TRAUMA REGISTRY DATA COLLECTION AND MANAGEMENT

Effective: December 18, 2017  
Replaces: September 12, 2014  
Review: December 18, 2020

I. Purpose

The purpose of this policy is to define the means of collection of data for the Quality Improvement of the Trauma System.

II. Prehospital Care Providers

A. The prehospital care report (PCR) shall be completed by prehospital care providers in accordance with policy and procedure.

B. A copy of the PCR is to be made available to the Trauma Center/Emergency Department; at the time the patient is delivered to the facility for inclusion in the patient's medical record and abstracted into the Trauma Registry.

III. Trauma Centers

A. Each Trauma Center shall abstract the records of all Major Trauma Victims and enter the data into the Santa Clara County Trauma Registry System.

B. The Trauma Center shall submit the data in an agreed-upon format to the Agency on regularly assigned dates.

C. Each Trauma Center may use its data for self-evaluation and research purposes.

D. Each Trauma Center shall ensure that the data submitted to the EMS Agency is valid, without error and submitted in a timely fashion.

IV. Santa Clara County EMS Agency

A. The Agency shall maintain the central Trauma Registry.

B. Data submitted by the Trauma Centers shall be utilized for system monitoring, evaluation, and research.

C. The EMS Agency will conduct trauma data validation on an annual and ad hoc basis. Validation will follow processes identified in the Trauma
Validation Plan and in collaboration with the Trauma User Registry Group.

D. Trauma Data will be submitted to the California State EMS Information System on a quarterly basis by the EMS Agency.

V. **Minimum Required Data Elements**

A. The minimum data elements are identified in the Santa Clara County Trauma Data Dictionary.

B. The Santa Clara County Trauma Data Dictionary is updated on an annual basis in accordance with County, State and National guidelines.

VI. **Routine Report Generation**

A. The EMS Agency will provide a comprehensive annual Trauma System Report.

B. Trauma Center Activity Report (TCAR) will be provided at each Trauma Care System Quality Improvement Committee (TCSQIC) meeting.

C. Ad-hoc reports are provided by the EMS Agency to the TCSQIC on as needed basis.

D. Injury epidemiology reports are developed with various stakeholders.