

Supplemental Trauma Inclusion Criteria FAQ's

Q. Patient arrives in the Emergency Department (ED) with a traumatic injury, and the physician determines that the patient has qualifying injuries and needs to be admitted to the hospital for treatment. Admission orders are written, but, before the patient is admitted, they leave Against Medical Advice (AMA). Would I include this patient?

A. *Yes, if they have qualifying injuries and admission orders are written, the patient should be included in the trauma registry.*

Q. Patient arrives in the Emergency Department (ED) with a traumatic injury, but prior to a physician doing an assessment, the patient leaves the hospital AMA. Would I include this patient?

A. *No. Since there was not an official assessment completed, no qualifying diagnoses can be documented, and the patient cannot be included in the trauma registry.*

Q. If a patient of any age slipped and fell on a sidewalk and sustained a single fractured femur, but no other injuries, should this traumatic injury be reported?

A. *No. This is a ground level fall with a fracture of a single bone, single extremity. All ground level falls where the patient sustains **only** a single bone, single extremity fracture or a single bone, single extremity dislocation from a ground-level fall do not meet the Time Sensitive Emergency (TSE) Registry inclusion criteria for trauma and are not reportable.*

*Per our Idaho TSE Trauma Registry Inclusion/Exclusion Criteria, falls with the following external cause of morbidity codes qualify as ground level falls; these events should **not** be reported if the **only** associated injury is a single extremity bone fracture/dislocation:*

- **W00.0**
- **W01**
- **W03**
- **W18.30**
- **W18.31**
- **W18.39**

Q. If a patient slipped and fell on a sidewalk and sustained a fractured femur and a dislocated shoulder, should this case be reported?

A. *Maybe. The injuries meet inclusion criteria, but the case must also meet one of the following three conditions to be included in the registry:*

1) Patient was admitted to the hospital (including observation status for 2020 cases)

or

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2) Patient died as a result from the traumatic injury

or

3) Patient was transferred into or out from one acute care hospital to another acute care hospital regardless of the mode of transport (EMS ground, Air, or Private Vehicle, etc.) and meet the remaining criteria

If the patient was treated and discharged from the ED (not admitted, did not die and not transferred to another acute care hospital), the case should not be reported.

Q. If a patient slipped and fell on a sidewalk and sustained a 'hip fracture', should the case be reported?

A. *Maybe. The term 'hip fracture' can often be used generically. Carefully read through imaging reports to determine if the injury is a femur fracture (not reportable absent other injuries) or pelvic ring fracture (pubic ramus, acetabulum, ilium, sacrum, etc.). A patient who slipped and fell on a sidewalk and sustained a pelvic ring fracture does meet the inclusion criteria and should be reported if the patient also meets one of the following three conditions:*

1) Patient was admitted to the hospital (including observation status for 2020 cases)

or

2) Patient died as a result from the traumatic injury

or

3) Patient was transferred into or out from one acute care hospital to another acute care hospital regardless of the mode of transport (EMS ground, Air, or Private Vehicle, etc.) and meet the remaining criteria

If the patient was treated and discharged from the ED (not admitted, did not die and not transferred to another acute care hospital), the case should not be reported.

Q. If a patient fell from a ladder and sustained just a fractured femur should this case be reported?

A. *Maybe. Because the fall was not from ground level, the case should be reported if the patient also meets one of the following three conditions:*

1) Patient was admitted to the hospital (including observation status for 2020 cases)

or

2) Patient died as a result from the traumatic injury

or

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3) Patient was transferred into or out from one acute care hospital to another acute care hospital regardless of the mode of transport (EMS ground, Air, or Private Vehicle, etc.) and meet the remaining criteria

If the patient was treated and discharged from the ED (not admitted, did not die and not transferred to another acute care hospital), the case should not be reported.

Q. If a patient slipped and fell on a sidewalk, sustained just a fractured femur and died during surgery, should this case be reported?

A. *No. A diagnosis of a ground level fall with a single extremity, single bone fracture does not meet inclusion criteria and there is no need to assess the additional criteria of inpatient admission, death, or transfer to another facility.*

Q. If a patient slipped and fell on a sidewalk, sustained a trimalleolar fracture (fracture of medial malleolus – distal tibia, lateral malleolus – distal fibula, and posterior malleolus – back of tibia) and died during surgery, should this case be reported?

A. *Yes. Since this is a fracture of more than one bone from a ground level fall, the patient was admitted and the patient died, this case would be included in the trauma registry.*

Q. If a patient is evaluated in the Emergency Department (ED) of Hospital A, they have qualifying injuries and Hospital A has decided that the patient needs transferred to Hospital B for treatment - but, the mode of transportation to Hospital B is done via private vehicle. Should this case be reported?

A. *Yes. This case should be reported because the patient has qualifying injuries and was transferred to another acute care hospital regardless of the mode of transport (EMS ground, Air, or Private Vehicle, etc.).*

Q. If a patient is coming in for a pre-planned surgery due to trauma that happened at a previous encounter, should this case be reported?

A. *No. This does not meet our inclusion criteria. This is not considered an acute injury (it occurred at a previous encounter).*

Q. If a patient is coming in for a return visit to the Emergency Department due to trauma that happened at a previous encounter, and they now have new injuries should this case be reported?

A. *Maybe. If the patient has a qualifying injury and meets the remainder of our inclusion criteria.*

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Q. If a patient starts out in the Emergency Department (ED), gets discharged from the ED to Observation status, and then a physician orders changes status to Inpatient, would this case be reported?

A. *If they meet all the remaining Inclusion criteria, yes, you should include this patient in the trauma registry. Admissions under “observation” status and “inpatient” are both reportable.*

Q. If the patient is already admitted to the hospital for something other than an acute injury/trauma (Example: Admitted for acute or congestive heart failure, or a planned elective surgery, etc.) and they fall during this hospital admission, should we include?

A. *No. Do not include this patient. The reason they initially presented to the hospital was not for initial treatment of an acute injury. They presented for other medical reasons thus, they do not qualify.*

Q. If a patient twisted their back getting out of the car and it resulted in a fracture of a vertebra, would this case be included?

A. *No. Overexertion by lifting, twisting, pushing, or bending over does not meet our inclusion criteria.*

*Per our Idaho TSE Trauma Registry Inclusion/Exclusion Criteria, Overexertion and strenuous or repetitive movements should not be reported; external cause of injury/morbidity code **X50** is excluded.*

Q. If a patient has osteoporosis and suffers a fracture on the neck of the femur with no trauma (no falls, etc.) associated to cause the fracture, would this case be included?

A. *No. Pathological fracture ICD-10 diagnosis codes begin with the letter M not the letter S, thus, they do not fall in the traumatic injury diagnosis fracture code range and do not meet the inclusion criteria.*

*Per our Idaho TSE Trauma Registry Inclusion/Exclusion Criteria, pathological fractures should not be reported; **M80, M84.4-M84.7***

Q. If a patient has osteoporosis and suffers a fracture on the neck of the femur with trauma from a non-ground level fall (e.g. they fell down the stairs, fell from a ladder), would this case be included?

A. *Yes. This would be included since they have associated trauma that caused the fracture. If they meet all the remaining Inclusion criteria, yes, you should include this patient in the trauma registry.*

Q. A patient presents to the Emergency Department (ED) with superficial lacerations on both wrists, the lacerations are repaired in the ED, and the patient is observed overnight. They are discharged the next day and transferred to a mental health/behavior health facility via EMS. Should this case be included?

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A. No. The injuries are superficial. Superficial injuries do not meet our inclusion criteria and do not need to be reported. There is no need to assess the additional criteria of inpatient admission, death, or transfer to another facility.

Q. A child falls off their bike and presents to the Emergency Department (ED) at acute care hospital A. The radiology report indicates they have a fractured humerus and a fractured tibia. The ED physician determines they will need to transfer the patient to a higher level of care at acute care hospital B for surgery and treatment. The patient transfers to hospital B via EMS ground ambulance. Should this case be included?

A. Yes, it meets the inclusion criteria. They have qualifying injuries and are transferring to another acute care hospital regardless of the mode of transport (EMS ground, Air, or Private Vehicle, etc.).

Q. A child falls off their bike and presents to the Emergency Department (ED) at acute care hospital A. The radiology report indicates they have a fractured humerus and a fractured tibia. The ED physician determines they will need to transfer the patient to a higher level of care at acute care hospital B for surgery and treatment. The patient transfers to hospital B via the parents' private vehicle. Should this case be included?

A. Yes. This case should be reported because the patient has qualifying injuries and was transferred to another acute care hospital regardless of the mode of transport (EMS ground, Air, or Private Vehicle, etc.).

Q. A patient trips on a crack in the sidewalk and sustains a pelvic ring fracture. Should this case be included?

A. Yes. The pelvic ring is not considered an extremity so this fracture from a ground level fall would be reportable if they meet all the remaining Inclusion criteria.

Q. A patient has a skiing accident at Grand Targhee Resort in the state of Wyoming. EMS brings the patient to Teton Valley Health Hospital in Idaho. After evaluation in the ED, it is determined that they have qualifying injuries and are admitted to Teton Valley Health Hospital for further care. Would this case be reported into the Idaho TSE Trauma Registry?

A. Yes. Since they have qualifying injuries and are being admitted to an acute care hospital in Idaho for further care, they meet our state inclusion criteria and should be included in the Idaho TSE trauma registry.

Q. A patient arrives in the ED at Bingham Memorial Hospital in Idaho. After evaluation in the ED, it is determined that they have qualifying injuries and are transferred to University of Utah Hospital in Salt Lake City, Utah for further treatment. Would this case be reported into the Idaho TSE Trauma Registry?

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A. Yes. Since they have qualifying injuries and are transferring to another acute care hospital for further care, they meet our state inclusion criteria. Bingham Memorial Hospital should report this case to the Idaho TSE trauma registry.

Q. A patient has a skiing accident at Grand Targhee Resort in the state of Wyoming. The patient receives initial care at a Level IV trauma facility in Wyoming, and the patient is transferred to St. Luke's in Boise for a higher level of care. St. Luke's Boise also determines that the patient has qualifying injuries and admits the patient. Would this case be reported into the Idaho TSE Trauma Registry?

A. Yes. Even though their initial place of care was out-of-state, since they have qualifying injuries and are admitted to a facility in Idaho for further care, this case meets our state inclusion criteria and should be included in the Idaho TSE Registry for trauma.

Q. A patient arrives in the Emergency Department (ED) with a contusion of the left kidney and superficial abrasion with skin intact. The patient was admitted for further treatment and follow-up. Should this case be included?

*A. Yes. They have qualifying injuries and were admitted. Contusions occurring inside the body (internal organs, vascular, etc.) are **not** considered superficial and therefore meet our state inclusion criteria.*