# Data Management Committee

Statewide Trauma Advisory Council Wednesday, September 3, 2025



# Acronyms

- FAST: Focused assessment with sonography for trauma
- NTDS: National trauma data standard
- SBIRT: Screening, brief intervention, and referral to treatment
- TR101: Trauma Registry 101 course
- TR102: Trauma Registry 102 course

# Agenda

- Introductions and announcements
- Approval of June 2025 minutes
- 2026 Data Dictionary
- Data dashboard presentation
- Trauma registry educational courses
- Public comment related to the Wisconsin trauma care system

# Data Management Committee

- Chair: Laura Kalscheur, Trauma Program Manager,
   American Family Children's Hospital
- Vice Chair: Kurrie Kovacevich, Trauma Data Analyst Sr., Aurora Summit and Washington Co.

# Data Management Committee

- Meredith Glueck, Trauma Registrar, SSM Health St. Mary's Hospital Madison and Sun Prairie
- Stephanie Becker, Trauma Registrar, Froedtert Menomonee Falls and West Bend Hospitals
- Nathan Emerson, Supervisor of Trauma Registry, Froedtert Hospital
- Meghan McGavin, Clinical Performance Analyst, UnityPoint Health Meriter
- Abby Salter, Trauma Registrar, SSM Greater Fond du Lac

### Data Management Committee

- Trauma Registry Data Manager: Katie Prather,
   Wisconsin Department of Health Services
- State Trauma Coordinator: Margaret Wogahn,
   Wisconsin Department of Health Services

# Approval of Minutes

# 2026 Data Dictionary

# Updated NTDS Requirements

- Hospital event
  - Unplanned visit to the operating room (retired)
  - Unplanned return to the operating room (new)
- Element intents
  - Added to each data element page
  - Removed from appendix
- Current smoker
  - Includes nicotine inhalation
  - Excludes chew tobacco or snuff

### New Optional Data Elements

- TR17.77 Timely arrival for consulting services
- TR17.56 FAST exam
- TR5.23 Registrar name
- TR45.10 Reason SBIRT was not done

### **Updated Elements**

- TR17.44 Reason for transfer delays
  - Adding new options
  - Removing duplicate options
- TR31.4 Audit
  - Adding new options
  - Removing duplicate options
- TR5.60 Prehospital procedures
  - Removing non-procedure options
- TR15.31 Medications
  - Removing non-medication options

### **Updated Elements**

- TR33.28 Referring hospital medications given
  - Removing non-medication options
- TR17.25 ED discharge date
  - Same name as TR17.41 in NTDS
  - Change to ED physical discharge date
- TR17.26 ED discharge time
  - ◆ Same name as TR17.42 in NTDS
  - Change to ED physical discharge time
- TR17.32 Consulting service type
  - Adding pediatric option

# Other Changes

- Mark as complete required
- Language consistency
  - Hospital
  - ◆ Trauma Center

### Reason for Transfer Delays to Add

- EMS issue
  - ◆ EMS transfer unit with the appropriate level of care not available
  - EMS declines interfacility transfer
- Receiving facility issue
  - Difficulty obtaining accepting hospital
  - Bed availability

# Reason for Transfer Delays to Remove

- Reason for transfer delay
  - Delayed identification that the patient needed trauma center resources
  - High ED census at receiving hospital/busy
  - High ED census at transferring hospital/busy
  - In-house imaging delay
  - Late requesting transporting EMS unit

# Reason for Transfer Delays to Remove

- Reason for transfer delay continued
  - Patient status change/complication
  - Referring hospital issue radiology
  - Waiting for transporting EMS unit
- EMS issue
  - Out of county

- Adverse med event, reaction, or wrong med
- Concern with receiving facility (divert, delay, etc.)
- Death (pre-hospital)
- Delay in diagnosis
- Delay in obtaining subspecialty consult
- Delay in obtaining trauma consult
- Delay in physician response: trauma surgeon

- Deviation from standard related to ED care
- Deviation from standard related to inpatient care
- Deviation from standard related to trauma service
- ED LOS > 2 hours with ISS > 15
- Error in diagnosis
- Massive transfusion protocol activation
- Missed diagnosis
- NAT-non accidental trauma

- No FAST exam performed
- No trauma activation by EMS that met criteria
- No trauma page received/wrong info
- Organ donation case
- Patient < 18 years old and not weighed</p>
- Patient met transfer criteria and admitted locally
- Pediatric admission

- Prehospital delay
- Prehospital issue
- Provider downgraded trauma
- Tourniquet use
- Transferred and did not meet transfer criteria

#### Audits to Remove

- Appropriateness of prehospital and ED triage
- Appropriateness, completeness, and legibility of documentation
- Compliance of TTA, as dictated by program protocols
- Delay in assessment, dx, technique, disposition, or tx
- Delays in care due to the unavailability of ED physician

#### Audits to Remove

- Glasgow Coma Score <= 8, no endotracheal tube or surgical airway
- Glasgow Coma Score not present (prehospital)
- Response time > 30 minutes (dispatch to arrival on scene prehospital)
- Transfer after 3 hours in the initial hospital
- Vital signs are not recorded (prehospital)

# Data Dashboard Presentation

# Trauma Registry Educational Courses

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- October 15: Data entry
- October 29: Transactional reporting
- November 12: Analytical tabular reporting

# Trauma Registry Educational Courses

- Standalone courses
- Hands-on interactive learning
- Can be taken after participation in TR101 or TR102
- Can take as many as you wish

# Public Comment Related to the Wisconsin Trauma Care System

Thank You!