10/01/2023

Georgia Trauma Data Dictionary

2023 Office of EMS Trauma
ImageTrend Georgia Patient Registry

DPH
GEORGIA DEPARTMENT OF PUBLIC HEALTH

CONTENTS

INTRODUCTION

The Georgia Office of Emergency Medical Services and Trauma (OEMST) utilizes the ImageTrend Georgia Patient Registry as the central site for facilities to enter trauma data directly or by importing data from another registry software.

This Georgia Trauma Data Dictionary serves a reference document containing the additional data fields and definition requirements for use by registry vendors to prepare the annual ITDX+GA Extension SDL file. These additional fields are referred to as the Georgia Extensions.

The ITDX+GA Extensions include the fields required by National Trauma Data Standard (NTDS), Trauma Quality Improvement Program (TQIP), ESO International Trauma Data Exchange (ITDX), and the Georgia Extensions.

The NTDS, TQIP, and vendor specific data dictionaries are to be used in conjunction with this dictionary.

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VISION, MISSSION, CORE VALUES

VISION
A Healthy and Safe Georgia – exceptional patient outcomes through comprehensive, statewide, integrated, data–driven, equitable, and people–centered Emergency Medical Services and time–sensitive systems of care.

MISSION
The mission of the Georgia Office of EMS and Trauma is to reduce death and disability by providing regulation, guidance, and leadership to enable the assessment, planning, development, and promotion of statewide Emergency Medical Services and time–sensitive systems of care.

CORE VALUES
DPH's workforce is guided by the following core values in carrying out our public health work:

- **People** – We value our employees as professional colleagues. We treat out customers, clients, partners, and those we serve with respect by listening, understanding, and responding to needs.
- **Excellence** - Commitment, accountability, and transparency for optimal efficient, effective, and responsive performance.
- **Partnership** – Internal and external teamwork to solve problems, make decisions, and achieve common goals.
- **Innovation** – New approaches and progressive solutions to problems. Embracing change and accepting reasonable risk.
- **Science** – The application of the best available research, data and analysis leading to improved outcomes.

TRAUMA CENTER INFORMATION

All facilities seeking designation status are expected to meet specific criteria as set forth by the Department of Public Health, Office of EMS and Trauma (OEMST). The department utilizes the document, "Resources for Optimal Care of the Injured Patient", published by the American College of Surgeons. All designated hospitals must submit trauma registry data to the OEMST and maintain a performance improvement process with thorough documentation.

LEVEL I TRAUMA FACILITY

The highest level of trauma center designation offers the greatest level of comprehensive trauma care, from prevention through rehabilitation. Level I facilities have the major responsibility for leading in trauma education, research, and planning. Facilities that meet Level I criteria will be academic facilities.

LEVEL II TRAUMA FACILITY

The second level of trauma center designation offers the same level of clinical care as a Level I, but usually does not have the focus on research, education, and systems planning. Some patients with very complex injuries, such as replantation, may require transfer to a Level I center.

LEVEL III TRAUMA FACILITY

The third level of trauma center designation provides trauma assessment, resuscitation, emergency surgery, stabilization, and if needed, transfer of patients requiring more definitive care to Level I or II centers. Well trained emergency department physicians and general surgeons are required.

LEVEL IV TRAUMA FACILITY

The fourth level of trauma center designation provides advanced trauma life support and stabilization of patients received in their facility. Well trained mid-level providers may assist to expedite the transfer of patients requiring more definitive care to Level I or II centers. Level IV centers may be a clinic or hospital in a remote or rural area and may or may not have a physician available 24 hours a day.

2023 GEORGIA TRAUMA REGISTRY CRITERIA

INCLUDED:

Patients presenting with a traumatic injury occurring within 14 days of initial hospital visit and with an ICD-10_CM diagnosis code below:

- S00-S99 w/ 7th character modifiers of A, B, or C ONLY. Injuries to specific body parts – initial encounter (see exclusions below)
- T07 (unspecified multiple injuries)
- T14 (injury of unspecified body region)
- T20-T28 with 7th character A only or T30-T32 (only with a non-burn trauma dx meeting inclusion criteria)
- T79.A1 – T79.A9 with 7th character modifier A only (Traumatic Compartment Syndrome – initial encounter)

AND must include one of the following in addition to a valid trauma diagnosis code from the listed above.

- Admitted to the hospital after discharge from the ED or directly admitted to the hospital, regardless of length of stay
- Transferred to or from another acute care facility**
- Died, regardless of length of stay
- DOA: defined as a patient that died from a traumatic injury before hospital arrival and was pronounced dead by a physician in the emergency department.

Additional criteria:

- The Georgia data collection standard for blood utilization includes data for any blood products administered within the first 4 hours from the patient arrival time.
- Unplanned readmissions must be associated with the initial trauma injury, have a trauma diagnosis, ISS total, and be readmitted within 72 hours of discharge from the first visit.
- Dictionary **Data Sources** are simply a guide; Centers should use the most reliable source at their center.
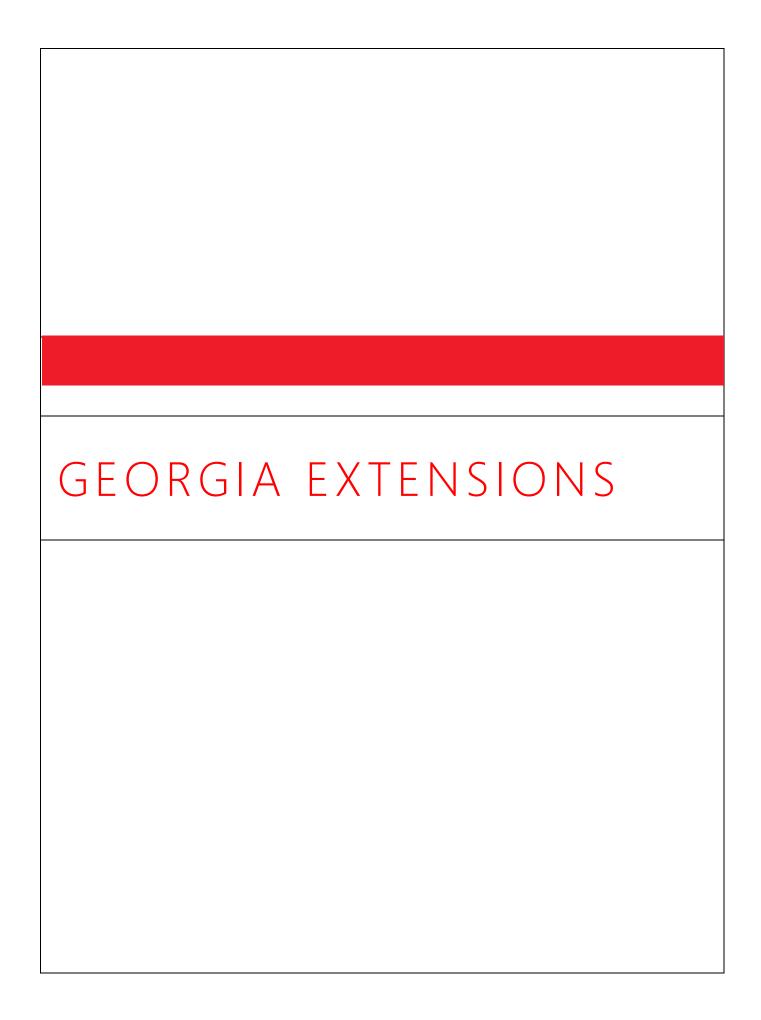
EXCLUDED:

- Patients with isolated superficial injuries- Diagnosis codes of ICD-10-CM superficial injuries: S00, S10, S20, S30, S40, S50, S60, S70, S80, S90
- Late effect codes with the 7th character modifier of D through S
- Patients with **isolated** burn injuries T20-T28 with a 7th modifier A or T30-T32 (NTDS 2021)
- Patients admitted to a medical or social service with a minor trauma injury that would not have been otherwise admitted for their injury. Inclusion decisions are at the discretion of each facility. ***** (GA 2023)
- Patients with injuries older than 14 days from first ED/hospital arrival date. (NTDS 2021)
- Patients admitted for elective and/or planned surgical intervention. (NTDS 2022)
- Patients with an In-House trauma injury sustained after the initial ED/Hospital arrival and before ED/Hospital discharge. This exclusion involves all data related to the In-House injury. (NTDS 2022)

NOTES:

* Indicates a difference between the Georgia Criteria and the NTDS Criteria

** Per the Centers for Medicare and Medicaid Services, Acute Care Hospital is defined as a hospital capable of providing inpatient medical care with services for surgery, acute medical conditions, or injuries. "CMS Data Navigator Glossary of Terms" https://www.cms.gov/Research-Statistics-Data-and systems/Research/ResearchGenInfo/Downloads/DataNav_Glossary_Alpha.pdf (accessed January 15, 2019).

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GEORGIA EXTENSIONS

DEMOGRAPHIC SCREEN:

The demographic screen contains data elements related to the patient's identity such as age, gender, race, home city, home state, home zip code, and the DPH LongID number.

The OEMST requires the following fields in addition to the standard fields included in the NTDS, TQIP, and ITDX dictionaries.

Medical Record Number
Georgia LongID

MEDICAL RECORD NUMBER

ITPR TAB NAME: Demographic

ITPR FIELD LABEL: TR1.2

S**END TO OEMST STATE?** YES

ESO V5 REP WRITER NAME: PAT_REC_NUM

ALLOW N/A? NO

ALLOW UNK? NO

DEFINITION:
The unique identification number assigned as the patient identifier.

ADDITIONAL INFORMATION:
In some instances, patients are assigned a new medical record number (MRN) when they already have one from a previous encounter. Typically, all the patient's records will be merged under the latest medical record number. Check with your facility's Medical Records / Health Information Management Department to determine the standard of practice and use the final MRN assigned to the patient.

DATA SOURCE:
Billing/Registration Form, Admission Form

GEORGIA LONGID NUMBER

ITPR TAB NAME: Demographic

ITPR FIELD LABEL: TR1.30

S**END TO OEMST STATE?** YES

ESO V5 REP WRITER NAME: LINK_NUM

ALLOW N/A? NO

ALLOW UNK? NO

DEFINITION:
The LongID is a variable that will help registry records link with other state data sources. The variable, LONGID, is alphanumeric and has a 15-digit length. The registrar creates the LongID using the following instructions.

1. To create the variable, record the following data in the order listed:
   a) the first two letters of the first name,
   b) the first and last two letters of the last name,
   c) the birth date (date of birth – DOB) in an eight-digit MM/DD/YYYY format and
   d) sex as "M" for male, "F" for female, and "U" for unknown or if the patient does not identify as a male or female,
1. No symbols such as apostrophes as in names like O'Connor or slashes ("/") like those in birth dates separating the month, day and year should be included in the values of LONGID.
2. Suffixes such as "Jr.", "Sr.", "II" or "III" are not considered when creating the values for LONGID.
3. Some names have few letters, e.g., Ray, Coe or Li. In such circumstances, letters will be used repeatedly but in the same order as described above.
4. Some names have two parts separated by space or a hyphen, e.g., Di Napoli, Ramirez-Martinez, Jones Smith. Regardless of the separator between the two parts, always use the first two letters of the first part and the last two letters of the last part of the compound names.
5. If the name and date of birth are unknown, use the names Jane Doe for a female or John Doe for a male and the date of birth January 1, 1900.
6. If the sex is unknown or the patient does not identify as a male or female, use "U" for unknown as the sex.

See the next page for examples of LongID numbers.

- Subject's first name is Michael, last name is Thompson, DOB: May 9, 1924 the LONGID will be:
  - MI + TH + ON + 05091924 + M = "**MITHON05091924M**"
- Subject's first name is D'Arcy and last name is O'Brien, DOB: 04/15/1932 then the LONGID will be
  - DA + OB + EN + 04151932 + F = "**DAOBEN04151932F**"
- Subject's first name is William, the last name is Ray, DOB: February 23, 1940 then the LONGID will be
  - WI + RA + AY + 02231940 + M = "**WIRAAY02231940M**"
- Subject's first name is Edward, last name is Li, born on December 6, 1946 then the LONGID will be
  - ED + LI + LI + 12061946 + M = "**EDLILI12061946M**"
- Subject's first name is Anthony, last name is De Virgilio, born on September 15, 1956 then the LONGID will be
  - AN + DE + IO + 09151956 + M = "**ANDEIO09151956M**"
- If the first name is Paula, the last name is Ramirez-Martinez, DOB: January 9, 1960 then the LONGID will be
  - PA + RA + EZ + 01091960 + F = **"PARAEZ01091960F"**
- Subject's first name is John, the last name is Jones-Smith, DOB: May 29, 1955 then the LONGID will be
  - JO + JO + TH + 0529195 + M = **"JOJOTH05291955M"**
- Subject's first name is Jane, the last name is Doe, DOB: January 1, 1900 then the LONGID will be
  - JA + DO + OE + 01011900 + F = **"JADOOE01011900F"**
- Subject's first name is John, the last name is Doe, DOB: January 1, 1900 then the LONGID will be
  - JO + DO + OE + 01011900 + M = **"JODOOE01011900M"**
- Subject's sex is unknown, first name is Michael, last name is Thompson, DOB: May 9, 1924 the LONGID will be:
  - MI + TH + ON + 05091924 + U = "**MITHON05091924U**"
- Subject's sex is unknown, first name is Michelle, last name is Thompson, DOB: May 9, 1924 the LONGID will be:
  - MI + TH + ON + 05091924 + U = "**MITHON05091924U**"
- Subject's sex is unknown, first name is Jane, the last name is Doe, DOB: January 1, 1900 then the LONGID will be
  - JA + DO + OE + 01011900 + U = **"JADOOE01011900U"**
- Subject's sex is unknown, first name is John, the last name is Doe, DOB: January 1, 1900 then the LONGID will be
  - JO + DO + OE + 01011900 + U = **"JODOOE01011900U"**

ADDITIONAL INFORMATION:
- Applies to all patients.
- Not applicable should not be used.

DATA SOURCE:
Hospital Patient Registration, Billing information, ED MD care note, History & Physical (H&P), ED Nursing Assessment, ED Nursing Notes, EMS PCR

PRE-HOSPITAL SCREEN:

The pre-hospital screen contains data elements related to the pre-hospital emergency medical services provided to the injured patient.

The OEMST requires the following fields in addition to the standard fields included in the NTDS, TQIP, and ITDX dictionaries. The field data is needed for pre-hospital care performance improvement and the time to definitive care analysis.

Armband Number
EMS Patient Care Report Number (PCR)
EMS Dispatch Date and Time
EMS Scene Arrival Date and Time
EMS Scene Departure Date and Time
EMS Initial Systolic Blood Pressure
EMS Initial Pulse Rate
EMS Initial Respiratory Rate
EMS Initial Oxygen Saturation
EMS Initial GCS – Eye
EMS Initial GCS – Verbal
EMS Initial GCS – Motor
EMS Initial GCS- Total

A R M B A N D   N U M B E R

ITPR TAB NAME: Pre-Hospital

ITPR FIELD LABEL: TR7.4

S**END TO OEMST STATE?** YES

ESO V5 REP WRITER NAME: _____

ALLOW N/A? See additional information below.

ALLOW UNK? See additional information below.

DEFINITION:
The armband identification number is a Georgia System of Care Armband Identification number. The armband number is a 6-digit alpha character long field. The armband is put on the patient by the first care provider the patient has contact with.

ADDITIONAL INFORMATION:
● In ImageTrend Patient Registry, the Armband field must be left blank until the pilot or live use of the armband is IN USE in the facility's EMS region.
● In ESO, the Armband field must be left blank until the pilot or live use of the armband is IN USE in the facility's EMS region.
● The purpose of the armband number is to represent a Key Patient Identification Number that can be used to link multiple local, state, and national databases.
● The DPH Office of EMS Trauma will distribute armbands to providers and provide education on the purpose and use statewide according to the OEMST implementation schedule.
● The armband will be placed on the patient by the first care provider. The first provider may be a public health agency, EMS, police, or hospital ED.
● The armband should remain on the patient from initial contact by the first provider through rehabilitation or the patient's final destination of care.
● The armband number will be useful in local, state, and national emergencies.

DATA SOURCE:
GEMSIS Hospital Hub, EMS Patient Care Report, medical report from a public health agency, EMS, police, or hospital Emergency Department.
https://www.mygemsis.org/hub

EMS PATIENT CARE REPORT NUMBER (PCR)

ITPR TAB NAME: Pre-Hospital

ITPR FIELD LABEL: TR9.11

S**END TO OEMST STATE?** YES

ESO V5 REP WRITER NAME: PHP_PCR_NUMS

ALLOW N/A? See additional information below**.**

ALLOW UNK? See additional information below.

DEFINITION:
EMS Patient Care Report (PCR) Number Response number. The number can be a numerical or alpha-numeric digit number depending on the EMS provider and EMS software used. The number is a unique number assigned to each patient care report per medical encounter. The number will not be duplicated by another EMS provider.

ADDITIONAL INFORMATION:
● Applies to all patients transported by EMS.
● In ESO, the null value "Not Applicable" should be reported to indicate that the patient did not arrive by EMS.
● In ESO, the null value "Not Known/Not Recorded" should be reported if PCR is missing.
● In ESO, the null value "Not Known/Not Recorded" should be reported if PCR is incomplete and/or the number cannot be located.

DATA SOURCE:
GEMSIS Hospital Hub, EMS Patient Care Report
https://www.mygemsis.org/hub

EMS DISPATCH DATE AND TIME

ITPR TAB NAME: Pre-Hospital

ITPR FIELD LABEL: TR9.1, TR9.10

S**END TO OEMST STATE?** YES

ESO V5 REP WRITER NAME: PHP_D_DATES_L and PHP_D_TIMES_L

ALLOW N/A? See additional information below.

ALLOW UNK? See additional information below.

DEFINITION:
The date and time the EMS unit transporting the patient to the hospital was notified by EMS dispatch.

ADDITIONAL INFORMATION:
- Applies to all patients transported by EMS.
- Reported as MM-DD-YYYY and HH:MM (military) for time.
- In ImageTrend Patient Registry, the date and time fields are blank for patients who were NOT transported by EMS to the first facility.
- In ESO, the null value "Not Applicable" is reported for patients who were NOT transported by EMS to the first facility.

DATA SOURCE:
GEMSIS Hospital Hub, EMS Patient Care Report
https://www.mygemsis.org/hub

EMS SCENE ARRIVAL DATE AND TIME

ITPR TAB NAME: Pre-Hospital

ITPR FIELD LABEL: TR9.2, TR9.2.1

SEND TO OEMST STATE? YES

ESO V5 REP WRITER NAME: PHP_A_DATES_L and   PHP_A_TIMES_L

ALLOW N/A? See additional information below.

ALLOW UNK? See additional information below.

DEFINITION:
The date and time the EMS unit transporting the patient to the first hospital arrived on the scene or the patient's location.

ADDITIONAL INFORMATION:
- Reported as MM-DD-YYYY and HH:MM (military) for time.
- This is the Date/Time the transporting unit arrived at the patient's location (arrival is defined as the Date/Time when the vehicle stopped moving).
- In ImageTrend Patient Registry, the date and time fields are blank for patients who were NOT transported by EMS to the first facility.
- In ESO, the null value "Not Applicable" is reported for patients who were NOT transported by EMS.

DATA SOURCE:
GEMSIS Hospital Hub, EMS Patient Care Report
https://www.mygemsis.org/hub

EMS SCENE DEPARTURE DATE AND TIME

ITPR TAB NAME: Pre-Hospital

ITPR FIELD LABEL: TR9.3, Tr9.3.1

S**END TO OEMST STATE?** YES

ESO V5 REP WRITER NAME: PHP_L_DATES and PHP_L_TIMES

ALLOW N/A? See additional information below.

ALLOW UNK? See additional information below.

DEFINITION:
The date and time the EMS unit transporting the patient to the first hospital departed the scene or the patient's location.

ADDITIONAL INFORMATION:
- Reported as MM-DD-YYYY and HH:MM (military) for time.
- This is the date/time on which the unit transporting the patient to the first facility departed from the scene or patient location (departure is defined as date/time when the vehicle started moving).
- In ImageTrend Patient Registry, the date and time fields are blank for patients who were NOT transported by EMS to the first facility.
- In ESO, the null value "Not Applicable" is reported for patients who were NOT transported by EMS.

DATA SOURCE:
GEMSIS Hospital Hub, EMS Patient Care Report
https://www.mygemsis.org/hub

EMS INITIAL SYSTOLIC BLOOD PRESSURE

ITPR TAB NAME: Pre-Hospital

ITPR FIELD LABEL: TR18.67

SEND TO OEMST STATE? YES

ESO V5 REP WRITER NAME: PHAS_SBPS

ALLOW N/A? See additional information below.

ALLOW UNK? See additional information below.

DEFINITION:
Systolic Blood Pressure (SBP) - Maximum blood pressure occurs during contraction of ventricles. An acceptable range is 0 - 300.

ADDITIONAL INFORMATION:
- Direct entry. First recorded SBP by the Prehospital Provider.
- In ImageTrend Patient Registry, if the SBP is not recorded, select the not value symbol and choose from the list of options: Device/Monitor Not Available, Not Recorded, Patient has been intubated, Patient in cardiac arrest, or Patient in Respiratory Arrest. The field will not be open for data on patients who were NOT transported by EMS.
- In ESO, :-4 = Not Recorded, :-5 = Not Available
- In ESO, the null value "Not Applicable" is reported for patients who were NOT transported by EMS.
- Even if Prehospital Provider: Transport Role is Transport from Non-Scene Location, enter ALL pre-hospital vitals.

DATA SOURCE:
GEMSIS Hospital Hub, EMS Patient Care Report
https://www.mygemsis.org/hub

EMS INITIAL PULSE RATE

ITPR TAB NAME: Pre-Hospital

ITPR FIELD LABEL: TR18.69

S**END TO OEMST STATE?** YES

ESO V5 REP WRITER NAME: PHAS_PULSES

ALLOW N/A? See additional information below.

ALLOW UNK? See additional information below.

DEFINITION:
Pulse Rate – Rate of the heartbeat measured in beats per minute. (Do not use the cardiac monitor).

ADDITIONAL INFORMATION:
- Direct entry. First recorded Pulse Rate by the Prehospital Provider.
- In ImageTrend Patient Registry, if the Pulse Rate is not recorded, leave the field blank. The field will not be open for data on patients who were NOT transported by EMS.
- In ESO, :-4 = Not Recorded, :-5 = Not Available
- In ESO, the null value "Not Applicable" is reported for patients who were NOT transported by EMS.
- Even if Prehospital Provider: Transport Role is Transport from Non-Scene Location, enter ALL pre-hospital vitals.

DATA SOURCE:
GEMSIS Hospital Hub, EMS Patient Care Report
https://www.mygemsis.org/hub

EMS INITIAL RESPIRATORY RATE

ITPR TAB NAME: Pre-Hospital

ITPR FIELD LABEL: TR18.70

S**END TO OEMST STATE?** YES

ESO V5 REP WRITER NAME: PHAS_URRS

ALLOW N/A? See additional information below.

ALLOW UNK? See additional information below.

DEFINITION:
The act of breathing measured in spontaneous **unassisted** breaths per minute without the use of mechanical devices.

ADDITIONAL INFORMATION:
● Direct entry. First recorded Unassisted Respiratory Rate by the Prehospital Provider.
● In ImageTrend Patient Registry, if the Respiratory Rate is not recorded, leave the field blank. The field will not be open for data on patients who were NOT transported by EMS.
● In ESO, :-4 = Not Recorded, :-5 = Not Available
● In ESO, the null value "Not Applicable" is reported for patients who were NOT transported by EMS.
● Even if Prehospital Provider: Transport Role is Transport from Non-Scene Location, enter ALL pre-hospital vitals.

DATA SOURCE:
GEMSIS Hospital Hub, EMS Patient Care Report
https://www.mygemsis.org/hub

EMS INITIAL OXYGEN SATURATION

ITPR TAB NAME: Pre-Hospital

ITPR FIELD LABEL: TR18.82

S**END TO OEMST STATE?** YES

ESO V5 REP WRITER NAME: PHAS_SAO2S

ALLOW N/A? See additional information below.

ALLOW UNK? See additional information below.

DEFINITION:
Measure of the amount of oxygen-carrying hemoglobin in the blood relative to the amount of hemoglobin not carrying oxygen.

ADDITIONAL INFORMATION:
- Direct entry. First recorded O2 Oxygen Saturation (SPO2) level.
- In ImageTrend Patient Registry, if the Oxygen Saturation (O2Sat) level is not recorded, leave the field blank. The field will not be open for data on patients who were NOT transported by EMS.
- In ESO, :-4 = Not Recorded, :-5 = Not Available
- In ESO, the null value "Not Applicable" is reported for patients who were NOT transported by EMS.
- Even if Prehospital Provider: Transport Role is Transport from Non-Scene Location, enter ALL pre-hospital vitals.

DATA SOURCE:
GEMSIS Hospital Hub, EMS Patient Care Report
https://www.mygemsis.org/hub

EMS INITIAL GCS – EYE

ITPR TAB NAME: Pre-Hospital

ITPR FIELD LABEL: TR18.60

S**END TO OEMST STATE?** YES

ESO V5 REP WRITER NAME: PHAS_GCS_EOS

ALLOW N/A? See additional information below.

ALLOW UNK? See additional information below.

DEFINITION:
The Glasgow Coma Scale for Eye Opening
4 = Spontaneous, Opens eyes spontaneously
3 = To Voice, Opens eyes in response to verbal stimulation
2 = To Pain, Opens eyes in response to painful stimulation
1 = No Response, No eye movement when assessed

ADDITIONAL INFORMATION:
- Direct entry. First recorded Eye GCS recorded by the Prehospital Provider.
- In ImageTrend Patient Registry, if the initial GCS is not recorded, select Not Applicable or Not Known/Not Recorded. The field will not be open for data on patients who were NOT transported by EMS.
- In ESO, :-4 = Not Recorded, :-5 = Not Available
- In ESO, the null value "Not Applicable" is reported for patients who were NOT transported by EMS.
- Even if Prehospital Provider: Transport Role is Transport from Non-Scene Location, enter ALL pre-hospital vitals.

DATA SOURCE:
GEMSIS Hospital Hub, EMS Patient Care Report
https://www.mygemsis.org/hub

EMS INITIAL GCS - VERBAL

ITPR TAB NAME: Pre-Hospital

ITPR FIELD LABEL: TR18.61.2

S**END TO OEMST STATE?** YES

ESO V5 REP WRITER NAME: PHAS_GCS_VRS

ALLOW N/A? See additional information below.

ALLOW UNK? See additional information below.

DEFINITION:
The Glasgow Coma Scale for Verbal Response
Patient's age is over 2 years.
5 = Oriented
4 = Confused
3 = Inappropriate words
2 = Incomprehensible words or sounds
1 = None, No verbal response

ADDITIONAL INFORMATION:
- Direct entry. First recorded Verbal GCS recorded by the Prehospital Provider.
- Patient's must be over two years.
- In ImageTrend Patient Registry, if the initial GCS is not recorded, select Not Applicable or Not Known/Not Recorded. The field will not be open for data on patients who were NOT transported by EMS.
- In ESO, :-4 = Not Recorded, :-5 = Not Available
- In ESO, the null value "Not Applicable" is reported for patients who were NOT transported by EMS.
- Even if Prehospital Provider: Transport Role is Transport from Non-Scene Location, enter ALL pre-hospital vitals.

DATA SOURCE:
GEMSIS Hospital Hub, EMS Patient Care Report
https://www.mygemsis.org/hub

EMS INTITAL GCS - MOTOR

ITPR TAB NAME: Pre-Hospital

ITPR FIELD LABEL: TR18.62.2

S**END TO OEMST STATE?** YES

ESO V5 REP WRITER NAME: PHAS_GCS_MRS

ALLOW N/A? See additional information below.

ALLOW UNK? See additional information below.

DEFINITION:
The Glasgow Coma Scale for Motor Response
6 = Obeys commands
5 = Localizing pain
4 = Withdraw from pain
3 = Flexion to pain
2 = Extension to pain
1 = None , No motor response

ADDITIONAL INFORMATION:
- Direct entry. First recorded Motor GCS recorded by the Prehospital Provider.
- Patient's must be over two years.
- In ImageTrend Patient Registry, if the initial GCS is not recorded, select Not Applicable or Not Known/Not Recorded. The field will not be open for data on patients who were NOT transported by EMS.
- In ESO, :-4 = Not Recorded, :-5 = Not Available
- In ESO, the null value "Not Applicable" is reported for patients who were NOT transported by EMS.
- Even if Prehospital Provider: Transport Role is Transport from Non-Scene Location, enter ALL pre-hospital vitals.

DATA SOURCE:
GEMSIS Hospital Hub, EMS Patient Care Report
https://www.mygemsis.org/hub

EMS INITIAL GCS TOTAL

ITPR TAB NAME: Pre-Hospital

ITPR FIELD LABEL: TR18.65

S**END TO OEMST STATE?** YES

ESO V5 REP WRITER NAME: PHAS_GCSSC

ALLOW N/A? See additional information below.

ALLOW UNK? See additional information below.

DEFINITION:
The Glasgow Coma Scale Total is the sum of the GCS Eye, Verbal, and Motor scores (number between 3-15).

ADDITIONAL INFORMATION:
- The GCS Total is an auto-calculated field.
- Patient's must be over two years.
- In ImageTrend Patient Registry, if the initial GCS is not recorded, the total will not be automatically calculated by the registry software. Users may enter a manual GCS total if necessary. The field will not be open for data on patients who were NOT transported by EMS.
- In ESO, :-4 = Not Recorded, :-5 = Not Available
- In ESO, the null value "Not Applicable" is reported for patients who were NOT transported by EMS.
- Even if Prehospital Provider: Transport Role is Transport from Non-Scene Location, enter ALL pre-hospital vitals.

DATA SOURCE:
GEMSIS Hospital Hub, EMS Patient Care Report
https://www.mygemsis.org/hub

REFERRING HOSPITAL SCREEN:

The referring hospital screen contains data elements related to the patient's registry number, the referring facility name, mode of arrival, vital signs, procedures, disposition, arrival date and time, and discharge date and time.

The OEMST requires the following fields in addition to the standard fields included in the NTDS, TQIP, and ITDX dictionaries.

Referring Hospital Name
Referring Hospital Arrival Date and Time
Referring Hospital Discharge Date and Time

R E F E R R I N G   H O S P I T A L   N A M E

ITPR TAB NAME: Referring Hospital

ITPR FIELD LABEL: TR33.1

S**END TO OEMST STATE?** YES

ESO V5 REP WRITER NAME: RFS_FACLNK_**AS_TEXT**

ALLOW N/A? See additional information below.

ALLOW UNK? See additional information below.

DEFINITION:
Acute care facility where the patient received care immediately before transfer.

ADDITIONAL INFORMATION:
- Hospital names are listed in the registry program for this field.
- In ImageTrend Patient Registry, if the Referring Hospital name is not recorded in the medical record, leave the field blank.
- In the ESO, the null value "Not Applicable" is used only for patients who were not received from another facility.
- In the ESO, if you are unable to locate a Georgia hospital in the pick list, please contact the State Trauma Registrar or Office of EMS Trauma at trauma@dph.ga.gov. Facilities change names periodically for various reasons and the name may have changed in the registry program. New facilities must be added to the registry program. If a facility is not available as a choice, refer to the GQIP data dictionary for a list of generic Georgia facility identifiers or out of state facility identifiers,

DATA SOURCE:
Referring Hospital Medical Record, GEMSIS Hospital Hub, EMS Patient Care Report https://www.mygemsis.org/hub , ER nursing notes, ER MD documentation, History & Physical (H&P), Consult note, Outside facility documentation.

REFERRING HOSPITAL ARRIVAL DATE AND TIME

ITPR TAB NAME: Referring Hospital

ITPR FIELD LABEL: TR33.2, TR33.3

SEND TO OEMST STATE? YES

ESO V5 REP WRITER NAME: RFS_A_DATE and RFS_A_TIME

ALLOW N/A? See additional information below.

ALLOW UNK? See additional information below.

DEFINITION:
The date and time the patient arrived at the Acute care facility where the patient received care immediately before transfer.

ADDITIONAL INFORMATION:
- Report as MM-DD-YYYY and HH:MM (military) for time.
- This is the date/time on which the patient arrived at the referring facility prior to being transferred to your facility.
- In ImageTrend Patient Registry, if the Referring Hospital Admit date and time are not recorded in the medical record, leave the field blank.
- In ESO, the null value "Not Applicable" is used only for patients who were not received from another facility.

DATA SOURCE:
Referring Hospital Medical Record, GEMSIS Hospital Hub, EMS Patient Care Report https://www.mygemsis.org/hub , ER nursing notes, ER MD documentation, History & Physical (H&P), Consult note, Outside facility documentation.
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REFERRING HOSPITAL DISCHARGE DATE AND TIME

ITPR TAB NAME: Referring Hospital

ITPR FIELD LABEL: TR33.30, TR33.31

S**END TO OEMST STATE?** YES

ESO V5 REP WRITER NAME: RFS_DIS_DATE and RFS_DIS_TIME

ALLOW N/A? See additional information below.

ALLOW UNK? See additional information below.

DEFINITION:
The date and time the patient departed from the Acute care facility where the patient received care immediately before transfer.

ADDITIONAL INFORMATION:
- Report as MM-DD-YYYY and HH:MM (military) for time.
- This is the date/time on which the patient departed from the referring facility prior to being transferred to your facility.
- In ImageTrend Patient Registry, if the Referring Hospital Discharge date and time are not recorded in the medical record, leave the field blank.
- In ESO, the null value "Not Applicable" is used only for patients who were not received from another facility.

DATA SOURCE:
Referring Hospital Medical Record, GEMSIS Hospital Hub, EMS Patient Care Report https://www.mygemsis.org/hub , ER nursing notes, ER MD documentation, History & Physical (H&P), Consult note, Outside facility documentation.

GEORGIA DEPARTMENT OF PUBLIC HEALTH