

Mississippi State Department of Health  
Trauma Registry Data Committee Meeting Minutes  
August 16, 2011

The Trauma Registry Data Committee Meeting was held at the Mississippi State Department of Health, Cobb Auditorium, and it started at 10:00 am.

Committee Members Present:

Betty Cox	Heather Shields
Bobbie Knight	Naomi Sigman
Amber Kyle	Gloria Smalley
Carrie McFarland	Marsha Smith
Monica McCullum	Courtney Stevens
Cherri Rickels	

Other Attendees and Guests:

Elaine Coleman	Norm Miller
Pam Graves	Kesha Prystupa
Aleta Guthrie	LeAnne Williams
Linda Horne	

Committee Members Absent:

Steve Lesley	Susan Perrigin
Jimmy McManus	Linda Swann
Gerald Nottenkamper	

I. Call to Order

The meeting was called to order by Carrie McFarland, Chairperson at 10:01 am.

II. Approval of Minutes from Previous Meeting

Minutes from the meeting on May 31, 2011 were reviewed and approved with correction of moving Courtney Stevens name from Guest to Committee Members Present.

III. Old Business

- QA/ Data Integrity

QA handouts: Data Submission report Jan-Aug 15, 2011, Questionable Values, Missing Values, and ISS Report for June 2011. One hospital is delinquent in the East Central Region. Missing Value Response CY 2011 and Questionable Value Response CY handouts.

Heather Shields reported that Anderson South- Riley's ER is closed as of today.

Everyone was encouraged to run the quality assurance checks/reports/queries on their data before submitting to the State and make sure they submit the QA response log back to the State.

- Collector Software
  1. Update - Our Fall 2011 update is scheduled for release October 31. Current list is as of August 15, 2011.
    - Impediments to Discharge will not change the title.
    - Zip code - N/A not allowed. Please select “unknown”
    - Supplemental Oxygen field check box will be added to ED vitals field under the vital signs. It will be mapped to NTDB.
    - ICD9 code- N/A and Unknown will not be allowed. This field must be populated.
    - Referring Facility Level: Referring facility and Facility level will be linked. When the hospital is selected, the facility level will auto-populate.
    - New EMS Agency: Add License #1740 Children’s Transport UMC, Add 1063 Neonatal and mapping all entered under 1083.
    - First Procedure: Report to generate first instance of procedure and the avg. time. DI will build report.
    - Injury Diagnosis: Add report for Avg. of total hospital days for each group in the Injury diagnosis 1 report.
    - Data Fax Report: The size of the report is too large. Committee will need to decide what is to be added on the Quick report. Option 1: Demographics(report1) and QA(report2)
    - Committee members were asked to look at the quick report and email Carrie the fields that need to remain on the report. Will add MR# and Patient ID on each page of report. Will revisit the page breaks.
    - Batch reporting functionality: Adding
    - New Role: This will be added to the Admin Module to view trauma data and have access to RW.
    - ED Med Menu: Do not add TDAP vaccination - Committee voted at previous meeting.
    - QA Tracking: “If pre-hospital” free text field will be changed to the EMS agency pick list.
    - TM\_RESP\_TM\_L: This will be added to RW to correct ability to capture times and calculate correctly.
    - Transfer ACS Filter: These will transfer if selected. No User defined filters will transfer.
    - Outcome to Transfer: New field added to document transfer out mode on the Outcomes screen.
    - New Logic: When Disch\_To
    - New Blank Check
    - Hospice: Will be added to Disch\_ To as a menu option.
    - BMI: New field added in ED next to height but will be auto-calculated and also logic.
    - Burn: Add Xeroform dressing and Silver Bases Antimicrobial dressing to Burn treatment.
    - Incorporate AIS 2005 and Tri-code 2005.
    - Remove Check from Alias fields on Demographics Tab.
    - New Check: ED LOS>360 min message to validate.

- Staff Manager: Remove “Emergency Department” from Service menu pick list.
- Cause of Injury: Add “other” and an “if other” text box with 50 characters.
- Non-Surg Adm Serv Query: Change from each to one or more.
- Demographics report: Change label from “Direct” to “Direct from Scene”.
- Date/Time Edits: Ex: Arrival time can not be before Called time.
- Discharge to Logic: Transfer, accepting: D/C to SNF or LTC enables Transfer, accepting facility field.
- Quick Add Fields List: RW-The fields need to be updated to correct name to avoid unknown token errors when running reports.
- ICD9 Text Printing: Definitions-To extend the field width for printing the text.
- Submission Manager: Central Site Registry-Add search options.

## 2. MEMSIS Interface

This is still in process. Once Image Trend provides the criteria for what is defined as “trauma” in the MEMSIS system, DI will begin development work. We should be able to use most of the development work from previous interface development.

- “Per Regional Protocol” field/checkbox(Pre-hospital Screen)  
Committee consensus: Do not add checkbox to registry.
- Co-Morbidities-NTDS/MS
  - Handout-Co-Morbid Conditions along with the NTDB definitions.
  - NTDB Co-morbid Branch will be added as (A) in the menu choice in the registry.
- Complications-NTDS/MS
  - Handout-Complications along with the NTDB definitions.
  - NTDB Complications will be added as the first branch in the menu choice in the registry.
- Data Dictionary Format Revision
  - Committee worked on revisions. Subcommittee was established to complete draft before our next meeting. Members are Naomi Sigman, Gloria Smalley and Courtney Stevens.

## IV. New Business

- MTAC/ Rules & Regs./Functionality
  - Norm Miller: Proposed regulation change will be posted on Friday on the MSDH website. There are new chapters that are consolidated. Pediatric chapter has 30 completed pages. The Burn chapter has been completed as well. The Administrative Code will be published online with a new format for the regulations.
  - EMS: Directed to start a MEMSIS user group. There will be representation from Data committee in this group and vice versa.

- EMS Advisory Committee
  - EMS Field Triage to be implemented September 1, 2011 and it will be revisited with data to support whether the Guideline/Criteria needs to be adjusted.
  - Two purposes: establish Standard Activation criteria uniform across MS and ensure that EMS personnel know and follow the same standard and consistency of care across MS.
- PI Committee Update
  - There are 7 PI indicators. The reports have been sent to all regions.
  - Handout: Appendix B - PI indicators
  - Handout: PI Indicators Report Format and Queries
- “Mode of Transfer” Field for patients transferred out (Outcome Screen)
  - This field is on the list for the 2012 update.
- ED Discharge Time for Transfer Patients
  - Trauma Administrators will need to educate their hospitals on the importance of completing ED discharge time.

#### V. Comments/ Other Discussion

- The Benchmark reports from NTDB will be available in September. All committee members were reminded to go to the site to print their applicable reports.
- Additional Handouts:
- EMS check box: Was EMS Run record left with patient? This field will be added to the Pre-hospital field next to POV/Walking.
- Amber gave an update on the EMS Advisory committee stating that they will meet in September and will discuss the issue.
- At our next meeting revisit whether we should add Criteria to the EMS Triage Rationale after Guidelines go into effect.
- State will audit data submissions for completion when submitted by the due date, 6<sup>th</sup> of each month.

#### VI. Next Meeting

Next Trauma Registry Data Committee Meeting will be held Tuesday, November 15, 2011, 10 a.m. at the MSDH Osborne Auditorium.

#### VII. Adjourned

With no further business, the Trauma Registry Data Committee Meeting was adjourned at 2:00 pm.

Recorder

Monica McCullum