		Character	50		No			Unique record identifier in ASTR and hospital systems. Auto-generated by system as the reporting facility "Site ID" plus "Account Number" from the reporting facility database.
<p>2008 changes: Hospital Site IDs are listed in Appendix A. Flagstaff switched from Collector to Trauma One software for 2008. Their State Unique ID data prior to 2008 starts with COL-TFLG. 2008 forward starts with TFLG.</p>										For facilities submitting a reduced data set, this will be the Site ID plus unique registration number.
										Record identifier used in communication between ASTR and reporting hospitals regarding specific trauma records.

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										Automatically generated by system. No manual entry required.
Reporting Facility Site ID	MAINDATA	ENTRYMODE		Character	8		Yes	See Appendix A for data values.		Unique system code identifying the facility submitting the record to ASTR.
										Automatically generated by system. No manual entry required. Site IDs are listed in Appendix A of this data dictionary.
**Reporting Facility Trauma Designation Level	STAT2008	TRACENTER		Character	15		Yes	LEVEL I	Level I	Trauma center designation level for the facility submitting the record.
2008 change: New field.								LEVEL II	Level II	Based on hospital's designation status at the time of the record's ED/Hospital Arrival Date.
								LEVEL III	Level III	Automatically populated for state reporting purposes.
								LEVEL IV-FULL	Level IV -Full Data Set	
								LEVEL IV-PART	Level IV -Reduced Data Set	
								NONDESIG-FULL	NonDesignated -Full Data Set	
								NONDESIG-PART	NonDesignated -Reduced Data Set	
**Reporting Facility ADHS Number (License Code)	STAT2008	LIC_CODE		Character	10		Yes	See Appendix A for data values.	MED number from ADHS HDD, licensing or other assigned number	ASTR assigned number for the facility submitting the record. This number correlates to the facility ID used in the Hospital Discharge Database. This field will be used for ADHS linking purposes.
2008 change: New field.										If a reporting hospital does not have a MED #, the hospital's code from the ASTR Hospital picklist will be populated into this field.
										Automatically populated for State reporting purposes.
**Reporting Facility Zip Code	STAT2008	FAC_ZIP		Character	5		Yes	See Appendix A for data values.		Zip code of reporting facility.
2008 change: New field.										Automatically populated for state reporting purposes.

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INJURY SECTION - "AZ-INJURY" PAGE IN ASTR DATABASE										
Injury Incident Date	FLDDETAI	FL_ENT_DT		Date	8	I_01	No	mmddyyyy		The date that the injury event occurred.
										Injury event date/time estimates should be based upon report by patient, witness, family, or health care provider.
										Not Documented may be used, but this information is important for reporting. Please make every attempt to obtain this information.
										Not Applicable should not be used.
Injury Incident Time	FLDDETAI	FL_ENT_TM		Time	6	I_02	No	HH:MM - Military time format		The time that the injury event occurred.
										Injury event date/time estimates should be based upon report by patient, witness, family, or health care provider. Per NTDS, other proxy measures (e.g., 911 call time) should not be used.
										Time fields should be entered in AZ Mountain Standard Time (MST).
										Not Documented may be used, but this information is important for reporting. Please make every attempt to obtain valid estimate.
										Not Applicable should not be used.
Actual versus Estimated Injury Time?	INJDETS	INJ_ST_TYP		Character	2		Yes	A	Actual Time of Injury	Indicates whether the injury incident time represents an actual or estimated time.
								E	Estimated Time of Injury	Single entry picklist.
										Not Documented may be used.
										Not Applicable should not be used.

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Injury Location ICD-9-CM E-code (E849)	INJDETS	SITE_CLASS		Character	2	I_07	Yes	0	Home	The location E-code (E849.X) used to describe the place/location where the injury event occurred.
<p>2009 change: Picklist option 7 "Residential institution" was expanded (7A-7E) to identify the type of residential institution.</p>										
								1	Farm	Single entry picklist.
								2	Mine and quarry	The location E-code describes the place where the event occurred, not the patient's activity at the time of the event.
								3	Industrial places and premises	Do not use "Unspecified place" (E849.9) if the place of occurrence is not stated. "Unspecified place" means the location is stated, but that location does not fit into any of the choices listed in the ICD-9-CM coding manual. Not Documented should be used if the injury location is unknown.
								4	Place for recreation or sport	Not Applicable should not be used.
								5	Street and highway	Refer to ICD-9-CM coding manual for more details.
								6	Public building	
								7	Residential institution	
								7A	Acute care hospital	
								7B	Jail / Prison / Correctional Facility	
								7C	Nursing home	
								7D	Psychiatric facility (inpatient)	
								7E	Other residential institution not listed	
								8	Other specified places	
								9	Unspecified place	
Street Location of Injury Incident	INJDETS	INJ_STR1		Character	40		No	Free Text	Please refer to the examples below for address data entry. A specific format is needed to geocode the injury incident location.	The street address/location where the injury incident occurred (best approximation).

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<p><i>2009 change: Additional data entry instructions and examples are provided.</i></p>										<p>This field is very important for reporting. To facilitate geocoding, the first preference is to submit a full street address. Second preference would be the intersection.</p>
										<p>Enter the full street address using the abbreviations provided below. Example1: 123 N 19TH AVE APT 12 Example2: 1234 S 8TH ST</p>
										<p>If you are entering a location <u>name</u> plus an address, first enter the street address, followed by the location name in parentheses. Example: 26700 S HWY 85 (ASPC LEWIS). If you are entering a place name without an address, enter the place name in parentheses. Example1: (LAKE POWELL) Example2: (SUPERSTITION MOUNTAINS)</p>
										<p>If only the intersection is known, please enter intersection using the & sign. Example1: 7TH ST & MCDOWELL Example2: 19TH AVE & VAN BUREN</p>
										<p>If only the milepost is known, please enter the highway, followed by the milepost (abbreviate as MP) Example1: I-10 E MP 145 Example 2: HWY 89 MP 470</p>

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										<p>Please use the following abbreviations (with <u>no</u> punctuation): North = N, South = S, West = W, East = E, Street = ST, Apartment = APT, Avenue = AVE, Road = RD, Drive = DR, Circle = CIR, Boulevard = BLVD, Suite = STE, Highway = HWY, Milepost = MP</p> <p>Not Documented may be used if an approximation or place name cannot be determined. Registrar should make attempts to obtain this information.</p> <p>Not Applicable should not be used.</p>
ZIP Code of Injury Incident Location	INJDETS	INJ_ZIP		Character	6	I_09	Yes	Standard U.S. ZIP code list - valid area zip codes that can be mapped		The ZIP code of the injury incident location.
2008 change: Lancet ZIP updates.										Single entry picklist.
										<p>This field is very important for reporting. Registrar should make attempts (using EMS documentation and internet resources) to identify an injury ZIP code. Not Documented may be used if ZIP code cannot be determined.</p> <p>Not Applicable should only be used if the incident occurred outside of the U.S.</p>
"+4" ZIP Code extension (of Injury)	INJDETS	INJ_ZIPPLS		Character	4	I_09 (2) - optional	No	Standard U.S. ZIP code 4 digit extension		4 digit extension for the injury location ZIP code. (OPTIONAL)
2008 change: New field (OPTIONAL).										<p>NTDS requests submission of 5 digit or 9 digit ZIP code. Submission of the 4 digit ZIP extension is optional.</p> <p>Field may be left blank. Not Documented and Not Applicable may be used.</p>

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City of Injury Incident Location	INJDETS	INJ_CITY		Character	30	I_13	Yes	See Appendix B for AZ city data values. Other cities may be manually entered by user.		The city or township where the patient was found or to which the EMS unit responded (or best approximation).
<i>2008 change: Picklist updated. UNKNOWN removed from list.</i>										
										Single entry picklist.
										Not Documented may be used in rare instances when an approximation cannot be determined. This field is important for reporting and registrar should make attempts to obtain best city approximation, even if exact address is unknown.
										Not Applicable should not be used. If city is outside of the U.S., manually enter city name.
										Automatically populated when ZIP code is entered. Make sure the database populates the correct city, as some zip codes represent multiple cities. Cities not on the picklist may be manually entered. Please be careful to enter correct spelling.
County of Injury Incident Location	INJDETS	INJ_CNTY		Character	9	I_12	Yes	APACHE	Apache	The county where the patient was found or to which the EMS unit responded (or best approximation).
<i>2008 changes: Picklist updated. UNKNOWN and OTHER removed from list. OTHER US and OOC added to list.</i>										
								COCHISE	Cochise	Single entry picklist.
								COCONINO	Coconino	Only valid entries from picklist should be entered or autofilled. If patient resides outside of AZ, select either "Other U.S. County (not AZ)" or "Outside of U.S."

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								GILA	Gila	Not Documented may be used <u>only</u> in rare instances where injury county cannot be determined. Even if the exact address is unknown, every attempt should be made to obtain the county where the injury event occurred.
								GRAHAM	Graham	Not Applicable should not be used. If county is outside of the U.S., select "Outside of U.S." from picklist.
								GREENLEE	Greenlee	Automatically populated when ZIP code is entered.
								LA PAZ	La Paz	
								MARICOPA	Maricopa	
								MOHAVE	Mohave	
								NAVAJO	Navajo	
								PIMA	Pima	
								PINAL	Pinal	
								SANTA CRU	Santa Cruz	
								YAVAPAI	Yavapai	
								YUMA	Yuma	
								OTHER US	Other U.S. County (not AZ)	
								OOC	Outside of U.S.	
State of Injury Incident Location	INJDETS	INJ_STATE		Character	3	I_11	Yes	See Appendix C for data values.		The state, territory or province where the patient was found or to which the EMS unit responded (or best approximation).
2008 change: Picklist updated. *U (unknown) removed from list.										Single entry picklist.
										Not Documented may be used <u>only</u> in rare instances where injury state cannot be determined. Even if the exact address is unknown, every attempt should be made to obtain the state where the injury event occurred.

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										Not Applicable should not be used. If State is outside of U.S., select "Other - Out of Country" from picklist. Automatically populated when ZIP code is entered.
Country of Injury Incident Location	PERHIST	BORN_CNTRY		Character	3	I_10	Yes	See Appendix D for data values.	Standard ISO 3166 2 digit values. United States is "US" in 2 digit format.	The country where the patient was found or to which the EMS unit responded (or best approximation).
2008 change: New field.										Single entry picklist.
										Not Documented may be used only in rare instances where injury country cannot be determined. Even if the exact address is unknown, every attempt should be made to obtain the country where the injury event occurred.
										Not Applicable should not be used. US automatically populates as country code when valid ZIP is entered.
Trauma Type	INJDETS	INJ_CLASS		Character	1		Yes	B	Blunt	Broad categorization of the patient's <u>primary</u> trauma injury type.
2008 change: Picklist updated. U (unknown) removed from list.								P	Penetrating	Single entry picklist. Select the category related to the patient's primary injury.
								N	Burn	Not Documented may be used if patient injuries are unknown or not recorded.
										Not Applicable may be used if patient meets the State patient inclusion criteria but no injuries are detected.

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Primary ICD-9-CM E-code Injury Descriptor (1st E-code)	GENMECH	ECODE_ICD9	1	Character	6	I_06	Yes	Valid ICD-9-CM injury E-codes. Submit to ASTR as an E + 3 digit number, followed by decimal, and 4th digit as required. All codes must contain an E and a decimal. Examples: E916. or E813.0		Primary E-code used to describe the mechanism (or external factor) that caused the injury event. E-codes are used to report on the mechanism/cause and manner/intent of the injury event.
										The primary E-code should describe the main injury event or circumstance responsible for patient's hospital care. Single entry picklist. E849 place/location E-codes and Adverse Effects E-codes should NOT be entered in this field. Not Documented may be used only in rare instances. Every attempt should be made to identify at least one E-code for the injury event. Not Applicable should not be used.
CDC Mechanism/Cause Category for Primary E-code	GENMECH	CDC_MOI	1	Character	30		Yes			CDC mechanism of injury category code for the primary E-code.
2008 change: New field. ASTR database only.										Field populated based on CDC E-code matrix. MOI = Mechanism of Injury.
										ASTR system only. Automatically populated by ASTR database for state reporting purposes.
CDC Intent/Manner Category for Primary E-code	GENMECH	CDC_INT	1	Character	30		Yes			CDC intent category code for the primary E-code.
2008 change: New field. ASTR database only.										Field populated based on CDC E-code matrix.

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										ASTR system only. Automatically populated by ASTR database for state reporting purposes.
Additional ICD-9-CM E-code Injury Descriptor (2nd E-code)	GENMECH	ECODE_ICD9	2	Character	6	I_08	Yes	Valid ICD-9-CM injury E-codes. Submit to ASTR as an E + 3 digit number, followed by decimal, and 4th digit as required. All codes must contain an E and a decimal. Examples: E916. or E813.0		Additional E-code used to describe injury event (e.g., a mass casualty event or other external cause.) E-codes are used to report on the mechanism/cause and the manner/intent of the injury event.
2008 change: New field.										Single entry picklist.
										E849 place/location E-codes should NOT be entered in this field. E849 is already captured in another ASTR data field.
										Not Documented may be used.
										Not Applicable should be used if primary E-code is sufficient in describing the mechanism and intent of the injury event.
CDC Mechanism/Cause Category for Additional E-code	GENMECH	CDC_MOI	2	Character	30		Yes			CDC mechanism/cause of injury category code for the additional E-code.
2008 change: New field. ASTR database only.										Field populated based on CDC E-code matrix. MOI = Mechanism of Injury.
										ASTR system only. Automatically populated by ASTR database for state reporting purposes.
CDC Intent/Manner Category for Additional E-code	GENMECH	CDC_INT	2	Character	30		Yes			CDC manner/intent category code for the additional E-code.
2008 change: New field. ASTR database only.										Field populated based on CDC E-code matrix.

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										ASTR system only. Automatically populated by ASTR database for state reporting purposes.
Injury Event Details	NARRATIV	ETIOLOGY		Memo (E)	0		No	Free Text (no limit)		Text narrative field used to document the cause and circumstances of the injury event. This field will be used to supplement the E-code data, as there are instances where E-codes do not provide enough detail. This field may also be used for QA checks on the E-codes submitted.
										Please provide a description of the injury incident, with enough information so that ASTR staff could select the appropriate E-code based on the text narrative.
										If patient was injured while occupying a motor vehicle, please indicate the vehicle type and whether patient was the driver or passenger. Include any other important information, including type of crash, extrication information, etc.
										If patient was injured by a weapon or object, please document the type of object.
										If injury event was sports-related, please include the type of sport and how the injury was sustained.
										Include information regarding the intent of the injury event: unintentional, assault, self-inflicted or undetermined intent.

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										<p>This narrative field is meant to capture details regarding the injury event and the cause of injury. Demographic information, diagnoses, and protective device details are not captured in this field.</p> <p>Not Documented should not be used. At least some basic injury event information should be available from the prehospital, referring hospital or reporting hospital records.</p> <p>Not Applicable should not be used. All patients would have been involved in some type of injury event in order to be considered a trauma patient.</p>
Protective Devices	PROTECT	PROTECTIVE	(multiple entry picklist)	Character	15	I_14	Yes	NONE	None	Protective devices (safety equipment) in use or worn <u>by this patient</u> at the time of the injury event. Use may be reported or observed.
								LAP BELT	Lap Belt	It is very important that registrar enter <u>all that apply</u>. Multiple entry picklist (max 10).
								SHOULDER BELT	Shoulder Belt	For patients with EMS run sheets documented only as "Restrained" (and not further specified), select "Lap Belt". If documentation indicates a "3 point restraint", select both LAP BELT and SHOULDER BELT.

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								CHILD RESTRAINT	Child Restraint (booster seat, child or infant car seat)	NONE means that protective devices were not in use (or pt was not wearing) any type of protective device at the time of injury event. If an airbag was present, do <u>not</u> select None + Airbag Present. (The airbag was a protective device in use at time of injury event, even if it did not deploy.)
								HELMET	Helmet (e.g., bicycle, skiing, motorcycle)	If a child restraint was used, the specific type of restraint should be entered in the Child Specific Restraint Details field.
								AIRBAG	Airbag Present	If an Airbag was present during a motor vehicle crash, the deployment details should be entered in the Airbag Deployment Details field.
								PERSONAL FLOATA	Personal Floatation Device	"Other" means the patient used other protection devices not on this picklist.
								EYE PROTECTION	Eye Protection	Not Documented should be used if it is unknown whether patient used any protective devices.
								PROTECTIVE CLOT	Protective Clothing (e.g., padded leather pants)	Not Applicable should not be used. Instead, select "None" from picklist.
								PROTECTIVE NON-OTHER	Protective Non-Clothing Gear (e.g., shin guard) Other	
Child Specific Restraint Details	STAT2008	CHILDREST		Character	15	I_15	Yes	CHILD_CARSEAT	Child Car Seat	Protective child restraint device used by this patient at the time of injury. Use may be reported or observed.
<i>2008 change: New field.</i>								INFANT_CARSEAT	Infant Car Seat	Single entry picklist.
								BOOSTER_SEAT	Child Booster Seat	Not Documented may be used if type is unspecified.
										Not Applicable should be used if child restraint was not used or if the injury event did not involve a motor vehicle.

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Airbag Deployment Details	RES (FLD)	RESISTNCE	(multiple entry picklist)	Character	15	I_16	Yes	NO_DEPLOY	Airbag Not Deployed	Indication of airbag deployment during a motor vehicle crash, if an airbag was present. Deployment may be reported or observed.
2008 change: New field.								FRONT_DEPLOY	Airbag Deployed Front	Multiple entry picklist. Select all types of airbag deployment that apply.
								SIDE_DEPLOY	Airbag Deployed Side	"Airbag Not Deployed" should be selected if an airbag was <u>known to be present</u> and did not deploy.
								OTHER_DEPLOY	Airbag Deployed Other (knee, airbelt, curtain, etc.)	If an airbag deployed, but registrar is unable to determine which airbag, select "Airbag Deployed, Type Unspecified". This option is to merge to NTDB as "Airbag Deployed Front".
								UNSPECIF_DEPLOY	Airbag Deployed, Type Unspecified	Not Documented may be used if no information is available on airbag deployment.
										Not Applicable should be used if the vehicle did not have an airbag present or if the injury event did not involve a motor vehicle.
Position in Vehicle / Vehicle Type	INJMECH	INJ_WHERE		Character	30		Yes	<i>Main picklist screen has 15 options. 4 of these options open to a sub-picklist.</i>		Patient location in vehicle (or type of vehicle in use) at the time of injury incident. (This field is meant to provide more specific vehicle information than can sometimes be obtained from the E-code.)
2008 changes: Entirely new picklist adopted for 2008. Picklist was expanded and all system codes are different from the 2005-2007 list, even if long text appears similar. When querying multiple years of data, pay attention to the old and new codes.									Rider of off-road vehicle (street and non-street use)	Single entry picklist.

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<p>2009 changes: The data element title was changed from "Patient Position in Vehicle" to "Position in Vehicle / Vehicle Type". Items new to the picklist for 2009 are listed in bold. In 2008, WATERCRAFT_OCCUPANT and AIRCRAFT_OCCUPANT were individual picklist choices. For 2009, these codes were removed from data entry and expanded into sub-picklists to identify type. ATV_RIDER is found on the 2008 and 2009 lists, but the other off-road vehicle choices are new for 2009. Also added RAILWAY_OCCUPANT as a new choice for 2009.</p>										
								ATV_RIDER	ATV/Quad (3 or more low press. tires/straddleseat/handlebar)	Refer to all picklist choices before making selection. Picklist has been expanded to supplement E-code reporting.
								RHINO_UTV	Rhino, Side by Side, UTV (steering wheel/non-straddle seats)	Not Documented may be used if type of vehicle cannot be determined.
								DUNEBUG_SANDRAIL	Dune Buggy or Sand Rail (designed for sand or beach use)	Not Applicable should be used if patient was not riding in or upon a vehicle at the time of injury event.
								DIRTBIKE	Dirt Bike, Trail Motorcycle (2 wheel, designed for off-road)	
								GOLF_CART	Golf Cart	
								GO_KART	Go-Kart	
								SNOWMOBILE	Snowmobile	
								OTHER_OFF-RD	Other all-terrain vehicle	
								DRIVER_AUTO	Driver of Motor Vehicle (auto/truck/van) - not motorcycle	
								FRONT_SEAT_MV	Passenger of Motor Vehicle (auto/truck/van) - not motorcycle Front Seat Passenger	
								BACK_SEAT_MV	Back Seat Passenger (anyone inside except front seat)	
								BACK_PICKUP	Back of Pickup Truck	
								UNSPECIFIED_MV	Position in Motor Vehicle Not Specified	

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)
								OTHER_MV_PASSENGER	Other Passenger (hanging onto vehicle/riding on top of/etc.)	
								DRIVER_MOTORCYCLE	Motorcycle Driver	
								PASSENGER_MOTORCYCLE	Motorcycle Passenger	
								BICYCLE_RIDER	Bicyclist (non-motorized)	
								FARM_CONSTR_INDUSTR	Riding on Farm, Construction or Industrial Equipment	
								EMERG_VEH_OCCUPANT	Emergency Vehicle Driver/Passenger (ambulance, fire, police)	
								BUS_OCCUPANT	Bus Occupant	
								LIGHT_RAIL_OCCUPANT	Light Rail Occupant	
								RAILWAY_OCCUPANT	Railway / Train Occupant (NOT light rail)	
									Watercraft / Boat Occupant	
								MOTOR_BOAT	Motorboat Occupant	
								NONMOTORIZED_BOAT	Non-motorized Boat Occupant (sail, paddle, row)	
								PERSONAL_WATERC	Rider of Jet Ski / Sea-Doo / Waverunner / Personal WC	
								UNSPECIFIED_WATERC	Unspecified Watercraft/Boat	
								WATERCRAFT_OCCUPANT	Watercraft / Boat Occupant (2008 list)	
									Aircraft Occupant	
								FIXED_WING	Fixed Wing Aircraft	
								ROTOR_WING	Rotor Wing Aircraft - Helicopter	
								NON_MOTOR_AIRC	Non-motor Aircraft (balloon, glider, parachute)	
								UNSPECIFIED_AIRC	Unspecified Aircraft	
								AIRCRAFT_OCCUPANT	Aircraft Occupant (2008 list)	
								MILITARY_VEH_OCCUPANT	Military Vehicle Occupant	
								OTHER_OCCUPANT	Other Vehicle Occupant - not listed above	

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Safety Equipment Issues	INJDETS	DESCRIPTIO		Character	40		No	Free Text		Text field allowing documentation of any issues related to the safety equipment used.
										Examples: SHOULDER BELT BROKE or CHILD SEAT EJECTED FROM VEHICLE Not Documented and Not Applicable may be used.
Work-Related?	INJDETS	JOB_RELTD		Character	1	I_03	Yes	Y	Yes	Indication of whether the injury occurred during paid employment.
2008 change: Picklist updated. U (unknown) removed from list.								N	No	Single entry picklist.
										Not Documented may be used. "No" from the picklist should be used instead of Not Applicable.
Patient's Occupational Industry	INJDETS	JOB_INDTRY		Character	15	I_04	Yes	1	Finance, Insurance, and Real Estate	The occupational industry associated with the patient's work environment, if injury event was work related.
2008 change: New field.								2	Manufacturing	Single entry picklist.
								3	Retail Trade	Not Documented may be used.
								4	Transportation and Public Utilities	This field is only required by NTDS if injury event was work related.
								5	Agriculture, Forestry, Fishing	Not Applicable should be used if the injury incident was not work related.
								6	Professional and Business Services	
								7	Education and Health Services	
								8	Construction	
								9	Government	
								10	Natural Resources and Mining	
								11	Information Services	
								12	Wholesale Trade	
								13	Leisure and Hospitality	
								14	Other Services	
Patient's Occupation	INJDETS	JOB_EMP		Character	15	I_05	Yes	1	Business and Financial Operations Occupations	The patient's occupation, if injury event was work related.
2008 change: New field.								2	Architecture and Engineering Occupations	Single entry picklist.

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								3	Community and Social Services Occupations	Not Documented may be used.
								4	Education, Training, and Library Occupations	This field is only required by NTDS if injury event was work related.
								5	Healthcare Practitioners and Technical Occupations	Not Applicable should be used if the injury incident was not work related.
								6	Protective Service Occupations	
								7	Building and Grounds Cleaning and Maintenance	
								8	Sales and Related Occupations	
								9	Farming, Fishing, and Forestry Occupations	
								10	Installation, Maintenance, and Repair Occupations	
								11	Transportation and Material Moving Occupations	
								12	Management Occupations	
								13	Computer and Mathematical Occupations	
								14	Life, Physical, and Social Science Occupations	
								15	Legal Occupations	
								16	Arts, Design, Entertainment, Sports, and Media	
								17	Healthcare Support Occupations	
								18	Food Preparation and Serving Related	
								19	Personal Care and Service Occupations	
								20	Office and Administrative Support Occupations	
								21	Construction and Extraction Occupations	
								22	Production Occupations	
								23	Military Specific Occupations	
PREHOSPITAL TRANSPORT SECTION - "PREHOSPITAL" PAGE IN ASTR DATABASE										

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System Access (Inclusion Criteria)	PHYSEXAM (FLD)	PE_ABDN	(multiple entry picklist)	Character	20		Yes	EMS_TRIAGE	Triaged from Scene to your facility per EMS Trauma Protocol	Indicates which inclusion criteria this patient met to be included in the ASTR registry as a trauma patient.
<p>2008 changes: Entirely new picklist adopted for 2008. Old System Access data is stored in a different database location (see 2005-2007 ASTR Data Dictionary). System Access field is now used to indicate which Inclusion Criteria the patient met in order to be considered an ASTR trauma patient.</p>								INTERF_TRNSFR	Acute care injury transfer in or out of your facility by EMS	This multiple entry picklist will be used to assess the ASTR inclusion criteria (listed in Appendix I). It is very important registrar enter all criteria that apply.
<p>2009 changes: Long text values updated. Added clarification that picklist items refer to the reporting hospital ("your facility"). Added INTERF_TRNSFR to the 2009 picklist after clarification of the ASTR inclusion criteria.</p>								ACTIVATION	Trauma Team Activation at your facility	A patient may meet one, two, three or all four of the inclusion criteria on this picklist.
								ICD9_REVIEW	Admission or Death and met ASTR ICD-9-CM Inclusion Codes	Not Documented and Not Applicable should not be used. Every patient in the ASTR registry should meet at least one of the inclusion criteria.
Triage Criteria	TRICRIT	TRIAGE_CRT	(multiple entry picklist)	Character	25		Yes	Main picklist screen has 5 options. 4 of these options open to a sub-picklist.		Indicates the ACS triage criteria that apply to this patient and injury event, per available EMS and hospital documentation.
<p>2008 changes: Entirely new picklist adopted for 2008 to match new ACS guidelines. Nearly every system code is now different from the 2005-2007 list, even if the long text appears similar. When querying multiple years of data, pay attention to the old and new codes.</p>									Vitals Signs / Level of Consciousness	Multiple entry picklist. Select all that apply.
								GCS < 14	Glasgow Coma Scale <14	"High-risk crash: Intrusion >12 in. occup site >18 in. other" refers to an intrusion >12 inches in the occupant site or an intrusion >18 inches in any site.

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								SBP < 90	Systolic Blood Pressure, mm Hg <90	"High-risk crash: Other criteria NOT listed" should <u>only</u> be selected if the other high-risk crash criteria on this list do not apply.
								RESP RATE < 10 OR > 29	Respiratory Rate /min - <10 or >29 - <20 infant under 1 yr	Not Documented should be used if no triage criteria are documented.
									Anatomy of Injury	Not Applicable should be used if patient was not treated by an EMS prehospital provider.
								PENETRATING_HEAD	Penetrating injuries to head	Picklist adapted from ACS "Green Book" triage guidelines.
								PENETRATING_NECK	Penetrating injuries to neck	
								PENETRATING_TORSO	Penetrating injuries to torso	
								PENETRATING_EXTREMITY	Penetrating injuries to extremities proximal to elbow & knee	
								FLAIL CHEST	Flail Chest	
								>=2 PROX LBONE FRACTURE	Two or more proximal long-bone fractures	
								CRUSH_DEGLV_MANGLED	Crush, degloved, or mangled extremity	
								AMPUT PROX WRIST/ANKLE	Amputation proximal to wrist and ankle	
								PELVIC FRACTURES	Pelvic fractures	
								OPEN OR DEPR SKULL FRACT	Open or depressed skull fracture	
								PARALYSIS	Paralysis	
									Mechanism of Injury / High Energy Impact	
								ADULT FALL > 20 FEET	Falls - Adult: >20 feet (1 story = 10 ft)	
								CHILD FALL >2-3 PT HEIGHT	Falls - Child: Falls >10 ft or 2-3 times the height of the child	
								CRASH INTRUSION	High-risk crash: Intrusion >12 in. occup site >18 in. other	
								EJECTION FROM AUTO	High-risk crash: Ejection (partial or complete) from auto	

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								DEATH SAME PASGR COMPART	High-risk crash: Death in same passenger compartment	
								VEH TELEMETRY RISK	High-risk crash: Per vehicle telemetry data	
								OTHER HIGH RISK CRASH	High-risk crash: Other criteria NOT listed	
								AUTO PEDESTRIAN	Auto v. pedestrian - thrown, run over or sign. >20mph impact	
								AUTO BICYCLE	Auto v. bicyclist - thrown, run over or sign. >20mph impact	
								MOTORCYCLE >20 MPH	Motorcycle crash >20 mph	
									Special Patient or System Considerations	
								AGE >55 YRS	Age: Older adults - >55 years old	
								CHILDREN	Age: Children	
								ANTICOAG & BLEED DISORD	Anticoagulation and bleeding disorders	
								BURNS ONLY	Burns without other trauma mechanism (triage to burn center)	
								BURNS TRAUMA	Burns with trauma mechanism (triage to trauma center)	
								TIME SENS EXT INJ	Time sensitive extremity injury	
								ENDSTAGE RENAL	End-stage renal disease requiring dialysis	
								PREGNANCY >20 WEEKS	Pregnancy >20 weeks	
								EMS JUDGMENT	EMS provider judgment	
								OTHER EMS PROTOCOL	Other EMS Protocol not on ACS Field Triage Decision Scheme	
<p>>Enter prehospital care/legs of transport in the order they occurred (ex: first responder care, transport to referring facility, transport from referring facility to your hospital). >The first leg of EMS care entered should pertain to EMS care received at the Scene of Injury. >The prehospital section includes data entry of any transport (both EMS and non-EMS) that occurred BEFORE patient arrived at your hospital. >Each leg of transport will have its own separate Transport Type, Transport Mode, Transported From (Origin/Hospital), EMS Agency, Run Sheet info, and EMS Dates/Times. >If your hospital is the first acute care facility to care for this patient and the patient did <u>not</u> have any EMS care, the registrar will enter one leg of transport for this record. >Transports OUT of your facility are NOT entered in this section.</p>										
**REPORTING NOTE: EACH PREHOSPITAL FIELD STORES DATA REGARDING MULTIPLE LEGS OF PREHOSPITAL TRANSPORT/CARE. PREHOSPITAL DATA IS MULTICOPY.										

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THE ASTR FIELDS "TRANSPORT TYPE", "TRANSPORT MODE" AND "TRANSPORTED FROM(ORIGIN)" CAN BE USED TO DETERMINE WHICH COPY IS NEEDED FOR REPORTING.										
Transport Type	TRANSPRT (FLD)	TPT_TYPE	**See note above, multi-copy field	Character	15		Yes	INTO_REPT_HOSP	Arrival/transport of pt INTO YOUR FACILITY (EMS & non-EMS)	Identifies which type of transport/EMS care is being documented. Each prehospital care/transport should have a separate entry, and only one leg will refer to the transport of the patient directly into your facility.
<p>2008 changes: New field. Major changes in data entry for prehospital care and legs of transport.</p>								FIRST_RESP	First Responder Care (non-transport)	All records must have one (and only one) entry pertaining to the patient's arrival into your facility, even if there was no prehospital EMS involvement or run sheet is unavailable.
<p>2009 changes: Picklist updated. Added FIRST_RESP "First Responder Care (non-transport)".</p>								OTHER	Any other prehospital care or transport	Single entry picklist. One per leg of transport or EMS care. Enter prehospital care in order of occurrence. The first leg of EMS care should refer to the EMS care received at the injury scene. When there are multiple legs of care/transport, the last entry will always apply to the arrival of patient into your facility.
										Transports OUT of your facility are <u>not</u> captured in the prehospital section. 2009 data entry change: When entering first responder care (non-transporter), select "First Responder Care" from picklist. "Arrival/transp of patient INTO YOUR FACILITY" will indicate to system which prehospital row to export to NTDB. Not Documented and Not Applicable should not be used. Every leg of transport must have a Transport Type entered.

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Transport Mode(s)	TRANSPRT (FLD)	TRANS_MODE	**See note above, multi-copy field	Character	15	P_07 & P_08	Yes	GRND_AMB	Ground Ambulance	Identifies the modes of transport used to deliver the patient to the referring and/or reporting hospitals. Field allows for entry of both EMS and non-EMS transport modes.
<i>2008 changes: New field.</i>								HELIC_AMB	Helicopter Ambulance	Single entry picklist. One per leg of transport. Enter legs of transport in order of occurrence.
								FIXED_WING_AMB	Fixed-wing Ambulance	Each prehospital leg of transport should have a corresponding mode of transport entered. All modes of transport before patient arrived at your facility should be documented as separate legs of transport.
								POV_WALK-IN	Private/Public Vehicle/Walk-in	Not Documented may be used if prehospital transport mode is unknown.
								POLICE	Police	Not Applicable should only be used if you are documenting first responder care (non-transport).
								OTHER	Other	All prehospital transport modes are exported to NTDB.
Transported From (ORIGIN)	TRANSPRT (FLD)	ORIGIN	**See note above, multi-copy field	Character	10		Yes	INJ_SCENE	From Injury Scene	The origin (location the patient was transported or came from) <u>immediately before arrival at the hospital or EMS Destination</u> . This field applies to all patients, both EMS and non-EMS transports.
<i>2008 changes: New field.</i>								REFER_FAC	From Referring Hospital	Each prehospital leg of transport should have a separate origin documented. Typically only one leg of transport will pertain to the transport of the patient from the Injury Scene.

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<p>2009 changes: To eliminate data entry confusion, NURS_HM and JAIL_PRISO were removed from this picklist and converted to picklist option INJ_SCENE "From Injury Scene". The Nursing Home or Jail/Prison information will be captured in the E849 Injury Location picklist.</p>								CLINIC_OFF	From Clinic/Doctor Office	Single entry picklist. One per leg of transport. Enter legs of transport in order of occurrence.
								URGENT_CAR	From Urgent Care Center	<u>If patient was injured at home and was transported from home, select "From Injury Scene"</u> . The only time you will select "From Home but Home was NOT the injury scene" is if patient was NOT injured at home, went home before going to the hospital, and then was taken from home to the hospital.
								EMS_REND	From EMS Rendezvous Point	Not Documented should be used if patient's origin is unknown.
								HOME	From Home but Home was NOT the injury scene	Not Applicable should be used if you are documenting non-transport first responder care. (Because there was no patient transport, this field would not apply.)
								OTHER	From Other Location (NOT injury scene)	
Transported From (HOSPITAL)	TRANSPRT (FLD)	BYP_HOSP	**See note above, multi-copy field	Character	15		Yes	See Appendix F for data values.		The name of the facility where the patient was transferred from (if the patient was transferred from a referring hospital.)

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<p>2008 changes: Picklist updated. Non-acute care facilities were removed from picklist. URG0001, UNS0012, and EMS0001 were added to list. Many of the system codes are different from the 2005-2007 list, even if the long text appears similar. When querying multiple years of data, pay attention to the old and new codes.</p>										<p>Single entry picklist. One per leg of transport. Enter legs of transport in order of occurrence.</p>
										<p>If you know that patient came from another hospital, but the hospital name is unknown, select "Unspecified Acute Care Hospital" from list. Not Documented should be used only if patient's prehospital history is unknown.</p>
										<p>Not Applicable should be used if this leg of transport does not pertain to the transport of the patient from another acute care referring hospital.</p>
<p>>The Transport Agency field has 3 main selections with 2 sub-picklists. "No EMS Care" does not have a sub-picklist.</p>										
<p>>Entry of "No EMS Care" in the Transport Agency field will autofill Not Applicable (null value) entries for the remaining prehospital fields for that leg of transport.</p>										
<p>>First responders are the first emergency responders to arrive on the incident scene (typically fire and public safety officials). For trauma registry data, first responders typically only provide non-transport emergency medical care. They are trained to assess the situation and patient injuries, and to stabilize the patient until more advanced care arrives. A first responder transport should occur very rarely (see next note).</p>										
<p>>*Note regarding prehospital transports (non-IHS): Some fire departments are CON holders licensed to transport patients within defined coverage areas. Current AZ CON holders are listed on the transporter picklist. Other fire departments transport under contracts with CON holders. If a non-transport fire department cares for the patient at the scene and then transports the patient under a contract with a CON holder, enter the fire department as the first responder and the licensed ambulance company as the transport agency. IHS ambulance companies are not required to register for CON designation and can transport.</p>										
EMS Agency Code (Prehospital)	TRANSPRT (FLD)	TRANS_AGNT	**See note above, multi-copy field	Character	15		Yes	See Appendix E for all picklist values. Main picklist screen is documented below.	EMS Agency codes were assigned to assist with data reporting (ex: Air transporters all start with TA). Refer to appendix for information on how codes were assigned.	The system code for the EMS agency that provided first responder care or provided transport of the patient to the hospital or rendezvous site.

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<p>2008 Changes: Picklist updated. All system codes are different from the 2005-2007 list, even if long text appears similar. When querying multiple years of data, pay attention to the old and new codes. Other changes were made in data entry of prehospital care and legs of transport. An autofill for NO_EMS_CARE was added to databases.</p>								NO_EMS_CARE	No EMS Care	If "No EMS Care" is selected from the picklist, the system will autofill Not Applicable (null value) entries into the remaining prehospital date/time and vital sign fields for this leg of prehospital care/transport.
<p>2008 Changes: Picklist updated. All system codes are different from the 2005-2007 list, even if long text appears similar. When querying multiple years of data, pay attention to the old and new codes. Other changes were made in data entry of prehospital care and legs of transport. An autofill for NO_EMS_CARE was added to databases.</p>								EMS_TRANSPORT	EMS Transporter	EMS Agencies that are found on both the Transporter and Non-Transport subpicklists have different codes depending on which picklist you select from. It is important to select the agency name from the appropriate subpicklist. If an agency is both a first responder and on the transporter list, select from the EMS Transporter picklist.
								EMS_NON_TRANSPT	EMS 1st Response Non-Transport	The "EMS_TRANSPORT" subpicklist should be used if the EMS Agency transported the patient. IHS facilities are listed on the data entry screen starting with "IHS-". See note above on entering fire department transports when the agency is not on the transporter list.*
										The "EMS_NON_TRANSPT" subpicklist should be used if the EMS provider was a first responder and did not transport the patient.
										Single entry picklist. One per leg of transport. Enter legs of transport in order of occurrence

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										<p>If you do not know the EMS agency name but you do know if the agency was an Air Transporter, Ground Transporter, or First Responder, select one of the Unknown options from the appropriate subpicklist.</p> <p>Not Documented may be used if both the EMS agency name and type are unknown.</p> <p>Not Applicable should not be used. If patient did not receive any prehospital EMS care, select "No EMS Care" from the picklist.</p>	
EMS Agency Name (Text Only)	TRANSPRT (FLD)	TRAN_AGENCY	**See note above, multi-copy field	Character	40		No	See Appendix E for EMS agency list.		Corresponding text name of the prehospital EMS agency code selected.	
										Autofilled from agency code selected above. For data entry view only. Do not use this field for reporting.	
Run Sheet Available?	TRANSPRT (FLD)	CARRY_PT	**See note above, multi-copy field	Character	1		Yes	C	Yes - Received and COMPLETE	Indicates if prehospital EMS Run Sheet is available and complete for hospital data abstraction.	
2008 Changes: Picklist updated. Y (Yes) was replaced with C (Received and COMPLETE) and I (Yes - Received but INCOMPLETE).									I	Yes - Received but INCOMPLETE	Single entry picklist.
									N	No - Not received from EMS provider	"Yes - Received but INCOMPLETE" means the EMS run sheet does not contain enough information for the registrar to complete all ASTR prehospital required data elements.

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										Not Documented should not be used. Not Applicable should be used if there was no EMS agency involvement, thus no run sheet expected.
Run Sheet Date	TRANSPRT (FLD)	RS_DATE	**See note above, multi-copy field	Date	8		No	mmddyyyy		Date of prehospital Run Sheet.
										Not Documented may be used if date of run sheet cannot be determined. Not Applicable should be used if there was no EMS agency involvement, thus no run sheet expected.
Run Sheet Number	TRANSPRT (FLD)	RS_NUM	**See note above, multi-copy field	Character	10		No			EMS prehospital Run Sheet number (PCR#).
2008 change: New field added as optional.										Not Documented may be used if run sheet number cannot be determined.
2009 change: This field is now REQUIRED. (Necessary for ASTR linkage purposes.)										Not Applicable should be used if there was no EMS agency involvement, thus no run sheet expected.
<p>>"Scene" typically refers to the injury incident scene, but "Scene" may also refer to the "Referring Hospital" when documenting EMS care during an interfacility transport.</p> <p>>Unless otherwise specified - For prehospital run sheet & vital sign fields below, Not Documented should be used if requested information is unknown or not recorded.</p> <p>>Unless otherwise specified - For prehospital run sheet & vital sign fields below, Not Applicable should be used if patient was not treated by a prehospital EMS provider.</p> <p>>All time fields should be entered in AZ Mountain Standard Time (MST).</p>										
Date EMS Provider Notified by Dispatch	TRANSPRT (FLD)	CALL_DATE	**See note above, multi-copy field	Date	8	P_01	No	mmddyyyy		Date that EMS (Emergency Medical Services) unit was notified by dispatch.

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										<p>For the EMS leg of transport from the scene of injury to your hospital, this will be the date EMS was dispatched to the injury scene.</p> <p>For the EMS leg transport from the referring hospital to your hospital, this will be the date EMS was dispatched to the referring facility.</p> <p>Not Documented and Not Applicable may be used.</p>
Time EMS Provider Notified by Dispatch	TRANSPRT (FLD)	CALL_TIME	**See note above, multi-copy field	Time	6	P_02	No	HH:MM - Military time format		Time that EMS (Emergency Medical Services) unit was notified by dispatch.
										<p>For the EMS leg of transport from the scene of injury to your hospital, this will be the time EMS was dispatched to the injury scene.</p> <p>For the EMS leg of transport from the referring hospital to your hospital, this will be the time EMS was dispatched to the referring facility.</p> <p>Not Documented and Not Applicable may be used.</p>
Date EMS Provider Left for Scene	TRANSPRT (FLD)	LFORSCN_DT	**See note above, multi-copy field	Date	8		No	mmddyyyy		Date that EMS provider left for the scene. This is the time the vehicle started moving.
2008 change: New field.										Scene typically refers to the injury incident scene, but "Scene" may also refer to the Referring Hospital or EMS rendezvous point.

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)
										<p>For the EMS leg of transport from the scene of injury to your hospital, this will be the date EMS left for the injury scene.</p> <p>For the EMS leg transport from the referring hospital to your hospital, this will be the date EMS left for the referring facility.</p> <p>Not Documented and Not Applicable may be used.</p>
Time EMS Provider Left for Scene	TRANSPRT (FLD)	DEPRT_TIME	**See note above, multi-copy field	Time	6		No	HH:MM - Military time format		Time that EMS left for the scene (or rendezvous point or referring facility). This is the time the vehicle started moving.
										<p>Scene typically refers to the injury incident scene, but "Scene" may also refer to the Referring Hospital or EMS rendezvous point.</p> <p>For the EMS leg of transport from the scene of injury to your hospital, this will be the time EMS left for the injury scene.</p> <p>For the EMS leg of transport from the referring hospital to your hospital, this will be the time EMS left for the referring facility.</p> <p>Not Documented and Not Applicable may be used.</p>
Date EMS Provider Arrived on Scene	TRANSPRT (FLD)	ASCENE_DT	**See note above, multi-copy field	Date	8	P_03	No	mmddyyyy		Date that EMS arrived on the scene (or rendezvous point or referring facility). This is the time the vehicle stopped moving.

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)
<i>2008 change: New field.</i>										For the EMS leg of transport from the scene of injury to your hospital, this will be the date EMS arrived at the injury scene.
										For the EMS leg of transport from the referring hospital to your hospital, this will be the date EMS arrived at the referring facility.
										Not Documented and Not Applicable may be used.
Time EMS Provider Arrived on Scene	TRANSPRT (FLD)	ARRIV_TIME	**See note above, multi-copy field	Time	6	P_04	No	HH:MM - Military time format		Time that EMS arrived on the scene (or rendezvous point or referring facility). This is the time the vehicle stopped moving.
										For the EMS leg of transport from the scene of injury to your hospital, this will be the time EMS arrived at the injury scene.
										For the EMS leg of transport from the referring hospital to your hospital, this will be the time EMS arrived at the referring facility.
										Not Documented and Not Applicable may be used.
Date of EMS Patient Contact	TRANSPRT (FLD)	PCONT_DT	**See note above, multi-copy field	Date	8		No	mmdyyy		Date that EMS provider first established contact with the patient.
<i>2008 change: New field.</i>										For the EMS leg of transport from the scene of injury to your hospital, this will be the date EMS established contact with the patient at the injury scene.

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)
										For the EMS leg of transport from the referring hospital to your hospital, this will be the date EMS established contact with the patient at the referring facility. Not Documented and Not Applicable may be used.
Time of EMS Patient Contact	TRANSPRT (FLD)	BSCNT_TIME	**See note above, multi-copy field	Time	6		No	HH:MM - Military time format		Time that EMS provider first established contact with the patient.
										For the EMS leg of transport from the scene of injury to your hospital, this will be the time EMS established contact with the patient at the injury scene. For the EMS leg of transport from the referring hospital to your hospital, this will be the time EMS established contact with the patient at the referring facility. Not Documented and Not Applicable may be used.
Date EMS Departed Scene	TRANSPRT (FLD)	LSCENE_DT	**See note above, multi-copy field	Date	8	P_05	No	mmddyyyy		Date that EMS provider left the scene (or rendezvous point or referring facility). This is the time the vehicle started moving.
<i>2008 change: New field.</i>										For the EMS leg of transport from the scene of injury to your hospital, this will be the date EMS left the injury scene. For the EMS leg of transport from the referring hospital to your hospital, this will be the date EMS left the referring facility.

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)
										Not Documented and Not Applicable may be used.
Time EMS Departed Scene	TRANSPRT (FLD)	EXIT_TIME	**See note above, multi-copy field	Time	6	P_06	No	HH:MM - Military time format		Time that EMS provider left the scene (or rendezvous point or referring facility). This is the time the vehicle started moving.
										For the EMS leg of transport from the scene of injury to your hospital, this will be the time EMS left the injury scene.
										For the EMS leg of transport from the referring hospital to your hospital, this will be the time EMS left the referring facility.
										Not Documented and Not Applicable may be used.
Date of Arrival at EMS Destination	TRANSPRT (FLD)	DEST_DATE	**See note above, multi-copy field	Date	8		No	mmddyyyy		Date that EMS provider arrived at the trip destination. Destination may be an EMS rendezvous point, referring hospital or arrival at the reporting hospital.
2008 change: New field.										For the EMS leg of transport from the scene of injury to your hospital, this will be the date EMS arrived at your hospital.
										For the EMS leg of transport from the referring hospital to your hospital, this will be the date EMS arrived at the your facility.
										Not Documented and Not Applicable may be used.
Time of Arrival at EMS Destination	TRANSPRT (FLD)	DEST_TIME	**See note above, multi-copy field	Time	6		No	HH:MM - Military time format		Time that EMS provider arrived at the trip destination. Destination may be an EMS rendezvous point, referring hospital or arrival at reporting hospital.

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)
										For the EMS leg of transport from the scene of injury to your hospital, this will be the time EMS arrived at your hospital.
										For the EMS leg of transport from the referring hospital to your hospital, this will be the time EMS arrived at the your hospital.
										Not Documented and Not Applicable may be used.
EMS Destination	TRANSPRT (FLD)	ACT_DEST	**See note above, multi-copy field	Character	15		Yes	See Appendix F for data values.		The location or facility where the EMS provider arrived with the patient. Depending on the leg of transport being entered, the EMS Destination may be a rendezvous point, referring hospital or the reporting hospital.
2008 changes: Picklist updated. Non-acute care facilities were removed from picklist. URG0001, UNS0012, and EMS0001 were added to list. Many of the system codes are different from the 2005-2007 list, even if the long text appears similar. When querying multiple years of data, pay attention to the old and new codes.										For the EMS leg of transport from the scene of injury to your hospital, the destination will be your hospital.
										For the EMS leg of transport from the referring hospital to your hospital, the destination will be your hospital.
										Not Documented and Not Applicable may be used.
EMS Agency Response Time (minutes)	TRANSPRT (FLD)	RESP_TM	**See note above, multi-copy field	Numeric	5		No	Minutes		Elapsed time from Date/Time EMS Notified by Dispatch to Date/Time EMS Arrived on Scene (in minutes).

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)
<i>2008 change: New field.</i>										<p>Reporting note: Calculated separately for each leg of transport. "Scene" typically refers to the injury incident scene, but "Scene" may also refer to the Referring Hospital or EMS rendezvous point.</p> <p>Automatically calculated by system when dispatch and scene arrival times are entered. This field will be blank if EMS dates/times are not available for calculation.</p>
EMS Agency Scene Time (minutes)	TRANSPRT (FLD)	SCENE_TM	**See note above, multi-copy field	Numeric	5		No	Minutes		<p>Elapsed time from Date/Time EMS Arrived at Scene to Date/Time EMS Departed Scene (in minutes).</p> <p>Reporting note: Calculated separately for each leg of transport. "Scene" typically refers to the injury incident scene, but "Scene" may also refer to the Referring Hospital or EMS rendezvous point.</p> <p>Automatically calculated by system when scene arrival and scene departure times are entered. This field will be blank if EMS dates/times are not available for calculation.</p>
Transport Time - EMS Agency Scene to Destination (minutes)	TRANSPRT (FLD)	TRANSP_TM	**See note above, multi-copy field	Numeric	5		No	Minutes		<p>Elapsed time from Date/Time EMS Departed Scene to EMS Date/Time of Arrival at Destination (in minutes).</p>

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)
										<p>Reporting note: Calculated separately for each leg of transport. "Scene" typically refers to the injury incident scene, but "Scene" may also refer to the Referring Hospital or EMS rendezvous point.</p> <p>Automatically calculated by system when scene departure and destination arrival times are entered. This field will be blank if EMS dates/times are not available for calculation.</p>
EMS Agency Total Time (minutes)	TRANSPRT (FLD)	TOTAL_TM	**See note above, multi-copy field	Numeric	5		No	Minutes		Elapsed time from Date/Time EMS Notified by Dispatch to Date/Time of Arrival at EMS Destination (in minutes).
<i>2008 change: New field.</i>										<p>Reporting note: Calculated separately for each leg of transport. "Scene" typically refers to the injury incident scene, but "Scene" may also refer to the Referring Hospital or EMS rendezvous point.</p> <p>Automatically calculated by system when dispatch and destination times are entered. This field will be blank if EMS dates/times are not available for calculation.</p>

PREHOSPITAL VITAL SIGNS AND AIRWAY MANAGEMENT = "PREHOSPITAL" PAGE IN ASTR DATABASE

First recorded prehospital vital signs are required to be submitted to ASTR. Submission of other prehospital vital signs is optional.

NTDS export requests only the first recorded vitals from the injury scene.

Important note on prehospital vital signs: For 2008 ED/Hospital Arrival data, prehospital vitals were captured in a different section (table) than the prehospital transport section. For ED/Hospital Arrival Dates January 1, 2009 forward, prehospital vitals are now captured in the transport section with the option to enter a set of vital signs per EMS leg of care. 2008 vitals signs are stored in a different location in the database than 2009 forward, so user must be careful to select the correct reporting variables.

*For reporting, the 2008 prehospital vitals signs are found under the "2008 ONLY_PREH VITAL" page in the ASTR database. 2009 vital signs are found under the "PREHOSPITAL" page.

****REPORTING NOTE: EACH PREHOSPITAL FIELD STORES DATA REGARDING MULTIPLE LEGS OF PREHOSPITAL TRANSPORT/CARE. PREHOSPITAL DATA IS MULTICOPY.**

THE ASTR FIELDS "TRANSPORT TYPE", "TRANSPORT MODE" AND "TRANSPORTED FROM(ORIGIN)" CAN BE USED TO DETERMINE WHICH COPY IS NEEDED FOR REPORTING.

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)
Date of Measurement of Field Vital Signs	2009: TRANSPRT (FLD)	2009: VDT	**See note above, multi-copy field	Date	8		No	mmddyyyy		The date vital signs were measured in the prehospital setting.
	2008: VITALS (FLD)	2008: DT								First recorded prehospital vital signs are required. Submission of other prehospital vital signs is optional. NTDS export requires the first recorded injury scene vitals (unassisted).
<p>2009 change: Data entry of prehospital vitals were changed for ED/Hospital Arrival Dates 1/1/09 forward. Vitals are now entered per EMS leg of care. 2008 vital signs are stored in a different database table than 2009 forward, so the reporting variables are different.</p>										Only one set of vitals can be entered per run sheet. If an EMS agency documented multiple vitals on one run sheet, enter the earliest (first recorded) vitals.
										Not Documented should be used if vital signs are not recorded on the EMS Run Sheet.
										Not Applicable should be used if patient was not treated by an EMS prehospital provider.
Time of Measurement of Field Vital Signs	2009: TRANSPRT (FLD)	VTIME	**See note above, multi-copy field	Time	6		No	HH:MM - Military time format		The time vital signs were measured in the prehospital setting.
	2008: VITALS (FLD)	TIME								First recorded prehospital vital signs are required. Submission of other prehospital vital signs is optional.
<p>2009 change: Data entry of prehospital vitals were changed for ED/Hospital Arrival Dates 1/1/09 forward. Vitals are now entered per EMS leg of care. 2008 vital signs are stored in a different database table than 2009 forward, so the reporting variables are different.</p>										Not Documented should be used if vital signs are not recorded on EMS Run Sheet.

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)
										Not Applicable should be used if patient was not treated by an EMS prehospital provider.
Field Pulse Rate	2009: TRANSPRT (FLD)	VHR	**See note above, multi-copy field	Numeric	3	P_10	No	Values 0-299 or null values		Pulse measured in the prehospital setting (palpated or auscultated), expressed as a number per minute.
	2008: VITALS (FLD)	HR								First recorded prehospital vital signs are required. Submission of other prehospital vital signs is optional.
2008 changes: New field.										Not Documented and Not Applicable may be used.
2009 change: Data entry of prehospital vitals were changed for ED/Hospital Arrival Dates 1/1/09 forward. Vitals are now entered per EMS leg of care. 2008 vital signs are stored in a different database table than 2009 forward, so the reporting variables are different.										
Field Respiratory Rate	2009: TRANSPRT (FLD)	VRESP_RATE	**See note above, multi-copy field	Numeric	3	P_11	No	Values 0-99 or null values - unassisted rate only		Respiratory rate measured in the prehospital setting (expressed as a number per minute).
	2008: VITALS (FLD)	RESP_RATE								First recorded prehospital vital signs are required. Submission of other prehospital vital signs is optional. For NTDS export, only send unassisted respiratory rate at the scene of injury.
2009 change: Data entry of prehospital vitals were changed for ED/Hospital Arrival Dates 1/1/09 forward. Vitals are now entered per EMS leg of care. 2008 vital signs are stored in a different database table than 2009 forward, so the reporting variables are different.										Not Documented means that the respiratory rate cannot be determined from available documentation.
										Not Applicable should be used if patient was not treated by a prehospital provider.

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)
Field Oxygen Saturation	2009: TRANSPRT (FLD)	VPULSE_OX	**See note above, multi-copy field	Numeric	3	P_12	No	Values 0-100 or null values		Oxygen saturation measured in the prehospital setting (expressed as a percentage).
	2008: VITALS (FLD)	PULSE_OX								First recorded prehospital vital signs are required. Submission of other prehospital vital signs is optional.
2008 changes: New field.										Not Documented and Not Applicable may be used.
2009 change: Data entry of prehospital vitals were changed for ED/Hospital Arrival Dates 1/1/09 forward. Vitals are now entered per EMS leg of care. 2008 vital signs are stored in a different database table than 2009 forward, so the reporting variables are different.										
Intubation Status at Time of Field Vitals	2009: TRANSPRT (FLD)	VINTUBATED	**See note above, multi-copy field	Character	1		Yes	Y	Yes	Indicates if patient was intubated prior to collection of the prehospital vital signs being documented. Intubation before GCS and RR can result in inefficient data for these values.
2008 Change: Picklist updated. U (unknown) removed from list.								N	No	Single entry picklist.
	2008: VITALS (FLD)	INTUBATED								First recorded prehospital vital signs are required. Submission of other prehospital vital signs is optional.
2009 change: Data entry of prehospital vitals were changed for ED/Hospital Arrival Dates 1/1/09 forward. Vitals are now entered per EMS leg of care. 2008 vital signs are stored in a different database table than 2009 forward, so the reporting variables are different.										Not Documented and Not Applicable may be used.
Field Systolic Blood Pressure	2009: TRANSPRT (FLD)	VSBP	**See note above, multi-copy field	Numeric	3	P_09	No	Values 0-300 or null values		Systolic blood pressure measured in the prehospital setting.

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)
	2008: VITALS (FLD)	SBP								First recorded prehospital vital signs are required. Submission of other prehospital vital signs is optional.
<i>2009 change: Data entry of prehospital vitals were changed for ED/Hospital Arrival Dates 1/1/09 forward. Vitals are now entered per EMS leg of care. 2008 vital signs are stored in a different database table than 2009 forward, so the reporting variables are different.</i>										
Field GCS - Eye Opening	2009: TRANSPRT (FLD)	VEO	**See note above, multi-copy field	Numeric	1	P_13	Yes	1	1 No eye movement when assessed	Glasgow Coma Score (Eye) measured in the prehospital setting.
	2008: VITALS (FLD)	EO						2	2 Opens eyes in response to painful stimulation	Single entry picklist.
<i>2009 change: Data entry of prehospital vitals were changed for ED/Hospital Arrival Dates 1/1/09 forward. Vitals are now entered per EMS leg of care. 2008 vital signs are stored in a different database table than 2009 forward, so the reporting variables are different.</i>										
								3	3 Opens eyes in response to verbal stimulation	Adult and pediatric scales are the same for GCS eye opening.
								4	4 Opens eyes spontaneously	Not Documented and Not Applicable may be used.
Field GCS - Verbal Response	2009: TRANSPRT (FLD)	VVR	**See note above, multi-copy field	Numeric	1	P_14	Yes	1	1 No verbal response	Glasgow Coma Score (Verbal) measured in the prehospital setting.
	2008: VITALS (FLD)	VR						2	2 Incomprehensible sounds	Single entry picklist.
<i>2009 change: Data entry of prehospital vitals were changed for ED/Hospital Arrival Dates 1/1/09 forward. Vitals are now entered per EMS leg of care. 2008 vital signs are stored in a different database table than 2009 forward, so the reporting variables are different.</i>										
								3	3 Inappropriate words	*A "Pediatric (<=2 yrs)" scale is listed for data entry assistance. Data values are stored with the same codes.
								4	4 Confused	Not Documented and Not Applicable may be used.
								5	5 Oriented	
									Pediatric <= 2 yrs *	

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)
								1 2 3 4 5	1 No vocal response 2 Inconsolable, agitated 3 Inconsistently consolable, moaning 4 Cries but is consolable, inappropriate interactions 5 Smiles, oriented to sounds, follows objects, interacts	
Field GCS - Motor Response	2009: TRANSPRT (FLD)	VMR	**See note above, multi-copy field	Numeric	1	P_15	Yes	1	1 No motor response	Glasgow Coma Score (Motor) measured in the prehospital setting.
	2008: VITALS (FLD)	MR						2	2 Extension to pain	Single entry picklist.
2009 change: Data entry of prehospital vitals were changed for ED/Hospital Arrival Dates 1/1/09 forward. Vitals are now entered per EMS leg of care. 2008 vital signs are stored in a different database table than 2009 forward, so the reporting variables are different.								3	3 Flexion to pain	* A "Pediatric (<=2 yrs)" scale is listed for data entry assistance. Data values are stored with the same codes.
								4	4 Withdrawal from pain	Not Documented and Not Applicable may be used.
								5	5 Localizing pain	
								6	6 Obeys commands	
									Pediatric <= 2 yrs *	
								1	1 No motor response	
								2	2 Extension to pain	
								3	3 Flexion to pain	
								4	4 Withdrawal from pain	
								5	5 Localizing pain	
								6	6 Appropriate response to stimulation	
Field GCS - Total	2009: TRANSPRT (FLD)	VGCS	**See note above, multi-copy field	Numeric	2	P_16	No	Value range = 3 (worst) - 15 (best)		Glasgow Coma Score (total) measured in the prehospital setting. GCS measures basic neurological functions of eye-opening, verbal response, and motor response.

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)
	2008: VITALS (FLD)	GCS								First recorded prehospital vital signs are required. Submission of other prehospital vital signs is optional.
2009 change: Data entry of prehospital vitals were changed for ED/Hospital Arrival Dates 1/1/09 forward. Vitals are now entered per EMS leg of care. 2008 vital signs are stored in a different database table than 2009 forward, so the reporting variables are different.										Autocalculated when EO, VR, and MR are entered.
										If a numeric GCS value is not recorded, but patient has documentation related to a level of consciousness AAOx3 (awake alert and oriented) or "normal mental status", interpret this as GCS 15 (assuming there is no other contraindicating information).
										Not Documented and Not Applicable may be used.
Field Paralytic Agent in Effect	2009: TRANSPRT (FLD)	VPAR_AGENT	**See note above, multi-copy field	Character	1		Yes	P	Paralytic	Describes paralytic/sedative agents in effect before prehospital GCS was assessed. Prior administration can result in inefficient data for GCS.
	2008: VITALS (FLD)	2008: PAR_AGENT						S	Sedated	Single entry picklist.
2008 Change: Picklist updated. U (unknown) removed from list.								X	Sedated and Paralytic	First recorded prehospital vital signs are required. Submission of other prehospital vital signs is optional.
2009 change: Data entry of prehospital vitals were changed for ED/Hospital Arrival Dates 1/1/09 forward. Vitals are now entered per EMS leg of care. 2008 vital signs are stored in a different database table than 2009 forward, so the reporting variables are different.								N	No Paralytic or Sedative Agents	Not Documented and Not Applicable may be used.
Field Revised Trauma Score	2009: TRANSPRT (FLD)	VRTS	**See note above, multi-copy field	Numeric	7.2		No	Weighted RTS only. Constraint values 0-7.85 or null values.		Patient's prehospital Revised Trauma Score. Autocalculated when prehospital SBP, RR, and GCS are entered. Field RTS could be affected by inefficient data for RR or GCS.

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)
	2008: VITALS (FLD)	RTS								Note: System calculates a weighted RTS based on vital signs entered. Field providers may document a non-weighted RTS on the run sheet, but only the weighted RTS should be entered for this field. Max value possible for a weighted RTS is 7.8408.
<p>2009 change: Data entry of prehospital vitals were changed for ED/Hospital Arrival Dates 1/1/09 forward. Vitals are now entered per EMS leg of care. 2008 vital signs are stored in a different database table than 2009 forward, so the reporting variables are different.</p>										First recorded prehospital vital signs are required. Submission of other prehospital vital signs is optional.
										Not Documented means that patient was treated by an EMS provider, but a required value for the RTS calculation is unknown.
										Not Applicable should be used if patient was not treated by a prehospital provider.
Field Airway Management Details	OTHFACT	OTH_FACTOR	(multiple entry picklist)	Character	15		Yes	OXYG	Oxygen administration or nasal canula only	All airway management procedures performed by EMS providers <u>at the scene of injury or during EMS transport to the first hospital for treatment.</u>
<p>2008 Changes: Picklist updated. UNK and NA removed from picklist.</p>								RSISUC	RSI - Intubation Attempt Successful	Multiple entry picklist. <u>Select all that apply.</u>
<p>2009 Changes: Picklist updated. PULSEOX, ETDLAD and LMA added to picklist. EOA removed from picklist. EOA/Combitube data converted to ETDLAD/Combitube.</p>								RSIUNS	RSI - Intubation Attempt Unsuccessful	Rapid Sequence Induction (RSI) = protocols using pharmacologic agents to aid in establishing advanced airway support.

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								OETT	Oral ETT - Intubation Successful	Per TRUG decision, registrar should document ALL airway management attempts, both successful and unsuccessful. Intubation and oxygen administration will be implied when the registrar selects "RSI - Intubation Attempt Successful" (RSISUC).
								NETT	Nasal ETT - Intubation Successful	"Not performed per documentation" from picklist should be used if patient had EMS care at the scene and run sheet indicates that no prehospital airway management was performed.
								INTUNS	Not RSI - Intubation Unsuccessful	Not Documented should be used if scene airway management is unknown or documentation is inadequate.
								BMV	Bag valve mask (BVM / BMV)	Not Applicable should be used if patient did not receive care at the injury scene from an EMS provider.
								PULSEOX	Pulse Oximetry	
								ETDLAD	ETDLAD / Combitube	
								LMA	Laryngeal Mask Airway (LMA)	
								CAPN	Capnography	
								AUTOV	Autoventilator	
								ORAL	Oral pharyngeal airway (OPA)	
								NASO	Nasopharyngeal airway (NPA)	
								CRIC	Cricothyrotomy	
								TRACH	Tracheostomy	
								NOT	No airway management performed by EMS, per documentation	
REFERRING (TRANSFERRING) HOSPITAL SECTION - "REFERRAL" PAGE IN ASTR DATABASE										
FIRST REFERRING AND SECOND REFERRING HOSPITAL INFORMATION										

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)
<p>>Referring Hospital data fields were entered very differently for ED Arrival years 2007 and earlier. Users must be very careful when comparing referral data across years.</p> <p>>"Referring Hospital" refers only to acute care facilities in which patient received care PRIOR TO arrival at YOUR hospital. Admission at referring facility is not required.</p> <p>>For 2008 data, the First Referring Hospital will denote the acute care hospital that transferred the patient TO YOUR FACILITY, not always the first hospital to care for patient.</p> <p>>For 2008 data, the Second Referring Hospital will denote any other acute care hospital that treated the patient <u>before arrival at the First Referring Hospital</u>.</p> <p>>Interfacility transfers OUT OF YOUR FACILITY are NOT captured in this section.</p> <p>>For 2008 Referring Hospital data entry - unless otherwise specified - Not Documented means that the requested information is unknown or not recorded.</p> <p>>For 2008 Referring Hospital data entry - unless otherwise specified - Not Applicable means the patient was NOT treated by a referring hospital before your hospital.</p> <p>>All time fields should be entered in AZ Mountain Standard Time (MST).</p> <p>>Entering the Interfacility Transfer field as "No" will auto-fill Not Applicable (null values) into all remaining referring facility fields.</p>										
Interfacility Transfer?	STAT2008	A_TRFR		Character	1	P_17	Yes	Y	Yes, transferred INTO your facility from acute care (by EMS)	Was this patient transferred to <u>your facility</u> from another acute care facility by EMS transport?
2008 changes: New field and autofill.									No, not transferred from acute care hospital using EMS	Single entry picklist.
										Includes EMS transports to your hospital from IHS clinics and other outlying facilities if providing emergency care services and stabilization. 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 interfacility transfer.
										Select "No, not transferred..." if your hospital was the first acute care hospital to care for this patient for this injury event.
										Not Documented may be used.
										Entry of code "N" into this field will <u>autofill</u> Not Applicable (null value) entries for all remaining Referring Hospital and Referring vital sign fields. Not Applicable should not be used.

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)
Date of Arrival at First Referring Hospital	TRANSFER	ENT_DATE	1	Date	8		No	mmddyyyy		Patient's arrival date at the First Referring Hospital. The First Referring Hospital is the acute care hospital that transferred the patient to <u>your</u> hospital for care.
<i>2008 changes: Definition was changed to clarify which destination facility should be entered first.</i>										
										Not Documented may be used.
										Not Applicable should be used if the patient was NOT treated by an acute care hospital before arrival at your hospital.
Time of Arrival at First Referring Hospital	TRANSFER	ENT_TIME	1	Time	6		No	HH:MM - Military time format		Patient's arrival time at the First Referring Hospital. The First Referring Hospital is the acute care hospital that transferred the patient to your hospital for care.
<i>2008 change: Definition was changed to clarify which destination facility should be entered first.</i>										
										Not Documented and Not Applicable may be used.
Date of Transfer (Exit) from First Referring Hospital	TRANSFER	EXIT_DATE	1	Date	8		No	mmddyyyy		Date of exit/transfer from the First Referring Hospital to your hospital.
<i>2008 change: Definition was changed to clarify which destination facility should be entered first.</i>										
										Not Documented and Not Applicable may be used.
Time of Transfer (Exit) from First Referring Hospital	TRANSFER	EXIT_TIME	1	Time	6		No	HH:MM - Military time format		Time of exit/transfer from the first referring facility to your hospital.
<i>2008 change: Definition was changed to clarify which destination facility should be entered first.</i>										
										Not Documented and Not Applicable may be used.
First Transferring Hospital	TRANSFER	REF_HOSP	1	Character	15		Yes	See Appendix F for data values.		The First Referring Hospital that transferred the patient to <u>your hospital</u> .

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)
<i>2008 changes: Definition was changed to clarify which transferring facility should be entered first. Picklist updated. Non-acute care facilities were removed from picklist. Many of the system codes are different from the 2005-2007 list, even if the long text appears similar. When querying multiple years of data, pay attention to the old and new codes.</i>										Not Documented and Not Applicable may be used.
Length of Stay (Hrs) in First Referring Hospital	TRANSFER	LOS	1	Numeric	4		No	Calculated in Hours, with rounding	<i>Any stay less than 1 hour rounds up to 1 hour. After that, the system rounds up to the next hour after 30 minutes.</i>	Total number of hours of patient stay in the First Referring Hospital.
<i>2008 changes: Definition was changed to clarify which transferring facility should be entered first. Calculation of LOS (Hrs) was changed to ensure consistency between hospitals.</i>										Automatically calculated as date difference between Date/Time of Arrival and Date/Time of Transfer. If only an estimated time is available, registrar should enter estimate.
										Not Documented and Not Applicable may be used.
Length of Stay (minutes) in First Referring Hospital	TRANSFER	LOS_MIN	1	Numeric	8		No	Calculated in Minutes, no rounding		Total number of minutes of patient stay in the First Referring Hospital.
<i>2008 change: New field.</i>										Automatically calculated as the difference between Date/Time of 1st Referring Hospital Arrival and the Date/Time of 1st Referring Hospital Exit.
										ASTR system only. Automatically populated by ASTR database for State reporting purposes.
Destination Facility (after transfer from 1st Referring)	TRANSPRT (REF)	ACT_DEST	1	Character	15		Yes	<i>See Appendix F for data values.</i>		The name of the facility the patient was transferred to. When entering First Referring Hospital information, the destination will be YOUR hospital.

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)
<p>2008 changes: Definition was changed to clarify which destination facility should be entered first. Picklist updated. Non-acute care facilities were removed from picklist. Many of the system codes are different from the 2005-2007 list, even if the long text appears similar. When querying multiple years of data, pay attention to the old and new codes.</p>										Not Documented and Not Applicable may be used.
<p>>Entry of a Not Applicable (null value) into the Date of Arrival in Second Referring field will <u>autofill</u> Not Applicable entries for the remaining second referring facility fields.</p>										
Date of Arrival at Second Referring Hospital	TRANSFER	ENT_DATE	2	Date	8		No	mmddyyyy		<p>Patient's arrival date at the Second Referring Hospital. The Second Referring Hospital is any acute care hospital that treated the patient before arrival at the First Referring Hospital. This will NOT be the hospital that transferred the patient to your facility.</p>
<p>2008 changes: Definition was changed to clarify which destination facility should be entered second. Added autofill.</p>										Not Documented may be used.
										<p>Not Applicable should be used if patient was NOT treated at a Second Referring Hospital. Entering data for a Second Referring Facility indicates that this patient had 2 interfacility transfers before arriving at your hospital.</p>
										<p>Entry of Not Applicable (null value) into this field will <u>autofill</u> Not Applicable entries for the remaining second referring facility fields and for the 2nd referring vital signs.</p>

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)
Time of Arrival at Second Referring Hospital	TRANSFER	ENT_TIME	2	Time	6		No	HH:MM - Military time format		Patient's arrival time at the Second Referring Hospital. The Second Referring Hospital is any acute care hospital that treated the patient before arrival at the First Referring Hospital.
<i>2008 changes: Definition was changed to clarify which destination facility should be entered second.</i>										
Date of Transfer (Exit) from Second Referring Hospital	TRANSFER	EXIT_DATE	2	Date	8		No	mmddyyyy		Date of exit/transfer from the Second Referring Hospital to the First Referring Hospital.
<i>2008 changes: Definition was changed to clarify which destination facility should be entered second.</i>										
Time of Transfer (Exit) from Second Referring Hospital	TRANSFER	EXIT_TIME	2	Time	6		No	HH:MM - Military time format		Time of exit/transfer from the Second Referring Hospital to the First Referring Hospital.
<i>2008 changes: Definition was changed to clarify which destination facility should be entered second.</i>										
Second Transferring Hospital	TRANSFER	REF_HOSP	2	Character	15		Yes	See Appendix F for data values.		The Second Referring Facility that transferred the patient to the First Referring Hospital. The Second Referring Hospital is any acute care hospital that treated the patient before arrival at the First Referring Hospital.
<i>2008 changes: Definition was changed to clarify which destination facility should be entered second.</i>										
Length of Stay (Hrs) in Second Referring Hospital	TRANSFER	LOS	2	Numeric	4		No	Calculated in Hours, with rounding	<i>Any stay less than 1 hour should round up to 1 hour. After that, the system should round up to the next hour after 30 minutes.</i>	Total number of hours of patient stay in the Second Referring Hospital.

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)
<i>2008 changes: Definition was changed to clarify which transferring facility should be entered second.</i>										Automatically calculated as date difference between Date/Time of Arrival and Date/Time of Transfer. If only an estimated time is available, registrar should enter estimate.
										Not Documented and Not Applicable may be used.
Length of Stay (minutes) in Second Referring Hospital	TRANSFER	LOS_MIN	2	Numeric	8		No	Calculated in Minutes, no rounding		Total number of minutes of patient stay in the Second Referring Hospital.
<i>2008 change: New field.</i>										Automatically calculated as the difference between Date/Time of 2nd Referring Facility Arrival and the Date/Time of 2nd Referring Facility Exit.
										ASTR system only. Added for state reporting purposes. Automatically populated by ASTR database for State reporting purposes.
Destination Facility (after transfer from 2nd Referring)	TRANSPRT (REF)	ACT_DEST	2	Character	15		Yes	See Appendix F for data values.		The name of the facility that the patient was transferred to. When entering Second Referring Hospital information, the destination will be the First Referring Hospital, NOT your hospital.
<i>2008 changes: Definition was changed to clarify which destination facility should be entered second. Picklist updated. Non-acute care facilities were removed from picklist. Many of the system codes are different from the 2005-2007 list, even if the long text appears similar. When querying multiple years of data, pay attention to the old and new codes.</i>										Not Documented and Not Applicable may be used.

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)
Vital Sign Designation (If recorded at 1st or 2nd Referring Facility)	VITALS (REF)	VS_DESIGN	1 or 2	Character	1		Yes	1	First Referring Hospital Vital Signs	Identifies at which referring facility the vital signs were collected. First Referring Hospital is the acute care hospital that transferred the patient TO YOUR FACILITY. Second Referring Hospital is another acute care hospital that treated the patient before arrival at the First Referring Hospital.
								2	Second Referring Hospital Vital Signs	Not Documented and Not Applicable may be used.
										Single entry picklist. Maximum of 2 sets of referring vitals signs can be submitted to ASTR. Submit only the first recorded vitals from each facility.
Initial Glasgow Coma Score Total in Referring Hospital 1 or 2	VITALS (REF)	GCS	1 or 2	Numeric	2		No	Value range = 3 (worst) - 15 (best)		Patient's first recorded Glasgow Coma Score <u>total</u> in the first or second referring hospital.
										Not Documented and Not Applicable may be used.
Initial Systolic Blood Pressure in Referring Hospital 1 or 2	VITALS (REF)	SBP	1 or 2	Numeric	3		No	Values 0-300 or null values		Patient's first recorded systolic blood pressure in the first or second referring hospital.
										Not Documented and Not Applicable may be used.
Initial Respiratory Rate in Referring Hospital 1 or 2	VITALS (REF)	RESP_RATE	1 or 2	Numeric	3		No	Values 0-99 or null values		Patient's first recorded respiratory rate in the first or second referring hospital.
										Not Documented and Not Applicable may be used.
Initial Revised Trauma Score in Referring Hospital 1 or 2	VITALS (REF)	RTS	1 or 2	Numeric	7.2		No	Weighted RTS only. Constraint values 0-7.85 or null values.		Patient's initial Revised Trauma Score in the first or second referring hospital. Autocalculated when referring hospital SBP, RR and GCS are entered.

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)
										Reporting note: Referring Facility RTS could be affected by inefficient data for RR and GCS. Not Documented and Not Applicable may be used.
ED/TRAUMA SECTION - "AZ-TRAUMA" PAGE IN ASTR DATABASE										
Reporting Hospital Emergency Department										
ED/Hospital Arrival Date*	TRA	TR_ENT_DT		Date	8	ED_01	No	mmddyyyy	This field is found on both the Demographic and ED/Trauma page. Editing either field should update the other.	First recorded arrival date into your emergency department (or hospital) for this injury event. If patient did not enter your hospital through the ED (e.g., direct admit), enter the date of first contact with the patient for this injury event. *Determines the case date range for data submission and date range for ASTR data reporting. Valid entry required for all records. Field is used to calculate Patient Age, ED LOS and Total Hospital LOS. Not Documented and Not Applicable should not be used. Field should not be left blank.
ED/Hospital Arrival Time	TRA	TR_ENT_TM		Time	6	ED_02	No	HH:MM - Military time format		First recorded arrival time into your emergency department (or hospital) for this injury event. If patient did not enter your hospital through the ED (e.g., direct admit), enter the time of first contact with the patient for this injury event. Field is used to calculate ED LOS and Total Hospital LOS. Time fields should be entered in AZ Mountain Standard Time (MST).

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										Not Documented and Not Applicable should not be used. Field should not be left blank.
ED Exit Date	TRA	TR_EXIT_DT		Date	8	ED_19	No	mmddyyyy		Date that patient <u>physically left your emergency department or died in your ED</u> . An actual change in level of care (i.e., transfer to an ICU transitional unit) is considered an ED Exit.
										If patient died in the ED, the date and time of ED exit is the time the patient was pronounced by the physician. Field is used to calculate ED LOS. (Also used to calculate Total Hospital LOS if patient was not admitted.) Not Documented should not be used. Not Applicable should be used if the patient was not treated in your hospital ED.
ED Exit Time	TRA	TR_EXIT_TM		Time	6	ED_20	No	HH:MM - Military time format		Time that patient <u>physically left your emergency department or died in your ED</u> .
										If patient died in the ED, the date and time of ED exit is the time the patient was pronounced by the physician. Field is used to calculate ED LOS. (Also used to calculate Total Hospital LOS if patient was not admitted). Time fields should be entered in AZ Mountain Standard Time (MST). Not Documented should not be used. Not Applicable should be used if the patient was not treated in your hospital ED.

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)
Length of Stay (Hrs) in ED	TRA	TR_LOS		Numeric	4		No	Calculated in Hours, with rounding	Any stay less than 1 hour should round up to 1 hour. After that, the system should round up to the next hour after 30 minutes.	The number of hours of patient stay in the emergency department of your hospital.
2008 change: New calculation instructions to ensure consistency between hospitals.										Automatically calculated as Date/Time of ED Exit minus Date/Time of ED Arrival.
										Not Documented should be used if patient was treated in your ED, but LOS is unknown. This option should be used <u>only</u> in rare instances.
										Not Applicable should be used if the patient was not treated in your hospital ED.
Length of Stay (minutes) in ED	STAT2008	EDLOSMIN		Numeric	6		No	Calculated in Minutes, no rounding		Total number of minutes of patient stay in the emergency department of your hospital.
2008 change: New field.										Automatically calculated as difference between Date/Time of ED Arrival and Date/Time of ED Exit.
										ASTR system only. Automatically populated by ASTR database for State reporting purposes.
Complete Trauma Team Arrival Time	TRMTEAM	ACT_TIME		Time	6		No			Time when all activated trauma team members arrived (if the trauma team was activated <u>at your hospital</u>).
										Time fields should be entered in AZ Mountain Standard Time (MST).
										Not Documented may be used if the trauma team arrival time is unknown.
										Not Applicable should be used if a trauma team was not activated for this patient at your hospital.
ED Discharge Disposition	TRA	TR_DISPO		Character	10	ED_17 & ED_18	Yes	FLOOR	Floor bed (general admission, non specialty unit bed)	The disposition of the patient at the time of discharge <u>from your ED</u> .

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								HOME NO SE	Home without services	Single entry picklist.
								ICU	Intensive Care Unit (ICU)	Picklist differentiates between discharge "Home without services" and "Home with services". "Home with services" indicates the patient required MEDICAL services in order to discharge home (ex: home health care, outpatient physical, occupational or speech therapy, etc.) "Home with services" does not refer to social services, such as bus passes or shelter information.
								OR	Operating Room	Field includes the NTDS "ED Death" categories in an ED Disposition subpicklist.
								TELE STEPD	Telemetry/step-down unit (less acuity than ICU)	Pts treated in accordance with "Do Not Resuscitate" (DNR) order should be coded under "Died in ED (other than failed resuscitation attempt)". Patients with DNR status should also be coded with the DNR co-morbid condition.
								TRANSFER	Transferred to another hospital	DOA means patient was declared dead on arrival with minimal or no resuscitation attempt and no invasive procedures were attempted.
								OBSERVE	Observation Unit (unit that provides <24 hour stays)	<i>Further clarification of DOA: Arrival at the hospital with no signs of life, but with pre-hospital CPR as indicated below:</i>

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)
									Died	Age >12 years and: 1) Blunt trauma, > 5 minutes pre-hospital CPR, 2) Penetrating head/neck/abdomen trauma, > 5 minutes pre-hospital CPR or 3) Penetrating chest trauma, > 15 minutes pre-hospital CPR.
								ED DOA	Declared dead on arrival w/ minimal/no resuscitation attempt	Age ≤ 12 years and: 1) Blunt trauma, > 15 minutes pre-hospital CPR, 2) Penetrating trauma, > 15 minutes pre-hospital CPR.
								DEATH RESU	Death after failed resuscitation attempt-no response 15 mins	"No response 15 mins" refers to resuscitation activities <u>in the reporting hospital</u> .
								DIED IN ED	Died in ED (other than failed resuscitation attempt)	The NTDS purpose of this field is to "roughly characterize functional status at hospital discharge". If location is not on this list, select the option that most closely represents the level of medical support the patient required.
								LEFT AMA	Left against medical advice	Not Documented may be used in rare instances, but attempts should be made to identify ED disposition.
								HOME SERVI	Home with services	Not Applicable should be used if the patient was never seen in your ED (ex: direct admit).
								OTHER	Other (jail, institutional care, mental health, etc.)	If the ED disposition entered does NOT indicate an acute care transfer, the system should autofill Not Applicable (null value) for ED Discharge Destination Hospital, ED Discharge Destination Transport Agency, and ED Transfer Reason.

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)
ED Discharge Destination Hospital	STAT2008	ED_HDEST		Character	15		Yes	See Appendix F for data values.		The name of the <u>acute care hospital</u> that your facility transferred this patient to, after patient received care in your ED. Patient must be transferred by EMS to an acute care hospital for this field to be applicable. Single entry picklist.
2008 change: New field.										Not Documented should be used if the discharge destination hospital cannot be determined.
										Not Applicable should be used if this patient was not transferred from your ED to another acute care hospital. (See autofill note under ED Discharge Disposition.)
ED Discharge Transport Agency	STAT2008	ED_AGENCY		Character	15		Yes	See Appendix E for all picklist values. Main picklist screen is documented below.		The system code for the EMS agency that transported the patient from your ED to another acute care hospital.
2008 change: New field.										*Because this field refers to an EMS transport, user should only select an option from the EMS Transporter subpicklist.
								NO_EMS_CARE	No EMS Care	
								EMS_TRANSPORT	EMS Transporter*	Single entry picklist.
								EMS_NON_TRANSPT	EMS 1st Response Non-Transport	Not Documented may be used if the name of the EMS transport agency is unknown.
										Not Applicable should be used if this patient was not transferred from your ED to another acute care hospital. (See autofill note under ED Discharge Disposition.)
ED Transfer Reason	STAT2008	ED_REASON		Character	15		Yes	HIGHER_CARE	Higher Level of Care/Specialty Care	The reason your facility transferred this patient <u>from your ED</u> to another acute care hospital.
2008 change: New field.								BURN_UNIT	Transfer to Burn Unit	Single entry picklist.

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								INSURANCE	Insurance Reason	Not Documented should be used if the ED transfer reason cannot be determined.
								RESOURCES	Resources Unavailable	Not Applicable should be used if this patient was not transferred from your ED to another acute care hospital. (See autofill note under ED Discharge Disposition.)
							PATIENT_RQST	Patient Request		
							LOWER_CARE	Lower Level of Care		
							OTHER	Other		

VITAL SIGNS - Reporting Hospital Emergency Department

>Only the first recorded ED/hospital vital signs should be submitted to ASTR.
 >If patient was a direct admit, enter the first vital signs that were collected at your hospital.
 >Not Documented should be used if vital sign values are unknown, not recorded.
 >Not Applicable should be used if the requested vital sign was not collected at your facility.

ED/Hospital Initial Pulse Rate	VITALS (TRA)	HR		Numeric	3	ED_04	No	Values 0-299 or null values		First recorded pulse rate in your ED/hospital (palpated or auscultated), expressed as a number per minute.
<i>2008 change: New field.</i>										Not Documented and Not Applicable may be used.
ED/Hospital Initial Respiratory Rate	VITALS (TRA)	RESP_RATE		Numeric	3	ED_06	No	Values 0-99 or null values		First recorded respiratory rate in your ED/hospital (expressed as a number per minute). First recorded RR may be entered as assisted or unassisted.
<i>2008 change: New field.</i>										Not Documented and Not Applicable may be used.
ED/Hospital Initial Respiratory Assistance	VITALS (TRA)	RESP_ASST		Character	1	ED_07	Yes	1	Unassisted Respiratory Rate	Determination of respiratory assistance associated with the ED/Hospital Initial Respiratory Rate. Assistance is defined as mechanical and/or external support of respiration.
<i>2008 change: New field.</i>										Single entry picklist.
								2	Assisted Respiratory Rate	Not Documented and Not Applicable may be used.
ED/Hospital Initial Oxygen Saturation	VITALS (TRA)	PULSE_OX		Numeric	3	ED_08	No	Values 0-100 or null values		First recorded oxygen saturation in the ED/hospital (expressed as a percentage).

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<i>2008 change: New field.</i>										Not Documented and Not Applicable may be used.
ED/Hospital Initial Supplemental Oxygen	VITALS (TRA)	RESP_EXPS		Numeric	1	ED_09	Yes	1	No Supplemental Oxygen	Determination of the presence of supplemental oxygen during assessment of ED/Hospital initial oxygen saturation level.
<i>2008 change: New field.</i>								2	Supplemental Oxygen	Single entry picklist.
<i>2008 change: New field.</i>										Not Documented and Not Applicable may be used.
ED/Hospital Initial Systolic Blood Pressure	VITALS (TRA)	SBP		Numeric	3	ED_03	No	Values 0-300 or null values		Patient's first recorded systolic blood pressure taken in the ED/hospital.
<i>2008 change: New field.</i>										Not Documented and Not Applicable may be used.
ED/Hospital Initial GCS - Eye Opening	VITALS (TRA)	EO		Numeric	1	ED_10	Yes	1	1 No eye movement when assessed	First recorded Glasgow Coma Score (Eye) in the ED/Hospital.
<i>2008 change: New field.</i>								2	2 Opens eyes in response to painful stimulation	Adult and pediatric scales are the same for GCS eye opening.
<i>2008 change: New field.</i>								3	3 Opens eyes in response to verbal stimulation	Single entry picklist.
<i>2008 change: New field.</i>								4	4 Opens eyes spontaneously	Not Documented and Not Applicable may be used.
ED/Hospital Initial GCS - Verbal Response	VITALS (TRA)	VR		Numeric	1	ED_11	Yes	1	1 No verbal response	First recorded Glasgow Coma Score (Verbal) in the ED/Hospital.
<i>2008 change: New field.</i>								2	2 Incomprehensible sounds	Single entry picklist.
<i>2008 change: New field.</i>								3	3 Inappropriate words	* A "Pediatric (<=2 yrs)" scale is listed for data entry assistance. Data values are stored the same.
<i>2008 change: New field.</i>								4	4 Confused	Not Documented and Not Applicable may be used.
<i>2008 change: New field.</i>								5	5 Oriented	
<i>2008 change: New field.</i>									Pediatric <= 2 yrs *	
<i>2008 change: New field.</i>								1	1 No vocal response	
<i>2008 change: New field.</i>								2	2 Inconsolable, agitated	
<i>2008 change: New field.</i>								3	3 Inconsistently consolable, moaning	
<i>2008 change: New field.</i>								4	4 Cries but is consolable, inappropriate interactions	

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								5	5 Smiles, oriented to sounds, follows objects, Interacts	
ED/Hospital Initial GCS - Motor Response	VITALS (TRA)	MR		Numeric	1	ED_12	Yes	1	1 No motor response	First recorded Glasgow Coma Score (Motor) in the ED/Hospital.
								2	2 Extension to pain	Single entry picklist.
								3	3 Flexion to pain	* A "Pediatric (<=2 yrs)" scale is listed for data entry assistance. Data values are stored the same.
								4	4 Withdrawal from pain	Not Documented and Not Applicable may be used.
								5	5 Localizing pain	
								6	6 Obeys commands	
									Pediatric <= 2 yrs *	
								1	1 No motor response	
								2	2 Extension to pain	
								3	3 Flexion to pain	
								4	4 Withdrawal from pain	
								5	5 Localizing pain	
								6	6 Appropriate response to stimulation	
ED/Hospital Initial GCS - Total	VITALS (TRA)	GCS		Numeric	2	ED_13	No	Value range = 3 (worst) - 15 (best)		First recorded Glasgow Coma Score (total) in the ED/Hospital. GCS measures basic neurological functions of eye-opening, verbal response, and motor response.
										Autocalculated when EO, VR, and MR are entered.
										Not Documented and Not Applicable may be used.
Intubation Status at Time of ED/Hospital Vitals	VITALS (TRA)	INTUBATED		Character	1		Yes	Y	Yes	Indicates if patient was intubated <u>prior to collection of the ED vital signs</u> being documented. Intubation before GCS and RR can result in inefficient data for these values.
2008 Change: Picklist updated. U (unknown) removed from list.								N	No	Single entry picklist.
										Not Documented and Not Applicable may be used.

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Paralytic Agent in Effect in ED/Hospital	VITALS (TRA)	PAR_AGENT		Character	1		Yes	P	Paralytic	Describes paralytic/sedative agents in effect before 1st recorded ED GCS was assessed. Prior administration can result in inefficient data for GCS.
2008 Change: Picklist updated. U (unknown) removed from list.								S	Sedated	Single entry picklist.
								X	Sedated and Paralytic	Not Documented and Not Applicable may be used.
								N	No Paralytic or Sedative Agents	
ED/Hospital Initial GCS Qualifiers	VITALS (TRA)	BP_MEASURE	(multiple entry picklist)	Character	1	ED_14	Yes	1	Patient Chemically Sedated	Documentation of factors potentially affecting the first assessment of GCS upon arrival in the ED/Hospital. (GCS qualifier field for NTDB export)
2008 change: New field.								2	Obstruction to the Patient's Eyes	Single entry picklist, per registry software design.
								3	Patient Intubated	If multiple factors are present affecting the GCS, be sure to select appropriate combination picklist choice.
								4	Chemically Sedated & Intubated	Not Documented may be used.
								5	Chemically Sedated & Obstruction to Eyes	Not Applicable should be used if patient was not chemically sedated, intubated and did not have eye obstruction.
								6	Obstruction to Eyes & Intubated	
								7	Chem. Sedated & Obstruction to Eyes & Intubated	
ED/Hospital Initial Temperature	VITALS (TRA)	TEMP		Numeric	6.1	ED_05	No			First recorded temperature taken in your ED/hospital.
										Not Documented means temperature was taken but value is unknown or not recorded.
										Not Applicable means no temperature was taken.

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										ASTR accepts temperature in Fahrenheit or Celsius. If temperature is entered in Fahrenheit, conversion to Celsius will be needed before export to NTDB.
Units of Temperature	VITALS (TRA)	TEMP_UNITS		Character	1		Yes	F C	Fahrenheit Celsius	The units used to document the patient's initial temperature. Single entry picklist.
										Not Documented means temperature was taken but value is unknown or not recorded. Not Applicable means no temperature was taken.
Temperature Route	VITALS (TRA)	TEMP_LOC		Character	15		Yes	ORAL	Oral	The route used to measure the patient's initial temperature.
2008 change: Picklist updated. NOT DOCUMENTED removed from picklist. Null value Not Documented (*ND) to be used instead.										
2009 change: Picklist updated. TEMPORAL was added to list.										
								RECTAL	Rectal	Single entry picklist.
								AXILLARY	Axillary	Not Documented means temperature was taken but value is unknown or not recorded.
								TYMPANIC	Tympanic	Not Applicable means no temperature was taken.
								FOLEY	Foley	
								TEMPORAL	Temporal Artery Sensor	
								OTHER	Other	
ED/Hospital Initial Revised Trauma Score	VITALS (TRA)	RTS		Numeric	7.2		No	Weighted RTS only. Constraint values 0-7.85 or null values.		Patient's initial ED/Hospital Revised Trauma Score. Autocalculated when ED/Hospital SBP, RR, and GCS are entered. Not Documented and Not Applicable may be used.
TOXICOLOGY FINDINGS SECTION - "AZ-TOXICOLOGY" PAGE IN ASTR DATABASE										
Alcohol Use Indicator	STAT2008	A_INDICATE		Character	15	ED_15	Yes	NOT_SUSPECTED	NO- not suspected	Use of alcohol by the patient.
2008 change: New field.								CONFIRMED_NONE	NO- confirmed by test	Single entry picklist. Select most appropriate option.

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								SUSPECTED	Suspected use, not tested	Alcohol testing may be documented <u>at any facility (or setting)</u> treating this patient event.
								PT REPT_NO TEST	Patient reported use, not tested	Per NTDS, "Trace levels" is defined as any alcohol level below the legal limit of the testing state, but not zero. ASTR instructions: If lab result indicates alcohol value <10mg/dL or a result too low to specify a value, enter "No (confirmed by test)".
								BELOW_LEGAL_LMT	YES- confirmed by test, under legal limit (NTDB trace level)	"Beyond the legal limit" is defined by a BAC above the legal limit for the testing state. In AZ, the legal BAC limit is .08 (BAC >= 80 mg/dL). For patients under age 21, any conclusive level would be "beyond legal limit."
								ABOVE_LEGAL_LMT	YES- confirmed by test, beyond legal limit	Not Documented may be used if there is no documentation regarding alcohol testing.
										Not Applicable should not be used. "No, not suspected" should be used if patient was not suspected of alcohol use and no testing was performed.
Blood Alcohol Content - mg/dL	VITALS (TRA)	ETOH_LEVEL		Numeric	3		No	Must be submitted as mg/dL (3 digit value, no decimal)	Example: A BAC of .05 would be entered as 50 mg/dL / BAC of .08 = 80 mg/dL / BAC of .10 = 100 mg/dL / BAC of .25 = 250 mg/dL, etc.	Level of blood alcohol concentration (BAC) detected in the patient's blood (milligrams per deciliter, no decimals).
										If lab result indicates alcohol value <10mg/dL or a result too low to specify a value, enter 0 (zero).

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										<p>Blood alcohol concentration (BAC) may be documented <u>at any facility (or setting)</u> treating this patient event, including referring facility lab results. Only one BAC value is submitted to ASTR. If multiple results are available, submit the first recorded result (blood draw closest to the time of injury).</p> <p>Not Documented may be used if there is no documentation in record regarding alcohol testing.</p> <p>Not Applicable should be used if patient's BAC was not tested.</p>
Drug Use Indicator	TRA	TR_UNCPROB		Character	15	ED_16	Yes	NOT_SUSPECTED	NO- not suspected	Use of drugs by the patient (prescription and illegal).
<p>2008 changes: Entirely new picklist adopted to match NTDS list. Many system codes are different from the 2005-2007 list, even if long text appears similar. When querying multiple years of data, pay special attention to the old and new codes.</p>										
								CONFIRMED_NO	NO- confirmed by test	Single entry picklist, per software system design. Enter "Yes, confirmed legal AND illegal use drugs" if patient used both legal and illegal drugs.
								SUSPECTED	Suspected use, not tested	Field applies to drugs used by patient prior to, or at the time of injury. This field does NOT pertain to drugs given to patient by EMS provider or drugs given at your hospital.
								YES_LEGAL_USE	YES- confirmed by test, legal use prescription drug	"Illegal use drug" includes the <u>illegal</u> use of prescription drugs. Registrar should carefully review chart for indication if prescription drug was being used legally. If this cannot be determined, registrar will select "legal use" for prescription drug.

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								YES_ILLEGAL_USE	YES- confirmed illegal use drug or illegal use prescription	Drug use may be documented <u>at any facility (or setting)</u> treating this patient event.
								YES_LGL+ILLEGAL	YES- confirmed legal AND illegal use drugs	Not Documented may be used if there is no documentation in record regarding drug testing.
										Not Applicable should not be used. "No (not suspected)" should be used if patient was not tested for drugs.
Toxicology Substances Found	TOXIANAL	SUBSTANCE	(multiple entry picklist)	Character	20		Yes	AMPHETAMINE	Methamphetamine	Specific drugs used by patient. If drug screen was positive, select all substance(s) detected.
								BARBITURATES	Barbiturates	Multiple entry picklist. Select all that apply.
								BENZODIAZEPINE	Benzodiazepines	Field applies to drugs that were used by patient prior to, or at the time of injury. Do NOT enter drugs given to patient by EMS provider or drugs given at your hospital.
								COCAINE	Cocaine	Drug use may be documented <u>at any facility (or setting)</u> treating this patient event.
								PHENCYCLIDINE	Phencyclidine	Not Documented may be used if there is no documentation in record regarding drug testing.
								OPIATE	Opiate	Not Applicable should be used if patient's blood was not tested for drugs or if no drugs were found.
								THC MARIJUANA	THC Marijuana	
								OTHER	Other	
DISCHARGE SECTION - "AZ-DISCHARGE" PAGE IN ASTR DATABASE										
Final Outcome	POSTHOSP	FNL_OUTCM		Character	1		Yes	L	Lived	Indicates whether patient was alive or deceased at the time of ED or inpatient discharge <u>from your facility.</u>

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<i>2008 change: Picklist updated. U (Unknown) removed from picklist.</i>										Not Documented may be used in rare instances, but every attempt should be made to determine patient outcome at discharge.
								D	Died	Not Applicable should not be used. Outcome should be entered for all patients regardless of admission status.
Total ICU Length of Stay	ICU	LOS		Numeric	4	O_01	No	Values 0 - 400 or null values.		The total number of patient days in any Intensive Care Unit (ICU) - including all episodes.
<i>2008 change: Added NTDS clarification regarding calculation of ICU LOS.</i>										Per NTDS, record in full day increments with any partial day listed as a full day. Total time spent in ICU should be calculated in hours and rounded to the next full day increment.
										Field allows for multiple admission and discharge dates and autofills with total ICU LOS. If a patient is admitted and discharged on the same date, the LOS is one day.
										Only the total ICU value should be submitted to ASTR.
										Not Documented may be used. Not Applicable should be used if patient did not receive care in the ICU.
Total Ventilator Days	STAT2008	A_VENTDAYS		Numeric	5	O_02	No	Values 0 - 400 or null values.		The total number of patient days spent on a mechanical ventilator. Includes all mechanical ventilation time, <u>except</u> mechanical ventilation initiated solely for an OR procedure. Includes ED vent time but not vent time for organ harvesting.

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<i>2008 change: New field.</i>										Per NTDS, record in full day increments with a partial day listed as a full day. Total time spent on ventilator should be calculated in hours and rounded to the next full day increment. Exclude time associated with OR procedures.
										Field allows for multiple stop and start dates and calculates with total days spent on a mechanical ventilator. If patient begins and ends mechanical ventilation on the same date, the total ventilator days is one day.
										Not Documented may be used.
										Not Applicable should be used if patient did not receive any mechanical ventilation or if patient received ventilation solely for an OR procedure.
Autopsy Identification Number	MORTDETS	AUTOP_IDNO		Character	10		No			Identification number of autopsy (coroner/medical examiner number).
										Not Documented may be used if patient had autopsy but ID number is unknown.
										Not Applicable should be used if patient survived or if patient expired and did not have an autopsy performed.
Hospital (Inpatient) Discharge Date	POSTHOSP	PH_ENT_DT		Date	8	O_03	No			The date the patient was discharged (as an inpatient) from your hospital.
<i>2008 change: Entry of Not Applicable in this field will indicate to system that ED Exit date/time should be used in calculation of Total Hospital LOS.</i>										If patient died while admitted to your hospital, the date and time of discharge is the time the patient was pronounced by the physician.
										Not Documented should not be used.

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										<p>Not Applicable should be used if patient was never admitted as an inpatient to your hospital.</p> <p>Field is used to calculate Admission LOS and Total Hospital LOS.</p> <p>Entry of Not Applicable (null value) into this field will indicate to system that patient was only seen in the ED. This will instruct system to use ED Exit Date/Time to calculate patient's Total Hospital LOS instead of Hospital (Inpatient) Discharge Date.</p>
Hospital (Inpatient) Discharge Time	POSTHOSP	PH_ENT_TM		Time	6	O_04	No	HH:MM - Military time format		The time the patient was discharged (as an inpatient) from your hospital.
2008 change: New field.										<p>If patient died while admitted to your hospital, the date and time of discharge is the time the patient was pronounced by the physician.</p> <p>Time fields should be entered in AZ Mountain Standard Time (MST).</p> <p>Field is used to calculate Total Hospital LOS.</p> <p>Not Documented should not be used.</p> <p>Not Applicable should be used if patient was never admitted as an inpatient to your hospital.</p>
Hospital Admission Length of Stay (Days)	MAINDATA	LOS		Numeric	4		No	Calculated in Days (see notes)		The patient's total number of days of inpatient stay at your facility.

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									Note: Admission and Discharge on the same day equals LOS of one day. (Admit 1/1/08 and D/C 1/1/08 = 1 day / Admit 1/1/08 and D/C 1/2/08 = 1 day / Admit 1/1/08 and D/C 1/3/08 = 2 days, Admit 1/1/08 and D/C 1/4/08 = 3 days, etc.)	Automatically calculated as the date difference between Hospital Admission Date and Hospital (Inpatient) Discharge Date. Admission and discharge times are not used in this calculation. Admission time is not an ASTR required field.
										Not Documented should not be used.
										Not Applicable should be used if patient was never admitted as an inpatient to your hospital.
Total Hospital Length of Stay (ED + Admission)	STAT2008	A_THOSPLOS		Numeric	9.2		No	Calculated in Days, up to 2 decimal places, no rounding		The patient's total ED and hospital stay at your facility.
2008 change: New field.										Calculation for admitted patients: If patient was admitted, the system will calculate Hospital (Inpatient) Discharge Date/Time minus ED/Hospital Arrival Date/Time.
										Calculation for ED only patients: If Hospital (Inpatient) Discharge Date is entered by the user as Not Applicable (null value), the system will use ED Exit Date/Time instead of Hospital Discharge Date/Time to calculate Total Hospital LOS.
										Not Documented and Not Applicable should not be used.
Hospital (Inpatient) Discharge Disposition	POSTHOSP	DSCHG_TO		Character	25	O_05	Yes	HOME	Discharged home with no home services	The disposition of the patient at discharge from your hospital (after an inpatient stay).
								ACUTE CARE	Discharge/Transfer to another acute care hospital using EMS	Single entry picklist.

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								INTERM CARE FACILITY	Discharge/Transfer to an Intermediate Care Facility	The NTDS purpose of this field is to "roughly characterize functional status at hospital discharge". "Discharged home with no home services" refers to any non-medical facility or residence. (Jail, prison, institutional care, etc. are similar in the level of medical care required at home.) Discharge to any other medical facility, other than those on list, should be coded as "Discharged/ Transferred to another type of rehabilitation or long-term care facility".
								HOME HEALTH	Discharge/Transfer to home under care of Home Health Agency	Skilled Nursing Care is "daily nursing and rehabilitative care that is performed only by or under the supervision of skilled professional or technical personnel. Skilled care includes administering of medication, medical diagnosis and minor surgery."
								LEFT AMA	Left against medical advice	Intermediate care facility (ICF) is "a facility providing a level of medical care that is less than the degree of care and treatment that a hospital or SNF is designed to provide but greater than the level of room and board."

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								EXPIRED	Expired	Home Health Agency must be an organized home health service. This is a "a certified service approved to provide care received at home as part-time skilled nursing care, speech therapy, physical or occupational therapy or, part-time services of home health aides."
								DISCHARGED, SNF	Discharge/Transfer to Skilled Nursing Facility	Hospice is "an organization which is primarily designed to provide pain relief, symptom management and supportive services for the terminally ill and their families."
								HOSPICE	Discharge/Transfer to hospice care	Not Documented may be used in rare instances, but attempt should be made to identify disposition.
								OTHER REHAB OR LTC	Discharge to other type of rehab or long-term care facility	Not Applicable should be used if patient was never admitted to your hospital.
										If disposition entered does NOT indicate an acute care transfer, the system should autofill Not Applicable (null value) for Hospital Discharge Destination Hospital, Hospital Discharge Destination Transport Agency, and Hospital Discharge Transfer Reason.
Hospital Discharge Destination Hospital	STAT2008	A_HDESTH		Character	15		Yes	See Appendix F for data values.		The name of the <u>acute care hospital</u> that your facility transferred this patient to, after patient received inpatient care at your facility. Patient must be transferred by EMS to an acute care hospital for this field to be applicable.

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<i>2008 change: New field.</i>										Not Documented should be used if the discharge destination hospital cannot be determined.
										Not Applicable should be used if patient was not transferred from your hospital to another acute care hospital after inpatient care. (See autofill note under Hospital Discharge Disposition.)
Hospital Discharge Transport Agency	STAT2008	A_HTAGNT		Character	15		Yes	See Appendix E for all picklist values. Main picklist screen is documented below.		The code for the EMS agency that transported the patient from your facility to another acute care hospital, after patient received inpatient care at your facility.
<i>2008 change: New field.</i>										*Because this field refers to an EMS transport, user should only select an option from the EMS Transporter subpicklist.
								NO_EMS_CARE	No EMS Care	
								EMS_TRANSPORT	EMS Transporter*	Single entry picklist.
								EMS_NON_TRANSPT	EMS 1st Response Non-Transport	Not Documented may be used if the name of the EMS transport agency is unknown.
										Not Applicable should be used if patient was not transferred from your hospital to another acute care hospital after inpatient care. (See autofill note under Hospital Discharge Disposition.)
Hospital Discharge Transfer Reason	STAT2008	A_HDREASON		Character	15		Yes	HIGHER_CARE	Higher Level of Care/Specialty Care	The reason your facility transferred this patient to another acute care hospital, after patient received inpatient care at your facility.
<i>2008 change: New field.</i>										Not Documented should be used if the transfer reason cannot be determined.
								BURN_UNIT	Transfer to Burn Unit	

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)
								INSURANCE RESOURCES PATIENT_RQST LOWER_CARE OTHER	Insurance Reason Resources Unavailable Patient Request Lower Level of Care Other	Not Applicable should be used if patient was not transferred from your hospital to another acute care hospital after inpatient care. (See autofill note under Hospital Discharge Disposition.)
State Patient?	MAINDATA	TCCODE		Character	3		Yes	Y	Yes	"State Patient" field indicating whether patient meets inclusion criteria for export to ASTR.
								N	No	Hospitals may want to capture patients that do not meet ASTR criteria. This field allows hospitals to identify which records should not export to ASTR.
										System should autofill to Yes, but entry can be changed. Selection of "No" by user will indicate to system that this is not an ASTR patient.
DISCHARGE SECTION - HOSPITAL PROCEDURES										
Location of ED/Hospital Procedures	SURG (TRA)	PHASE_COPY	(may be multiple)	Character	3		Yes	ED	ED	The location at which each ICD-9-CM procedure was performed. Enter procedures performed in your hospital or in referring hospital.
2008 change: Picklist updated to clarify between referring and reporting hospital procedures. REF "Referring Facility" text was updated to "REFERRING FACILITY (any location)." OTH "Other" text was updated to "Other Location in Your Hospital".								OR	OR	Picklist allows for selection of a corresponding location for each procedure performed.
								RAD	Radiology	A valid location should be entered for each ICD-9-CM procedure performed on patient.

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)
								ICU	ICU	<p>All location categories except "REFERRING FACILITY" refer to locations <u>within your hospital</u>. For procedures performed anywhere in the Referring Facility, select "REFERRING FACILITY" from picklist.</p> <p>ASTR requests procedures performed in the reporting and referring hospitals. NTDB requests only reporting hospital procedures. At NTDB export, all procedures should be sent <u>except</u> those marked as "REFERRING FACILITY".</p> <p>Not Documented may be used.</p> <p>Not Applicable should be used if no procedures were performed.</p>
							SPU	Special Procedures Unit		
							MED	Medical Surgical / Floor		
							MSR	Minor Surgery Unit		
							CAT	Cath Lab		
							NUC	Nuclear Medicine		
							STE	Stepdown Unit		
							CAR	Cardio Diagnostics		
							BRN	Burn Unit		
							L&D	Labor & Delivery		
							PAC	PACU		
							OTH	Other Location in Your Hospital		
							REF	REFERRING FACILITY (any location)		
ED/Hospital Procedure Start Date	SURG (TRA)	DT	(may be multiple)	Date	8	HP_02	No			The date operative and/or essential procedures were performed.
2008 change: New field.										Not Documented may be used.
										Not Applicable should be used if no procedures were performed on patient.
ED/Hospital Procedure Start Time	SURG (TRA)	AN_ST_TME	(may be multiple)	Time	6	HP_03	No	HH:MM - Military time format		The time operative and/or essential procedures were performed.

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)
<i>2008 change: New field.</i>										Procedure start time is defined as the time the incision was made (or the procedure started).
										Not Documented may be used.
										Not Applicable should be used if no procedures were performed.
ED/Hospital ICD-9-CM Procedure Codes	SURG (TRA)	PROC_ICD9	(may be multiple)	Character	6	HP_01	Yes	Valid ICD-9-CM IP procedure codes. Submit to ASTR as a 2 digit number, followed by decimal, and 3rd or 4th digit as required.	00.01-99.99	Operative and/or essential procedures conducted during hospital stay.
<i>2008 change: Added NTDS clarification regarding which procedures should be entered.</i>										Major and minor procedure (ICD-9 CM) codes (performed on patient at referring facility or reporting facility.)
										Multiple entry picklist. Select all that apply. (NTDS max = 200)
										Operative and/or essential procedures are defined as those procedures performed in the OR, ED, or ICU that were essential to the diagnoses, stabilization or treatment of the patient's specific injuries.
										Repeated diagnostic procedures (e.g., repeated CT scan) should not be recorded (record only the first procedure).
										Prehospital EMS procedures should <u>not</u> be entered into this field.
										Not Documented may be used.
										Not Applicable should be used if no procedures were performed.
										Refer to ICD-9-CM coding manual for more details.
DISCHARGE SECTION - HOSPITAL COMPLICATIONS										

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)	
Hospital Complications	NINJCOMP (TRA)	NINJ_NTDB	(multiple entry picklist)	Character	4	Q_01	Yes		<i>Note: Please refer to the 2008 and 2009 change notes for information that affects data reporting.</i>	Any medical complication (from NTDS list) that occurred during the patient's stay at your hospital.	
<p>2008 changes: Implemented new NTDS complication list. Many system codes (data values) were changed. When querying multiple years of data, pay attention to old and new codes. RENF, ARDS, CARA, COAG, MYCI, PNEU and PEMB were carried over from 2005-2007 list. All other codes are new or changed starting Jan 2008.</p>											
<p>2009 changes: NO_NTDS was removed from picklist for 2009 data entry. OTHR was added to list in 2009. Note: In 2008, user was instructed to enter NO_NTDS if patient had no complications OR if patient only had complications not on the picklist. For 2009, user was instructed to enter OTHR when patient had other complications not on picklist. If patient had no complications at all, user was instructed to enter Not Applicable (*NA).</p>											
								2008 list only -->	NONE	No NTDS listed medical complications occurred	Multiple entry picklist. Select all that apply. (NTDS max = 10)
								ABCS	Abdominal compartment syndrome	Not Documented should be used if hospital complications are unknown or not recorded.	
								ABFA	Abdominal fascia left open	Not Applicable (*NA) should be used if patient had no complications at all.	
								RENF	Acute renal failure	Picklist based on NTDS list. Patient may have other complications not on this list. If your hospital wishes to collect additional complications, please do so in a separate field.	
								ARDS	Acute respiratory distress syndrome (ARDS)	NTDS list. Definitions of complications (and applicable ICD-9 codes) can be found in Appendix H (Glossary of NTDS Terms).	
								BASE	Base deficit		
								BLEE	Bleeding		
								CAWC	Cardiac arrest with CPR		
								COAG	Coagulopathy		
								COMA	Coma		

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)
								DECU DINF DRUG DVTT EXCS FAIL PRES MYCI INFE PNEU PEMB SCVA SINF SEPS UINT WNDD OTHR	Decubitus ulcer Deep surgical site infection Drug or alcohol withdrawal syndrome Deep Vein Thrombosis (DVT) / thrombophlebitis Extremity compartment syndrome Graft/prosthesis/flap failure Intracranial pressure Myocardial infarction Organ/space surgical site infection Pneumonia Pulmonary embolism Stroke / CVA Superficial surgical site infection Systemic sepsis Unplanned intubation Wound disruption OTHER COMPLICATIONS EXIST (not on this list)	
Hospital Complications (Text Only)	NINJCOMP (TRA)	DESCRPTIO		Character	55		No			Corresponding text for the hospital complication codes entered above.
										Autofilled from complications codes selected above. For data entry view only. Do not use this field for reporting.
INJURY DIAGNOSES SECTION - "AZ-DIAGNOSES" PAGE IN ASTR DATABASE										
ICD-9-CM Injury Diagnosis Code(s)	INJDIAG (TRA)	INJ_COMP	(may be multiple)	Character	6	DG_02	Yes	Valid ICD-9-CM injury diagnosis codes. Submit to ASTR as a 3 digit number, followed by decimal, and 4th or 5th digit as required.	Diagnosis codes 800.00-999.9 (do not enter E-codes in this field)	ICD-9-CM final injury diagnoses related to all identified injuries (Also referred to as N-codes, nature of injury). Multiple entry picklist. Select all that apply. (NTDS = max 50) System will generate the body region, severity value, and an ICD-9-CM Injury Severity Score based on injury diagnoses entered.

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)
										<p>ICD-9-CM and AIS 2005 codes do not need to be entered together line by line. Do not leave extra spaces or *NA values in the middle of the coding.</p> <p>Not Documented may be used.</p> <p>Not Applicable (*NA) should be entered on the first diagnosis line if the patient meets the ASTR patient inclusion criteria but no injuries are detected.</p> <p>Refer to ICD-9-CM coding manual for more details.</p>
Severity Value (for ICD diagnosis codes)	INJDIAG (TRA)	AIS	(may be multiple)	Character	1		No	Values 1-6 and null values	AIS severity values include: 1 (minor), 2 (moderate), 3 (serious), 4 (severe), 5 (critical), 6 (maximum injury/virtually unsurvivable)	Corresponding AIS severity code that reflects the severity of the ICD-9-CM injury diagnosis entered.
<p>2008 change: 2005-2007 data for this field was a mix of AIS and ICD-9-CM severity values. For 2008, this field will only reflect the severity values for ICD-9-CM diagnoses only. Starting January 2008, a separate body region, severity and ISS is calculated for ICD-9-CM and AIS 2005 codes.</p>										<p>One selection per diagnosis entered. Autogenerated by system after entering valid ICD-9-CM injury diagnoses.</p> <p>Not Documented may be used.</p> <p>Not Applicable (*NA) should be entered on the first diagnosis line if the patient meets the ASTR patient inclusion criteria but no injuries are detected.</p>
Body Part Injured (for ICD diagnosis codes)	INJDIAG (TRA)	BODY_PART	(may be multiple)	Character	1		Yes	1	Head or Neck	Corresponding body region for the ICD-9-CM injury diagnosis entered.

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)
<p>2008 change: 2005-2007 data for this field was a mix of AIS and ICD-9-CM body region values. For 2008, this field will only reflect the body region values for ICD-9-CM diagnoses only. Starting January 2008, a separate body region, severity and ISS is calculated for ICD-9-CM and AIS 2005 codes.</p>										One selection per diagnosis entered. Autogenerated by system after entering valid ICD-9-CM injury diagnoses.
								2	Face	
								3	Chest	Single entry picklist. One per injury code.
								4	Abdominal or pelvic contents	Not Documented may be used.
								5	Extremities or pelvic girdle	<p>Not Applicable (*NA) should be entered on the first diagnosis line if the patient meets the ASTR patient inclusion criteria but no injuries are detected.</p>
								6	External	
Injury Severity Score (calculated based on ICD-9-CM Injury Diagnoses)	MAINDATA	ISS		Numeric	2		No	Value range = 1 to 75		Injury Severity Score calculated based on the ICD-9-CM injury diagnoses entered. Overall scoring system for patients with multiple injuries.
<p>2008 change: 2005-2007 data for this field was a mix of AIS-98 and ICD-9-CM ISS values. For 2008 forward, this field will only reflect the ISS values for ICD-9-CM diagnoses only. Starting January 2008, a separate body region, severity and ISS is calculated for ICD-9-CM and AIS 2005 codes.</p>										In most cases, system will generate the body region, severity value, and an Injury Severity Score based on the ICD-9-CM injury diagnosis codes entered.
										Reporting note: Hospitals have reported that some DOA patients have a low ISS score, even if the injuries were fatal. This happens in instances where no autopsy was completed and there is a lack of information regarding the patient's injury diagnoses.
										Not Documented may be used.

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)
										Not Applicable (*NA) should be entered <u>on the first diagnosis line</u> if the patient meets the ASTR patient inclusion criteria but no injuries are detected.
Probability of Survival (based on ICD9 diagnoses)	MAINDATA	PROB_SURV		Numeric	6.3		No	*Autocalculated if valid entries are given for Trauma Type (Blunt or Penetrating), ISS (from ICD-9-CM injuries), RTS (in ED), and patient's Age.		Estimated probability of survival, calculated using TRISS methodology and several required data elements.*
2008 change: In 2005-2007 data, the POS was calculated based on AIS-98 or ICD-9-CM codes. POS calculation January 1, 2008 forward will be based on ICD-9-CM diagnoses, as all reporting hospitals submit ICD-9 codes.										Not Documented may be used if any of the calculation variables are unknown or not recorded. Some databases may require the POS to be blank if necessary fields for calculation are unavailable.
										Not Applicable may be used if patient did not suffer a blunt or penetrating injury (calculation cannot be completed).
AIS 2005 Six Digit Injury Identifier(s)	INJDIAG (TRA)	AIS5_CDE	(may be multiple)	Character	6	IS_01 (NTDS optional)	Yes	Valid AIS 2005 6 digit predot code (code preceding the decimal point)		Six digit Injury identifier from the Association for the Advancement of Automotive Medicine's (AAAM) Abbreviated Injury Scale (AIS) 2005. These are also referred to as the AIS predot codes.
(Required - LEVEL I Trauma Centers only)										6 digit AIS code is required for designated <u>Level I Trauma Centers only</u>.
2008 change: New AIS 2005 field replaced AIS-98 codes January 2008. Old AIS-98 data is stored in a separate database field location (refer to 2005-2007 data dictionary) and reporting note to the right.										Multiple entry picklist. Select all that apply. (NTDS = max 50)
										All records with 2008 ED Arrival Dates should be coded using the AIS 2005 coding system.

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)
										<p>Note on AIS reporting using multiple years of data: Depending on the date of picklist implementation for each hospital, the 2007 AIS data may contain codes from both the AIS 2005 and the AIS 98 versions. Codes 2008 forward should only contain AIS 2005. AAAM released some 2008 updates that were implemented in October 2008.</p> <p>ICD-9-CM and AIS 2005 codes do not need to be entered together line by line. Do not leave extra spaces or *NA values in the middle of the coding.</p> <p>Not Documented may be used.</p> <p>Not Applicable (*NA) should be entered on the first diagnosis line if the patient meets the ASTR patient inclusion criteria but no injuries are detected.</p> <p>Refer to AAAM AIS 2005 manual for more details.</p>
Severity Value (for AIS injury codes)	INJDIAG (TRA)	AIS_SEV	(may be multiple)	Character	1	IS_02 (NTDS optional)	No	Values 1-6 and null values	AIS severity values include: 1 (minor), 2 (moderate), 3 (serious), 4 (severe), 5 (critical), 6 (maximum injury/virtually unsurvivable)	Corresponding AIS severity code that reflects the severity of the AIS code entered.
(Required - LEVEL I Trauma Centers only)										Severity values for AIS codes are required for designated Level I Trauma Centers only.
2008 change: New field. Separate body region, severity and ISS calculated for ICD-9-CM and AIS 2005 codes.										One selection per AIS code. Autogenerated by system after entering valid AIS 2005 injury diagnoses.
										Not Documented may be used.

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)
										Not Applicable (*NA) should be entered <u>on the first diagnosis line</u> if the patient meets the ASTR patient inclusion criteria but no injuries are detected.
Body Part Injured (for AIS injury codes)	INJDIAG (TRA)	AIS_BODY	(may be multiple)	Character	1	IS_03 (NTDS optional)	Yes	1	Head or Neck	Corresponding body region for the AIS 2005 predot code entered.
(Required - LEVEL I Trauma Centers only)								2	Face	Body regions for AIS codes are required for designated <u>Level I Trauma Centers only</u>.
2008 change: New field. Separate body region, severity and ISS calculated for ICD-9-CM and AIS 2005 codes.								3	Chest	Single entry picklist. One selection per AIS code. Autogenerated by system after entering valid AIS 2005 injury diagnoses.
								4	Abdominal or pelvic contents	Not Documented may be used.
								5	Extremities or pelvic girdle	Not Applicable (*NA) should be entered <u>on the first diagnosis line</u> if the patient meets the ASTR patient inclusion criteria but no injuries are detected.
								6	External	For more information on ISS body regions, refer to the end of Appendix H (Glossary of NTDS Terms).
AIS Version	N/A	N/A		Character	1	IS_04 (NTDS optional)			NTDS standards request the AIS version used, when AIS codes are submitted to NTDB. The corresponding value for the AIS 2005 code on the NTDS AIS Version picklist would be the #6 option.	The software (and version) used to calculate Abbreviated Injury Scale (AIS) severity codes.
2008 change: New NTDS field for Level I Trauma Centers ONLY.								6	05 Full code (description & severity, XXXXXX.Y)	NTDB export field only. NOT found in ASTR system. ASTR requires Level I Trauma Centers to submit the AIS 2005 full code.
Injury Severity Score (calculated based on AIS 2005 injury identifiers)	STAT2008	AIS_ISS		Numeric	3	IS_05 (NTDS optional)	No	Value range = 1 to 75		Injury Severity Score calculated based on the AIS 2005 injury identifiers entered. Overall scoring system for patients with multiple injuries.

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)
(Required - LEVEL I Trauma Centers only)										In most cases, system will generate the body region, severity value, and an Injury Severity Score based on the AIS 2005 predot codes entered.
2008 change: New field. Separate body region, severity and ISS calculated for ICD-9-CM and AIS 2005 codes.										
										<p>ISS scores for AIS codes are required for designated Level I Trauma Centers only.</p> <p>Reporting note: Hospitals have reported that some DOA patients have a low ISS score, even if the injuries were fatal. This happens in instances where no autopsy was completed and there is a lack of information regarding the patient's injury diagnoses.</p> <p>Not Documented may be used.</p> <p>Not Applicable (*NA) should be entered on the first diagnosis line if the patient meets the State patient inclusion criteria but no injuries are detected.</p>
FINANCIAL SECTION - "FINANCIAL" PAGE OF ASTR DATABASE										
Primary Method of Payment	HOSPREV	PAYOR	1 (must select First to get primary)	Character	15	F_01	Yes	MEDICAID/AHCCCS	Medicaid (includes AHCCCS)	Primary source of payment to the hospital for this visit.

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)
<p>2008 changes: Entirely new picklist was adopted to match NTDS list. Many system codes are different from the 2005-2007 list, even if the long text appears similar. Codes in bold are new or revised in 2008 (examples: SELF-PAY in 2007 is now SELF PAY in 2008, Medicaid and AHCCCS were combined in 2008). When querying multiple years of data, pay special attention to the old and new codes.</p>										Arizona's AHCCCS Medicaid program should be coded under "Medicaid (includes AHCCCS)." IHS should be coded under "Other Government". Auto Insurance should be coded under "Private/Commercial Insurance" unless patient had coverage under an out of state No Fault Auto plan. Arizona is not a No Fault Auto state so this option should not be selected frequently.
								NOT BILLED	Not Billed (for any reason)	
								SELF PAY	Self Pay	Single entry picklist.
								PRIV-COMMERCIAL	Private/Commercial Insurance	Not Documented should be used if method of payment for this visit is unknown.
								NO FAULT AUTO	No Fault Automobile	Not Applicable should not be used. If patient does not have insurance and was billed, select "Self Pay". If patient was not billed, select "Not Billed (for any reason)."
								MEDICARE	Medicare	NTDS list.
								OTHER GOVT	Other Government	
								WORKERS COMP	Workers Compensation	
								BCBS	Blue Cross/Blue Shield	
									Other	
Secondary Method of Payment	HOSPREV	PAYOR	2	Character	15		Yes	MEDICAID/AHCCCS	Medicaid (includes AHCCCS)	Secondary source of payment to the hospital for this visit. <u>This field only applies if patient had two forms of payment for this visit.</u>

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)
<p>2008 changes: Entirely new picklist was adopted to match NTDS list. Many system codes are different from the 2005-2007 list, even if the long text appears similar. Codes in bold are new or revised in 2008 (examples: SELF-PAY in 2007 is now SELF PAY in 2008, Medicaid and AHCCCS were combined in 2008). When querying multiple years of data, pay special attention to the old and new codes.</p>										Arizona's AHCCCS Medicaid program should be coded under "Medicaid (includes AHCCCS)." IHS should be coded under "Other Government". Auto Insurance should be coded under "Private/Commercial Insurance" unless patient had coverage under an out of state No Fault Auto plan. Arizona is not a No Fault Auto state so this option should not be selected frequently.
								NOT BILLED	Not Billed (for any reason)	Single entry picklist.
								SELF PAY	Self Pay	Not Documented should be used if method of payment for this visit is unknown.
								PRIV-COMMERCIAL	Private/Commercial Insurance	Not Applicable should be used if patient did not have a secondary form of payment for this visit.
								NO FAULT AUTO	No Fault Automobile	NTDS list.
								MEDICARE	Medicare	
								OTHER GOVT	Other Government	
								WORKERS COMP	Workers Compensation	
								BCBS	Blue Cross/Blue Shield	
								OTHER	Other	
Total Hospital Charges	FINANCE	T_HOS_CHRG		Numeric	12		No	Submitted as nearest whole dollar, no decimal.		Final amount (in whole dollars) billed for this visit.
<p>2008 changes: Updated data export instructions.</p>										Financial data is to be exported twice for each record, similar to the way other updates are sent to ASTR. The initial data should be sent on the record's regular quarterly due date. <u>All updates</u> should then be included with the next quarterly submission.

DATA ELEMENT DESCRIPTION	ASTR TABLE NAME (CARE PHASE)	ASTR DATABASE FIELD NAME (system only)*	COPY FIELD	FIELD TYPE	FIELD WIDTH	NTDS Data Element #	PICK-LIST?	DATA VALUES - the actual codes (short text) stored in database for reporting and data interfacing	PRIMARY AND SUBPICKLIST DESCRIPTIONS (long text displayed in data entry to help user select the correct data value)	DEFINITION & COMMENTS (including when null values are appropriate)
										<p>Not Documented may be used if hospital charges for this visit cannot be obtained. Required data element. Not Documented for most records will not be accepted from designated trauma centers.</p> <p>If patient was not billed for this visit, enter 0. Not Applicable should not be used.</p>
Total Reimbursements	FINANCE	T_HOSP_REC P		Numeric	12		No	Submitted as nearest whole dollar, no decimal.		Amount (in whole dollars) collected by hospital for this visit.
<i>2008 changes: Updated data export instructions.</i>										<p>Financial data is to be exported twice for each record, similar to the way other updates are sent to ASTR. The initial data should be sent on the record's regular quarterly due date. <u>All updates</u> should then be included with the next quarterly submission.</p>
										<p>Not Documented may be used if reimbursements for this visit cannot be obtained. Required data element. Not Documented for most records will not be accepted from designated trauma centers.</p> <p>If no reimbursement was received for this visit, enter 0. Not Applicable should not be used.</p>

APPENDIX A1 - ASTR REPORTING FACILITY NAMES, FACILITY ID CODES, AND HOSPITAL-RELATED VARIABLES

ASTR Reporting Facility List (as of 7/20/09)

Reporting Facility Name	Reporting Facility ID (ASTR database code)	Trauma Designation Level held by reporting facility - Also indicates if hospital submits the full or reduced ASTR data set* (see code descriptions below)	Years of Data Submitted (List is for ED/Hospital Arrival Dates 2005 forward)	Reporting Facility's ADHS Number	Reporting Facility Zip Code
Banner Good Samaritan Medical Center	TGSR	LEVEL I	2005 - present	MED0219	85006
Banner Page Hospital	TPAG	LEVEL IV-PART (designated 11/5/08)	1/1/09 - present	MED0203	86040
Flagstaff Medical Center	TFLG	LEVEL I	2005 - present	MED0201	86001
John C. Lincoln North Mountain Hospital	TAJL	LEVEL I	2005 - present	MED0222	85020
Kingman Regional Medical Center	TKNG	NONDESIG-PART	1/1/09 - present	MED0245	86409
La Paz Regional Hospital	TLPZ	LEVEL IV-PART (designated 6/2/09)	1/1/09 - present	MED0207	85344
Little Colorado Medical Center	TLCO	LEVEL IV-PART (designated 3/10/09)	1/1/09 - present	MED0247	86047
Maricopa Medical Center	TAMR	LEVEL I	2005 - present	MED0223	85008
Northern Cochise Hospital	TNCO	LEVEL IV-PART (designated 12/4/08)	1/1/09 - present	MED0196	85643
Phoenix Children's Hospital	TAPC	LEVEL I (designated 7/1/08)	1/1/08 - 6/30/08 submitted as NonDesignated (full data set) - 7/1/08 forward as Level I	MED2170	85016
Scottsdale Healthcare Osborn	TASO	LEVEL I	2005 - present	MED0235	85251
Summit Healthcare Regional Medical Center	TSUM	LEVEL IV-FULL (designated 8/13/08)	7/1/08 - present	MED0246	85901
St. Joseph's Hospital and Medical Center	TASJ	LEVEL I	2005 - present	MED2125	85013
Tuba City Regional Health Care Corporation	TATR	LEVEL IV_FULL (designated 5/6/09)	1/1/2006 - 5/5/09 submitted as NonDesignated (full data set) -- 5/6/09 forward as Level IV (full data set)	MED3006	86045
University Medical Center - Tucson	TATU	LEVEL I	2005 - present	MED0257	85724
Yavapai Regional Medical Center	TAYP	NONDESIG-FULL	2005 - present	MED0261	86301
Yuma Regional Medical Center	TAYU	NONDESIG-FULL	2005 - present (partial records submitted 2005-2006 / full data 2007 forward)	MED0262	85364

Total number of hospitals participating in the ASTR (as of 7/20/09) = 17.

(8 hospitals = Level I, 6 hospitals = Level IV, 3 hospitals = Non-Designated)

Hospitals that previously submitted data but are no longer reporting to ASTR:					
Sierra Vista Regional Health Center	TASV	NONDESIG-FULL	10/1/07 - 12/31/07 - data submitted as Non-Designated	MED0198	85635
Whiteriver Indian Health Services	TAWR	NONDESIG-FULL	1/1/05 - 12/31/06 - data submitted as Non-Designated (partial records submitted)	MED3003	85941

All designated trauma centers are required to submit data to ASTR. Non-designated hospitals may submit voluntarily.

***Levels I, II and III Trauma Centers must submit the full ASTR data set. Non-Designated and Level IV trauma centers may submit a full or reduced data set.**

ASTR reporting levels:

Code	Designation	Reporting
LEVEL I	Level I Trauma Center	Must submit Full Data Set
LEVEL II	Level II Trauma Center	Must submit Full Data Set
LEVEL III	Level III Trauma Center	Must submit Full Data Set
LEVEL IV-FULL	Level IV Trauma Center	Submitting Full Data Set
LEVEL IV-PART	Level IV Trauma Center	Submitting Reduced Data Set
NONDESIG-FULL	Non-Designated Facility	Submitting Full Data Set
NONDESIG-PART	Non-Designated Facility	Submitting Reduced Data Set

Appendix A2 - Copy of ASTR Trauma Data Submission Guidelines

ARIZONA STATE TRAUMA REGISTRY (ASTR)

TRAUMA DATA SUBMISSION GUIDELINES

Records of patients meeting the ASTR *Trauma Patient Inclusion Definition* must be submitted to the Arizona State Trauma Registry within 90 days of the close of the quarter, according to the following schedule:

ASTR Reporting Quarter	ED/Hospital Arrival Months	Data 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

Trauma data must be submitted in a format authorized by the Arizona Department of Health Services and must include valid entries in all State required fields. All data must be accompanied by a Trauma Data Quarterly Submission Form.

The following are acceptable electronic media formats for data submission:

- 1) The data file and a completed data submission form may be transferred to ASTR using ADHS-approved secure file transfer protocol (sftp).
- 2) The data file may be delivered to ASTR on compact disc (CD) along with a completed data submission form.

When mailing data to ASTR, please clearly label CD with the following information:
Name of Facility, Quarter, Number of Cases, ED/Hospital Arrival Dates of Cases Submitted

Data submitted on CD should be sent by registered courier (requiring signature upon receipt) to:

Arizona Department of Health Services
Bureau of EMS & Trauma System
Attn: Trauma Registry Manager
150 N. 18th Avenue, Suite 540
Phoenix, AZ 85007-3248

For questions regarding the Arizona State Trauma Registry, please contact Anita Ray Ng, ADHS Trauma Registry Manager, at (602) 542-1245 or by email at raya@azdhs.gov.

For more information on Arizona statutes and rules that pertain to the trauma registry, please refer to A.R.S. Title 36, Chapter 21.1 and A.A.C. Title 9, Chapter 25.

APPENDIX B - AZ CITY OF RESIDENCE & AZ CITY OF INJURY Data Values (AZ codes for ASTR 2008 data forward / 2005-2007 data have different codes.)

Note: The ASTR city picklists contain data values for common Arizona cities and towns only. Cities outside of Arizona are manually entered by the user.

AZ City Data Value	AZ City Data Value	AZ City Data Value	AZ City Data Value
AGUA LINDA	BYLAS	COPPER QUEEN	FLORENCE
AGUILA	CAMERON	CORDES LAKES	FOREST LAKES
AJO	CAMP VERDE	CORNFIELDS	FORT APACHE
ALLENTOWN	CANE BEDS	CORNVILLE	FORT DEFIANCE
ALPINE	CANELO	CORONA	FORT GRANT
AMADO	CANYON DE CHELLY NATIONAL MO	CORONA DE TUCSON	FORT HUACHUCA
ANTHEM	CAREFREE	CORONADO	FORT LOWELL
APACHE JUNCTION	CARMEN	CORTARO	FORT MCDOWELL
ARIVACA	CARRIZO	COTTONWOOD	FORT MOHAVE
ARIZONA CITY	CASA GRANDE	COTTONWOOD STATION	FORT THOMAS
ARLINGTON	CASCABEL	COWLIC	FOUNTAIN HILLS
ASH FORK	CASHION	CROSS CANYON	FREDONIA
AVONDALE	CATALINA	CROWN KING	FRESNAL CANYON
AVRA VALLEY	CAVE CREEK	DATLAND	FRY
BABY ROCK	CEDAR RIDGE	DAVIS MONTHAN AFB	GADSDEN
BACOBI	CENTRAL	DENNEBITO	GANADO
BAGDAD	CHAMBERS	DENNEHOTSO	GILA BEND
BAPCHULE	CHANDLER	DESERT HILLS	GILA RIVER INDIAN COMMUNITY
BAY ACRES	CHANDLER HEIGHTS	DEWEY	GILBERT
BEAR CANYON JUNCTION	CHILCHINBITO	DILKON	GISELA
BEAVER DAM	CHINLE	DOLAN SPRINGS	GLEESON
BELLEMONT	CHINO VALLEY	DOME	GLENDALE
BENSCH RANCH	CHIRICAHUA NATIONAL MONUMENT	DOS CABEZAS	GLOBE
BENSON	CHLORIDE	DOUBLE ADOBE	GOLD CANYON
BISBEE	CIBECUE	DOUGLAS	GOLDEN SHORES
BITAHOCHEE	CIBOLA	DRAGOON	GOLDEN VALLEY
BLACK CANYON CITY	CIRCLE CITY	DUDLEYVILLE	GOODYEAR
BLACK MESA	CLARKDALE	DUNCAN	GRAND CANYON
BLACKWATER	CLAY SPRINGS	EAGAR	GRAND CANYON CAVERNS
BLAISDELL	CLAYPOOL	EDEN	GRASSHOPPER JUNCTION
BLUE	CLIFTON	EHRENBERG	GRAY MOUNTAIN
BLUE GAP	COAL MINE MESA	EL MIRAGE	GREASEWOOD
BONITA	COCHISE	ELEVEN MILE CORNER	GREASEWOOD SPRINGS
BOUSE	COLORADO CITY	ELFRIDA	GREATERVILLE
BOWIE	CONCHO	ELGIN	GREEN VALLEY
BUCKEYE	CONCHO VALLEY	ELOY	GREENHAVEN
BULLHEAD CITY	CONGRESS	FAIRBANK	GREER
BUMBLE BEE	CONTINENTAL	FIRST MESA	GROOM CREEK
BURNT WATER	COOLIDGE	FLAGSTAFF	GU ACHI

AZ City Data Value	AZ City Data Value	AZ City Data Value	AZ City Data Value
GUADALUPE	KIRKLAND	MISSION	PEARCE
HACKBERRY	KLAGETOH	MOBILE	PEEPLES VALLEY
HANO	KLONDYKE	MOCCASIN	PEORIA
HAPPY JACK	KYKOTSMOVI	MOENAVE	PERIDOT
HARD ROCK	KYKOTSMOVI VILLAGE	MOENKOPI	PETRIFIED FOREST NATL PK
HARSHAW	LAKE HAVASU CITY	MOHAVE VALLEY	PHOENIX
HAVASU CITY	LAKE MEAD RANCHEROS	MORENCI	PICACHO
HAVASUPAI INDIAN RESERVATION	LAKE MONTEZUMA	MORMON LAKE	PIMA
HAWLEY LAKE	LAKESIDE	MORRISTOWN	PINE
HAYDEN	LAVEEN	MOUNT LEMMON	PINE SPRINGS
HEBER	LEUPP	MUNDS PARK	PINEDALE
HEREFORD	LEUPP CORNER	NACO	PINETOP
HIGLEY	LIGURTA	NAVAJO INDIAN RESERVATION	PINON
HILLTOP	LINDEN	NAVAJO STATION	PIPE SPRING NATIONAL MONUMEN
HOLBROOK	LITCHFIELD PARK	NAZLINI	PIRTLEVILLE
HOPI INDIAN RESERVATION	LITTLE TUCSON	NEW ORAIBI	PISINEMO
HOTEVILLA	LITTLEFIELD	NEW RIVER	POLACCA
HOUCK	LITTLETOWN	NICKSVILLE	POMERENE
HUACHUCA CITY	LOCHIEL	NOGALES	PORTAL
HUACHUCA TERRACE	LOW MOUNTAIN	NORTH RIM	POSTON
HUALAPAI	LOWELL	NUTRIOSO	PRESCOTT
HUBBELL TRADING POST NATIONA	LUKACHUKAI	OAK SPRINGS	PRESCOTT VALLEY
HUMBOLDT	LUKE AFB	OATMAN	QUARTZSITE
HUNTERS POINT	LUKEVILLE	OLD ORAIBI	QUEEN CREEK
IMMANUEL MISSION	LUPTON	OLJATO	QUEEN VALLEY
INDIAN WELLS	MADERA CANYON	ORACLE	QUERINO
IRON SPRINGS	MAMMOTH	ORACLE JUNCTION	QUIJOTOA
JACOB LAKE	MANY FARMS	ORAIBI	RARE METALS
JEDDITO	MARANA	ORO VALLEY	RED LAKE
JEROME	MARBLE CANYON	OVERGAARD	RED MESA
JOHNSON	MARICOPA	PAGE	RED ROCK
JOSEPH CITY	MARTINEZ LAKE	PALO VERDE	RED VALLEY
KAIBAB	MAYER	PALOMINAS	REDINGTON
KAIBAB INDIAN RESERVATION	MC NEAL	PARADISE	RICHVILLE
KAIBETO	MCNARY	PARADISE VALLEY	RILLITO
KANSAS SETTLEMENT	MEADVIEW	PARKER	RIMROCK
KAYENTA	MENNONITE MISSION	PARKER LAKE	RINCON
KEAMS CANYON	MESA	PARKS	RIO RICO
KEARNY	MESCAL	PATAGONIA	RIO VERDE
KIN-LI-CHEE	MEXICAN WATER	PAUL SPUR	ROCK POINT
KINGMAN	MIAMI	PAULDEN	ROCK SPRINGS
KINO	MIRACLE VALLEY	PAYSON	ROLL
KINSLEY RANCH	MISHONGNOVI	PEACH SPRINGS	ROOSEVELT

AZ City Data Value	AZ City Data Value	AZ City Data Value	AZ City Data Value
ROUGH ROCK	SOLOMON	TOPAWA	WINDOW ROCK
ROUND ROCK	SOMERTON	TOPOCK	WINKELMAN
RUCKER	SONOITA	TOREVA	WINSLOW
RYE	SOUTH BISBEE	TORTILLA FLAT	WINWOOD
SACATON	SPRING VALLEY	TOYEI	WITCH WELLS
SADDLEBROOKE	SPRINGERVILLE	TRUXTON	WITTMANN
SAFFORD	STANFIELD	TSAIL	WOODRUFF
SAHUARITA	STAR VALLEY	TSE BONITA	WOODSPRINGS
SAINT DAVID	STEAMBOAT CANYON	TUBA CITY	YARNELL
SAINT JOHNS	STRAWBERRY	TUBAC	YOUNG
SAINT MICHAELS	SUN	TUCSON	YOUNGTOWN
SALADO	SUN CITY	TUMACACORI	YUCCA
SALINA	SUN CITY WEST	TURKEY CREEK	YUMA
SALOME	SUN LAKES	TUSAYAN	YUMA PROVING GROUND
SAN CARLOS	SUN VALLEY	TWO STORY	
SAN LUIS	SUNIZONA	UPPER GREASEWOOD TRADING POS	
SAN MANUEL	SUNRISE SPRINGS	UPPER WHEATFIELDS	
SAN SIMON	SUNSET	VAIL	
SAN TAN VALLEY	SUNSET ACRES	VALENTINE	
SAND SPRINGS	SUNSITES	VALLE	
SANDERS	SUPAI	VALLEY FARMS	
SANTA RITA	SUPERIOR	VAMORI	
SANTA RITA FOOTHILLS	SUPERSTITION MOUNTAIN	VERNON	
SASABE	SURPRISE	VICKSBURG	
SAWMILL	TACNA	VIRDEN	
SCOTTSDALE	TAHCHEE	WADDELL	
SECOND MESA	TAYLOR	WALKER	
SEDONA	TEEC NOS POS	WALPI	
SELIGMAN	TEMPE	WARREN	
SELLS	TEMPLE BAR MARINA	WELLTON	
SHIPLEY	THATCHER	WENDEN	
SHIPLOVI	THE GAP	WHETSTONE	
SHONGOPOVI	THREE POINTS	WHITE CLAY	
SHONTO	TINTOWN	WHITE HILLS	
SHOW LOW	TOLACON	WHITE MOUNTAIN LAKE	
SHUMWAY	TOLANI	WHITERIVER	
SICHOMOVI	TOLANI LAKES	WHY	
SIERRA BONITA	TOLLESON	WICKENBURG	
SIERRA VISTA	TOLTEC	WIDE RUINS	
SIL NAKAYA	TOMBSTONE	WIKIEUP	
SKULL VALLEY	TONALEA	WILLCOX	
SMOKE SIGNAL	TONOPAH	WILLIAMS	
SNOWFLAKE	TONTO BASIN	WILLOW BEACH	

APPENDIX C - ASTR STATE OF RESIDENCE and STATE OF INJURY Data Values and Definitions

Data Value	State Name (data entry view only)
AL	Alabama
AK	Alaska
AZ	Arizona
AR	Arkansas
CA	California
CO	Colorado
CT	Connecticut
DE	Delaware
DC	District of Columbia
FL	Florida
GA	Georgia
HI	Hawaii
ID	Idaho
IL	Illinois
IN	Indiana
IA	Iowa
KS	Kansas
KY	Kentucky
LA	Louisiana
ME	Maine
MD	Maryland
MA	Massachusetts
MI	Michigan
MN	Minnesota
MS	Mississippi
MO	Missouri
MT	Montana
NE	Nebraska
NV	Nevada
NH	New Hampshire
NJ	New Jersey

Data Value	State Name (data entry view only)
NM	New Mexico
NY	New York
NC	North Carolina
ND	North Dakota
OH	Ohio
OK	Oklahoma
OR	Oregon
PA	Pennsylvania
RI	Rhode Island
SC	South Carolina
SD	South Dakota
TN	Tennessee
TX	Texas
UT	Utah
VT	Vermont
VA	Virginia
WA	Washington
WV	West Virginia
WI	Wisconsin
WY	Wyoming
AS	American Samoa
FM	Federated States of Micronesia
GU	Guam
MH	Marshall Islands
MP	Northern Mariana Islands
PW	Palau
PR	Puerto Rico
UM	US Minor Outlying Islands
VI	Virgin Islands of the US
99	Other - Out of Country

Appendix D - ASTR Country of Residence and Country of Injury Data Values and Definitions

*Country codes were changed to ISO 3166 two digit codes, effective for arrival dates 1/1/2008 forward. Code USA was changed to US and Code MEX (Mexico) was changed to MX.

System Code	Country Long Text (data entry view only)	System Code	Country Long Text (data entry view only)
AF	Afghanistan	BG	Bulgaria
AX	Aland Islands	BF	Burkina Faso
AL	Albania	BI	Burundi
DZ	Algeria	KH	Cambodia
AS	American Samoa	CM	Cameroon
AD	Andorra	CA	Canada
AO	Angola	CV	Cape Verde
AI	Anguilla	KY	Cayman Islands
AQ	Antarctica	CF	Central African Republic
AG	Antigua And Barbuda	TD	Chad
AR	Argentina	CL	Chile
AM	Armenia	CN	China
AW	Aruba	CX	Christmas Island
AU	Australia	CC	Cocos (Keeling) Islands
AT	Austria	CO	Colombia
AZ	Azerbaijan	KM	Comoros
BS	Bahamas	CG	Congo
BH	Bahrain	CD	Congo, The Democratic Republic Of The
BD	Bangladesh	CK	Cook Islands
BB	Barbados	CR	Costa Rica
BY	Belarus	CI	Côte D'Ivoire
BE	Belgium	HR	Croatia
BZ	Belize	CU	Cuba
BJ	Benin	CY	Cyprus
BM	Bermuda	CZ	Czech Republic
BT	Bhutan	DK	Denmark
BO	Bolivia	DJ	Djibouti
BA	Bosnia And Herzegovina	DM	Dominica
BW	Botswana	DO	Dominican Republic
BV	Bouvet Island	EC	Ecuador
BR	Brazil	EG	Egypt
IO	British Indian Ocean Territory	SV	El Salvador
BN	Brunei Darussalam	GQ	Equatorial Guinea

System Code	Country Long Text (data entry view only)	System Code	Country Long Text (data entry view only)
ER	Eritrea	IR	Iran, Islamic Republic Of
EE	Estonia	IQ	Iraq
ET	Ethiopia	IE	Ireland
FK	Falkland Islands (Malvinas)	IM	Isle Of Man
FO	Faroe Islands	IL	Israel
FJ	Fiji	IT	Italy
FI	Finland	JM	Jamaica
FR	France	JP	Japan
GF	French Guiana	JE	Jersey
PF	French Polynesia	JO	Jordan
TF	French Southern Territories	KZ	Kazakhstan
GA	Gabon	KE	Kenya
GM	Gambia	KI	Kiribati
GE	Georgia	KP	Korea, Democratic People'S Republic Of
DE	Germany	KR	Korea, Republic Of
GH	Ghana	KW	Kuwait
GI	Gibraltar	KG	Kyrgyzstan
GR	Greece	LA	Lao People'S Democratic Republic
GL	Greenland	LV	Latvia
GD	Grenada	LB	Lebanon
GP	Guadeloupe	LS	Lesotho
GU	Guam	LR	Liberia
GT	Guatemala	LY	Libyan Arab Jamahiriya
GG	Guernsey	LI	Liechtenstein
GN	Guinea	LT	Lithuania
GW	Guinea-Bissau	LU	Luxembourg
GY	Guyana	MO	Macao
HT	Haiti	MK	Macedonia, The Former Yugoslav Republic Of
HM	Heard Island And Mcdonald Islands	MG	Madagascar
VA	Holy See (Vatican City State)	MW	Malawi
HN	Honduras	MY	Malaysia
HK	Hong Kong	MV	Maldives
HU	Hungary	ML	Mali
IS	Iceland	MT	Malta
IN	India	MH	Marshall Islands
ID	Indonesia	MQ	Martinique

System Code	Country Long Text (data entry view only)	System Code	Country Long Text (data entry view only)
MR	Mauritania	PN	Pitcairn
MU	Mauritius	PL	Poland
YT	Mayotte	PT	Portugal
MX	Mexico	PR	Puerto Rico
FM	Micronesia, Federated States Of	QA	Qatar
MD	Moldova, Republic Of	RE	Reunion
MC	Monaco	RO	Romania
MN	Mongolia	RU	Russian Federation
ME	Montenegro	RW	Rwanda
MS	Montserrat	BL	Saint Barthelemy
MA	Morocco	SH	Saint Helena
MZ	Mozambique	KN	Saint Kitts And Nevis
MM	Myanmar	LC	Saint Lucia
NA	Namibia	MF	Saint Martin
NR	Nauru	PM	Saint Pierre And Miquelon
NP	Nepal	VC	Saint Vincent And The Grenadines
NL	Netherlands	WS	Samoa
AN	Netherlands Antilles	SM	San Marino
NC	New Caledonia	ST	Sao Tome And Principe
NZ	New Zealand	SA	Saudi Arabia
NI	Nicaragua	SN	Senegal
NE	Niger	RS	Serbia
NG	Nigeria	SC	Seychelles
NU	Niue	SL	Sierra Leone
NF	Norfolk Island	SG	Singapore
MP	Northern Mariana Islands	SK	Slovakia
NO	Norway	SI	Slovenia
OM	Oman	SB	Solomon Islands
PK	Pakistan	SO	Somalia
PW	Palau	ZA	South Africa
PS	Palestinian Territory, Occupied	GS	South Georgia And The South Sandwich Islands
PA	Panama	ES	Spain
PG	Papua New Guinea	LK	Sri Lanka
PY	Paraguay	SD	Sudan
PE	Peru	SR	Suriname
PH	Philippines	SJ	Svalbard And Jan Mayen

System Code	Country Long Text (data entry view only)
SZ	Swaziland
SE	Sweden
CH	Switzerland
SY	Syrian Arab Republic
TW	Taiwan, Province Of China
TJ	Tajikistan
TZ	Tanzania, United Republic Of
TH	Thailand
TL	Timor-Leste
TG	Togo
TK	Tokelau
TO	Tonga
TT	Trinidad And Tobago
TN	Tunisia
TR	Turkey
TM	Turkmenistan
TC	Turks And Caicos Islands
TV	Tuvalu
UG	Uganda
UA	Ukraine
AE	United Arab Emirates
GB	United Kingdom
US	United States
UM	United States Minor Outlying Islands
UY	Uruguay
UZ	Uzbekistan
VU	Vanuatu
VE	Venezuela
VN	Viet Nam
VG	Virgin Islands, British
VI	Virgin Islands, U.S.
WF	Wallis And Futuna
EH	Western Sahara
YE	Yemen
ZM	Zambia
ZW	Zimbabwe

Appendix E - ASTR EMS Agency/Destination Picklist (as of 8/3/09)

(The EMS Agency field is found in the PREHOSPITAL section, ED/TRAUMA section, and HOSPITAL DISCHARGE section)

Note: Major changes were made to the EMS Agency codes for 2008 data forward. Refer to the ASTR 2005-2007 data dictionary for old coding system.

Format of the EMS Agency picklist:

3 MAIN picklist choices with the following subpicklists:

(User may select the "No EMS Care" option or open up one of the subpicklists to select an EMS Agency.)

	System Code	Long Text (data entry view only)
1	NO_EMS_CARE	No EMS Care
		(no subpicklist)
2	EMS_TRANSPORT	EMS Transporter
		Air Transporter (opens into subpicklist of EMS Air Transporters)
		Ground Transporter (opens into subpicklist of EMS Ground Transporters)
3	EMS_NON_TRANSPT	EMS 1st Response Non-Transport
		(opens into subpicklist of ALL ground EMS agencies - First Responders and CON* holders)

*Note: CON = Certificates of Necessity assigned to EMS Transport Agencies with designation of their ambulance service areas.

CON registrations are monitored by the Bureau of EMS & Trauma System. IHS facilities are not required to register as CON holders.

>To make it easier for reporting & data validation, 2008 forward EMS agency codes were assigned in the following manner:

EMS Agency Air Transporter code assignment:

System code TA (Transport Air) + B + assigned number = Agencies on BEMSTS Air Ambulance License List

System code TA (Transport Air) + N + assigned number = Agencies NOT on BEMSTS Air Ambulance License List

EMS Agency Ground Transporter code assignment:

For CON holders (on BEMSTS Ground Transport List), system code = TG (Transport Ground) + an assigned number

For IHS transporters, system code = TG (Transport Ground) + IHS + an assigned number

For any other transporter not on BEMSTS list and NOT IHS, system code = TG (Transport Ground) + OTH + an assigned number

For an unknown EMS ground transporter option, system code = TG (Transport Ground) + UNK + an assigned number

EMS Agency 1st Response Non-Transport code assignment:

For First Responders who are also BEMSTS CON holders, the system code = FRT + an assigned #

For First Responders who are NOT BEMSTS CON holders, the system code = FRN + an assigned #

Full list of entire EMS Agency picklist (includes main picklist in bold, subpicklists, system codes, and long text):

NO_EMS_CARE	No EMS Care
EMS_TRANSPORT	EMS Transporter
Air Transporter	
(system code)	(long text - data entry view only)
TAB001	Aerocare Med. Transport System (Scottsdale)
TAB002	Aerocare Med. Transport-AeroMed (Chinle/Winslow/Show Low)
TAB017	Air Ambulance Specialists
TAB003	Air Evac Svcs.
TAB004	AirCARE1 International
TAN001	AirMed
TAN016	American Care Air Ambulance
TAB018	Angel Medflight Worldwide Air Ambulance Svcs.
TAB005	Arizona Lifeline
TAN011	Border Patrol Search & Rescue
TAN012	California Highway Patrol -CHP (California)
TAN002	Care Flight/REMSA (Nevada)
TAB006	Classic Lifeguard Aeromedical Svc.
TAB015	Coast to Coast Air Ambulance
TAB007	DPS - Department of Public Safety (Air Rescue AZ)
TAB008	Eagle Air Med (was Golden Eagle)
TAN003	Gallup Med Flight (New Mexico)
TAB009	Guardian Air (Flagstaff)
TAB010	LifeNet (Arizona)
TAN013	Lifeguard Air Emergency Services (New Mexico)
TAN014	MCAS Search and Rescue (SAR) - Marines (Yuma)
TAB011	Medical Express Int'l.
TAN004	Military Air Transport (not on this list)
TAB012	Native American Air Ambul. - OMNI Flight
TAN015	Other Air Search and Rescue (not on this list)
TAN005	Other Air Transporter (not on this list)
TAN006	Other Fixed Wing Ambul. Air Transport
TAN007	Other Rotor Ambul. Air Transport
TAN008	Out of State Air Transporter (not on this list)
TAN017	REACH Air Medical Svcs. (California)
TAN009	San Juan Regional Air Care (New Mexico)
TAB013	Sun Care Air Ambulance (out of service Feb 2008)
TAB016	Trauma Flight, Inc.

TAB014	Tri State Care Flight, LLC
TAN010	Unknown Air Provider (agency not specified)
Ground Transporter	
(system code)	(long text - data entry view only)
TGCON001	Action Medical Svc. - Ganado
TGCON002	Action Medical Svc. - Winslow
TGCON003	Ajo Ambulance
TGCON004	American Ambulance
TGCON005	American Comtrans
TGCON006	Arizona Ambulance Transport of Douglas
TGCON007	Avra Valley Fire District
TGCON086	Baker EMS
TGCON008	Beaver Dam-Littlefield Fire District
TGCON009	Bisbee Fire Dept.
TGCON010	Black Canyon Fire Dept.
TGCON011	Blue Ridge Fire Dept.
TGCON012	Buckeye Valley Vol. Rescue Unit (Buckeye Fire)
TGCON013	Bullhead City Fire Dept. Ambulance Svc.
TGCON014	Camp Verde Fire and EMS
TGCON015	Canyon State Ambulance
TGCON016	Colorado City Fire Dept.
TGCON017	Daisy Mountain Fire District
TGCON018	Douglas Fire Dept. Ambul. Svc., City of
TGCON019	Drexel Heights Fire District
TGCON020	Elfrida Ambulance Svc.
TGCON021	Eloy Fire District Ambulance Svc.
TGCON022	Forest Lakes Fire District
TGCON023	Fort Mojave Mesa Fire Dept.
TGCON024	Fry Fire District
TGCON025	Gila Bend Rescue / Ambulance
TGCON026	Golden Shores Fire Dept. Ambul. Svc.
TGCON027	Golder Ranch Fire District
TGCON028	Grapevine Mesa Fire District
TGCON029	Greenlee County Ambulance Svc.
TGCON030	Guardian Medical Transport
TGCON031	Healthcare Innovations
TGCON032	Heber-Overgaard Fire District
TGCON033	Holbrook EMS
TGIHS001	IHS- Ak-Chin Fire Dept.
TGIHS003	IHS- Chinle Service Unit
TGIHS004	IHS- Fort Defiance EMS
TGIHS002	IHS- Fort McDowell Fire Dept.

TGIHS005	IHS- Gila River EMS/Fire
TGIHS006	IHS- Hopi EMS
TGIHS007	IHS- Kayenta EMS
TGIHS008	IHS- Navajo Nation EMS/Fire
TGIHS009	IHS- Other Tribal EMS Transport
TGIHS010	IHS- Pascua Pueblo Fire Dept.
TGIHS016	IHS- Peach Springs Ambulance Service
TGIHS011	IHS- Salt River Fire Dept.
TGIHS012	IHS- San Carlos Apache EMS
TGIHS019	IHS- Sells Service Unit IHS EMS Rescue
TGIHS013	IHS- Shiprock EMS
TGIHS014	IHS- Teec Nos Pos EMS
TGIHS015	IHS- Tuba City EMS
TGIHS017	IHS- White Mountain Apache Tribe EMS (Whiteriver)
TGIHS018	IHS- Winslow EMS
TGCON034	Kearny Ambulance Svc., Town of
TGCON035	Kord's Southwest
TGCON036	Lake Mohave Ranchos Fire District
TGCON037	Lakeside Fire District
TGCON038	Life Line Ambulance Svc.
TGCON039	Mayer Fire District Ambulance Svc.
TGOTH003	Military Ground Transport
TGCON040	Mohave Valley Fire Dept. Ambulance Svc.
TGCON041	Montezuma-Rimrock Fire District
TGCON042	Motorsport Medical Svc. (Las Vegas)
TGCON043	Nogales Ambulance Svc. (Nogales Fire)
TGOTH001	Other AZ EMS Ground Transport Agency
TGOTH002	Out of State EMS Ground Transport Agency
TGCON050	PMT- Professional Medical Transport
TGCON044	Page Fire Dept. Ambulance Svc., City of
TGCON045	Phoenix Fire Dept.
TGCON046	Picture Rocks Fire Dept.
TGCON047	Pine/Strawberry Fire Dept.
TGCON048	Pinetop Vol. Fire District
TGCON049	Pinewood Fire Dept.
TGCON051	Puerco Valley Ambulance Svc.
TGCON052	Rincon Valley Fire District
TGCON053	Rio Rico Fire District
TGCON054	River Medical Inc.
TGCON057	Rural Metro Cort. (Pinal) - TRI-CITY MED
TGCON056	Rural/Metro Corp. (Pima)
TGCON058	Rural/Metro Corp. (Yuma)
TGCON055	Rural/Metro Corp. - AMT (Maricopa)

TGCON059	Sacred Mountain Medical Svc.
TGCON060	San Manuel Fire Dept. Assoc.
TGCON061	Sedona Fire District
TGCON062	Show Low EMS
TGCON063	Sierra Vista Fire Dept.
TGCON064	Snowflake/Taylor Ambulance Svc.
TGCON065	Somerton Fire Dept.
TGCON066	Southwest Ambulance & Rescue of AZ
TGCON068	Southwest Ambulance (Maricopa)
TGCON070	Southwest Ambulance (Yavapai)
TGCON067	Southwest Ambulance of Casa Grande
TGCON069	Southwest Ambulance of Safford
TGCON071	St. Johns Emergency Svcs.
TGCON072	Sun City West Fire Dist. Ambul., Fire District Of SCW
TGCON073	Sun Lakes Fire District
TGCON074	Sunsites-Pearce Fire District
TGCON075	Superior Emergency Medical Svcs.
TGCON076	Three Points Fire District
TGCON077	Tonto Basin Fire District
TGCON078	Tri-City Fire District Ambulance Svc.
TGCON079	Tri-Valley Ambulance Svc.
TGCON080	Tubac Fire District Ambulance Svc.
TGCON081	Tucson Fire Dept.
TGUNK001	Unknown EMS Ground Transport (not specified)
TGCON082	Verde Valley Ambulance Co.
TGCON083	Verde Valley Fire District
TGCON084	Whetstone Fire District Ambulance Svc.
TGCON085	White Mountain Ambulance Svc.

EMS_NON_TRANSP	EMS 1st Reponse Non-Transport
(system code)	(long text - data entry view only)
FRT0001	Action Medical Svc. - Ganado
FRN0001	Action Medical Svc. - Kayenta
FRT0002	Action Medical Svc. - Winslow
FRN0002	Aguila Fire Dist.
FRT0003	Ajo Ambulance
FRN0003	Ajo Gibson Vol. Fire Dept.
FRN0004	Ak-Chin Fire Dept.
FRN0005	Alpine Fire Dist.
FRT0004	American Ambulance
FRT0005	American Comtrans
FRN0006	Apache Junction Fire Dist.
FRT0006	Arizona Ambulance Transport of Douglas

FRN0007	Arizona City Fire Dist.
FRN0008	Ash Fork Fire Dist.
FRN0009	Avondale Fire-Rescue
FRT0007	Avra Valley Fire District
FRN0010	Babocomari Fire Dist.
FRN0199	Bagdad Fire Dept.
FRT0008	Beaver Dam-Littlefield Fire District
FRN0011	Beaver Valley Fire Dist.
FRN0012	Benson Vol. Fire Dept.
FRT0009	Bisbee Fire Dept.
FRT0010	Black Canyon Fire Dept.
FRT0011	Blue Ridge Fire Dept.
FRN0013	Border Patrol Rescue Services
FRN0014	Bouse Volunter Fire Dist.
FRN0015	Bowie Fire Dist.
FRN0016	Buckeye Fire Department
FRT0012	Buckeye Valley Vol. Rescue Unit
FRN0017	Buckskin Fire Dist.
FRT0013	Bullhead City Fire Dept. Ambulance Svc.
FRT0014	Camp Verde Fire and EMS
FRN0018	Canyon Fire Dist.
FRT0015	Canyon State Ambulance
FRN0019	Casa Grande Fire Dept., City of
FRN0020	Catalina Foothills Fire Dist.
FRN0021	Central AZ Mountain Rescue Assoc.
FRN0022	Central Yavapai Fire Dist.
FRN0023	Chandler Fire Dept.
FRN0024	Chinle Community Fire Dept.
FRN0025	Chino Valley Fire Dist.
FRN0026	Chloride Fire Dist.
FRN0027	Christopher Kohls Fire Dist.
FRN0028	Cibique Fire Dept.
FRN0029	Circle City-Morristown Fire Dist.
FRN0030	Clarkdale Fire Dist.
FRN0031	Clay Springs-Pinedale Fire Dist.
FRT0016	Colorado City Fire Dept.
FRN0032	Colorado River Indian Tribes EMS
FRN0033	Concho Fire Dist.
FRN0034	Congress Fire Dist.
FRN0035	Coolidge Fire Dept.
FRN0036	Corona de Tucson Fire Dist.
FRN0037	Cottonwood Fire Dept.
FRN0038	County Sheriff's Ofc.

FRN0039	County Sheriff's Ofc. - Search and Rescue Team
FRN0040	Crown King Fire Dist.
FRN0044	DPS - Department of Public Safety
FRT0017	Daisy Mountain Fire District
FRN0041	Davis-Monthan AFB Vol. Fire Dept.
FRN0042	Desert Hills Fire Dist.
FRN0043	Diamond Star Fire Dist.
FRT0018	Douglas Fire Dept. Ambul. Svc., City of
FRT0019	Drexel Heights Fire District
FRN0045	Dudleyville Fire Dist.
FRN0046	Duncan Valley Rural Fire Dist.
FRN0047	Ehrenberg Fire Dist.
FRN0048	El Mirage Fire Dept.
FRN0049	Elephant Head Vol. Fire Dept.
FRT0020	Elfrida Ambulance Svc.
FRT0021	Eloy Fire District Ambulance Svc.
FRN0050	Flagstaff Fire Dept.
FRN0051	Flagstaff Ranch Fire Dist.
FRN0052	Florence Fire Dept.
FRT0022	Forest Lakes Fire District
FRN0053	Fort Defiance Fire Dept.
FRN0054	Fort Huachuca Fire Dept.
FRN0055	Fort McDowell Fire Dept.
FRT0023	Fort Mojave Mesa Fire Dept.
FRN0056	Fort Valley Fire Dist.
FRN0057	Fountain Hills Fire Dept.
FRT0024	Fry Fire District
FRN0058	Ganado Fire Dept.
FRN0059	Gila Bend Fire Dist.
FRT0025	Gila Bend Rescue / Ambulance
FRN0060	Gila River EMS/Fire
FRN0061	Gilbert Fire Dept.
FRN0062	Gisela Valley Fire Dist.
FRN0063	Glendale Fire Dept.
FRN0064	Globe Fire Dept.
FRT0026	Golden Shores Fire Dept. Ambul. Svc.
FRN0065	Golden Valley Fire Dist.
FRT0027	Golder Ranch Fire District
FRN0066	Goldfield Ranch Fire Dist.
FRN0067	Goodyear Fire Dept.
FRN0068	Grand Canyon Nat. Park Fire Dept.
FRN0069	Grande Buttes Fire Dist.
FRT0028	Grapevine Mesa Fire District

FRN0070	Green Valley Fire Dist.
FRN0071	Greenhaven Fire Dist.
FRT0029	Greenlee County Ambulance Svc.
FRN0072	Greer Fire Dist.
FRN0073	Groom Creek Fire Dist.
FRN0074	Guadalupe Fire Dept.
FRT0030	Guardian Medical Transport
FRN0075	Harquahala Valley Fire Dist.
FRT0031	Healthcare Innovations
FRT0032	Heber-Overgaard Fire District
FRN0076	Heritage Hills Fire Dist.
FRN0077	Highlands Fire Dist.
FRT0033	Holbrook EMS
FRN0078	Hopi EMS
FRN0079	Houston Mesa Fire Dist.
FRN0080	Hualapai Valley Fire Dist.
FRN0081	Junipine Fire Dist.
FRN0082	Kachina Village Fire Dept.
FRN0083	Kaibab Estates (West) Fire Dist.
FRN0084	Kayenta Fire Dept.
FRT0034	Kearny Ambulance Svc., Town of
FRN0085	Kingman Fire Dept., City of
FRT0035	Kord's Southwest
FRN0086	La Canada Fire Dist.
FRN0087	Lake Havasu Fire Dept., City of
FRT0036	Lake Mohave Ranchos Fire District
FRT0037	Lakeside Fire District
FRN0088	Laveen Fire Dist.
FRT0038	Life Line Ambulance Svc.
FRN0089	Linden Fire Dist.
FRN0090	Lockheed Martin Aerospace Fire Dept.
FRN0197	MCAS Fire Dept. (Marines) - Yuma
FRN0091	Mammoth Fire Dist.
FRN0200	Maricopa County Sheriff's Office (MCSO)
FRN0092	Maricopa Fire Dist.
FRT0039	Mayer Fire District Ambulance Svc.
FRN0093	McMullen Valley Fire Dist.
FRN0094	McNeal Fire Department
FRN0095	Mesa Fire Dept.
FRT0040	Mohave Valley Fire Dept. Ambulance Svc.
FRT0041	Montezuma-Rimrock Fire District
FRN0096	Mormon Lake Fire Dist.
FRT0042	Motorsport Medical Svc. (Las Vegas)

FRN0097	Mount Lemmon Fire Dist.
FRN0098	Naco Fire Dist.
FRN0099	National Forest Service or National Park Service
FRN0100	Navajo Nation EMS/Fire
FRT0043	Nogales Ambulance Svc./Nogales Fire Dept.
FRN0101	Nogales Suburban Fire Dist.
FRN0102	Northwest Fire Rescue Dist.
FRN0103	Nutrioso Vol. Fire Dist.
FRN0104	Oatman Fire Dist.
FRN0105	Oracle Vol. Fire Dist.
FRN0106	Other AZ EMS First Responder
FRN0198	Other Military EMS First Responder
FRN0107	Other Tribal EMS First Responder
FRN0108	Out of State EMS First Responder
FRT0050	PMT- Professional Medical Transport
FRT0044	Page Fire Dept. Ambulance Svc., City of
FRN0109	Palo Verde NGS Fire Dept.
FRN0110	Palominas Fire Dist.
FRN0111	Parker Fire Dist.
FRN0112	Pascua Pueblo Fire Dept.
FRN0113	Patagonia Fire Dept.
FRN0114	Payson Fire Dept.
FRN0115	Peach Springs Ambulance Service
FRN0116	Peoples Valley Fire Dist.
FRN0117	Peoria Fire Dept.
FRT0045	Phoenix Fire Dept.
FRN0118	Phoenix Fire Haz Mat Team
FRN0119	Phoenix Indian Medical Service Unit EMS
FRT0046	Picture Rocks Fire Dept.
FRN0120	Pima Fire Department
FRN0121	Pine Lake Fire Dist.
FRT0047	Pine/Strawberry Fire Dept.
FRT0048	Pinetop Vol. Fire District
FRT0049	Pinewood Fire Dept.
FRN0122	Pinion Pine Fire Dist.
FRN0123	Pleasant Valley Fire Dist.
FRN0124	Police Department
FRN0125	Ponderosa Fire Dist.
FRN0126	Prescott Fire Dept.
FRT0051	Puerco Valley Ambulance Svc./Fire
FRN0127	Quartzsite Fire Dist.
FRN0128	Queen Creek Fire Dept.
FRN0129	Queen Valley Fire Dist.

FRN0133	RW Bliss Army Ambulance
FRN0130	Regional Fire and Rescue Dept.
FRT0052	Rincon Valley Fire District
FRT0053	Rio Rico Fire District
FRN0131	Rio Verde Fire Dist.
FRT0054	River Medical Inc. (Lake Havasu)
FRN0132	Round Valley/Oxbow Estates Fire Dist.
FRT0057	Rural Metro Cort. (Pinal) - TRI-CITY MED
FRT0056	Rural/Metro Corp. (Pima)
FRT0058	Rural/Metro Corp. (Yuma)
FRT0055	Rural/Metro Corp. - AMT (Maricopa)
FRN0134	Sabino Vista Fire Dist.
FRN0135	Sacaton Fire & Ambul.
FRT0059	Sacred Mountain Medical Svc.
FRN0136	Safford Rural Fire Dist.
FRN0137	Sage Memorial Hosp. Ambul. (Ganado)
FRN0138	Salt River Fire Dept. (Salt River Pima)
FRN0139	San Carlos Apache EMS
FRN0140	San Jose Fire Dist.
FRN0141	San Luis Fire Dept.
FRT0060	San Manuel Fire Dept. Assoc.
FRN0142	Scottsdale Fire Dept.
FRN0143	Search and Rescue Unit (not on this list)
FRT0061	Sedona Fire District
FRN0144	Seligman Fire Dist.
FRN0145	Sells Service Unit IHS EMS Rescue
FRN0146	Sheriff's Office - IHS
FRN0147	Sherwood Forest Estates Fire Dist.
FRN0148	Shiprock IHS EMS
FRT0062	Show Low EMS
FRN0149	Show Low Fire Dist.
FRT0063	Sierra Vista Fire Dept.
FRN0150	Silverbell Army Heliport Fire Dept.
FRN0151	Snowflake Fire Dept.
FRT0064	Snowflake/Taylor Ambulance Svc.
FRT0065	Somerton Fire Dept.
FRN0152	Sonoita-Elgin Fire Dept.
FRN0153	South Tucson Fire Dept.
FRN0154	Southern Arizona Rescue Association
FRT0066	Southwest Ambulance & Rescue of AZ
FRT0067	Southwest Ambulance (Maricopa)
FRT0068	Southwest Ambulance (Yavapai)
FRT0069	Southwest Ambulance of Casa Grande

FRT0070	Southwest Ambulance of Safford
FRN0155	Springerville Vol. Fire Dept.
FRN0156	St. David Vol. Fire Dist.
FRT0071	St. Johns Emergency Svcs./Fire
FRN0157	Stanfield Fire Dist.
FRN0158	Summit Fire Dist.
FRN0159	Sun City Fire Dist.
FRT0072	Sun City West Fire Dist. Ambul., Fire District Of SCW
FRT0073	Sun Lakes Fire District
FRN0160	Sun Valley Fire Dist.
FRN0161	Sunnyside Fire Dist.
FRT0074	Sunsites-Pearce Fire District
FRT0075	Superior Emergency Medical Svcs.
FRN0162	Surprise Fire Dept.
FRN0163	Tacna Vol. Fire Dept.
FRN0164	Tanque Verde Valley Fire Dist.
FRN0165	Taylor Fire Dept.
FRN0166	Teec Nos Pos BIA Fire
FRN0167	Teec Nos Pos EMS
FRN0168	Tempe Fire Dept.
FRT0076	Three Points Fire District
FRN0169	Thunderbird Fire Dist.
FRN0170	Tohono O'odham Nation Fire Dept.
FRN0171	Tolleson Fire Dept.
FRN0172	Tombstone Fire Dept.
FRN0173	Tonopah Valley Fire Dist.
FRT0077	Tonto Basin Fire District
FRN0174	Tonto Rim Search and Rescue
FRN0175	Tonto Village Fire Dist.
FRT0078	Tri-City Fire District Ambulance Svc.
FRT0079	Tri-Valley Ambulance Svc.
FRN0176	Truxton Fire Dist.
FRN0177	Tuba City Fire & Rescue
FRT0080	Tubac Fire District Ambulance Svc.
FRN0178	Tucson C.C. Estates Fire Dist.
FRT0081	Tucson Fire Dept.
FRN0179	Tusayan Fire Dist.
FRN0180	Unknown EMS First Responder (not specified)
FRN0181	Valle Vista Fire Dist.
FRT0082	Verde Valley Ambulance Co.
FRT0083	Verde Valley Fire District
FRN0182	Vernon Fire Dist.
FRT0084	Whetstone Fire District Ambulance Svc.

FRN0183	Whispering Pines Fire Dist.
FRT0085	White Mountain Ambulance Svc.
FRN0184	White Mountain Apache Tribe EMS (Whiteriver)
FRN0185	White Mountain Lake Fire Dist.
FRN0186	Why Fire Dist.
FRN0187	Wickenburg Rural Fire Dist.
FRN0188	Williamson Valley Fire Dist.
FRN0189	Winslow Fire Dept.
FRN0190	Winslow IHS EMS
FRN0191	Wittman Fire Dist.
FRN0192	Yarnell Fire Dist.
FRN0193	Yavapai Apache Tribe Fire Dept.
FRN0194	Yucca Fire Dist.
FRN0195	Yuma Fire Dept.
FRN0196	Yuma Proving Grounds Fire Dept.

Appendix F - ASTR Hospital/Destination Picklist

Note: Only "Acute Care" facilities are included on the ASTR Hospital picklist.

Non-acute care facilities (rehab, long-term care, psych) do not meet the ASTR definitions for these fields.

The Hospital/Destination picklist is used in the following fields:

Prehospital: Transported From (Hospital), EMS Destination

Referring: First and Second Referring Hospital / First and Second Destination Hospital

ED/Trauma: ED Discharge Destination Hospital

Discharge: Inpatient Discharge Destination Hospital

System Code	Long Text (data entry view only)
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MED1442	Arizona Heart Hospital
MED2787	Arizona Orthopedic Surgical Hospital
MED3795	Arizona Regional Medical Center
MED2312	Arizona Spine & Joint Hospital
MED0209	Arrowhead Hospital
MED0239	Banner Baywood Medical Center (East Mesa)
MED0241	Banner Boswell Hospital (was Sun Health)
MED0217	Banner Del E. Webb Medical Center (was Sun Health)
MED0216	Banner Desert Medical Center (Mesa)
MED2910	Banner Estrella Medical Center (Phoenix-West Valley)
MED3557	Banner Gateway Medical Center (Gilbert)
MED0219	Banner Good Samaritan Medical Center (Downtown Phoenix)
MED2157	Banner Heart Hospital (Baywood)
MED0238	Banner Thunderbird Medical Center (Glendale)
MED0194	Benson Hospital
MED0343	Carondelet Holy Cross Hospital - Nogales
MED0253	Carondelet St. Joseph's Hospital - Tucson
MED0254	Carondelet St. Mary's Hospital - Tucson
MED0258	Casa Grande Regional Medical Center
MED2124	Chandler Regional Hospital
MED0205	Cobre Valley Community Hospital
MED0195	Copper Queen Community Hospital
MED1397	Cornerstone Hospital of Southeast Arizona
UNK0001	Davis Monthan AFB Hospital - Tucson
MED0201	Flagstaff Medical Center
MED3150	Gilbert Hospital
MED2568	Greenbaum Surgical Specialty Hospital
MED0244	Havasu Regional Medical Center (Lake Havasu City)
MED0230	John C. Lincoln Hospital - Deer Valley
MED0222	John C. Lincoln Hospital - North Mountain

System Code	Long Text (data entry view only)
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MED0245	Kingman Regional Medical Center
MED0207	La Paz Regional Hospital - Parker
MED0247	Little Colorado Medical Center (was Winslow Memorial)
MED0483	Los Ninos Hospital
MED0223	Maricopa Medical Center
MED0224	Maryvale Hospital
MED1574	Mayo Clinic Hospital - Phoenix
MED3311	Mercy Gilbert Medical Center
MED0226	Mesa General Hospital (removed from list May 2008 - hospital closed)
MED0206	Mount Graham Regional Medical Center - Safford
MED3488	Mountain Vista Medical Center
MED0196	Northern Cochise Community Hospital - Willcox
MED0251	Northwest Medical Center - Tucson
MED2944	Northwest Medical Center Oro Valley
EMS0001	Other EMS Destination (Rendezvous, Airport, etc.)
OOS0010	Out of State - Acute Care Facility - California
OOS0011	Out of State - Acute Care Facility - Colorado
OOS0012	Out of State - Acute Care Facility - Mexico
OOS0013	Out of State - Acute Care Facility - Nevada
OOS0014	Out of State - Acute Care Facility - New Mexico
OOS0015	Out of State - Acute Care Facility - Other Country (not MEX)
OOS0016	Out of State - Acute Care Facility - Other State not listed
OOS0017	Out of State - Acute Care Facility - Utah
MED3007	PHS - Chinle Comprehensive Health Care Facility
MED3005	PHS - Fort Defiance Indian Hospital
MED3008	PHS - Fort Yuma Indian Hospital
MED3010	PHS - Hopi Healthcare Center
MED3009	PHS - HuHuKam Memorial Hosp. (Gila River Healthcare Sacaton)
UNK0007	PHS - Kayenta Health Center (EMS transport)
MED3011	PHS - Parker Indian Health Center

System Code	Long Text (data entry view only)
MED3013	PHS - Phoenix Indian Medical Center
MED3014	PHS - San Carlos Indian Hospital
MED3012	PHS - Sells Indian Hospital
UNK0066	PHS - Supai Clinic (EMS transport)
MED3006	PHS - Tuba City Regional Healthcare Corp.
MED3003	PHS - Whiteriver Indian Health Service
MED0203	Page Hospital (Banner)
MED2149	Paradise Valley Hospital
MED0204	Payson Regional Medical Center
MED0228	Phoenix Baptist Hospital
MED2170	Phoenix Children's Hospital
UNK0012	R. W. Bliss Army Hospital - Fort Huachuca
MED0192	Sage Memorial Hospital - Ganado
MED0235	Scottsdale Healthcare - Osborn
MED0236	Scottsdale Healthcare - Shea
MED3513	Scottsdale Healthcare - Thompson Peak
MED0198	Sierra Vista Regional Health Center
MED0199	Southeast Arizona Medical Center - Douglas
MED2125	St. Joseph's Hospital & Medical Center - Phoenix
MED0234	St. Luke's Medical Center - Phoenix
MED0246	Summit Healthcare Regional Medical Center (was Navapache)
MED1864	Surgical Specialty Hospital of AZ (was AZ Surgical Hosp.)
MED0237	Tempe St. Luke's Hospital
MED1129	Tucson Heart Hospital
MED0256	Tucson Medical Center
MED0257	University Medical Center - Tucson
MED2863	University Physicians Hospital at Kino
UNS0012	Unspecified Acute Care Hospital
URG0001	Urgent Care Facility (EMS transfer only)
UNK0014	VA - Carl T. Hayden VA Medical Center - Phoenix
UNK0013	VA - Northern AZ VA Healthcare (Bob Stump)
UNK0015	VA - Southern AZ VA Healthcare System - Tucson
MED3174	Valley View Medical Center (Fort Mohave)
MED0260	Verde Valley Medical Center - Cottonwood
MED0811	Verde Valley Medical Center - Sedona Campus
MED2640	West Valley Hospital
MED0243	Western Arizona Regional Medical Center (Bullhead City)
MED0193	White Mountain Regional Medical Center - Springerville

System Code	Long Text (data entry view only)
MED2277	Wickenburg Regional Medical Center
MED3183	Yavapai Regional Medical Center EAST (Prescott Valley)
MED0261	Yavapai Regional Medical Center WEST (Prescott)
MED0262	Yuma Regional Medical Center

Appendix G - CHANGE LOG - ASTR 2008-2009 Data Dictionary (Full Data Set)

Revisions to the final version (v. 1.1) of the 2008 data dictionary after its official release on 2/6/08:

Change Notes: "Typing change only" indicates that a data dictionary error was identified and corrected.
"SYSTEM CHANGE" indicates that an actual change was made to state and hospital databases.
"Data Entry Clarification" indicates that additional information was added to clarify questions regarding the data entry process.

Revision 1 - 2/15/08 - Data Dictionary version number was updated from 1.1 to 1.2 to reflect the following changes:

"Alcohol Use Indicator" (ED/Trauma - Toxicology)

Typing change only: System code "NOT SUSPECTED" updated to "NOT_SUSPECTED"

Typing change only: System code "CONFIRMED NO" updated to "CONFIRMED_NONE"

Typing change only: System code "SUSPECT_NO TEST" updated to "SUSPECTED"

SYSTEM CHANGE: System code "TRACE LEVELS" was changed to "BELOW_LEGAL_LMT" (Jan-Feb data already entered will be updated)

Typing change only: System code "ABOVE LEGAL LMT" updated to "ABOVE_LEGAL_LMT"

"Drug Use Indicator" (ED/Trauma - Toxicology)

Typing change only: System code "NONE" updated to "NOT_SUSPECTED"

Typing change only: System code for "NO- confirmed by test" was listed as "SUSPECTED" but should be "CONFIRMED_NO"

SYSTEM CHANGE: Added new picklist choice 2/15/08: "SUSPECTED / Suspected use, not tested"

SYSTEM CHANGE: System code "YES_PRESCRPTN" was changed to "YES_LEGAL_USE" (Jan-Feb data already entered will be updated)

Typing change only: System code "YES_BOTH" updated to "YES_LGL+ILLEGAL"

Revision 2 - 4/8/08 - Data Dictionary version number was updated from 1.2 to 1.3 to reflect the following changes:

"Co-morbid Conditions" (Demographics)

Data entry clarification: Updated note: Definitions of co-morbidities can be found in Appendix H (Glossary of NTDS Terms) of this dictionary or in the NTDS Data Dictionary v. 1.2.1.

"Protective Devices" (Injury)

Data entry clarification: Added note: For patients with EMS run sheets documented only as "Restrained" (but not further specified), select "Lap Belt".

"Airbag Deployment Details" (Injury)

Data entry clarification: Old text: Indication of airbag deployment during a motor vehicle crash. Added to definition: "..., if an airbag was present"

Data entry clarification: Added note: "Airbag Not Deployed" should be selected if an airbag was known to be present and did not deploy.

"Triage Criteria" (Prehospital)

Data entry clarification: Data Element Definition change, per TRUG request. Old definition: "Indicates the triage criteria used by any prehospital EMS provider to identify that this patient required care in a trauma center." New definition: Indicates the ACS triage criteria that apply to this patient and injury event, per available EMS and hospital documentation.

Deleted text at end of sentence: Not Documented should be used if no triage criteria are documented ~~on the EMS Run Sheet.~~

"Transport Type" (Prehospital)

Data entry clarification: Added additional wording to end of sentence: All records must have one entry pertaining to the patient's arrival into your facility, even if there was no prehospital EMS involvement or run sheet is unavailable.

"EMS Agency" (Prehospital)

Data entry clarification: Added note: If agency is both the first responder and the transporter, select from the EMS Transporter picklist.

"Run Sheet Available?" (Prehospital)

Data entry clarification: Added note: "Yes - Received but INCOMPLETE" means the EMS run sheet does not contain enough information for the registrar to complete all ASTR prehospital required data elements.

"Initial Field Respiratory Rate" (Prehospital Vitals)

Data entry clarifications: Old definition did not specify if an assisted respiratory rate may be entered. NTDS clarified that only unassisted rate should be entered. New definition: First recorded unassisted respiratory rate in the prehospital setting (expressed as a number per minute).

Updated note: Not Documented means that an unassisted rate cannot be determined from available documentation.

Updated note: Not Applicable should be used if patient was not treated by a prehospital provider.

"Intubation Status at Time of Field Vitals" (Prehospital Vitals)

Data entry clarification: Definition updated. Added note: Intubation before 1st Field GCS and RR can result in inefficient data for these values.

"Field Revised Trauma Score" (Prehospital Vitals)

Data entry clarifications: Added reporting note: Field RTS could be affected by inefficient data for GCS.

Updated note: Not Documented means that patient was treated by an EMS provider, but a required value for the RTS calculation is unknown.

Updated note: Not Applicable should be used if patient was not treated by a prehospital provider.

"Interfacility Transfer?" (Referring)

Data entry clarification: Added note: Includes EMS transports to your hospital from IHS clinics and other outlying facilities providing emergency care services and stabilization.

"Initial Revised Trauma Score in Referring Hospital" (Referring)

Data entry clarification: Added reporting note: Referring Facility RTS could be affected by inefficient data for RR and GCS.

"ED Discharge Disposition" (ED/Trauma)

Data entry clarifications:

Added NTDS note: Patients treated in accordance with "Do Not Resuscitate" (DNR) order should be coded under "Died in ED (other than failed resuscitation attempt)".

Added note: NTDS definition of "Dead on Arrival" can be found in Appendix H (Glossary of NTDS Terms) at the end of ASTR dictionary.

Added NTDS note: "No response 15 mins" refers to resuscitation activities in the reporting hospital.

"ED/Hospital Initial Respiratory Rate" (ED/Trauma)

Data entry clarification: Added note: First recorded RR may be entered as assisted or unassisted.

"ED/Hospital Initial Respiratory Assistance" (ED/Trauma)

Data entry clarification: Added NTDS definition: Assistance is defined as mechanical and/or external support of respiration.

"Intubation Status at Time of ED/Hospital Vitals" (ED/Trauma)

Data entry clarification: Definition updated. Added note: Intubation before the 1st ED/Hospital GCS and RR can result in inefficient data for these values.

"Revised Trauma Score (ED/Hospital)" (ED/Trauma)

Data entry clarification: Added reporting note: ED/Hospital RTS may be calculated using an assisted or unassisted respiratory rate (as indicated in the Respiratory Assistance field). RTS could be affected by inefficient data for RR and GCS.

"Alcohol Use Indicator" (ED/Trauma - Toxicology)

Data entry clarification: Added note: For patients under age 21, any conclusive level would be "beyond legal limit."

"Total Ventilator Days" (Discharge)

Data entry clarification: Added note: Includes all mechanical ventilation time, except mechanical ventilation initiated solely for an OR procedure. Includes ED vent time but not vent time for organ harvesting.
Text update: Not Applicable should be used if patient did not receive any mechanical ventilation or if patient received ventilation solely for an OR procedure.

"Hospital Complications" (Discharge)

Data entry clarification: Updated note: Definitions of complications can be found in Appendix H (Glossary of NTDS Terms) of this dictionary or in the NTDS Data Dictionary v. 1.2.1.

"Primary Method of Payment" (Financial)

Data entry clarification: Added more detail to notes: Arizona's AHCCCS Medicaid program should be coded under "Medicaid." IHS should be coded under "Other Government". Auto Insurance should be coded under "Private/Commercial Insurance" unless patient had coverage under an out of state No Fault Auto plan. Arizona is not a No Fault Auto state so this option should not be selected frequently. (Picklist changes 2008.)

"Secondary Method of Payment" (Financial)

Data entry clarification: Added note to definition: This field only applies if patient had two forms of payment for this visit.
Also added more detail to notes: Arizona's AHCCCS Medicaid program should be coded under "Medicaid." IHS should be coded under "Other Government". Auto Insurance should be coded under "Private/Commercial Insurance" unless patient had coverage under an out of state No Fault Auto plan. Arizona is not a No Fault Auto state so this option should not be selected frequently. (Picklist changes 2008.)

Appendix A - Facility Codes in ASTR database

SYSTEM CHANGE: Facility code for Flagstaff Medical Center was changed from 13169 to TFLG, per request of vendor. Vendor will convert all Flagstaff records in ASTR database to new code. Reporting will be unaffected.

Appendix H - "Glossary of NTDS Terms" was added with definitions of NTDS Co-morbidities, NTDS Hospital Complications, and other NTDS terms.

Appendix I - "ASTR Trauma Patient Inclusion Definition" was added to ASTR Data Dictionary.

Appendix J - "ASTR 2008 Required Data Elements" list was added to ASTR data dictionary.

Appendix K - "INDEX" was added to ASTR data dictionary.

Revision 3 - 12/30/08 - Data Dictionary version number was updated from 1.3 to 1.4 to reflect the following changes:

Cover Page

The title "2008 DATA DICTIONARY" was updated to "**2008-2009 DATA DICTIONARY**".

Effective date range January 1, 2008 - December 31, 2008 was changed to **January 1, 2008 to December 31, 2009**.

2008 and 2009 change notes were updated throughout the document to assist users relying on the data dictionary for reporting

"Registration Number" (Demographics)

Updated data entry instructions requesting same format as submitted to ADHS HDD. This is to aid in linking ASTR data.

"Medical Record Number" (Demographics)

Updated data entry instructions requesting same format as submitted to HDD. This is to aid in linking ASTR data .

"Street Address of Residence" (Demographics)

Added a list of suggested abbreviations for entering address data.

"Alternate Home Residence" (Demographics)

Added additional NTDS data entry information. NTDS definitions of picklist items were added to Appendix H.

"Co-morbid Conditions" (Demographics)

NO_NTDS is no longer an option for 2009 data entry (NO_NTDS was on state picklist from 1/1/08 - 12/31/08)

OTHER was added to list January 2009. Note: In 2008, user was instructed to enter NO_NTDS if user had no co-morbidities OR if patient only had co-morbidities not on the picklist. For 2009, user was instructed to enter OTHER when patient had other co-morbidities not on picklist. If patient did not have any co-morbidities at all, user was instructed to enter Not Applicable (*NA).

Added PREGNANCY back to state co-morbidity list. This picklist option was previously removed, per NTDS list, on Jan. 1, 2008.

However, TRUG decided this option is necessary so the choice was added back on Jan 1, 2009. Note: PREGNANCY was not a picklist option for 2008 data.

"Injury Location ICD-9-CM E-code (E849)" (Injury)

For January 2009, option 7 "Residential Institution" was expanded with a sub-picklist to document the type of residential institution where injury occurred. 7A - 7E are new to the picklist and supplement the E849 list.

"Street Location of Injury Incident" (Injury)

Added additional data entry instructions (format, abbreviations, etc.) to facilitate geocoding of the trauma data.

"Injury Event Details" (Injury)

Added this as a new field for 2009 with data entry instructions regarding what should be captured in this field.

"Patient Position in Vehicle" (Injury)

Data element description name changed from "Patient Position in Vehicle" to "Position in Vehicle / Vehicle Type".

A new sub-picklist was added titled "Rider of off-road vehicle (street and non-street use)"

ATV_RIDER was moved under the "Rider of off-road..." picklist

New off-road codes for 2009: RHINO_UTV, DUNEBUG_SANDRAIL, DIRTBIKE, GOLF_CART, GO_KART, SNOWMOBILE, OTHER_OFF-RD

RAILWAY_OCCUPANT was added as a new picklist choice for 2009

WATERCRAFT_OCCUPANT was expanded into a subpicklist to identify the type of watercraft.

Note: In 2008, only WATERCRAFT_OCCUPANT was available to describe water vehicles.

New watercraft codes for 2009: MOTOR_BOAT, NONMOTORIZED_BOAT, PERSONAL_WATERCRAFT, UNSPECIFIED_WATERCRAFT

AIRCRAFT_OCCUPANT was expanded into a subpicklist to identify the type of aircraft.

Note: In 2008, only AIRCRAFT_OCCUPANT was available to describe air vehicles.

New aircraft codes for 2009: FIXED_WING, ROTOR_WING, NON_MOTOR_AIRCRAFT, UNSPECIFIED_AIRCRAFT

"System Access (Inclusion Criteria)" (Prehospital)

Added INTERF_TRNSFR "Acute care injury transfer in or out of your facility by EMS" to 2009 picklist, per inclusion criteria update.

The following long text (data entry descriptions) were also updated to clarify data entry questions. (These changes do NOT affect reporting.)

Data entry screen update: "Triaged from Scene to Trauma Ctr/ED per EMS Trauma Protocol" was changed to "Triaged from Scene to your facility per EMS Trauma Protocol"

Data entry screen update: "Trauma Team Activation" was changed to "Trauma Team Activation at your facility"

"Triage Criteria" (Prehospital)

Data Dictionary typing corrections only. Hospital databases already had this information for 2008:

Short text for "Falls - Adult: >20 feet (1 story=10 ft)" corrected to "ADULT FALL > 20 FEET".

Short text for "Amputation proximal to wrist and ankle" corrected to "AMPUT PROX WRIST/ANKLE".

Short text for "Crush, degloved, or mangled extremity" corrected to "CRUSH_DEGLV_MANGLED".

"Transport Type" (Prehospital)

Added FIRST_RESP to picklist as new option for 2009.

"Transported From (Origin)" (Prehospital)

Having "From Nursing Home" and "From Jail or Prison" on the picklist with "Injury Scene" was causing confusion in data entry.

NURS_HM and JAIL_PRISO were removed from the picklist and data will be converted to data value INJ_SCENE.

The nursing home and jail/prison information will now be captured in the Injury Location E849 picklist field.

Added data entry clarification: The only time you will select "From Home but Home was NOT the injury scene" is if patient was NOT injured at home, went home before going to the hospital, and then was transferred from home to the hospital.

"Transported From (Hospital)" (Prehospital)

Added data entry clarification: If you know that patient came from another hospital, but the hospital name is unknown, select "Unspecified Acute Care Hospital" from list.

"EMS Agency" (Prehospital)

Added new EMS air agency to picklist: TAB016 Trauma Flight, Inc.

"Run Sheet Number" (Prehospital)

Field was changed from optional to required, as it is necessary for ASTR data linkage.

Prehospital Run Sheet Data (Prehospital)

Added data clarification notes to the EMS date and time fields. "Scene" may also refer to referring hospital or EMS rendezvous point depending upon which EMS leg of care is being entered. Notes added to help data entry users understand these fields.

Prehospital Vital Signs (Prehospital)

2008 data dictionary used to request only the first recorded vitals signs. However, some hospitals are capturing more than one set of vital signs. Data dictionary was updated to require first recorded but allow optional submission of other vitals signs. Notes were added regarding NTDS data export.

"Initial Field Respiratory Rate" (Prehospital)

Constraint values were updated, per NTDS, from 0-59 to 0-99.

"Field Airway Management" (Prehospital)

Picklist updated. PULSEOX, ETDLAD and LMA added to picklist. EOA removed from picklist. EOA/Combitube 2008 data will be converted to ETDLAD/Combitube so EOA was removed from list.

"Referring Hospital Respiratory Rate" (Referring Facility)

Respiratory Rate constraint values were updated, per NTDS, from 0-59 to 0-99.

"ED Exit Date/Time" (ED/Trauma)

Added data entry clarification note reminding registrars that if a patient dies in the ED, the exit date/time is when the patient was pronounced.

"ED Disposition" (ED/Trauma)

Added NTDS definitions and data entry instructions to clarify several of the picklist choices.

"ED/Hospital Respiratory Rate" (ED/Trauma)

Respiratory Rate constraint values were updated, per NTDS, from 0-59 to 0-99.

"Temperature Route" (ED/Trauma)

Added TEMPORAL "Temporal Artery Sensor" as new picklist choice, per hospital request.

"Blood Alcohol Content" (Toxicology)

Added data entry clarification that only one BAC value is submitted to ASTR. Instructed registrars to submit the first recorded alcohol results (the blood draw closest to the time of injury).

"Hospital Discharge Date/Time" (Discharge)

Added data entry clarification note reminding registrars that if a patient dies after admission, the discharge date/time is when the patient was pronounced.

"Hospital Discharge Disposition" (Discharge)

Added NTDS definitions and data entry instructions to clarify several of the picklist choices.

"Complications" (Discharge)

NO_NTDS is no longer an option for 2009 data entry (NO_NTDS was on state picklist from 1/1/08 - 12/31/08)

OTHER was added to list January 2009. Note: In 2008, user was instructed to enter NO_NTDS if user had no complications OR if patient only had complications not on the picklist. For 2009, user was instructed to enter OTHER when patient had other complications not on picklist. If patient did not have any complications at all, user was instructed to enter Not Applicable (*NA).

"State Patient?" (Discharge)

Moved this field to the discharge section of the dictionary, as this is where the field is located on the data entry screen.

"ICD-9-CM Diagnoses" (Diagnosis)

Following the NTDS data entry instructions, ASTR removed the note indicating that diagnosis codes must be entered in order of severity.

Added data entry note clarifying entry of ICD-9-CM and AIS 2005 codes: ICD-9-CM and AIS 2005 codes do not need to be entered together line by line.

Do not leave extra spaces or *NA values in the middle of the coding.

AIS 2005 Six Digit Injury Identifier(s) (Diagnosis)

Added data entry note clarifying entry of ICD-9-CM and AIS 2005 codes: ICD-9-CM and AIS 2005 codes do not need to be entered together line by line.

Do not leave extra spaces or *NA values in the middle of the coding.

"Primary Method of Payment" (Financial)

Typing change (correction): The short text for "Private/Commercial Insurance" was changed to "PRIV-COMMERCIAL". This short text change was already made with the AZ 2008 database changes, but this change was not reflected in the data dictionary.

Updated the data entry screen and long text for "Medicaid" to say "Medicaid (includes AHCCCS)". Will not change reporting, only assists registrars with correct data entry. System code "MEDICAID/AHCCCS" remains the same.

"Secondary Method of Payment" (Financial)

Typing change (correction): The short text for "Private/Commercial Insurance" was changed to "PRIV-COMMERCIAL". This short text change was already made with the AZ 2008 database changes, but this change was not reflected in the data dictionary.

Updated the data entry screen and long text for "Medicaid" to say "Medicaid (includes AHCCCS)". Will not change reporting, only assists registrars with correct data entry. System code "MEDICAID/AHCCCS" remains the same.

Appendix F - "Hospital List"

Data Dictionary typing corrections only. Hospital databases already had this information for 2008:

Short text for "Unspecified Acute Care Hospital" corrected to "UNS0012".

Short text for "Urgent Care Facility (EMS transfer only)" corrected to "URG0001".

Other hospital codes already matched HDD list. Any previous MED3242 data in the system will be converted to MED0195 so this change will not affect data reporting.

Removed MED0226 (Mesa General) - Hospital closed

Added new hospital MED3795 Arizona Regional Medical Center

Appendix I - "ASTR Inclusion Criteria"

Inclusion Criteria 1B was added to the inclusion criteria, after Bureau of EMS & Trauma System (BEMSTS) clarification of the criteria on 11-19-08

Revision 4 - 8/3/09 - Data Dictionary version number was updated from 1.5 to reflect the following minor changes:

Database schema changes:

In March 2009, the software vendor made changes to the database schema so that all reporting hospitals and the state system would have identical schema. Revised schema names were applied to all years of trauma data.

Any changes to table names, carephases or fields names were updated in the 2008-2009 and 2005-2007 ASTR data dictionaries and field, table and carephase names in the Oracle data should be the same for all years of trauma data.

NTDS national data element numbers:

A few of the national data element numbers were changed in the updated NTDS Data Dictionary version 1.2.5. These changes were made to the ASTR Data Dictionary and do not affect ASTR data entry or reporting.

"Age" / "Age Units":

Data entry instructions for Age Units were not being followed by several trauma centers. Many centers were entering an age value using months for children between 12 and 23 months. Because this was consistent across several hospitals, the ASTR data dictionary instructions were changed to allow 13-23 months as a valid Age/Age Units entry.

New data entry instructions (changes highlighted in bold):

Registrar note: If pt age is < 1 day, enter Age in "Hours". If pt age is >= 1 day but < 1 month, use "Days".

If patient age is >= 1 month but <1 year, use "Months".

If age is 13 - 23 months, you may enter the age in months or as 1 year. Age 2 or older must be entered in "Years".

Old data entry instructions (deleted):

Registrar note: If pt age is < 1 day, enter Age in "Hours". If pt age is >= 1 day but < 1 month, use "Days".

If patient age is >= 1 month but < 1 year, use "Months". Otherwise, enter patient age in "Years".

"Protective Devices" (data entry clarification):

Common data entry error was identified, so wording was added as data entry clarification:

NONE means that protective devices were not used (or pt was not wearing) any type of protective device at the time of injury event.

If an airbag was present, do not select None + Airbag Present. (Airbag was a protective device in use at time of injury event, even if it did not deploy.)

Prehospital (calculated time fields):

The prehospital transport section may contain more than one leg of EMS care. The EMS time calculations represent the time per EMS Agency and not a total EMS time overall. The names of these data elements were changed to make the reporting variables more clear.

Example "Total EMS Time (minutes)" refers to the time elapsed for that specific EMS Agency from notification to arrival at destination,

NOT the total time from when the first EMS Agency arrived on scene to the time of arrival of the last EMS agency at the destination hospital.

To clarify what is captured by these data elements, the titles of the following data elements were updated:

"Total EMS Response Time (minutes)" was changed to "EMS Agency Response Time (minutes)"

"Total EMS Scene Time (minutes)" changed to "EMS Agency Scene Time (minutes)"

"Transport Time - Scene to Destination (minutes)" changed to "Transport Time - EMS Agency Scene to Destination (minutes)"

"Total EMS Time (minutes)" changed to "EMS Agency Total Time (minutes)"

These data dictionary name changes do not affect the data entry calculation and name change is meant to help user when reporting.

Appendix A1 - Reporting Facility List

Updated reporting facility list to include new designation information and 2009 reporting hospitals.

Appendix A2 - Data Submission Guidelines

Added a copy of ASTR Data Submission Guidelines as an appendix in the data dictionary.

Appendix B - City of Residence and City of Injury Lists

It was discovered that the software city autofill and the ASTR city picklist did not match for 2008 data.

All ASTR data 2008 forward was converted to match the software autofill codes. Appendix B was edited to the new city codes.

ASTR 2005-2007 data did not use these new city codes, so caution is needed when reporting on multiple years of data.

Hospital databases may have some older codes leftover in their 2008 data.

Appendix E - EMS Agency List

Added EMS Air Agencies - TAB015, TAB016, TAB017, TAN016, TAN017

Added Ground Transport Agency TGCON086

Added First Responder Agencies FRN0199, FRN0200

Appendix F - Hospital/Destination List

Added Hospital - MED2568

Index 2 - DATA ELEMENTS LISTED IN ALPHABETICAL ORDER OF DATA ELEMENT NAME

A second index was added to assist users in searching the data dictionary for specific data elements. Multiple naming variations are given in the event the hospital data entry screens are different than ASTR data dictionary. The previous index was maintained as Index 1 (listed in order as found in ASTR database, with the data element name of the ASTR data dictionary).

Appendix H - GLOSSARY OF NTDS TERMS

The following is a Glossary of Terms for NTDS Alternate Home Residence, NTDS Co-morbid Conditions, NTDS Hospital Complications, Other NTDS Terms, and AIS ISS Body Regions.

This list is copied from the **National Trauma Data Standard (NTDS)** Data Dictionary version 1.2.5, revised November 2008.

ASTR has adopted these definitions for 2008-2009 ASTR data submission from reporting hospitals. Registrars should follow these NTDS definitions when abstracting trauma data to be exported to ASTR.

For more information on the National Trauma Data Standard, please refer to the NTDS website at <http://www.ntdsdictionary.org/>
NTDS refers to the dataset standard for submission to the National Trauma Data Bank (NTDB).

NTDS Alternate Home Residence

Homeless is defined as a person who lacks housing. The definition also includes a person living in transitional housing or a supervised public or private facility providing temporary living quarters.

Undocumented Citizen is defined as a national of another country who has entered or stayed in another country without permission. employment in the same country.

Migrant Worker is defined as a person who temporarily leaves his/her principal place of residence within a country in order to accept seasonal

Foreign Visitor is defined as any person visiting a country other than his/her usual place of residence for any reason without intending to receive earnings in the visited country.

NTDS Co-Morbid Conditions

Alcoholism: To be determined based upon the brief screening tool used at your institution.
ICD-9 Code Range: 291.0-291.3, 291.5, 291.81, 291.89, 291.9, 303.00-303.93, 305.00-305.03, V11.3

Ascites: The presence of fluid accumulation (other than blood) in the peritoneal cavity noted on physical examination, abdominal ultrasound, or abdominal CT/MRI.
ICD-9 Code Range: 789.5 (pre 2008), 789.59

Bleeding disorder: Any condition that places the patient at risk for excessive bleeding due to a deficiency of blood clotting elements (e.g., vitamin K deficiency, hemophilia, thrombocytopenia, chronic anticoagulation therapy with Coumadin, Plavix, or similar medications). Do not include the patient on

chronic aspirin therapy.

ICD-9 Code Range: for example - 269.0, 286.0, 286.1, 286.4, 287.1, 287.3 (pre 2006)-287.5, 287.9

Chemotherapy for cancer within 30 days: A patient who had any chemotherapy treatment for cancer in the 30 days prior to admission. Chemotherapy may include, but is not restricted to, oral and parenteral treatment with chemotherapeutic agents for malignancies such as colon, breast, lung, head and neck, and gastrointestinal solid tumors as well as lymphatic and hematopoietic malignancies such as lymphoma, leukemia, and multiple myeloma.

ICD-9 Code Range: V58.1(pre 2006), V58.11

Congenital Anomalies: Defined as documentation of a cardiac, pulmonary, body wall, CNS/spinal, GI, renal, orthopedic, or metabolic congenital anomaly.

ICD-9 Code Range: 740.0 through 759.9, 758.3 (pre 2005), 752.8 (pre 2004)

Congestive heart failure: Defined as the inability of the heart to pump a sufficient quantity of blood to meet the metabolic needs of the body or can do so only at an increased ventricular filling pressure. To be included, this condition must be noted in the medical record as CHF, congestive heart failure, or pulmonary edema with onset or increasing symptoms within 30 days prior to injury. Common manifestations are:

1. Abnormal limitation in exercise tolerance due to dyspnea or fatigue
2. Orthopnea (dyspnea on lying supine)
3. Paroxysmal nocturnal dyspnea (awakening from sleep with dyspnea)
4. Increased jugular venous pressure
5. Pulmonary rales on physical examination
6. Cardiomegaly
7. Pulmonary vascular engorgement

ICD-9 Code Range: 398.91, 402.01, 402.11, 402.91, 404.11, 404.13, 404.91, 404.93, 425.0-425.9, 428.0

Current smoker: A patient who has smoked cigarettes in the year prior to admission. Do not include patients who smoke cigars or pipes or use chewing tobacco.

Currently requiring or on dialysis: Acute or chronic renal failure prior to injury that was requiring periodic peritoneal dialysis, hemodialysis, hemofiltration, or hemodiafiltration.

ICD-9 Code Range: V45.1

CVA/residual neurological deficit: A history prior to injury of a cerebrovascular accident (embolic, thrombotic, or hemorrhagic) with persistent residual motor, sensory, or cognitive dysfunction. (e.g., hemiplegia, hemiparesis, aphasia, sensory deficit, impaired memory).

ICD-9 Code Range: 430-438.9, 436

Diabetes mellitus: Diabetes mellitus prior to injury that required exogenous parenteral insulin or an oral hypoglycemic agent.

ICD-9 Code Range: 250.00-250.33, 250.40- 250.73

Disseminated cancer: Patients who have cancer that:

1. Has spread to one site or more sites in addition to the primary site AND
2. In whom the presence of multiple metastases indicates the cancer is widespread, fulminant, or near terminal. Other terms describing disseminated

cancer include “diffuse,” “widely metastatic,” “widespread,” or “carcinomatous.” Common sites of metastases include major organs (e.g., brain, lung, liver, meninges, abdomen, peritoneum, pleura, bone).

ICD-9 Code Range: 196.0-199.1

Do Not Resuscitate (DNR) status: The patient had a Do-Not-Resuscitate (DNR) document or similar advance directive recorded prior to injury.

Esophageal varices: Esophageal varices are engorged collateral veins in the esophagus which bypass a scarred liver to carry portal blood to the superior vena cava. A sustained increase in portal pressure results in esophageal varices which are most frequently demonstrated by direct visualization at esophagoscopy.

ICD-9 Code Range: 456.0-456.20

Functionally dependent health status: Pre-injury functional status may be represented by the ability of the patient to complete activities of daily living (ADL) including: bathing, feeding, dressing, toileting, and walking. This item is marked YES if the patient, prior to injury, was partially dependent or completely dependent upon equipment, devices or another person to complete some or all activities of daily living. Formal definitions of dependency are listed below:

1. Partially dependent: The patient requires the use of equipment or devices coupled with assistance from another person for some activities of daily living. Any patient coming from a nursing home setting who is not totally dependent would fall into this category, as would any patient who requires kidney dialysis or home ventilator support that requires chronic oxygen therapy yet maintains some independent functions.
2. Totally dependent: The patient cannot perform any activities of daily living for himself/herself. This would include a patient who is totally dependent upon nursing care, or a dependent nursing home patient. All patients with psychiatric illnesses should be evaluated for their ability to function with or without assistance with ADLs just as the non-psychiatric patient.

History of angina within past 1 month: Pain or discomfort between the diaphragm and the mandible resulting from myocardial ischemia. Typically angina is a dull, diffuse (fist sized or larger) substernal chest discomfort precipitated by exertion or emotion and relieved by rest or nitroglycerine. Radiation often occurs to the arms and shoulders and occasionally to the neck, jaw (mandible, not maxilla), or interscapular region. For patients on anti-anginal medications, enter yes only if the patient has had angina within one month prior to admission.

ICD-9 Code Range: V12.50

History of Myocardial Infarction within past 6 months: The history of a non-Q wave, or a Q wave infarction in the six months prior to injury as diagnosed in the patient's medical record.

ICD-9 Code Range: 412

History of revasc/amp for PVD (History of revascularization/amputation for peripheral vascular disease): Any type of angioplasty or revascularization procedure for atherosclerotic PVD (e.g., aortafemoral, femoral-femoral, femoral-popliteal) or a patient who has had any type of amputation procedure for PVD (e.g., toe amputations, transmetatarsal amputations, below the knee or above the knee amputations). Patients who have had amputation for trauma or resection of abdominal aortic aneurysms would not be included.

Hypertension requiring medication: History of a persistent elevation of systolic blood pressure >140 mm Hg and a diastolic blood pressure >90 mm Hg requiring an antihypertensive treatment (e.g., diuretics, beta blockers, ACE inhibitors, calcium channel blockers).

ICD-9 Code Range: 401.0-401.9, 402.00, 402.10, 402.90, 403.00, 403.10, 403.90, 404.00, 404.10, 404.90, 405.01-405.99

Impaired sensorium: Patients should be noted to having an impaired sensorium if they had mental status changes, and/or delirium in the context of a current illness prior to injury. Patients with chronic or longstanding mental status changes secondary to chronic mental illness (e.g., schizophrenia) or chronic dementing illnesses (e.g., multi-infarct dementia, senile dementia of the Alzheimer's type) should also be included. Mental retardation would qualify as impaired sensorium. For pediatric populations, patients with documented behavior disturbances, attention disorders, delayed learning or delayed development should be included.

ICD-9 Code Range: 290-290.9, 299.00, 312.9, 314.00, 315.2, 315.31, 315.39, 315.5, 315.8, 315.9, 317, 318.0, 318.1, 319, 331.1 (pre 2004), 331.11-331.2, V11.0, V11.1, V11.2, V11.8

Prematurity: Defined as documentation of premature birth, a history of bronchopulmonary dysplasia, ventilator support for greater than 7 days after birth, or the diagnosis of cerebral palsy. Premature birth is defined as infants delivered before 37 weeks from the first day of the last menstrual period.

ICD-9 Code Range: 343.0 through 343.9, 765.00 through 765.19, 770.7

Obesity: Defined as a Body Mass Index of 40 or greater.

ICD-9 Code Range: 278.00-278.01

Respiratory Disease: Defined as severe chronic lung disease, chronic asthma; cystic fibrosis; or COPD (such as emphysema and /or chronic bronchitis) resulting in any one or more of the following:

1. Functional disability from COPD (e.g., dyspnea, inability to perform ADLs)
2. Hospitalization in the past for treatment of COPD
3. Requires chronic bronchodilator therapy with oral or inhaled agents
4. An FEV1 of <75% of predicted on pulmonary function testing

Do not include patients whose only pulmonary disease is *acute* asthma. Do not include patients with diffuse interstitial fibrosis or sarcoidosis.

ICD-9 Code Range: 277.00, 490 through 493.92

Steroid use: Patients that required the regular administration of oral or parenteral corticosteroid medications (e.g., Prednisone, Decadron) in the 30 days prior to injury for a chronic medical condition (e.g., COPD, asthma, rheumatologic disease, rheumatoid arthritis, inflammatory bowel disease). Do not include topical corticosteroids applied to the skin or corticosteroids administered by inhalation or rectally.

NTDS Hospital Complications

Abdominal compartment syndrome: Defined as the sudden increase in the intra-abdominal pressure resulting in alteration in the respiratory mechanism, hemodynamic parameters, and renal perfusion. Typically patients with this syndrome are critically ill and require ventilator support and/or reoperation.

ICD-9 Code Range: 958.93

Abdominal fascia left open: No primary surgical closure of the fascia or intra-abdominal packs left at conclusion of primary laparotomy (damage control).

Acute renal failure: A patient who did not require dialysis prior to injury, who has worsening renal dysfunction after injury requiring hemodialysis, ultrafiltration, or peritoneal dialysis. If the patient refuses treatment (e.g., dialysis), the condition is still considered present.

ICD-9 Code Range: 403.11, 403.91, 404.12, 404.92, 582.0-582.9, 583.0-583.7, 584.5-584.9 585 (pre 2006), 586, 588.0, 958.5

ARDS: Adult (Acute) Respiratory Distress Syndrome: ARDS occurs in conjunction with catastrophic medical conditions, such as pneumonia, shock, sepsis (or severe infection throughout the body, sometimes also referred to as systemic infection, and may include or also be called a blood or blood-borne infection), and trauma. It is a form of sudden and often severe lung failure characterized by $\text{PaO}_2/\text{FiO}_2 \leq 200$, decreased compliance, and diffuse bilateral pulmonary infiltrates without associated clinical evidence of CHF. The process must persist beyond 36 hours and require mechanical ventilation.

ICD-9 Code Range: ICD-9 codes 518.5 and 518.82 cross-referenced with procedural codes for ventilatory support (96.70, 96.71 and 96.72).

Base deficit: Defined as a value greater than 4 at any time during admission. This number is reported as a component of arterial or venous blood gases. The number may be reported by the lab as Base Deficit, or as Base Excess with a negative value.

Bleeding: Any transfusion (including autologous) of five or more units of packed red blood cells or whole blood given from the time the patient is injured up to and including 72 hours later. The blood may be given for any reason.

Cardiac arrest with CPR: The absence of a cardiac rhythm or presence of chaotic cardiac rhythm that results in loss of consciousness requiring the initiation of any component of basic and/or advanced cardiac life support. Excludes patients that arrive at the hospital in full arrest.

ICD-9 Code Range: 427.5

Coagulopathy: Defined as twice the upper limit of the normal range for PT or PTT in a patient without a pre-injury bleeding disorder of this magnitude.

ICD-9 Code Range: 286.6, 287.1, 287.3

Coma: Defined as significantly impaired level of consciousness (exclude transient disorientation or psychosis) for greater than 24 hours. The patient should be unconscious, or postures to painful stimuli, or is unresponsive to all stimuli. Does not include drug-induced coma.

Decubitus ulcer: Defined as a "pressure sore" resulting from pressure exerted on the skin, soft tissue, muscle, or bone by the weight of an individual against a surface beneath. Individuals unable to avoid long periods of uninterrupted pressure over bony prominences are at increased risk for the development of necrosis and ulceration.

ICD-9 Code Range: 707.0 (pre 2005), 707.00 through 707.09

Deep surgical site infection: Defined as an infection that occurs within 30 days after an operation and the infection appears to be related to the operation. The infection should involve deep soft tissues (e.g., fascial and muscle layers) at the site of incision and at least one of the following:

1. Purulent drainage from the deep incision but not from the organ/space component of the surgical site.
2. A deep incision spontaneously dehisces or is deliberately opened by a surgeon when the patient has at least one of the following signs or symptoms: fever (> 38 C), localized pain, or tenderness, unless site is culture-negative.
3. An abscess or other evidence of infection involving the deep incision is found on direct examination, during reoperation, or by histopathologic

or radiologic examination.

4. Diagnosis of a deep incision infection by a surgeon or attending physician.

Note: Report infections that involve both superficial and deep incision sites as deep surgical site infection.

If wound spontaneously opens as a result of infection, code for Deep Surgical Site Infection and Wound Disruption.

Drug or alcohol withdrawal syndrome: Defined as a set of symptoms that may occur when a person who has been drinking too much alcohol or habitually using certain drugs suddenly stops. Symptoms may include: activation syndrome (i.e., tremulousness, agitation, rapid heart beat and high blood pressure), seizures, hallucinations or delirium tremens.

ICD-9 Code Range: 291.0, 291.3, 291.81, 292.0

Deep Vein Thrombosis (DVT)/thrombophlebitis: The formation, development, or existence of a blood clot or thrombus within the vascular system, which may be coupled with inflammation. This diagnosis may be confirmed by a venogram, ultrasound, or CT. The patient must be treated with anticoagulation therapy and/or placement of a vena cava filter or clipping of the vena cava.

ICD-9 Code Range: 451.0, 451.11, 451.19, 451.2, 451.81- 451.84, 451.89, 451.9, 453.40, 459.10-459.19, 997.2, 999.2

Extremity compartment syndrome: Defined as a condition in which there is swelling and an increase in pressure within a limited space (a fascial compartment) that presses on and compromises blood vessels, nerves, and/or tendons that run through that compartment. Compartment syndromes usually involve the leg but can also occur in the forearm, arm, thigh, and shoulder.

Graft/prosthesis/flap failure: Mechanical failure of an extracardiac vascular graft or prosthesis including myocutaneous flaps and skin grafts requiring return to the operating room or a balloon angioplasty.

ICD-9 Code Range: 996.00, 996.1, 996.52, 996.61, 996.62

Intracranial pressure elevation: Defined as intracranial pressure greater than 25 Torr for greater than 30 minutes.

Myocardial infarction: A new acute myocardial infarction occurring during hospitalization (within 30 days of injury).

ICD-9 Code Range: 410.00, 410.02, 410.10, 410.12, 410.20, 410.22, 410.30, 410.32, 410.40, 410.42, 410.50, 410.52, 410.60, 410.62, 410.70, 410.72, 410.80, 410.82, 410.90, 410.92

Organ/space surgical site infection: Defined as an infection that occurs within 30 days after an operation and infection involves any part of the anatomy (eg, organs or spaces) other than the incision, which was opened or manipulated during a procedure; and at least one of the following, including:

1. Purulent drainage from a drain that is placed through a stab wound or puncture into the organ/space;
2. Organisms isolated from an aseptically obtained culture of fluid or tissue in the organ/space;
3. An abscess or other evidence of infection involving the organ/space that is found on direct examination, during reoperation, or by histopathologic or radiologic examination; or
4. Diagnosis of an organ/space SSI by a surgeon or attending physician.

Pneumonia: Patients with evidence of pneumonia that develops during the hospitalization. Patients with pneumonia must meet at least one of the

following two criteria:

Criterion 1. Rales or dullness to percussion on physical examination of chest AND any of the following:

- a. New onset of purulent sputum or change in character of sputum
- b. Organism isolated from blood culture
- c. Isolation of pathogen from specimen obtained by transtracheal aspirate, bronchial brushing, or biopsy

Criterion 2. Chest radiographic examination shows new or progressive infiltrate, consolidation, cavitation, or pleural effusion AND any of the following:

- a. New onset of purulent sputum or change in character of sputum
- b. Organism isolated from the blood
- c. Isolation of pathogen from specimen obtained by transtracheal aspirate, bronchial brushing, or biopsy
- d. Isolation of virus or detection of viral antigen in respiratory secretions
- e. Diagnostic single antibody titer (IgM) or fourfold increase in paired serum samples (IgG) for pathogen
- f. Histopathologic evidence of pneumonia

ICD-9 Code Range: 480.0-480.3, 481, 482.0, 482.1, 482.2, 482.30, 482.31, 482.32, 482.39, 482.40, 482.41, 482.49, 482.81-482.89, 482.9, 483.0, 483.1, 483.8, 484.1, 484.8, 485, 486

Pulmonary embolism: Defined as a lodging of a blood clot in a pulmonary artery with subsequent obstruction of blood supply to the lung parenchyma.

The blood clots usually originate from the deep leg veins or the pelvic venous system. Consider the condition present if the patient has a V-Q scan interpreted as high probability of pulmonary embolism or a positive pulmonary arteriogram or positive CT angiogram.

ICD-9 Code Range: 415.11, 415.19

Stroke/CVA: Following injury, patient develops an embolic, thrombotic, or hemorrhagic vascular accident or stroke with motor, sensory, or cognitive dysfunction (e.g., hemiplegia, hemiparesis, aphasia, sensory deficit, impaired memory) that persists for 24 or more hours.

ICD-9 Code Range: 997.02

Superficial surgical site infection: Defined as an infection that occurs within 30 days after an operation and infection involves only skin or subcutaneous tissue of the incision and at least one of the following:

1. Purulent drainage, with or without laboratory confirmation, from the superficial incision.
2. Organisms isolated from an aseptically obtained culture of fluid or tissue from the superficial incision.
3. At least one of the following signs or symptoms of infection: pain or tenderness, localized swelling, redness, or heat and superficial incision
4. Diagnosis of superficial incisional surgical site infection by the surgeon or attending physician.

Do not report the following conditions as superficial surgical site infection:

1. Stitch abscess (minimal inflammation and discharge confined to the points of suture penetration).
2. Infected burn wound.
3. Incisional SSI that extends into the fascial and muscle layers (see deep surgical site infection).

Systemic sepsis: Defined as definitive evidence of infection, plus evidence of a systemic response to infection. This systemic response is manifested by the presence of infection and TWO or more of the following conditions:

1. Temp >38 degrees C or <36 degrees C
2. Sepsis with hypotension despite adequate fluid resuscitation combined with perfusion abnormalities that may include, but are not limited to, lactic acidosis, oliguria, or an acute alteration in mental status. Patients who are on inotropic or vasopressor agents may not be hypotensive at the time that perfusion abnormalities are measured.
3. HR >90 bpm
4. RR >20 breaths/min or PaCO₂ <32 mmHg(<4.3 kPa)
5. WBC >12,000 cell/mm³, <4000 cells/mm³, or >10% immature (band) forms

ICD-9 Code Range: 038.0, 038.10, 038.11, 038.19, 038.3, 038.4-038.9, 790.7

Unplanned intubation: Patient requires placement of an endotracheal tube and mechanical or assisted ventilation because of the onset of respiratory or cardiac failure manifested by severe respiratory distress, hypoxia, hypercarbia, or respiratory acidosis. In patients who were intubated in the field or Emergency Department, or those intubated for surgery, unplanned intubation occurs if they require reintubation after being extubated.

Wound disruption: Separation of the layers of a surgical wound, which may be partial or complete, with disruption of the fascia.

ICD-9 Code Range: 998.3 (pre 2004), 998.31, 998.32

Other NTDS Terms

Dead on arrival: Dead on Arrival is defined as arrival at the hospital with no signs of life, but with pre-hospital CPR as indicated below:

Age >12 years

Blunt trauma, more than 5 minutes pre-hospital CPR

Penetrating head/neck/abdomen trauma, more than 5 minutes pre-hospital CPR

Penetrating chest trauma, more than 15 minutes pre-hospital CPR

Age ≤ 12 years

Blunt trauma, more than 15 minutes pre-hospital CPR

Penetrating trauma, more than 15 minutes pre-hospital CPR

Foreign Visitor is defined as any person visiting a country other than his/her usual place of residence for any reason without intending to receive earnings in the visited country.

Intermediate care facility: A facility providing a level of medical care that is less than the degree of care and treatment that a hospital or skilled nursing facility is designed to provide but greater than the level of room and board.

Home Health Service: A certified service approved to provide care received at home as part-time skilled nursing care, speech therapy, physical or occupational therapy or, part-time services of home health aides.

Homeless is defined as a person who lacks housing. The definition also includes a person living in transitional housing or a supervised public or private facility providing temporary living quarters.

Hospice: An organization which is primarily designed to provide pain relief, symptom management and supportive services for the terminally ill and their families.

Migrant Worker is defined as a person who temporarily leaves his/her principal place of residence within a country in order to accept seasonal employment in the same country.

Operative and/or essential procedures is defined as procedures performed in the Operating Room, Emergency Department, or Intensive Care Unit that were essential to the diagnoses, stabilization, or treatment of the patient's specific injuries. Repeated diagnostic procedures (e.g., repeated CT scan) should not be recorded (record only the first procedure).

Skilled Nursing Care: Daily nursing and rehabilitative care that is performed only by or under the supervision of skilled professional or technical personnel. Skilled care includes administering medication, medical diagnosis and minor surgery.

Undocumented Citizen is defined as a national of another country who has entered or stayed in another country without permission.

ISS BODY REGION INFORMATION (NTDS)

AIS ISS Body Regions:

- Head or neck injuries include injury to the brain or cervical spine, skull or cervical spine fractures.
- Facial injuries include those involving mouth, ears, nose and facial bones.
- Chest injuries include all lesions to internal organs. Chest injuries also include those to the diaphragm, rib cage, and thoracic spine.
- Abdominal or pelvic contents injuries include all lesions to internal organs. Lumbar spine lesions are included in the abdominal or pelvic region.
- Injuries to the extremities or to the pelvic or shoulder girdle include sprains, fractures, dislocations, and amputations, except for the spinal column, skull and rib cage.
- External injuries include lacerations, contusions, abrasions, and burns, independent of their location on the body surface.

Appendix I - ASTR TRAUMA PATIENT INCLUSION DEFINITION

ARIZONA STATE TRAUMA REGISTRY (ASTR) TRAUMA PATIENT INCLUSION DEFINITION*

*(Effective for trauma records with ED/Hospital Arrival Dates Jan. 1, 2008 forward)

- 1A 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**
- 1B A patient with injury or suspected injury who is transported via EMS transport from one acute care hospital to another acute care hospital; **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 within categories 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

*1B was added as a clarification of the criteria, per the ADHS Bureau of EMS & Trauma System (11/19/08)

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

Note: Inclusion criteria changes are effective for trauma records with ED/Hospital Arrival Dates Jan. 1, 2008 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.

Appendix J - ASTR 2008-2010 Required Data Elements List

**Arizona State Trauma Registry (ASTR) Required Data Elements
(For ED/Hospital Arrival Dates 1/1/2008 - 12/31/2010)**

All designated trauma centers are required to submit data to ASTR. Non-designated hospitals may submit voluntarily. Levels I, II and III Trauma Centers must submit the full ASTR data set. Level IV Trauma Centers and non-designated facilities may choose to submit a full or reduced data set.

Note: Major changes were made to ASTR data element requirements, effective for ED/Hospital arrival dates 1/1/2008 forward. Please refer to the ASTR 2005-2007 data dictionary for previous data submission requirements.

ASTR Field Name/Data Element Description	Required for Trauma Center I, II, and III	Required for TC Level IV, Non-Designated and ALS Base Hospitals
DEMOGRAPHIC DATA ELEMENTS		
Reporting Facility Site ID	X	X
Registration Number	X	X
Medical Record Number	X	X
Hospital Admission Date	X	X
Admission Status	X	X
Patient Last Name	X	X
Patient First Name	X	X
Patient Middle Initial	X	X
Social Security Number	X	X
Date of Birth	X	X
Age	X	X
Units of Age	X	X
Gender	X	X
Race (Primary)	X	X
Race (Secondary)	X	
Ethnicity	X	X
Zip Code of Residence	X	
City of Residence	X	
County of Residence	X	
State of Residence	X	X
Country of Residence	X	
Alternate Home Residence	X	
Co-Morbid Conditions (Pre-Existing)	X	
INJURY DATA ELEMENTS		
Injury Date	X	X

Injury Time	X	X
Actual versus Estimated Injury Time	X	
Injury Location ICD-9-CM E-code (E849)	X	X
Street Location of Injury	X	
Zip Code of Injury	X	X
City of Injury	X	X
County of Injury	X	
State of Injury	X	
Country of Injury	X	
Primary ICD-9-CM E-code Injury Descriptor	X	X
Additional ICD-9-CM E-code Injury Descriptor	X	
Trauma Type	X	
Work-Related	X	
Patient Occupational Industry	X	
Patient Occupation	X	
Position in Vehicle / Vehicle Type	X	
Injury Event Details (required 2009 forward)	X	
Protective Devices	X	X
Child Specific Restraint	X	
Airbag Deployment Details	X	
Safety Equipment Issues	X	
PREHOSPITAL/TRANSPORT DATA ELEMENTS		
Transport Type	X	
Transport Mode (Into Reporting Facility)	X	X
Other Transport Modes	X	
Prehospital EMS Agency	X	
Run Sheet Available?	X	
Run Sheet Date	X	
Run Sheet Number (required 2009 forward)	X	
Transported From (Origin)	X	
Transported From (Referring Hospital)	X	
Date EMS Provider Notified	X	
Time EMS Provider Notified	X	
Date EMS Provider Left for Scene	X	
Time EMS Provider Left for Scene	X	
Date EMS Provider Arrived at Scene	X	
Time EMS Provider Arrived at Scene	X	
Date of EMS Patient Contact	X	
Time of EMS Patient Contact	X	
Date EMS Provider Departed Scene	X	

Time EMS Provider Departed Scene	X	
Date of Arrival at Destination	X	
Time of Arrival at Destination	X	
EMS Destination	X	
EMS Agency Response Time (Minutes)	X	
EMS Agency Scene Time (Minutes)	X	
Transport Time - EMS Agency Scene to Destination (Minutes)	X	
Total EMS Agency Time (Minutes)	X	
System Access (Inclusion Criteria)	X	
Triage Criteria	X	X
Date of Measurement of Vital Signs	X	
Time of Measurement of Vital Signs	X	
Initial Field Pulse Rate	X	
Initial Field Respiratory Rate	X	
Initial Field Oxygen Saturation	X	
Field Airway Management Details	X	
Field Intubation Status	X	
Field Paralytic Agent in Effect	X	
Initial Field Systolic Blood Pressure	X	
Initial Field GCS – Eye Opening	X	
Initial Field GCS – Verbal Response	X	
Initial Field GCS – Motor Response	X	
Initial Field GCS – Total	X	
Field Revised Trauma Score	X	
REFERRING/TRANSFER HOSPITAL DATA ELEMENTS		
Interfacility Transfer?	X	
Date of Arrival at First Referring Hospital	X	
Time of Arrival at First Referring Hospital	X	
Date of Transfer from First Referring Hospital	X	
Time of Transfer from First Referring Hospital	X	
Transferring Facility (First Referring)	X	
Length of Stay in First Referring Hospital (Hours)	X	
Destination Facility (from First Referring)	X	
Date of Arrival at Second Referring Hospital	X	
Time of Arrival at Second Referring Hospital	X	
Date of Transfer from Second Referring Hospital	X	
Time of Transfer from Second Referring Hospital	X	
Transferring Facility (Second Referring)	X	
Length of Stay in Second Referring Hospital (Hours)	X	
Destination Facility (from Second Referring)	X	

Vital Signs Designation (If First or Second Referring)	X	
Initial Respiratory Rate in Referring Facility	X	
Initial Systolic Blood Pressure in Referring Facility	X	
Initial GCS Total in Referring Facility	X	
Initial Revised Trauma Score in Referring Facility	X	
ED/TRAUMA DATA ELEMENTS		
ED/Hospital Arrival Date	X	X
ED/Hospital Arrival Time	X	X
ED Exit Date	X	X
ED Exit Time	X	X
Length of Stay in ED (Hours)	X	X
Complete Trauma Team Arrival Time	X	
ED Discharge Disposition	X	X
ED Discharge Destination Hospital	X	X
ED Discharge Transport Agency	X	
ED Discharge Transfer Reason	X	
ED/Hospital Initial Pulse Rate	X	
ED/Hospital Initial Respiratory Rate	X	
ED/Hospital Initial Respiratory Assistance	X	
ED/Hospital Initial Oxygen Saturation	X	
ED/Hospital Initial Supplemental Oxygen	X	
ED/Hospital Intubation Status	X	
ED/Hospital Paralytic Agent in Effect	X	
ED/Hospital Initial Systolic Blood Pressure	X	
ED/Hospital Initial GCS – Eye Opening	X	
ED/Hospital Initial GCS – Verbal Response	X	
ED/Hospital Initial GCS – Motor Response	X	
ED/Hospital Initial GCS – Total	X	
ED/Hospital Initial GCS Assessment Qualifiers	X	
ED/Hospital Initial Temperature	X	
ED/Hospital Initial Units of Temperature	X	
ED/Hospital Initial Temperature Route	X	
ED/Hospital Initial Revised Trauma Score	X	
Alcohol Use Indicator	X	
Blood Alcohol Content (mg/dl)	X	
Drug Use Indicator	X	
Toxicology Substances Found	X	
DISCHARGE DATA ELEMENTS		
Hospital Discharge Date	X	X
Hospital Discharge Time	X	X

Hospital Admission Length of Stay (Days)	X	X
Total Length of Hospital Stay – ED plus Admission (Days)	X	
Final Outcome – Dead or Alive	X	X
Total ICU Length of Stay (Days)	X	X
Total Ventilator Days	X	
Hospital Discharge Disposition	X	X
Hospital Discharge Destination Hospital	X	X
Hospital Discharge Transport Agency	X	
Hospital Discharge Transfer Reason	X	
Autopsy Identification Number	X	
Injury Diagnoses – ICD-9-CM N-codes	X	X
Severity Code(s) for ICD-9-CM Diagnosis	X	
Body Region(s) of Injury for ICD-9-CM Diagnosis	X	
Injury Severity Score for ICD-9-CM Diagnoses	X	
AIS 2005 Six-Digit Injury Identifier(s)*	X	*Required for Level I Trauma Centers Only
AIS Severity Code(s)*	X	
AIS Body Region(s) of Injury*	X	
Injury Severity Score for AIS 2005 Codes*	X	
Probability of Survival	X	
ED/Hospital Procedure Location	X	
ED/Hospital Procedure Start Date	X	
ED/Hospital Procedure Start Time	X	
ED/Hospital ICD-9-CM Procedure Codes	X	
Hospital Complications	X	
Primary Method of Payment	X	
Secondary Method of Payment	X	
Total Hospital Charges	X	
Total Reimbursements	X	

Appendix K - INDEX 1 and INDEX 2 for ASTR 2008-2010 DATA DICTIONARY

(Index 1 is in order that the data element is found in ASTR Database. Index 2 is in alphabetical order of data element name.)

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(Items in gray are not required by hospitals for submission but are included in ASTR database)

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(Note: Several naming variations are given for each data element to assist user in locating data element in data dictionary.)

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