



# Wisconsin Trauma Registry

Updates and Statistics

In support of the Wisconsin Trauma Care System

In this edition:

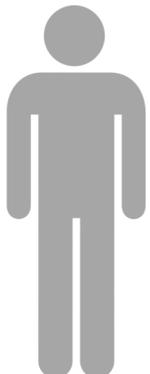
Quarter 3, 2018, Data	Fall-Specific Analysis	Registry Updates
Case Fatality Rate	Pediatric Trauma	Improvement Initiatives



## Quarter 3, 2018, Data

Analyses include patients discharged between July 1 and September 30, 2018.

### Patient Sex



56%



44%



## Summary



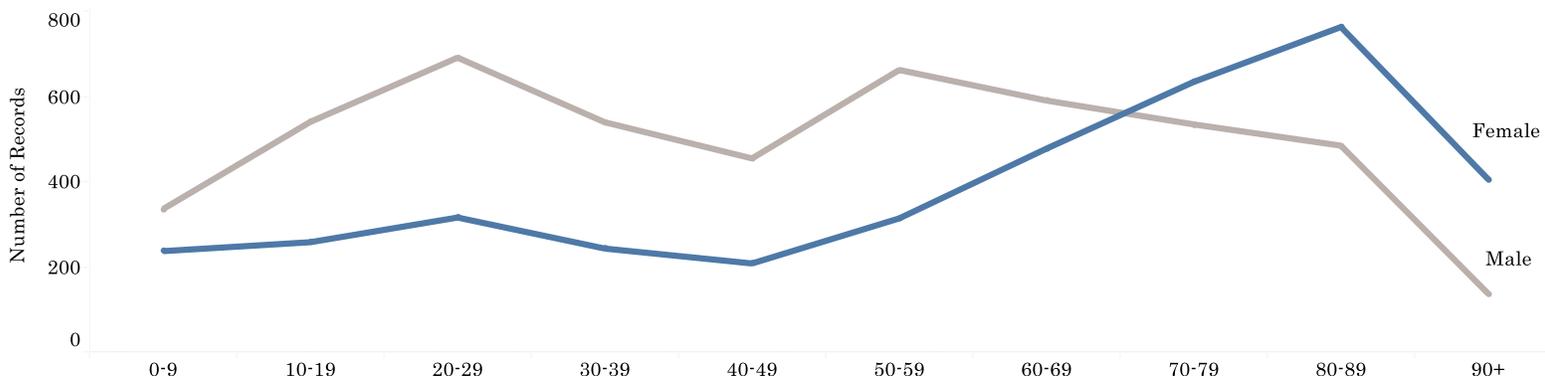
**9,946** Trauma Records

**8,840** Injury Events

All data for this report were exported on January 4, 2019

An injury event is unique to each reported incident. There are cases where a single patient has multiple traumatic events in a day. Thus, this patient has multiple injury events.

### Volume of Patients by Sex and Age Range



Quarter 3, 2018





# Case Fatality Rate

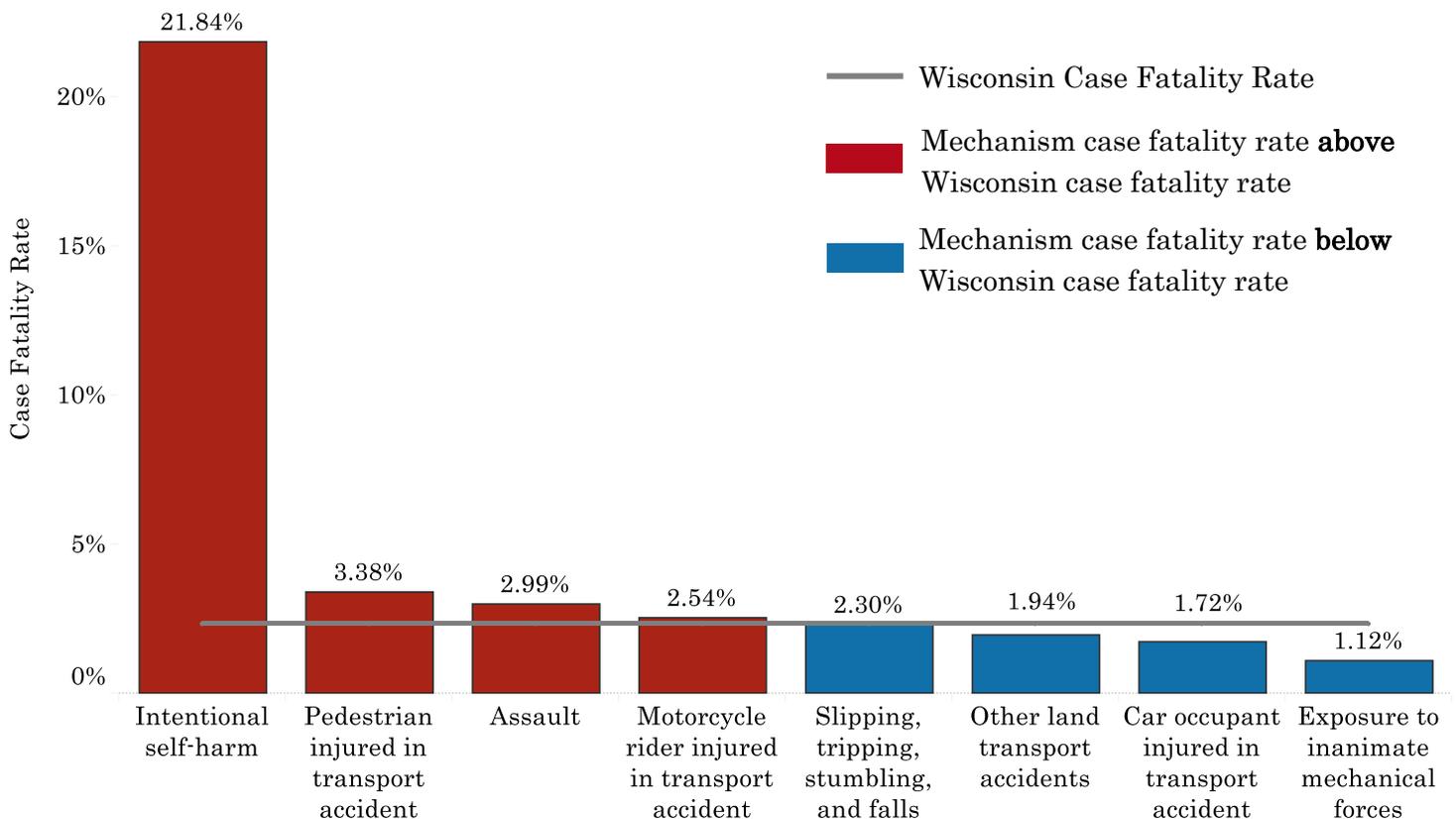
Analyses include patients discharged between July 1 and September 30, 2018.

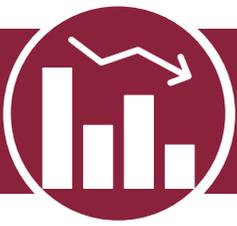
## Case Fatality Rate by Mechanism of Injury

Injury categories with fewer than five deaths are not included.

Incident ICD-10 Injury Category	Total Cases	Percent of All Injuries	Deaths	Case Fatality Rate
Slipping, tripping, stumbling, and falls	4,831	47.91%	111	2.30%
Car occupant injured in transport accident	1,339	13.28%	23	1.72%
Intentional self-harm	87	0.86%	19	21.84%
Motorcycle rider injured in transport accident	630	6.25%	16	2.54%
Assault	469	4.92%	14	2.99%
Other land transport accidents	516	5.12%	10	1.94%
Pedestrian injured in transport accident	237	2.35%	8	3.38%
Exposure to inanimate mechanical forces	626	6.21%	7	1.12%

## Mechanism-Specific Case Fatality Rate vs. Statewide Mortality Rate



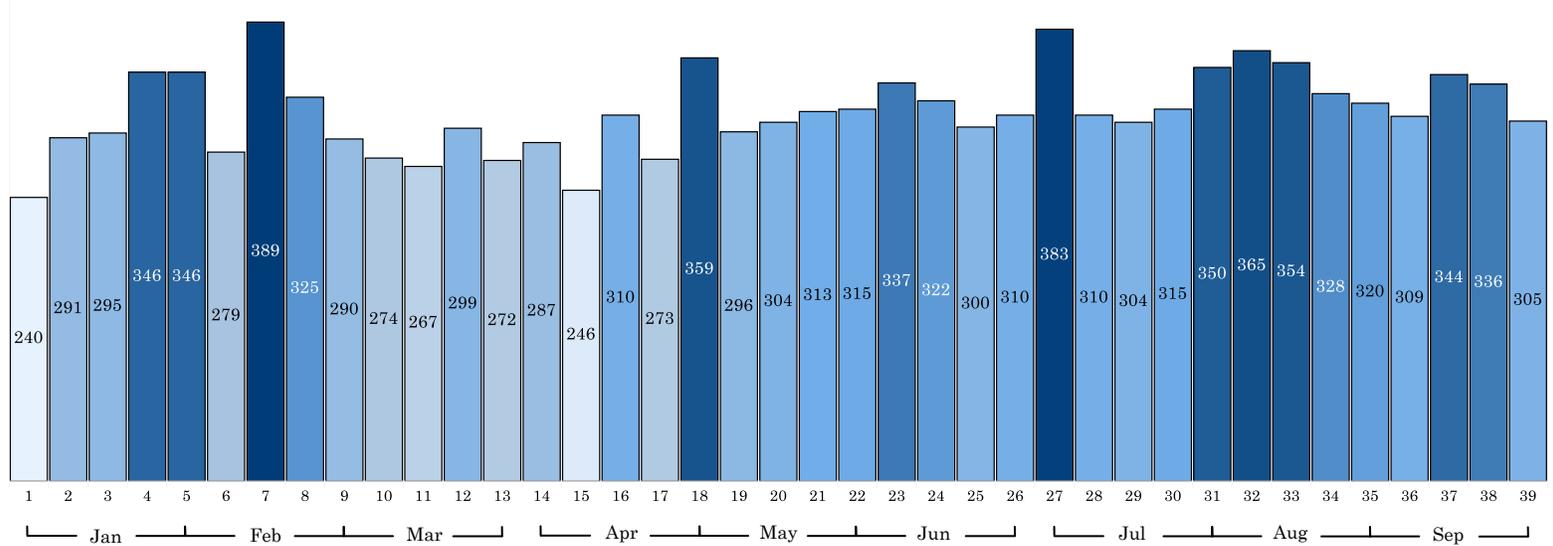


# Slipping, Tripping, Stumbling, and Falls

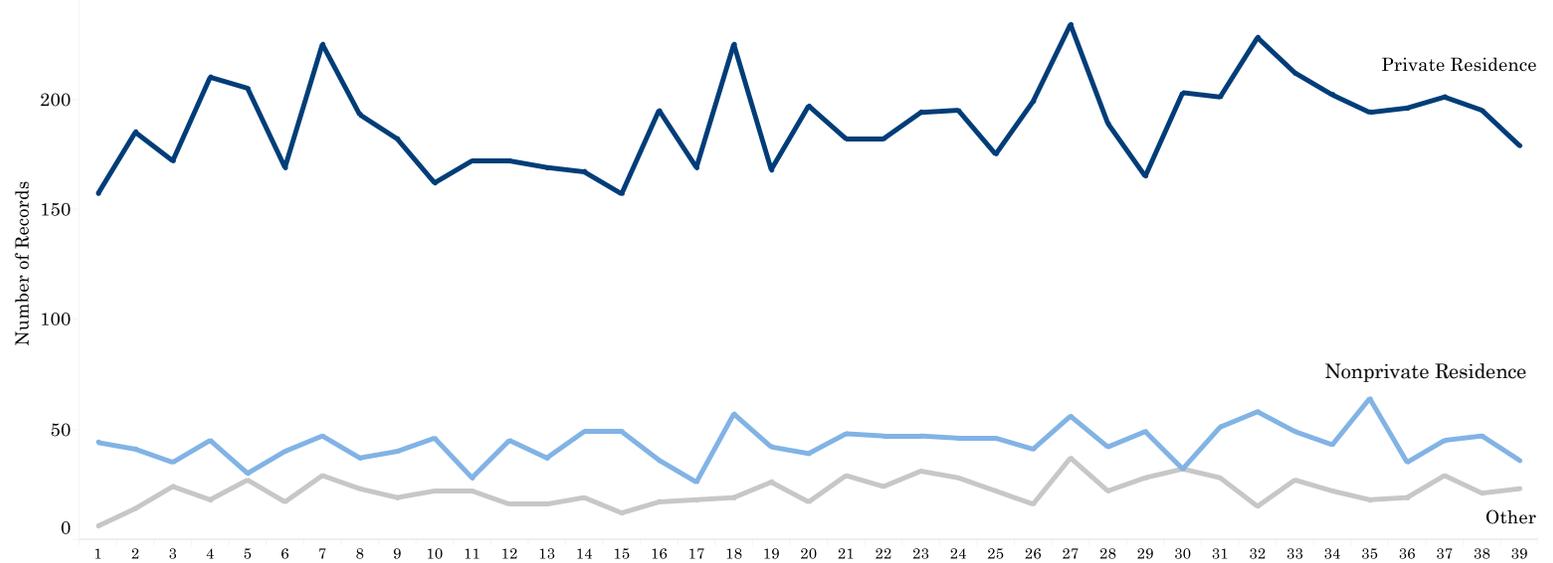
Analyses include patients discharged between January 1 and September 30, 2018.

## Falls by Week Number

See how your facility compares by running the report title “Falls by Week” in the report writer.



## Volume of Falls by Injury Location and Week Number



## How does your facility compare?

Falls are overwhelmingly the highest volume of trauma patients seen throughout Wisconsin. See how falls impact your facility by generating the following reports.

- Falls by Day of Week
- Falls by Month
- Falls by Gender
- Falls by Week
- Falls by Hour of Day
- Fall Patients by Diagnosis Category and ISS





# Pediatric Trauma

Analyses include patients discharged between July 1 and September 30, 2018.

## Overview

In the context of this report, pediatric patients are ages 17 and under.

## Summary

1,329 Trauma Records

1,122 Injury Events

All data for this report were exported on January 4, 2019

An injury event is unique to each reported incident. There are cases where a single patient has multiple traumatic events in a day. Thus, this patient has multiple injury events.

## Missing Initial Assessment Blood Pressure

Of all trauma records for patients aged 17 and under, 14.5% had no documented initial assessment systolic blood pressure (SBP). This field has the third highest rate of incompleteness for patients aged 17 and under behind patient weight and incident time. The following is an age range subcategory breakdown.

Patient Age Range in Years			
0-4	5-9	10-14	15-17
36.9% of patients aged 0-4 had no documented initial assessment SBP.	11.6% of patients aged 5-9 had no documented initial assessment SBP.	3.8% of patients aged 10-14 had no documented initial assessment SBP.	2.2% of patients aged 15-17 had no documented initial assessment SBP.



Utilize the reports available within the "Pediatric Trauma" folder of the report writer to track missing SBP in pediatric patients.

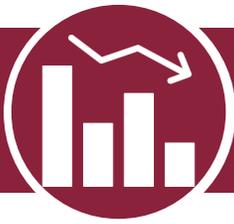


## Number of Patients Admitted to Nonpediatric Trauma Centers by ISS

A total of 94 patients aged 17 and under were admitted from the emergency department to a non-pediatric trauma care center. The highest share of these patients had an injury severity score between 1 and 4.

ISS Range	1-4	5-14	15+
Number of Patients	54	30	10





# Registry Updates and Improvement Initiatives

## 2019 Data Dictionary Available

The 2019 data dictionary has been published and can be found at the link provided below.

[www.dhs.wisconsin.gov/publications/p01117-19.pdf](http://www.dhs.wisconsin.gov/publications/p01117-19.pdf)

The 2018 data dictionary will remain active and has a new URL at:

[www.dhs.wisconsin.gov/publications/p01117-18.pdf](http://www.dhs.wisconsin.gov/publications/p01117-18.pdf)

## Registry Improvement Initiative: Timeliness

Wisconsin's path to 80% of records submitted within 60 days of discharge

Wisconsin trauma care facilities submitted 56% of trauma records within 60 days of patient discharge. This is consistent with values from quarter 2, 2018. This value excludes records in progress. The goal is to reach 70% of trauma records submitted within 60 days of patient discharge by the end of 2018, with complete compliance achieved by 2020. This value only includes records marked as completed.

Description	Projected Annual Improvements			
	Current	2018	2019	2020
Percentage of cases completed within 60 days of discharge.	56%	70%	75%	80%



## Current

**50** Average minutes to complete a case

**97.1** Average validity score  
(-0.3%)



## 2018 Goal

**45** Average minutes to complete a case

**98** Average validity score



## Reports

The following reports can assist facilities in tracking record submission timeliness.

- Data Feedback Report
- Percent of Records Completed Within 60 Days of Patient Discharge by Month



## Prevent duplicate entries

If multiple staff are responsible for data entry, be sure to communicate and prevent time spent on duplicate records. Enter the patient's name or medical record number into the search bar on the incidents tab to see if there is an existing record for this injury event prior to beginning data entry. This takes only a few seconds and can save hours of work!



[Advanced Search](#)
  

