North Dakota Trauma Registry
Data Dictionary

North Dakota Department of Health
Division of Emergency Medical Services and Trauma

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INTRODUCTION

Traumatic injury is the leading cause of death in Americans 44 years of age and younger. It results in the loss of more productive work years than both cancer and heart disease combined. The loss of productivity and health care costs associated with traumatic injuries accounts for 100 billion dollars annually.

A trauma registry is a disease-specific data collection of uniform data elements that describe an injury event, demographics, prehospital information, diagnosis, care, outcomes, and costs of treatment for injured patients. The trauma registry is used for improving trauma patient care, evaluating the adequacy of the system, and assessing compliance of various regions within the state trauma system.

Hospital-based trauma registries are the key source for providing much of the research and quality assessment work that has provided clinicians and policy makers the necessary information on methods to optimize the care for the injured patients. The North Dakota Data Dictionary was revised using the National Data Dictionary published by the National Trauma Registry of the American College of Surgeons, with modifications made specific to the North Dakota Trauma Registry. This document is intended to serve as a guide for trauma program managers and trauma registrars completing the required information. It provides a brief summary and definition of every data point that is used within the North Dakota Trauma Registry.

HIPAA Statement

The federal law known as "HIPAA" stands for the Health Insurance Portability and Accountability Act of 1996. This law was passed to promote more standardization and efficiency in the health care industry. HIPAA directly impacts health care providers who transmit any health care information in electronic form in connection with a covered transaction, as well as indirectly impacting their business partners.

There are four parts to HIPAA's Administrative Simplification:

1. Electronic transactions and code sets standards requirements

   National standards (for formats and data content) are the foundation of this requirement. HIPAA requires every provider who does business electronically to use the same health care transactions, code sets and identifiers. Transactions and code sets standards requirements were created to give the health care industry a common language to make it easier to transmit information electronically.

2. Privacy requirements

   The privacy requirements limit the release of patient protected health information without the patient's knowledge and consent beyond that required for patient care. Patient's personal information must be more securely guarded and more carefully handled when conducting the business of health care.

3. Security requirements

   The security regulation outlines the minimum administrative, technical and physical safeguards required to prevent unauthorized access to protected health care information. The general requirements of the security rule include:

   - Ensuring confidentiality, integrity and availability of electronic protected health information that a covered entity creates, receives, maintains or transmits;
   - Protecting against reasonably anticipated threats or hazards to the security or integrity of information;
   - Protecting against reasonably anticipated uses and disclosures not permitted by privacy rules;
   - ensuring compliance by the workforce.

4. National identifier requirements

   HIPAA requires health care providers, health plans and employers to have standard national numbers that identify them on standard transactions.

The HIPAA law applies directly to three specific groups referred to as "covered entities". The three groups include Health Care Providers who transmit any health information in electronic form in connection with a transaction for which standards requirements have been adopted; Health Plans; and Health Care Clearinghouses.

The NDDoH has been designated as a hybrid entity. A hybrid entity is a single legal covered entity whose business activities include both covered and noncovered functions. The NDDoH's covered functions are performed by the Division of Microbiology, however, the Department has chosen to operate under "best practices" as a single covered entity, and all divisions and programs of the Department operate under the privacy rule.

PREFACE

1. All times are to be registered in military time.
   When entering times, you will be using the 24-hour clock. You do not need to enter a delimiter in between the hours and minutes. If you do not have minutes, you can simply enter the hour.

   For Example: 1313 will be converted to 13:13
   13 will be converted to 13:00

2. You may enter the date without dashes or slashes.

   For example: 101090 will be converted to 10/10/90
   9/9/90 will be converted to 09/09/90
   9/9 will be converted to 09/09/90 (it will use the current year)

3. All temperatures are to be charted in Centigrade. See Appendix G for conversion chart or use the formula C= (F-32) x 5/9 (see example below) or a conversion calculator for Fahrenheit to Celsius can be found at www.metric-conversions.org or Appendix G.

   For example: 98.6 – 32 = 66.6 x 5/9 = 37

4. All weights are to be charted in Kilograms. Pounds can be converted to kilograms by dividing the pounds by 2.2. A pound to kilogram conversion calculator can be found at www.metric-conversions.org or Appendix H.

   For example 200 lbs. divided by 2.2 = 90.9 Kilograms

5. If the patient is brought to a facility **WITHOUT** being evaluated or treated at another facility, select patient arrived from the scene, regardless of the delay between time of injury and time of presentation to the hospital.

6. Vague descriptions like "blunt trauma" or "closed head injury" are not specific diagnoses and cannot be coded. **PAIN** of any kind is a symptom and can't be coded.

7. When coding, if there is any question about the severity of an injury, code conservatively (i.e. least severe code in that injury category). You should not code injuries that are possible, probable, impression of, or rule out.

8. Loss of Consciousness - must be disregarded unless witnessed by EMS or medical personnel.

9. Penetrating Injuries – if deeper structures are injured, code the injury under the appropriate organ or vessel. (i.e. liver laceration). Always code the deepest structure injured. **DO NOT** code the overlying skin injury, as entry and exit wounds are in the score of the deepest structure.

10. Always use the highest level of reliability when abstracting data and resolving contradictory information.

a. Highest to lowest reliability
    i. Medical examiner report
    ii. Hospital/medical records
        Autopsy report
        Operative report
        Radiology reports
        Nursing or ICU notes
        Physician progress notes
        ED record
        Discharge summary
        Face sheet

    iii. Field Records
        Ambulance patient care report
        Police report

    iv. Bystander

    v. Patient

Null Values

11. Unknown means the information is appropriate to this patient, but is not known or reasonably obtainable.

12. Not is used for fields when the desired data is a laboratory test result, but the test was not ordered.

13. NA (Not Applicable) means the information for a field does not apply to this patient (i.e. pediatric trauma scores on adults) or the information does not make sense for this field.

Definitions

14. **Pediatric** - refers to patients 14 years old or younger. (referenced from *Resources for Optimal Care of the Injured Patient 2006*).

15. **Readmission** – admission to the hospital within 72 hours of previous hospital discharge because of missed diagnosis or complications from original injuries (not late effects of). (i.e. infected wound, subacute or chronic subdural)

16. **Foreign Body** - patients with diagnoses of foreign bodies (ICD9 930-939) are required to be included in the registry only if there is a resulting injury. In these cases, the resulting injury should be coded.

17. **Transfers** – patients sent from one acute care hospital to another acute care hospital. If patients are sent by private vehicle (non-ambulance) they are **NOT** considered transfers for the purpose of inclusion, but may meet other inclusion criteria.

18. **Farm Related Injury** – a non-household injury incurred on the farm (ICD9-849.1) by any farmer, farm worker, farm family member, or other individual; or any non-farm injury incurred by a farmer, farm worker, or farm family member in the course of handling, producing, processing, or warehousing farm commodities.
    - Indicates injury meets the farm-related injury definition. Injury may not necessarily be work-related or directly related to the farm.
    - **Farm Related *Includes***:
        - Tractor roll-over
        - Caught in power take-off
        - Unloading grain wagon
        - Getting caught in a barbed wire fence on the farm
        - Injury occurring from repair or maintenance of farm related equipment on farm or in field
        - Falling or slipping on farm (not including in house or immediate yard surrounding house)
        - Being bitten by, struck by, or fallen on by an animal on the farm. (does not including leisure riding of horses)
    - **Farm Related *Excludes***:
        - Injuries incurred by farmers or non-farmers who are on farms for wide variety of purposes (i.e. visiting, hunting, swimming, or other recreation activities)
        - Farmhouse or immediate yard surrounding house
        - Fall from play or home maintenance/repair (i.e. hanging Christmas lights, painting, cleaning gutters, etc.)

19. **Work Related** – indicates if a patient was at work or working when *trauma event* occurred. *Trauma event* is defined as the injury-producing event or illness-producing exposure (i.e. chemicals) that precipitated the patient's traumatic injury.

    a. Yes - the patient was working when trauma occurred
    b. No - the patient was not working when trauma event occurred
    c. NA - child, unemployed, retiree
    d. Unk - either inadequate or no documentation

    Work related comprises manual or professional work for salary, bonus, other types of income or duties for which one would not normally gain an income. Use your best judgment in determining whether the patient was working or not.

    This data element may be used to gather information about the incidence of work-related injuries and may be useful in the planning and development of work place injury prevention.

    - **Work Related *Includes*:**
        - Apprentice or vocational activities
        - Breaks on employer premises (in hallway, rest room, cafeteria, storage area)
        - Traveling on business, including to/from customer/business contacts
        - Work for pay or compensation at home

- Working in family business, including family farm (activity should clearly be related to profit-oriented business)
- Working on, arriving at, or leaving employer parking lot
- Volunteer work and domestic duties such as caring for children and relatives, cleaning, cooking, gardening, and household maintenance

Work Related *Excludes:*

- Commuting to or from work site
- Engaged in recreational activities on employer controlled facilities
- Homemaker working at homemaking activities
- Illicit work (drug trafficking)
- Learning activities (attending school or lesson, undergoing education)
- Operating vehicle (personal or commercial) for non-work purposes
- Student engaged in school activities
- Visiting for non-work purposes, not on official business
- Working of self-non profit (lawn mowing, repair roof, hobby or recreation)

20. **Glasgow Coma Scale**

GCS is always documented based on assessment of the best side with the best response. GCS scores range from 3 (the lowest/poorest score possible) to 15 (highest/best score possible). The GCS has infant/pediatric adaptations.
Assessment qualifiers that potentially affect the assessment outcome such as intubation, sedation, paralytics and combinations of these factors are addressed in the field name PARALYTICS.

21. **Leave No Blank Fields**

Please DO NOT leave fields blank! If fields are left blank they cause errors in data reporting. Fill all fields in with the most appropriate response. See Null Values definitions.

ND Trauma Registry Quarterly Submission Schedule

Discharge Date	Submission Due Date
January 1 – March 31	June 30
April 1 - June 30	September 30
July 1 – September 30	December 31
October 1 – December 31	March 31

North Dakota Trauma
Inclusion/Exclusion Criteria
Patients to be downloaded to the State

INCLUDED:

- ❖ All Trauma Codes/Alerts or any level of trauma team activation (regardless of ICD9)
- ❖ International Classification of Diseases, Ninth Revision (ICD9) codes of 800-959.9 and 991.0-3 (frostbite) and one or more of the following:
    - Deaths that are registered to the hospital
    - Inter-facility transfers by ambulance that are admitted to the receiving hospital
    - Transfers out by ambulance
    - Patients admitted for > 48 hours
    - Patients admitted from ED to ICU

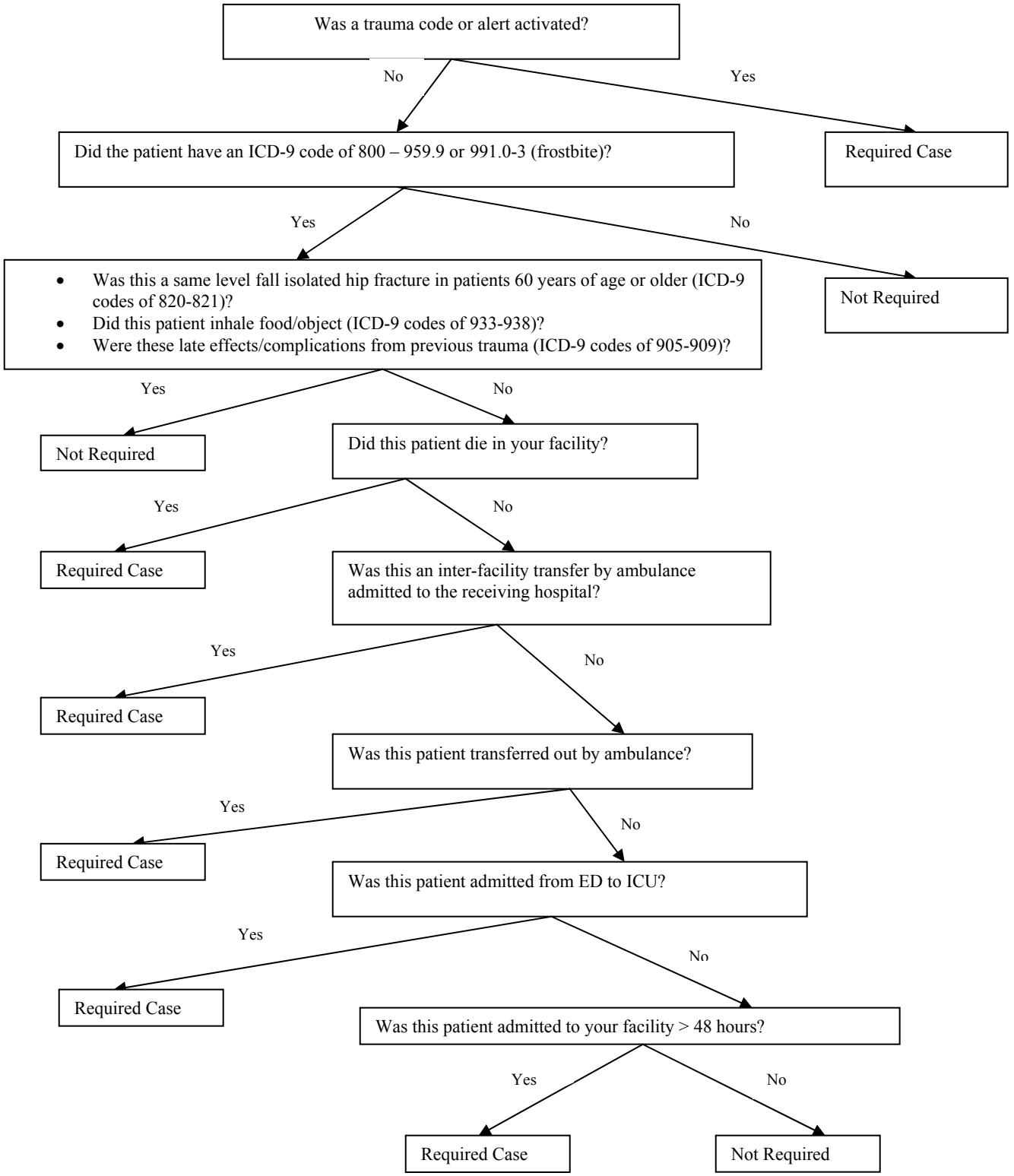
EXCLUDED:

Same level falls with isolated hip fractures in patients 60 years of age or older (ICD9 codes of 820 -821)
Inhalation of food/object (ICD9 codes of 933-938)
Late effects/complications (ICD9 codes of 905-909)

These are excluded from the trauma registry, unless they are a trauma code/alert or they have an additional injury code.

Poisoning (ICD9 codes of 960-989.9)
Hanging (ICD9 codes of 994.7)
Adult and child maltreatment (ICD9 codes of 995.5-995.8)
Drowning (ICD9 codes of 994.1)

ND STATE TRAUMA REGISTRY INCLUSION CRITERIA
(Revised 2007)



DEMOGRAPHICS

Age

Field Name: AGE_NUMBER

Description: This is the patient's age; if under 3 weeks old this is the number of days, if under 3 months old this is the number of weeks, if under 3 years old this is the number of months, or if older this is the number of years. This is a defaulted field. This default has been created from data you have previously entered. If, on the data entry screen, you push the ENTER key, the computer will automatically fill in the default for you. If you do not want to accept the default, you may enter the correct information.

Age Units

Field Name: AGE_UNITS

Description: This is the patient's age; if under 3 weeks old this is the number of days, if under 3 months old this is the number of weeks, if under 3 years old this is the number of months, or if older this is the number of years. This is a defaulted field. This default has been created from data you have previously entered. If, on the data entry screen, you push the ENTER key, the computer will automatically fill in the default for you. If you do not want to accept the default, you may enter the correct information.

Alternate Residence

Field Name: HOME

Description: This is used for patients without a home zip code.

HOME Homeless (lack of a residential address, includes shelters, missions and vehicles)
UND Undocumented citizen
MI Migrant (temporary or seasonal worker with no local residential address)
FV Foreign visitor (includes Canadian visitors)
NA Not Applicable
NOT Not Documented
UNK Unknown

Date of Birth

Field Name: DOB

Description: This is the patient's date of birth. If DOB is available, the Age_Number and Age_Unit fields will default.

City of Residence

Field Name: RES_CITY

Description: This is the patient's city of residence, not the location of the incident.

County of Residence

Field Name: RES_COUNTY_STATE

Description: This is the patient's county of residence, not the county of the incidence.

Country of Residence

Field Name: **RES_COUNTRY_STATE**

Description: This is the patient's country of residence, not the country of the incident.

Institution Number

Field Name: **INSTITUTE_NO**

Description: This is the institution number for the hospital - a hospital-specific identification number.

Through the INSTITUTE file, a hospital may use several Institute Numbers for different purposes: multi-hospital data collection, inpatient vs. outpatient data, etc. Each of these numbers can point to the same State Report Code, so that data aggregation or downloading is accurate.

The Institute Number is the second part of the two part key (Trauma Number is the first) that individualizes each patient record.

Race

Field Name: **RACE**

Description: This is the patient's race. Refer to the RACE file.

A	Asian	PI	Pacific Islander or Native Hawaiian
B	Black or African American	NA	Not Applicable
I	American Indian	NOT	Not Documented
O	Other	UNK	Unknown
W	White		

Ethnicity

Filed Name: **ETHNICITY**

Description: This is the patient's ethnicity referring to Hispanic.

H	Hispanic or Latino
N	Non-Hispanic or Non-Latino
NA	Not Applicable
NOT	Not Documented
UNK	Unknown

Sex

Field Name: **SEX**

Description: This is the patient's sex: 'M' for male, 'F' for female, or 'O' for other.

M	Male	NOT	Not Documented
F	Female	UNK	Unknown
O	Other		

This is standard demographic information used in epidemiologic analysis. This can be useful in targeting injury prevention efforts.

State of Residence

Field Name: **RES_STATE**

Description: This is the patient's state of residence, not the location of the incident.

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EVENT

E-Code, Geographic Place of Occurrence

Field Name: **LOCATION**

Description: This is the ICD9 'E' geographic location code. Refer to LOCATIONS file. Enter in the Location Code of the injury. These entries are the E849 location codes.

Place of occurrence is used to denote the place the injury occurred.

E849.0 HOME

Private: Garage
Apartment
Boarding house
Farm house
Home premises
House (residential)
Non-institutional place of residence
Swimming pool in private house or garden
Garden
Home
Walk
Yard of home
Driveway

Excludes: home under construction and not yet occupied or an institutional place of residence.

E849.1 FARM

Farm: buildings, land under cultivation

Excludes farm house and home premises of farm

E849.2 MINE & QUARRY

Gravel pit
Sand pit
Tunnel under construction

E849.3 INDUSTRIAL PLACE AND PREMISES

Building under construction
Dockyard
Dry Dock
Factory buildings and premises
Garage (place of work)
Industrial yard
Loading platform of factory or store
Plant industrial
Railway yard
Shop (place of work)
Warehouse
Workhouse

E849.4 PLACE OF RECREATION AND SPORT

Amusement park
Baseball field
Basketball court
Beach resort
Cricket ground
Fives court
Football field
Golf course
Gymnasium
Hockey rink
Holiday camp
Ice palace
Lake resort
Mountain resort
Public park
Racecourse
Resort NOS
Riding school
Rifle range
Seashore resort
Skating rink
Sports Palace
Stadium
Swimming pool (public)
Tennis court
Vacation resort
Playground including school playground (**excludes** that in private house or garden)

E849.5 STREET AND HIGHWAY

Maintained public roadways and their right of ways

E849.6 PUBLIC BUILDING

Building (includes adjacent grounds) used by the general public or by a particular group of the public, such as:

Airport
Bank
Café
Casino
Church
Cinema
Clubhouse
Courthouse
Dance hall
Garage building (for car storage)
Hotel
Market (grocery or other commodity)
Movie house
Music hall
Nightclub
Office
Office building
Opera house
Post office
Public hall
Radio broadcasting station
Restaurant
School (state, public or private)
Shop (commercial)
Station (bus or railway)
Store
Theater

Excludes home garage, industrial building or workplace

E849.7 RESIDENTIAL INSTITUTION

Children's home
Dormitory
Hospital
Jail
Assisted Living
Nursing Home
Orphanage
Prison
Reform school

E849.8 OTHER SPECIFIED PLACES

Beach (NOS)
Canal
Caravan site (NOS)
Derelict house
Desert
Dock
Forest
Harbor
Hill
Lake (NOS)
Mountain
Parking lot
Parking place
Pond or pool (natural)
Prairie (grassland, pasture)
Public place (NOS)
Railway line
Reservoir
River
Sea
Seashore (NOS)
Stream
Swamp
Trailer court
Woods
Sidewalk

E849.9 UNSPECIFIED PLACE

If location is not specifically listed above, then use unspecified place.

This information is useful in determining locations where injuries are occurring targeting injury prevention.

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External Cause of Injury

Field Name: **CAUSE_E_CODES**

Description: These are the ICD9 E codes for cause. 'E' is not required. This describes the event or circumstance, which is responsible for the primary injury. The computer will assist you in determining the codes if you need assistance. The first E Code selected should be associated with the primary cause of injury. These codes should be utilized when presenting or publishing any data on injury causes.

NOTE: The < F2 > key will activate the code assistance feature. The validity of the E Code is checked against the ECODES file on the ICD9 menu, the ICD-9-CM book, or call for assistance (see page 1)

This data element permits classification of environmental events, circumstances, and the conditions as the cause of injury and other adverse effects.

Cause Code

Field Name: **CAUSE_CODE**

Description: This is the code for the cause or mechanism of injury. Some codes may prompt you to answer specific questions about this cause of injury. This field uses the CAUSE File. Each entry in the CAUSE file is related to appropriate E Codes. If you add a new CAUSE code, be sure to specify the E Code groups. Since only one value can be entered, select the cause code that is most relevant to patient injury. For example, if a person was attacked by a dog and sustained moderate bites, and then fell 20 feet resulting in a severe head injury, then select the code that caused the most significant trauma; in this case the fall.

NOTE: Do not use this field for reporting purposes – use cause ECODES – as this field is not all inclusive.

AIR (i.e. airplane, hang-gliders, helicopters, ultra lights, hot air balloons, and skydivers)
ANIMAL (i.e. struck by animal, animal bites, injured by animal, stepped/crushed/mauled by animal)
ASSAULT (physical blunt attack)
ATV (definition of 3,4,5,6,7,8 "wheelers")
BIKE (bicycle, tricycle)
BIOHAZ (intentional or non-intentional exposure to potentially hazardous materials, i.e. a mass casualty incident)
BURN (thermal, chemical, electrical, includes frostbite)
FALL (falls)
GSW (gunshot wounds)
MACH (machinery incidents)
MC (motorcycle)
MV (motor vehicle auto and truck, i.e. cars, pickup truck, SUV, van, bus, semi, etc.)
OTHER (any other)
OV (i.e. animals being ridden, horse buggy, golf cart, go-cart, etc.)
PED (pedestrian)
SKATE (i.e. ice skates, roller skates, roller blades, and skateboard)
SKI (snow ski, snowboard, sledding)
SNOWMOBILE
SPORT (organized football, soccer etc)
STAB (point force or piercing injuries, i.e. knife, nail, tine.)
WATER (water transport and activities)
UNK (Unknown)

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Country of Injury

Field Name: **INJURY_COUNTRY**

Description: The country where the patient was found or to which the unit responded, or best approximation.

County and State of Injury

Field Name: **COUNTY_STATE**

Description: This is the county where the injury occurred. (Use 'out of state' code if injury occurred outside of North Dakota. If injury county is not known use 'UNK')

This provides useful data to assist with public heath interventions, identify populations at risk, focus injury prevention programs, and assess transport issues.

State of Injury

Field Name: **INJURY_ST**

Description: This is the state code where the injury occurred. (If injury State is not known use 'UNK')

This provides useful data to assist with public heath interventions, identify populations at risk, focus injury prevention programs, and assess transport issues.

Nearest Town to Injury

Field Name: **NEAREST_TOWN**

Description: This is the town nearest to where the injury occurred

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Injury Date

Field Name: **INJURY_DATE**

Description: This is the date the injury occurred. UNK is an acceptable value.

The date may be entered without dashes or slashes.

Injury Time

Field Name: **INJURY_TIME**

Description: This is the time of injury. It is entered using the 24-hour clock. "UNK" should be used if an accurate time is not known.

When entering in times, you will be using the 24-hour clock. You do not need to enter delimiters between the hours and minutes. If you do not have minutes, you can simply enter the hour.

Injury Location Zip Code

Field Name: **INJURY_ZIP**

Description: This is the Zip Code of the location where the injury occurred. It can be entered as 5 or 9 digits. If you are entering a 9-digit code, no dashes should be entered.

Example: 801231212 would be converted to 80123-1212

Protective Devices

Field Name: **PROTECTIVE_DEVICES**

Description: Enter in the codes for the protective devices used by the patient at the time of the injury. (May select both lab belt and shoulder belt.)

Patterns

AIR	airbag present
CHILD	child restraint
EYE	goggles, shields, and safety glasses
GEAR	protective nonclothing gear (i.e. shin guards)
HEL	helmet (i.e. bikes, sports, riding horse, hardhat)
NONE	none
OTHER	other
PAD	protective padding or clothing (i.e. shoes, gloves)
PFD	personal flotation device
SEAT	lab belt only
SH	shoulder belt only
NA	Not Applicable
NOT	Not Documented
UNK	Unknown

Child-Specific Restraint

Field Name: **CHILD_RESTRAINT**

Description: Protective child restraint devices used by the patient at the time of injury.

INFANT	Infant Child Seat (rear facing)
CHILD	Child Car Seat (forward facing)
BOOSTER	Child Booster Seat
SEAT	Unspecified Type
NA	Not Applicable
NOT	Not Documented
UNK	Unknown

NOTES:_____

Airbag Deployment

Field Name: **AIRBAG**

Description: Indication of an airbag deployment during a motor vehicle crash.

N	No Airbag Deployment
F	Airbag Deployed Front
S	Airbag Deployed Side
O	Airbag Deployed Other (Knee, Airbelt, Curtain)
AIR	Airbag Deployed Side Airbag Deployed Unspecified Type
NA	Not Applicable
ND	Not Documented
UNK	Unknown

Risk Factors – Comorbidity

Field Name: **RISK_TYPE**

Description: These are the risk factor codes. Risk factors must be documented in medical record. See appendix L for definitions.

Patterns

ANGINA	within the past 30 days	MI	within the past 6 months
ANOM	congenital anomolies	NONE	no known comorbid conditions
ASCITES	within the past 30 days	OBESE	if stated in medical record
CHEMO	within the past 30 days	PREG	pregnancy
CHF	congestive heart failure	PREMAT	prematurity
COAG	bleeding disorder**	PVD	revascularization or amputation related to peripheral vascular disease
COPD	severe COPD		
CVA	CVA with neurological deficit	RESP	respiratory disease, not COPD
DIALYSIS	currently on or receiving	SMOKER	currently smoking
DM	diabetes mellitus	STEROIDS	on steroids
DNR	Do Not Resuscitate, No CPR	SUB	abuse of legal or illegal substance
ETOH	Alcoholism **	VARICES	esophageal varices
HEALTH	Functional health status	NA	Not Applicable
HTN	hypertension and on medication	NOT	Not Documented
IMPAIRED	impaired sensorium	UNK	Unknown
METS	disseminated cancer		

****Note**: See appendix L for definition.

NOTES:_____

Triage Codes

Field Name: **TRIAGE_CODES**

Description: These are the triage codes.

AMPUT	amputation proximal to wrist and ankle
CHEST	flail chest
DEFORM	major auto deformity > 20 inches (documented or photographed by EMS)
EJECT	ejection from automobile
FALL	fall > 20 feet
FATAL	death in same passenger compartment
FX	>= 2 proximal/shaft long-bone fractures (includes: humerus and femur)
GCS	glasgow < 14
HYPO	systolic bloodpressure < 90
IMPACT	auto-ped or auto-bike > 5 mph impact
INTRUS	intrusion in passenger compartment > 12 inches (documented or photographed by EMS)
LIMB	paralysis
MCYCLE	motorcycle crash > 20 mph or separation of bike rider
NONE	none
OTHER	other triage code not listed (i.e. snowmobile/ATV rider separation, etc.)
PEDES	pedestrian thrown or run over
PELVFX	pelvic fractures
PEN	penetrating injury head, neck, torso, extremities proximal to elbow and knee
RESP	respiratory rate < 10, >29
ROLL	rollover
SKULL	open or depressed skull fracture
SPEED	initial speed > 40 mph
TRAP	extrication > 20 minutes
BURN	thermal, chemical, electrical

Type of Trauma

Field Name: **TRAUMA_TYPE**

Description: This is the trauma type and the predominant injury type.

BURN	burns
B	blunt injury: diffuse force, as in most MVC's
P	penetrating injury: point force Examples: Bullet/shell/BB Fork tine Knife Impaled object (i.e. nail)
Other	Not blunt, penetrating or burn

NOTE: If any of these causes a laceration/amputation type injury, then the trauma type would change to blunt. Example: Saw blade penetrating the skin, but creating a laceration or an amputation.

This is used to determine percentages of each type of trauma.

Work Related Accident

Field Name: **INDUST_ACC**

Description: This is whether the accident is work related or not.

N	not work related	NOT	Not Documented
Y	work related	UNK	Unknown
NA	Not Applicable		

Occupation

Field Name: **OCCUPATION**

Description: This is the patient's occupation.

ARC	architecture and engineering occupations
BUS	business and financial operations occupations
COM	community and social service occupations
COMP	computer and mathematical occupations
CONS	construction and extrication occupations
DISABLED	disabled
ED	education, training and library occupations
ENT	art, design, entertainment, sports and media occupations
FARM	farming, fishing and forestry occupations
FOOD	food preparation and serving related occupations
HEALTH	health care practitioners and technical occupations **
HS	health care support occupations **
LEGAL	legal occupations
MAIN	building and grounds cleaning and maintenance occupations
MAN	management occupations (i.e. person who owns a business including a family farm)
MILITARY	military-specific occupations
OFFICE	office and administrative support occupations
PER	personal care and service occupations
PRO	protective service occupations (i.e. police, fire etc.)
PROD	production occupations
REP	installation, maintenance and repair occupations
RETIRED	retired
SALE	sales and related occupations
SCI	life, physical and social science occupations
STUDENT	student, full time college
TRANS	transportation and material moving occupations
UNEMP	unemployed
NA	Not Applicable
NOT	Not Documented
UNK	Unknown

****Note:** See appendix K for definition**.**

Type of Industry

Field Name: **INDUSTRY_TYPE**

Description: The industry type is useful for the study of work related injuries. This is the industry classification associated with the patient's work environment/employment.

AG	agriculture, forestry and fishing
CONS	construction
EDU	education and health services
FINANCE	finance, insurance and real estate)
GOV	government
INF	information service
LEISURE	leisure and hospitality
MAN	manufacturing
NR	natural resources and mining
OTHER	other services
PROF	professional and business services
RETAIL	retail trade
UTIL	transportation and public utilities
WHOLE	wholesale trade
NA	unemployed, child, not applicable or not work related
NOT	not documented
UNK	unknown industry for work related injury

REFERRING

Hospital Transfer

Field Name: **HOSPITAL_TRANSFER**

Description: This is whether the patient was transferred from another acute care hospital (excluding swing or long term care beds). This field is required for all patients.

Y	Yes, this was a hospital transfer
N	No, this was not a hospital transfer
NA	Not Applicable
NOT	Not Documented
UNK	Unknown

Referring Intubated

Field Name: **INTUBATED**

Description: This is whether the patient was intubated when the GCS was done (i.e. endotracheal tube, trach, cricothyroidotmy, laryngeal mask airway (LMA), and combitube.

Was the patient intubated at the time this set of vital signs was taken?

Y	Yes
N	No
NA	Not Applicable
NOT	Not Documented
UNK	Unknown

Referring Arrival Date

Field Name: **REFERRING_ARRIVAL_DATE**

Description: This is the date the patient arrived at the referring hospital.

Referring Arrival Time

Field Name: **REFERRING_ARRIVAL_TIME**

Description: This is the time the patient arrived at the referring hospital. The 24-hour clock must be used.

Referring Discharge Date

Field Name: **REFERRING_DISCHARGE_DATE**

Description: This is the date the patient was discharged from the referring hospital.

Referring Discharge Time

Field Name: **REFERRING_DISCHARGE_TIME**

Description: This is the time the patient was discharged from the referring hospital. The 24-hour Clock must be used.

Referring Glasgow Coma Score – Eye Response

Field Name: **EYE_OPENING**

Description: This is the Glasgow Coma Scale Eye from the best side (the best response).

Glasgow coma scale Eye for adults and pediatrics.

1 None (Includes patients who are intubated, sedated, etc.)
2 Pain ******
3 Voice
4 Spontaneous
NA Not Applicable
NOT Not Documented
UNK Unknown (i.e. both eyes swollen shut due to injury)

This field is used to calculate the GCS and revised trauma score (RTS) from the scene, ED, and one hour-post hospital arrival, and is then used to determine other symbolic fields like the patient's probability of survival.

****** Pain = noxious physical stimuli that is intended to cause discomfort. This includes sternal rub, pinching the trapezius muscle, pressure on the nail beds, or pressure to the supra orbital ridge.

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Referring Glasgow Coma Score – Motor Response

Field Name: **MOTOR_RESPONSE**

Description: These are the Glasgow Coma Scale motor values from the best side.

Glasgow Coma Scale Motor Response:

Adult:

6	Obeys commands
5	Localizing pain
4	Withdraw from pain
3	Flexion to pain
2	Extension to pain**
1	No motor response (includes patients who are intubated, sedated, chemically paralyzed etc.)
NOT	Not Documented
NA	Not Applicable
UNK	Not known or reasonably obtainable

Pediatric (≤ 2 years):

6	Appropriate response to stimulation
5	Localizing pain
4	Withdrawal from pain
3	Flexion to pain
2	Extension to pain**
1	No motor response (includes patients who are intubated, sedated, etc.)
NOT	Not Documented
NA	Not Applicable
UNK	Not known or reasonably obtainable

** Pain = noxious physical stimuli that is intended to cause discomfort. This includes sternal rub, pinching the trapezius muscle, pressure on the nail beds, or pressure to the supra orbital ridge.

Referring Initial GCS Total

Field Name: **GLASGOW**

Description: First recorded Glasgow Coma Scale score (total) in the referral setting.

Referring GCS Assessment Qualifiers

Field Name: **PARALYTICS**

Description: Documentation of factors potentially affecting the first assessment of the GCS by agencies and facilities.

S	Patient Chemically Sedated
O	Obstruction to the Patient's Eye
I	Patient Intubated
IO	Patient intubated and obstruction to eye
SI	Patient chemically sedated and intubated
SO	Patient chemically sedated and obstruction to eye
SIO	Patient chemically sedated, intubated, and obstruction to eye
NA	Not Applicable
NOT	Not Documented
UNK	Unknown

Referring Hospital Code

Field Name: **FROM_HOSPITAL**

Description: This is the facility code from which the patient transferred (referral hospital). This is the acute hospital from which the patient came.

- A patient sent from a private doctor's office, clinic, nursing home, ambulatory surgery center, etc. that is *not* an acute care facility is considered a transport directly from the scene—*not* a referral.
- A patient sent by private vehicle or other non-EMS means is not a "transfer" for the purposes of the Trauma Registry.

This is useful in determining referral patterns.

Referring Hospital Pulse

Field Name: **PULSE**

Description: This is the first palpable pulse rate expressed as a number per minute (ideally taken within the first 15 minutes). If asystolic prior to intervention, record as "0".

If the range of 0-300 is not high enough it can be adjusted by going into the codes, patterns, pulse.

Referring Hospital Respiratory Rate

Field Name: **RESP_RATE**

Description: This is the first unassisted patient respiratory rate expressed in numbers per minute (ideally taken in the first 15 minutes). If patient is apneic prior to intervention record "0".

Enter the respiratory rate from 0 to 72.

NA	Not Applicable
NOT	Not Documented
UNK	Unknown

Referring Hospital Respiratory Assistance

Field Name: **ASSISTING**

Description: Determination of respiratory assistance associated with the initial referral hospital respiratory rate.

Y	Yes - assisted respiratory rate, bagged
N	No - unassisted respiratory rate
NA	Not Applicable
NOT	Not Documented
UNK	Unknown

Referring Hospital Oxygen Saturation Level

Field Name: **OXIMETRY**

Description: The oxygen saturation expressed as a percentage.

NA	Not Applicable
NOT	Not Documented
UNK	Unknown

Referring Hospital Supplemental Oxygen

Field Name: **VS_O2**

Description: Determination of the presence of supplemental oxygen during assessment of the initial oxygen saturation level.

Y Yes - Supplemental oxygen
N No - No supplemental oxygen
NA Not Applicable
NOT Not Documented
UNK Unknown

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Referring Procedure Code

Field Name: **PROCEDURE_CODE**

Description: This is the 'easy' code for this procedure. This field also contains procedure codes that may have been entered earlier during scene or ED segments, so that you can see all procedures that have been done.

NOTE: for the procedure "EASY" code, if your facility has a procedure that you want to track, that is not on the "EASY" list, you can enter them under the "OTHER" code (if not done in OR, but are done in the ED), or under "OR" code (if done in the OR) and OTHERNON (for procedures done outside the ED and not in OR)
You will then need to look through the ICD9 pick list in it's entirety to find the code that best fits the procedure done. If unable to find a proper code match, then a 99.99 may be placed in the box.

Examples:
An EKG would be OTHER with an ICD9 code 89.52 if in the ED and OTHERNON if done on the floor.
An anterior cervical spinal fusion done in the operating room would be an "OR" easy code with an ICD of 81.02.

Data from this field cannot be used for any published data. Specific ICD9 procedure codes must be used for any published data.

NOTE: See Appendix I for assistance.

Referring Procedure Episode

Field Name: **PROCEDURE_EPISODE**

Description: This is the episode indicator for the "operative" procedure in the OR.
Use this number to identify groups of procedures done at the same time in the OR. For Example: All procedures done in the first visit to the OR would be given a number 1 for episode.

NA	Non operative procedure
1	First operative episode
2	Second operative episode
3	Third operative episode
4	Fourth operative episode
5	Fifth operative episode
6	Sixth operative episode
UNK	Unknown

Referring Procedure Location

Field Name: **PROCEDURE_LOCATION_CODE**

Description: This is the unit location where the procedure was done. This indicates whether procedures were done at the scene, in ED, in the OR, in radiology, etc.

Refer to NURSING.STATION file.

Referring Procedure Start Date

Field Name: **PROCEDURE_START_DATE**

Description: These are the dates the procedures were started. For therapeutic procedures that imply a longer interval (such as ventilation or intubation), this date is the start of the therapy.

Referring Procedure Start Time

Field Name: **PROCEDURE_START_TIME**

Description: These are the times the procedures were started. For OR procedures, this refers to the actual beginning, not the time the patient was prepped or brought into the room prior to incision. For therapeutic procedures that imply a longer interval (such as ventilation or intubation), this time is the start of the therapy. The 24-hour clock will be used.

Referring Vital Sign Location Code

Field Name: **VS_LOCATION_CODE**

Description: This is where the Vital Signs were measured.
Reference file: Patterns, VS_LOCATION_CODE

NOTES:

EMS SCENE/TRANSPORT

Agency/EMS Arrival Date

Field Name: **ARRIVAL_DATE**

Description: These are the dates of EMS arrival on the scene, referral hospital, or point of intercepts depending on the leg of transport defined.

This is useful in determining scene times and transport times.

Agency/EMS Arrival Time

Field Name: **ARRIVAL_TIME**

Description: These are the times of EMS arrival on the scene, referral hospital, or point of intercepts depending on the leg of transport defined. (i.e. the time the responding vehicle stopped moving)

This may be useful in determining scene times and transport times. The 24-hour clock will be used.

Agency/EMS Departure Date

Field Name: **DEPARTURE_DATE**

Description: These are the dates the agencies departed from the scene, with the patient, for any destination of the EMS transport. This can be from a scene, referral hospital, intercept point, or definitive care hospital.

Agency/EMS Departure Time

Field Name: **DEPARTURE_TIME**

Description: These are the times the agencies departed from the scene, with the patient, for any destination of the EMS transport. This can be from a scene, referral hospital, intercept point, or definitive care hospital. You will be using the 24-hour clock.

Agency/EMS Notification Date

Field Name: **NOTIFY_DATE**

Description: These are the dates the agencies were notified/dispatched.

Agency/EMS Notification Time

Field Name: **NOTIFY_TIME**

Description: These are the times the agencies were notified/dispatched. You will be using the 24-hour clock.

Agency/EMS Glasgow Coma Score – Eye Response

Field Name: **EYE_OPENING**

Description: These are the GCS Eye from the best side (the best response).

Glasgow coma scale Eye for adults and pediatrics.

1	None (includes patients who are intubated, sedated, etc.)
2	Pain **
3	Voice
4	Spontaneous
NA	Not Applicable
NOT	Not Documented
UNK	Unknown (i.e. both eyes swollen shut due to injury)

This field is used to calculate the GCS and revised trauma score (RTS) from the scene, ED and one hour-post hospital arrival. It is then used to determine other symbolic fields like the patient's probability of survival.

** Pain = noxious physical stimuli that is intended to cause discomfort. This includes sternal rub, pinching the trapezius muscle, pressure on the nail beds, or pressure to the supra orbital ridge.

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Agency/EMS Glasgow Coma Score – Motor Response

Field Name: **MOTOR_RESPONSE**

Description: These are the GCS motor values from the best side.

Glasgow Coma Scale Motor Response:

Adult:

6	Obeys commands
5	Localizing pain
4	Withdraw from pain
3	Flexion to pain
2	Extension to pain**
1	No motor response (includes patients who are intubated, sedated, chemically paralyzed etc.)
NA	Not Applicable
NOT	Not Documented
UNK	Not known or reasonably obtainable

Pediatric (≤ 2 years):

6	Appropriate response to stimulation
5	Localizing pain
4	Withdrawal from pain
3	Flexion to pain
2	Extension to pain**
1	No motor response (includes patients who are intubated, sedated, etc.)
NA	Not Applicable
NOT	Not Documented
UNK	Not known or reasonably obtainable

** Pain = noxious physical stimuli that is intended to cause discomfort. This includes sternal rub, pinching the trapezius muscle, pressure on the nail beds, or pressure to the supra orbital ridge.

- - - -

Agency/EMS Pulse

Field Name: **PULSE**

Description: These are the pulse rates from 0 to 300. The first palpable pulse rate expressed as a number per minute (ideally taken within the first 15 minutes). If asystolic prior to intervention, record as "0".

If this range is not high enough it can be adjusted by going into the codes, patterns, pulse.

Agency/EMS Respiratory Rate

Field Name: **RESP_RATE**

Description: These are the respiratory rates, this is the first unassisted patient respiratory rate expressed in numbers per minute (ideally taken within the first 15 minutes). If patient is apneic prior to intervention record as "0".

Enter the respiratory rate from 0 to 72.

NA	Not Applicable
NOT	Not Documented
UNK	Unknown

Agency/EMS Respiratory Assistance

Field Name: **ASSISTING**

Description: Determination of respiratory assistance associated with the initial referral hospital respiratory rate.

Y	Yes - assisted respiratory rate, bagged
N	No - unassisted respiratory rate
NA	Not Applicable
NOT	Not Documented
UNK	Unknown

Agency/EMS Oxygen Saturation Level

Field Name: **OXIMETRY**

Description: The oxygen saturation expressed as a percentage.

UNK	Unknown

Agency/EMS Supplemental Oxygen

Field Name: **VS_O2**

Description: Determination of the presence of supplemental oxygen during assessment of the initial oxygen saturation level.

Y	Yes - Supplemental oxygen
N	No - No supplemental oxygen
NA	Not Applicable
NOT	Not Documented
UNK	Unknown

Agency/EMS Systolic Blood Pressure

Field Name: SYS_BP

Description: These are the systolic blood pressures initially assessed and recorded as a number (ideally taken within the first 15 minutes). If the patient is in full arrest before initial intervention record as "0".

You may have a number range check. Go to the pattern code, pattern, Systolic B/P.

NA	Not Applicable
NOT	Not Documented
UNK	Unknown

Initial Transportation Method

Field Name: TRANS

Description: The mode of transport delivering the patient to your hospital. This is not the specific agency that transported the patient. The specific information about the agency can be kept in the 'Agency' (Transport/Scene) section.

ALS	ALS ambulance
AMB	Ambulance (use if unknown ALS/BLS)
BLS	BLS ambulance
FIX	Fixed wing
HELI	Helicopter
NA	Not applicable
OTHER	Other (includes: patients that were brought from nursing home, swing bed, or nursing floor on a cart or in a wheelchair, and commercial (non-EMS) transportation such as taxi).
POL	Police vehicle
POV	Private vehicle
UNK	Unknown
WALK	Walk in
NOT	Not Documented

Interfacility Transport Mode

Field Name: TRANSFER_MODE

Description: This is the means of transport from the referral facility to your facility. This field should be NA if the patient was transported from the scene to your hospital. It should only be filled out if the patient came from another facility. This is not the specific agency that transported the patient. The specific information about the agency can be kept in the 'Agency' (Transport/Scene) section.

Pattern Information:
Patterns

ALS	ALS ambulance
AMB	Ambulance (use if unknown ALS/BLS)
BLS	BLS ambulance
FIX	Fixed wing
HELI	Helicopter
NA	Not applicable
OTHER	Other (includes: patients that were brought from nursing home, swing bed, nursing floor on a cart or in a wheelchair, or commercial (non EMS) transportation such as taxi)
POL	Police vehicle
POV	Private vehicle
UNK	Unknown
WALK	Walk in
NOT	Not Documented

Origin of Transport

Field Name: **TRANSPORT_ORIGIN**

Description: This field is used to sort multiple transports for the same patient. If there are multiple scenes, the times and dates will be used to sort the order.

SCENE
REF
NA

Agency/EMS Intubated

Field Name: **INTUBATED**

Description: This is whether the patient was intubated when the GCS was done. (i.e. endotracheal tube, trach, cricothyroidotomy, laryngeal mask airway(LMA), and combitube)

Was the patient intubated at the time this set of vital signs was taken?

Y	Yes
N	No
NA	Not Applicable
NOT	Not Documented
UNK	Unknown

Agency/EMS Transporting Code

Field Name: **TRANSPORT_AGENCY_CODE**

Description: This is the transporting agency code. Refer to AGENCY code file.
This can be prehospital or interfacility.

Agency/EMS Transporting Record Number

Field Name: **TRANSPORT_RECORD_NO**

Description: This is the patient's transport record number (transport ID number).

This can assist in merging of EMS records.

Agency/EMS Vital Sign Location Code

Field Name: **VS_LOCATION_CODE**

Description: This is where the vital signs were measured.
Reference file: VS_LOCATION_CODE

NOTES:_____

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EMERGENCY DEPARTMENT

Alcohol Level

Field Name: **ETOH**

Description: This is the value of the blood alcohol. This is based on mg/dls.

This is the value tested at your facility.

Note: Blood alcohol level in **grams**/dl (example: .08) is to be multiplied by 1000, to get **mg/**dl (example: 80)

When test not ordered, NOT is an appropriate response.

This can be useful in determining the role of ETOH in trauma. One must also consider the rate of testing done at your facility.

Alcohol Use Indicator

Field Name: **EV**

Description: Use of alcohol by the patient.

N	not suspected, not tested	NA	Not Applicable
Y	confirmed by test, trace levels, or by admission	NOT	Not Documented
NC	No - Confirmed by test	UNK	if alcohol use is suspected but not confirmed by test
YL	Yes - Confirmed by test beyond legal limit		

ED Admission Date

Field Name: **ED_ADM_DATE**

Description: This is the ED admission date. If the patient was a direct admission the value would be "NA".

Note: If the patient was seen in the ED this should be the same date as the Hospital Arrival Date.

This information is necessary to determine ED length of stay (LOS).

ED Admission Time

Field Name: **ED_ADM_TIME**

Description: This is the ED Admission time. If the patient was a direct admission the value would be "NA". Use the 24-hour Clock.

Note: If the patient was seen in the ED this should be the same time as the Hospital Arrival Time.

This information is necessary to determine ED length of stay (LOS).

NOTES:_____

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ED Airway

Field Name: **AIRWAY**

Description: This is the code for the type of airway used in your ED. Record the highest level of airway utilized during the ED stay.

BM	Bag and mask
CMT	Combi tube
CRIC	Cricothyroidotomy
EOA	Esophageal obturator
NASAL	Nasal airway/nasal trumpet
NC	Nasal cannula or face mask
NETT	Nasal ETT
NONE	No airway assistance face mask, nasal cannula
OETT	Oral ETT
ORAL	Oral airway
OTHER	Other (i.e. laryngeal mask airway (LMA))
TRACH	Tracheostomy

ED Discharge Date

Field Name: **ED_DC_DATE**

Description: This is the ED discharge date. If the patient was a direct admission – then value would be "NA".

Note: This is the date the patient left the ED to go: home, to another facility, nursing unit (in house), or morgue (death).

This information is necessary to determine ED length of stay (LOS).

ED Discharge Time

Field Name: **ED_DC_TIME**

Description: This is the ED discharge time. If the patient was a direct admission the value would be "NA". Use the 24-hour clock.

Note: This is the time the patient left the ED to go: home, to another facility, nursing unit (in -house), or morgue (death).

This information is necessary to determine ED length of stay (LOS).

NOTES:_____

ED Disposition Code

Field Name: **ED_DISPOSITION_CODE**

Description: This is the disposition of the patient when leaving the ED. This field MUST be completed. If the patient is a direct admission enter NA for not applicable.

D	Death in ED after resuscitation attempt, failure to respond after 15 minutes)
DE	Died in Ed < 15 minutes of CPR
DOA	Dead on Arrival in ED

Brief in-hospital CPR or interventions do not preclude DOA designation.

- A patient arriving at the emergency department without signs of life (absence of pulse, spontaneous movement, respiratory effort, or effective cardiac electrical activity) and pulse

And

Adult

- Blunt trauma; prehospital CPR >5 min; or
- Penetrating trauma to the abdomen, chest, head, neck, groin; prehospital CPR >15 min

Child (age < 13 yrs)

- Blunt/ penetrating trauma, prehospital CPR >15 min. without spontaneous pulse

AMA	Against medical advice
FLOOR	General floor bed
HH	Home health
HOME	Private dwelling, hotel
ICU	Intensive Care Unit
OBS	Observation
OR	Operating room
OTHER	Other (i.e. palliative care, psychiatric care, Triumph Hospital Central Dakotas, DETOX center, shelter or other residential institution, jail, or, mental health)
TELE	Telemetry/step-down
TRANS	Transferred to another acute care facility
NA	Not Applicable
NOT	Not Documented
UNK	Unknown

This is necessary in determining length of stay (LOS) and cost per day.

NOTES:_____

ED Glasgow Coma Score – Eye Response

Field Name: **EYE_OPENING**

Description: These are the GCS Eye from the best side (the best response).

Glasgow coma scale Eye for adults and pediatrics.

1	None (includes patients who are intubated, sedated, etc.)
2	Pain **
3	Voice
4	Spontaneous
NA	Not Applicable
NOT	Not Documented
UNK	Unknown (i.e. both eyes swollen shut due to injury)

This field is used to calculate the GCS and revised trauma score (RTS) from the scene, ED and one hour-post hospital arrival, and is then used to determine other symbolic fields like the patient's probability of survival.

** Pain = noxious physical stimuli that is intended to cause discomfort. This includes sternal rub, pinching the trapezius muscle, pressure on the nail beds, or pressure to the supra orbital ridge.

ED Glasgow Coma Scale – Verbal Response

Field Name: **VERBAL_RESPONSE**

Description: Glasgow Coma Scale Verbal Response

Adults:

5	Oriented
4	Confused
3	Inappropriate words
2	Incomprehensible words (or sounds)
1	None (no verbal response) (includes patients who are intubated, sedated, chemically paralyzed etc.)
NA	Not Applicable
NOT	Not Documented
UNK	Unknown

Pediatric (≤ 2years):

5	Smiles, oriented to sounds, follows objects, interacts
4	Cries but is consolable, inappropriate interactions
3	Inconsistently consolable, moaning
2	Inconsolable, agitated
1	No vocal response (includes patients who are intubated, sedated, chemically paralyzed etc.)
NA	Not Applicable
NOT	Not Documented
UNK	Unknown

GCS elements are useful in determining baselines and recovery outcomes in head injury along with ISS. It is also helpful in determining if head injury treatment follows established standards.

NOTES:_____

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ED Glasgow Coma Score – Motor Response

Field Name: **MOTOR_RESPONSE**

Description: These are the GCS motor values from the best side.

Glasgow Coma Scale Motor Response:

Adult:

6	Obeys commands
5	Localizing pain
4	Withdraw from pain
3	Flexion to pain
2	Extension to pain**
1	No motor response (includes patients who are intubated, sedated, chemically paralyzed etc.)
NA	Not Applicable
NOT	Not Documented
UNK	Unknown

Pediatric (≤ 2 years):

6	Appropriate response to stimulation
5	Localizing pain
4	Withdrawal from pain
3	Flexion to pain
2	Extension to pain**
1	No motor response (includes patients who are intubated, sedated, etc.)
UNK	Not known or reasonably obtainable
NA	Not Applicable
NOT	Not Documented

** Pain = noxious physical stimuli that is intended to cause discomfort. This includes sternal rub, pinching the trapezius muscle, pressure on the nail beds, or pressure to the supra orbital ridge.

ED Initial GCS Total

Field Name: **GLASCOW**

Description: First recorded GCS score.

ED GCS Assessment Qualifiers

Field Name: **PARALYTICS**

Description: Documentation of factors potentially affecting the first assessment of the GCS by agencies and facilities.

S	Patient Chemically Sedated
O	Obstruction to the Patient's Eye
I	Patient Intubated
IO	Patient intubated and obstruction to eye
SI	Patient chemically sedated and intubated
SO	Patient chemically sedated and obstruction to eye
SIO	Patient chemically sedated, intubated, and obstruction to eye
NA	Not Applicable
NOT	Not Documented
UNK	Unknown

ED Pulse

Field Name: **PULSE**

Description: These are the pulse rates from 0 to 300. The first palpable pulse rate expressed as a number per minute (ideally within the first 15 minutes). If asystolic prior to intervention, record as "0".

If this range is not high enough it can be adjusted by going into codes, patterns, pulse

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ED Respiratory Rate

Field Name: **RESP_RATE**

Description: These are the respiratory rates; this is the first assisted (bagged) or unassisted patient respiratory rate expressed in numbers per minute (ideally within the first 15 minutes). If the patient is apneic prior to intervention record as "0".

Enter the respiratory rate from 0 to 72.

NA	Not applicable
NOT	Not Documented
UNK	Unknown

ED Respiratory Assistance

Field Name: **ASSISTING**

Description: Determination of respiratory assistance.

Y	Yes - assisted respiratory rate, bagged
N	No - unassisted respiratory rate
NA	Not Applicable
NOT	Not Documented
UNK	Unknown

ED Oxygen Saturation Level

Field Name: **OXIMETRY**

Description: The oxygen saturation expressed as a percentage.

NA	Not Applicable
NOT	Not Documented
UNK	Unknown

ED Supplemental Oxygen

Field Name: **VS_O2**

Description: Determination of the presence of supplemental oxygen during assessment of the initial oxygen saturation level.

Y	Yes - Supplemental oxygen
N	No - No supplemental oxygen
NA	Not Applicable
NOT	Not Documented
UNK	Unknown

ED Systolic Blood Pressure

Field Name: SYS_BP

Description: These are the systolic blood pressures initially assessed and recorded as a number (ideally within the first 15 minutes). If the patient is in full arrest before initial intervention record as "0".

You may have a number range check. Go to the pattern code file.

NA Not applicable (i.e. CPR in progress)
NOT Not Documented
UNK Unknown

ED Temperature

Field Name: TEMPS

Description: The temperature recorded in Celsius in the ED (ideally recorded within 15 minutes of arrival).

NOTE: See preface or appendix G for conversion chart.

UNK Unknown
NOT Not Documented

ED Intubated

Field Name: INTUBATED

Description: This is whether the patient was intubated when the GCS was done. (i.e. endotracheal tube, trach, cricothyroidotomy, laryngeal mask airway(LMA), and combitube).

Was the patient intubated at the time this set of vital signs was taken?
Y Yes
N No
NA Not Applicable
NOT Not Documented
UNK Unknown

ED Procedure Code

Field Name: PROCEDURE_CODE

Description: This is the 'easy' code for this procedure. This field also contains procedure codes that may have been entered earlier during scene or ED segments, so you can see all procedures that have been done.

NOTE: for the procedure "EASY" code, if your facility has a procedure that you want to track, that is not on the "EASY" list, you can enter them under the "OTHER" code (if not done in OR, but are done in the ED), or under "OR" code (if done in the OR) and OTHERNON (for procedures done outside the ED and not in OR).
You will then need to look through the ICD9 pick list in it's entirety to find the code that best fits the procedure done. If unable to find a proper code match, then a 99.99 may be placed in the box.

Examples:
An EKG would be OTHER with an ICD9 code 89.52 if in the ED and OTHERNON if done on the floor.
An anterior cervical spinal fusion done in the operating room would be an "OR" easy code with an ICD of 81.02.

Data from this field cannot be used for any published data. Specific ICD9 procedure codes must be used for any published data.

Note: Appendix I can assist with this field.

ED Procedure Episode

Field Name: **PROCEDURE_EPISODE**

Description: This is the episode indicator for the "operative" procedure in the OR.
Use this number to identify groups of procedures done at the same time in the OR. For Example: All procedures done in the first visit to the OR would be given a number 1 for episode.

NA	Non operative procedure
1	First operative episode
2	Second operative episode
3	Third operative episode
4	Fourth operative episode
5	Fifth operative episode
6	Sixth operative episode
UNK	Unknown

ED Procedure ICD9

Field Name: **PROCEDURE_ICD9**

Description: These are the ICD9 codes for the procedures. Operative and/or essential procedures are defined as procedures performed in the operating room, emergency department, or intensive care unit that were essential to the diagnoses, stabilization, or treatment of the patient's specific injuries.

Repeated diagnostic procedures (e.g., repeated CT scan) are not required (record only the first procedure). You may list serial procedures like CT's by date in the description area if you choose.

NOTE: Refer to Appendix J or I, the ICD-9-CM book, or call for assistance (see page 1).

ED Procedure Location

Field Name: **PROCEDURE_LOCATION_CODE**

Description: This is the unit location where the procedure was done. This indicates whether procedures were done at the scene, in ED, in the OR, in radiology, etc.

Refer to NURSING.STATION file.

ED Procedure Start Date

Field Name: **PROCEDURE_START_DATE**

Description: These are the dates the procedures were started. For therapeutic procedures that imply a longer interval, (such as ventilation or intubation) this date is the start of the therapy.

ED Procedure Start Time

Field Name: **PROCEDURE_START_TIME**

Description: These are the times the procedures were started. For OR procedures, this refers to the actual beginning, not the time the patient was prepped or brought into the room prior to incision. For therapeutic procedures that imply a longer interval, (such as ventilation or intubation) this time is the start of the therapy. Use the 24-hour clock.

Toxicology

Field Name: **TOX**

Description: This is the toxicology (drug screen) results, substances that were found during drug screening or by admission.

NOTE: If the patient is on, or has received prescription medications (morphine, benzodiazepines, methadone etc) prior to screening, do not chart positive results.

AMPH	Amphetamines	NEG	Negative
BARB	Barbiturates	OPIA	Opiates
BEN	Benzodiazepines	PCP	PCP
COC	Cocaine	TRI	Tricyclic antidepressants
ETH	Ethanol Alcohol	OTHER	Paint, cough syrup, hairspray etc.
LSD	LSD	NA	Not Applicable
MARI	Marijuana derivatives	NOT	Not Documented
METH	Methamphetamine	UNK	Unknown

Drug Use Indicator

Field Name: **TOX_TEST**

Description: Use of drugs by the patient

N	Not tested or not suspected	NA	Not Applicable
NC	No - confirmed by test	NOT	Not Documented
YP	Yes - confirmed by test (prescription drug)	UNK	Unknown
YI	Yes - confirmed by test (illegal use drug)		

Trauma Activation

Field Name: **TEAM_ACTIVATED_BY**

Description: This is when the trauma team code/alert was requested.

PRE	Prior to arrival
ON	On arrival or within 5 minutes, includes walk-ins and private vehicles
LATE	Greater than five minutes, includes walk-ins and private vehicles
N	Not activated when criteria were met
NA	Not applicable

Trauma Team Readiness

Field Name: **TEAM_NOTIFIED**

Description: The Team Response was < 20 minutes from patient arrival.

Y	Yes – Arrival < 20 minutes
N	No – Arrival > 20 minutes
NA	Not Applicable

ED Vital Sign Location Code

Field Name: **VS_LOCATION_CODE**

Description: This is where the vital signs were measured.

Reference file: Patterns, VS_LOCATION _CODE

INPATIENT COURSE

Admission Type

Field Name: **ADMIT_TYPE**

Description: This is the admit type. This identifies/classifies the type of admission.

E Admitted through ED
D Direct admission (ED length of stay will = NA)
T Seen in ED then transferred out by EMS
R Seen in ED then released/ discharged, or referred elsewhere by POV
X Died in ED or DOA

- - - -

Diagnosis

Field Name: **DIAGNOSES**

Description: These are the anatomic diagnoses. This is an Optional field and is not required by the State of ND.

Narratives should mention the severity of the injury, such as comminuted fracture vs. compound fracture and identify the body regions as to:

Head/neck
Face
Chest
Abdomen/pelvic contents
Extremities/pelvic girdle
External (skin)

If you have selected an ICD9 code there will be a default diagnosis description. This description is from the INJURY.CODES file and may not be as detailed as you wish. You do not have to accept the default.

Text fields can be searched for reports. Keep in mind, however, that it is faster to search "short" text fields. We encourage you to use short concise verbiage, and to use abbreviations that are accepted at your facility.

This data should NOT be used for any published reports, as it is not all-inclusive. Actual AIS codes should be used.

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Other Transport Modes

Field Name: **TRANS_OTHER**

Description: These are all of the modes of transportation used (except the mode that delivered the patient to your door, that is captured under Interfacility Transport Mode) during any part of the patients hospital stay.

Patterns

ALS	ALS ambulance
AMB	Ambulance (use if unknown ALS/BLS)
BLS	BLS ambulance
FIX	Fixed wing
HELI	Helicopter
NA	Not applicable
OTHER	Other (includes: patients that were brought from nursing home, swing bed, nursing floor on a cart or in a wheelchair, or commercial (non EMS) transportation such as taxi)
POL	Police vehicle
POV	Private vehicle
UNK	Unknown
WALK	Walk in

Inpatient ICD9 Diagnosis

Field Name: **ICD9**

Description: This is the ICD9 code for the diagnosis. You may enter as many diagnostic/injury codes as needed. Only the injury codes will have an AIS value and be included in the ISS.

Press < F2 > for assistance in selecting your ICD9s from the file INJURY.CODE that is a subset of the ICD9 file. The codes in the INJURY.CODES file are from the 800 - 959 range and have been described to help in determining the AIS.

There are several ways of looking up ICD9 codes:

- SEARCH
- BODY AREA
- KEY WORD TABLES
- TYPE IN KEYWORDS

Try these different ways of ICD9 searching to find the most comfortable for you.

NOTE: Helpful link to make sure the current ICD9 codes are utilized can be found at http://icd9cm.chrisendres.com/ , or by using the ICD-9-CM book, or calling for assistance (see page 1)

ICU Length of Stay

Field Name: **TOTAL_DAYS_ICU**

Description: This is the total number of days spent in ICU units.

NOTE: Any stay ≤ 24 hours in the ICU, SCCU, etc., is to be counted as 1 day. It will be considered day 2, 24 hours after the ICU, SCCU, and ETC. admission Time/Date value.

This information is useful in determining ICU costs for trauma. You may want to correlate with ISS or level of trauma code called to assist in determining appropriateness of the level of trauma code called.

Direct Admission Glasgow Coma Score – Eye Response

Field Name: **EYE_OPENING**

Description: These are the GCS Eye from the best side (the best response).

Glasgow coma scale Eye for adults and pediatrics.

1 None (includes patients who are intubated, sedated, etc.)
2 Pain **
3 Voice
4 Spontaneous
NA Not Applicable
NOT Not Documented
UNK Unknown (i.e. both eyes swollen shut due to injury)

This field is used to calculate the GCS and revised trauma score (RTS) from the scene, ED and one hour-post hospital arrival, and is then used to determine other symbolic fields like the patient's probability of survival.

** Pain = noxious physical stimuli that is intended to cause discomfort. This includes sternal rub, pinching the trapezius muscle, pressure on the nail beds, or pressure to the supra orbital ridge.

Direct Admission Glasgow Coma Scale – Verbal Response

Field Name: **VERBAL_RESPONSE**

Description: Glasgow Coma Scale Verbal Response

Adults:

5 Oriented
4 Confused
3 Inappropriate words
2 Incomprehensible words (or sounds)
1 None (no verbal response) (includes patients who are intubated, sedated, chemically paralyzed etc.)
NA Not Applicable
NOT Not Documented
UNK Unknown

Pediatric (≤ 2years):

5 Smiles, oriented to sounds, follows objects, interacts
4 Cries, but is consolable, inappropriate interactions
3 Inconsistently consolable, moaning
2 Inconsolable, agitated
1 No vocal response (includes patients who are intubated, sedated, chemically paralyzed etc.)
NA Not Applicable
NOT Not Documented
UNK Unknown

GCS elements are useful in determining baselines and recovery outcomes in head injury along with ISS. It is also helpful in determining if head injury treatment follows established standards.

Direct Admission Glasgow Coma Score – Motor Response

Field Name: **MOTOR_RESPONSE**

Description: These are the GCS motor values from the best side.

Glasgow Coma Scale Motor Response:

Adult:

6	Obeys commands
5	Localizing pain
4	Withdraw from pain
3	Flexion to pain
2	Extension to pain**
1	No motor response (includes patients who are intubated, sedated, chemically paralyzed etc.)
NA	Not Applicable
NOT	Not Documented
UNK	Unknown

Pediatric (≤ 2 years):

6	Appropriate response to stimulation
5	Localizing pain
4	Withdrawal from pain
3	Flexion to pain
2	Extension to pain**
1	No motor response (includes patients who are intubated, sedated, etc.)
NA	Not Applicable
NOT	Not Documented
UNK	Unknown

** Pain = noxious physical stimuli that is intended to cause discomfort. This includes sternal rub, pinching the trapezius muscle, pressure on the nail beds, or pressure to the supra orbital ridge.

Direct Admission Initial GCS Total

Field Name: **GLASGOW**

Description: First recorded GCS score.

Direct Admission GCS Assessment Qualifiers

Field Name: **PARALYTICS**

Description: Documentation of factors potentially affecting the first assessment of the GCS by agencies and facilities.

S	Patient Chemically Sedated
O	Obstruction to the Patient's Eye
I	Patient Intubated
IO	Patient intubated and obstruction to eye
SI	Patient chemically sedated and intubated
SO	Patient chemically sedated and obstruction to eye
SIO	Patient chemically sedated, intubated, and obstruction to eye
NA	Not Applicable
NOT	Not Documented
UNK	Unknown

Direct Admission Pulse

Field Name: PULSE

Description: These are the pulse rates from 0 to 300. The first palpable pulse rate expressed as a number per minute (ideally within the first 15 minutes). If asystolic prior to intervention, record as "0".

If this range is not high enough it can be adjusted by going into the codes, patterns, pulse.

Direct Admission Respiratory Rate

Field Name: RESP_RATE

Description: These are the respiratory rates, this is the first unassisted patient respiratory rate expressed in numbers per minute (ideally within the first 15 minutes). If patient is apneic prior to intervention record "0".

Enter the respiratory rate from 0 to 72.

NA	Not Applicable
NOT	Not Documented
UNK	Unknown

Direct Admission Respiratory Assistance

Field Name: ASSISTING

Description: Determination of respiratory assistance associated with the respiratory rate.

Y	Yes - assisted respiratory rate, bagged
N	No - unassisted respiratory rate
NA	Not Applicable
NOT	Not Documented
UNK	Unknown

Direct Admission Oxygen Saturation Level

Field Name: OXIMETRY

Description: The oxygen saturation expressed as a percentage

Direct Admission Supplemental Oxygen

Field Name: VS_O2

Description: Determination of the presence of supplemental oxygen during assessment of the initial oxygen saturation level.

Y	Yes - Supplemental oxygen
N	No - No supplemental oxygen
NA	Not Applicable
NOT	Not Documented
UNK	Unknown

Direct Admission Systolic Blood Pressure

Field Name: **SYS_BP**

Description: These are the systolic blood pressures initially assessed and recorded as a number (ideally within in the first 15 minutes). If the patient is in full arrest before initial intervention record as "0".

If you want you can have a number range check. Go to the codes, patterns, Systolic B/P.

NA	Not Applicable (i.e. CPR in progress)
NOT	Not Documented
UNK	Unknown

Direct Admission Temperature

Field Name: **TEMPS**

Description: The temperature recorded, ideally within 15 minutes of arrival.

NOTE: See preface or appendix G for conversion chart.

Injury Severity Score (ISS)

Field Name: **ISS**

Description: This field is a calculated injury severity score (ISS 1 – 75). This field will be defaulted when you use your enter key. This will also automatically be updated if you add diagnoses to your list.

NOTE: The AIS Score should not be assigned on a subjective basis, but as the result of coding the full 7-digit AIS Score through the current AIS coding book, or by calling for assistance (see page 1).

Length of Stay (LOS)

Field Name: **LOS**

Description: This is the patient's length of stay (LOS) in days.

NOTE: If the patient died in ED, was an ED stay only, or an ED transfer out, then this field should have a 0. If the patient leaves ED to go to OR/FLOOR/UNIT etc. (becomes an inpatient) then it will automatically be a 1. It will be considered day 2, 24 hours after the Hospital Arrival Time/Date value.

This information is useful in determining cost per day and correlation between injury severity and LOS

NOTES:_____

Inpatient Procedure Code

Field Name: **PROCEDURE_CODE**

Description: This is the 'easy' code for this procedure. This field also contains procedure codes that may have been entered earlier during scene or ED segments, so you can see all procedures that have been done.

NOTE: For the procedure "EASY" code, if your facility has a procedure that you want to track, that is not on the "EASY" list, you can enter them under the "OTHER" code (if not done in OR, but are done in the ED), or under "OR" code (if done in the OR) and OTHERNON (for procedures done outside the ED and not in OR)
You will then need to look through the ICD9 pick list in it's entirety to find the code that best fits the procedure done. If unable to find a proper code match, then a 99.99 may be placed in the box.

Examples:
An EKG would be OTHER with an ICD9 code 89.52 if in the ED and OTHERNON if done on the floor.
An anterior cervical spinal fusion done in the operating room would be an "OR" easy code with an ICD of 81.02.

Data from this field cannot be used for any published data. Specific ICD9 procedure codes must be used for any published data.

NOTE: Refer to Appendix I to assist with this field.

- - - -

Inpatient Procedure Location

Field Name: **PROCEDURE_LOCATION_CODE**

Description: This is the unit location where the procedure was done. This indicates whether procedures were done at the scene, ED, OR, radiology, etc.

Refer to NURSING.STATION file.

Inpatient Procedure Start Date

Field Name: **PROCEDURE_START_DATE**

Description: These are the dates the procedures were started. For therapeutic procedures that imply a longer interval, (such as ventilation or intubation) this date is the start of the therapy.

Inpatient Procedure Start Time

Field Name: **PROCEDURE_START_TIME**

Description: These are the times the procedures were started. For OR procedures, this refers to the actual beginning, not the time the patient was prepped or brought into the room prior to incision. For therapeutic procedures that imply a longer interval, (such as ventilation or intubation) this time is the start of the therapy. Use the 24-hour clock.

Inpatient Vital Sign Location Code

Field Name: **VS_LOCATION_CODE**

Description: This is where the vital signs were measured.
Reference file: VS_LOCATION_CODE

NOTES:

Vital Sign Number

Field Name: VS_NUMBER

Description: Vital Sign numbers: initial, one hour, and last sets of vital signs from all agencies and facilities. Decimals up to and including .09 may be used for additional sets of vitals.

Patterns

1	First Scene, Initial
1.1	Scene, 1 Hour
1.2	Scene, Last
1.3	Scene, Intercept Agency
1.4	Scene, Additional as Needed
2	Your Facility ED, Initial
2.1	Your Facility ED, 1 Hour
2.2	Your Facility ED, Additional as Needed
2.9	Your Facility ED, Last
3	First Interfacility Agency, Initial
3.1	First Interfacility Agency, 1 Hour
3.2	First Interfacility Agency, Last
3.3	Second Interfacility Agency, Initial
3.4	Second Interfacility Agency, 1 Hour
3.5	Second Interfacility Agency, Last
3.6	Interfacility, Additional as Needed
4	First Referring Facility, Initial
4.1	First Referring Facility, 1 Hour
4.2	First Referring Facility, Last
4.3	Second Referring Facility, Initial
4.4	Second Referring Facility, 1 Hour
4.5	Second Referring Facility, Last
4.9	Referral Facility, Additional as Needed
5.0	Direct Admission

NOTES:_____

DISABILITY ASSESSMENT – DISCHARGE

Inpatient Discharge Date

Field Name: **HOSPITAL_DISCHARGE_DATE**

Description: This is the date the patient was discharged from the hospital as an *inpatient*, transferred out after admission, or death in the hospital.

NOTE: If the patient was an ED stay only, transfer out from ED, ED death, or DOA, then this field will be **NA**

This information is necessary to determine inpatient length of stay (LOS).

Inpatient Discharge Time

Field Name: **HOSPITAL_DISCHARGE_TIME**

Description: This is the time the patient was discharged from, transferred from, or died at the hospital as an ***inpatient***.

NOTE: If the patient was an ED stay only, transfer out from ED, ED death, or DOA, then this field will be **NA**.
Use the 24-hour clock.

This information is necessary to determine inpatient length of stay (LOS).

Inpatient Discharge Disposition Code

Field Name: **DC_DISPOSITION_CODE**

Description: This is the discharge disposition code. This classifies the patient's disposition after inpatient discharge. This is not the specific facility the patient was transferred to.

DOA	Dead upon arrival in ED
D	Death
DE	Died in Ed < 15 minutes of CPR
HOME	Home
HH	Home health
HOSP	Transfer to another acute care hospital
ICF	Discharged or transferred to an intermediate care facility
JAIL	Jail or detention center
NH	Nursing home
REHAB	Rehabilitation center
SWING	Hospital long term care (LTC) bed (i.e. transitional care unit (TCU))
OTHER	Other (i.e. palliative care, psychiatric care, Triumph Hospital Central Dakotas, DETOX center, shelter or other residential institution)
AMA	Against medical advice, even when a specific destination is known
HOSPICE	Hospice care
NA	Not Applicable, not an inpatient
NOT	Not Documented
UNK	Unknown

Facility Discharge Destination Code

Field Name: **DC_DESTINATION_CODE**

Description: This is the discharge destination code. This is the patient's specific destination after discharge. It will either be NA or a specifically named facility.

Discharge Transfer Mode

Field Name: **DC_TRANSFER_MODE**

Description: This is the mode (method) of transportation by which the patient left (was discharged) from the hospital. If the patient has died, N/A is the appropriate choice.

Patterns

ALS	ALS ambulance
AMB	Ambulance (use if unknown if ALS/BLS)
BLS	BLS ambulance
FIX	Fixed wing
HELI	Helicopter
OTHER	Other (includes: patients that were brought from nursing home, swing bed, nursing floor on a cart or in a wheelchair, or commercial (non EMS) transportation such as taxi)
POL	Police vehicle
POV	Private vehicle
NA	Not Applicable
NOT	Not Documented
UNK	Unknown

Financial Amount Collected

Field Name: **AMT_COLLECTED**

Description: The financial field is the amount collected. This is the dollar amount finally collected on the bill. It is important to wait long enough (30-120 days, at least) before obtaining this amount, since payments may be received at various times.

This data can be utilized to determine the reimbursement rates of trauma care.

Organs Donated

Field Name: **ORGANS_DONATED**

Description: These are the organs that were donated.

BONE	Bone
CORNEA	Cornea
EAR	Ear
HEART	Heart
KIDNEY	Kidney
LIVER	Liver
LUNG	Lung)
MARROW	Marrow
NOT	Not Documented
OTHER	Other, small bowel, tissue
PANCREAS	Pancreas
REF	Refused by family or coroner
SKIN	Skin
UNK	Unknown
UNSUIT	Deemed unsuitable for use by Life Source
VALVES	Heart Valves
NA	Not Applicable
NR	Not Requested

Patient Outcome

Field Name: **OUTCOME**

Description: This is the patient's outcome: 'A' or 'D'.

This is the patient's final outcome at hospital discharge.

A	Alive
D	Died

Payment Source

Field Name: **PAYMENT_SOURCE**

Description: These are the payment sources. List primary insurance first, list others if available

Patterns

AUTO	Automotive
BCBS	Blue Cross/Blue Shield; from any state
COM	Commercial insurance (includes government except IHS)
HMO	Health Maintenance Organization
IHS	Indian Health Service
MCAID	Medicaid (any medical assistance)
MCARE	Medicare
NOBILL	Not billed
OTHER	Other (i.e. international health plans (Canadians))
SELF	Self pay
WORK	Workers compensation
GOV	Other Government (i.e. Champus)
NA	Not Applicable
NOT	Not Documented
UNK	Unknown

Total Hospital Charges

Field Name: **CHARGE_TOTAL**

Description: This is the filled field for TOTAL.CHARGE.
This is the total amount of the hospital bill. This will include components, such as Physician, Outpatient, Radiology, Pharmacy, etc. It is important to be consistent when obtaining this amount, so that charges over time will be comparable.

This value helps to determine the total “cost” of Trauma in the state.

Severity Method

Field Name: **SEVERITY_METHOD**

Description: This is the severity coding methodology.

This is the severity system (AIS 98 or AIS 05) used for the AIS coding.

Total Ventilator Days

Field Name: **VENTDAYS**

Description: The total number of patient days spent on a mechanical ventilator (including all episodes).

Hospital Complications

Field Name: **COMP_TYPE**

Description: Any medical complication that occurred during the patient's stay at your hospital.
NOTE: See appendix M for definitions.

ACS	Abdominal Compartment Syndrome
ABD	Abdominal Fascia
ARF	Acute Renal Failure
ARDS	Acute Respiratory Distress Syndrome
BASE	Base Deficit
BLD	Bleeding
CPR	Cardiac Arrest with CPR
COAG	Coagulopathy
COMA	Coma
CVA	Stroke/CVA
DECUB	Decubitus Ulcer
DDX	Delayed Diagnosis
DISRUPT	Wound Disruption
DVT	Deep Vein Thrombosis/Thrombophlebitis
ECS	Extremity Compartment Syndrome
FAIL	Graft or Prosthetic or Flap failure
ICP	Intracranial Pressure
INTUB	Unplanned Intubation
MDX	Missed Diagnosis
MI	Myocardial Infarction
NONE	No NTDS listed medical complication occurred
ORGAN	Organ/Space Surgical Site Infection
PE	Pulmonary Embolism
PNEU	Pneumonia
SEPSIS	Systemic Sepsis
SURGINF	Deep Surgical Infection
SUP	Superficial Surgical Site Infection
WITH	Drug or Alcohol Withdrawal
NA	Not Applicable
NOT	Not Documented
UNK	Unknown

NOTES:_____

Appendix A (Agency Codes)

Appendix A (Agency Codes)

Agency No	Agency Name by City	
001	Almont Ambulance Service	Almont ND
002	Aneta Ambulance Service	Aneta ND
003	Ashley Ambulance Service	Ashley ND
004	Community Ambulance Service	Beach ND
005	Belfield Ambulance Service, Inc.	Belfield ND
006	Berthold Ambulance Service , Inc.	Berthhold ND
008	Coteau Properties Co. Ambulance Service	Beulah ND
009	Dakota Gasification Co. Ambulance Service	Beulah ND
079	McHenry Ambulance Service	Binford ND
012	Metro Area Ambulance Service	Bismarck ND
014	Bottineau Ambulance Service	Bottineau ND
015	Bowbells Ambulance Service	Bowbells ND
016	Bowdon Ambulance Service	Bowdon ND
017	Bowman Ambulance Squad, Inc.	Bowman ND
018	Ambulance Service, Inc.	Breckenridge MN
019	Towner County Ambulance Service, Inc.	Cando ND
020	Carpio Ambulance Service, Inc.	Carpio ND
021	Carrington Health Center Ambulance	Carrington ND
022	Carson Ambulance Service	Carson ND
023	Casselton Ambulance Service, Inc.	Casselton ND
024	Cavalier Ambulance Service, Inc.	Cavalier ND
025	Oliver County Ambulance Service	Center ND
026	Cooperstown Ambulance Service	Cooperstown ND
027	Divide County Ambulance Service	Crosby ND
028	Lake Region Ambulance Service	Devils Lake ND
029	Dickinson Area Ambulance Service, Inc.	Dickinson ND
030	Drayton Volunteer Ambulance Association, Inc.	DraytonND
031	Edgeley Ambulance Service	Edgeley ND
032	Edmore Volunteer Ambulance Service	Edmore ND
033	Ellendale Community Ambulance Service	Ellendale ND
034	Esmond Community Ambulance Service	Esmond ND
035	F-M Ambulance Service, Inc.	Fargo ND
036	Fessenden Ambulance Service	Fessenden ND
037	Finley Ambulance Service	Finley ND
038	Flasher Ambulance Service	Flasher ND
040	Sargent County Ambulance Service (Forman)	Forman ND
041	Standing Rock Ambulance Service	Ft. Yates ND
042	Gackle Ambulance Service	Gackle ND
076	Garrison Ambulance District	Garrison ND
044	Glen Ullin Area Ambulance Service	Glen Ullin ND
045	Glenburn Area Ambulance Service, Inc.	Glenburn ND
046	Goodrich Ambulance Service	Goodrich ND
047	Valley Ambulance & Rescue Service, Inc.	Grafton ND

048 Altru Health System Ambulance Service	Grand Forks ND
049 Grenora Ambulance Service	Grenora ND
050 Halliday Ambulance Service	Halliday ND
051 Hankinson Volunteer Ambulance Service	Hankinson ND
052 Harvey Ambulance Service, Inc.	Harvey ND
007 Mercer County Ambulance Service, Inc. (Beulah)	Hazen ND
053 Mercer County Ambulance Service, Inc.	Hazen ND
054 Hebron Ambulance Service	Hebron ND
055 West River Ambulance Service	Hettinger ND
056 Hillsboro Ambulance Service	Hillsboro ND
058 Hope Ambulance Service	Hope ND
059 Hunter Ambulance Service	Hunter ND
061 Kenmare Ambulance Service	Kenmare ND
062 Killdeer Area Ambulance Service, Inc.	Killdeer ND
063 Kindred Area Ambulance Service, Inc.	Kindred ND
064 Kulm Ambulance Corps, Inc.	Kulm ND
065 Lakota Ambulance Service	Lakota ND
067 Langdon Ambulance Service	Langdon ND
068 Lansford Ambulance Service	Lansford ND
069 Larimore Ambulance Service, Inc.	Larimore ND
070 Leeds Ambulance Service	Leeds ND
071 Lidgerwood Community Ambulance Service	Lidgerwood ND
072 Emmons County Ambulance Service	Linton ND
073 First Medic Ambulance of Ransom County, Inc.	Lisbon ND
074 Maddock Ambulance Service	Maddock ND
043 Garrison-Max Ambulance District	Max ND
077 West Trail Ambulance Service	Mayville ND
078 McClusky Rural Ambulance District	McClusky ND
080 McIntosh Volunteer Fire Dept Ambulance Service	McIntosh ND
081 Standing Rock Health System, Inc.	McLaughlin SD
082 McVille Community Ambulance Service	McVille ND
083 Medina Ambulance Service	Medina ND
084 Billings County Ambulance Service	Medora ND
085 Michigan Area Ambulance Service, Inc.	Michigan ND
086 Sargent County Ambulance Service	Milnor ND
088 Community Ambulance Service Inc.	Minot ND
089 Mohall Ambulance Service	Mohall ND
090 Mott Ambulance Service	Mott ND
091 Munich Rural Ambulance	Munich ND
092 Napoleon Ambulance Service	Napoleon ND
093 New England Ambulance Service	New England ND
094 New Leipzig Ambulance Service	New Leipzig ND
095 Community Ambulance Service of New Rockford	New Rockford ND
096 New Salem Ambulance Service	New Salem ND
097 New Town Community Ambulance Service District	New Town ND
098 Northwood Ambulance Service	Northwood ND
099 Oakes Vol. Ambulance Service	Oakes ND

100 Page Ambulance Service	Page ND
101 Park River Volunteer Ambulance Service, Inc.	Park River ND
102 Parshall Rural Ambulance Service, Inc.	Parshall ND
103 Pembina Ambulance Service, Inc.	Pembina ND
104 Plaza Ambulance Service	Plaza ND
105 Portal Ambulance Service	Portal ND
106 Powers Lake Ambulance Association	Powers Lake ND
107 Ray Community Ambulance District	Ray ND
108 Regent Ambulance Service	Regent ND
109 Richardton-Taylor Ambulance Service	Richardton ND
110 Riverdale Ambulance Department	Riverdale ND
111 Rock Lake Ambulance Service	Rock Lake ND
112 Rolette Ambulance Service, Inc.	Rolette ND
113 Community Ambulance Service	Rolla ND
114 Rugby Emergency Ambulance Service	Rugby ND
075 Ryder-Makoti Ambulance Service	Ryder ND
115 Sherwood Rural Ambulance Service	Sherwood ND
116 Stanley Ambulance Service	Stanley ND
117 Kidder County Ambulance Service	Steele ND
118 Tioga Ambulance Service	Tioga ND
119 Towner Fire/ Ambulance & Rescue, Inc.	Towner ND
120 Turtle Lake Ambulance Service	Turtle Lake ND
121 Underwood Ambulance Service	Underwood ND
122 Coal Creek Station Ambulance Service - GRE	Underwood ND
123 Falkirk Mining Company Ambulance Service	Underwood ND
124 Upham RFPD Ambulance Service	Upham ND

703 Other Canadian Ground
704 Other Ground
700 Other Minnesota Ground
701 Other Montana Ground
702 Other South Dakota Ground

POL Police Vehicle
POV Private Vehicle
AMB Unknown EMS Transport
NA Not Applicable
NOT Not Documented

Air Services
601 Avera St Luke's Careflight, Aberdeen SD
602 Sanford LifeFlight, Fargo ND
603 Trinity Hospital – NorthStar Criticair, Minot ND
604 Bismarck Air Medical, LLC, Mandan ND
606 Valley Med Flight, Grand Forks ND
610 Avera McKennan Careflight, Sioux Falls SD
680 Medical Air Rescue Company, Williston ND
681 Angel AirCare, Linton ND
699 Other - out of state air

Appendix B (Health Facility Codes)

Appendix B (Health Facility Codes)

Hospitals in Alphabetical Order by City	City State
5001 Ashley Medical Center	Ashley ND
5083 Quentin Burdick CHCF	Belcourt ND
5003 Medcenter One	Bismarck ND
5004 St. Alexius Medical Center	Bismarck ND
5005 St. Andrew's Health Center	Bottineau ND
5006 Southwest Healthcare Services	Bowman ND
5061 Towner County Medical Center	Cando ND
5008 Carrington Health Center	Carrington ND
5009 Pembina County Memorial Hospital	Cavalier ND
5010 Cooperstown Medical Center	Cooperstown ND
5011 St. Luke's Hospital	Crosby ND
5012 Mercy Hospital of Devils Lake	Devils Lake ND
5054 St. Joseph's Hospital & Health Center	Dickinson ND
5014 Jacobson Memorial Hospital Care Center	Elgin ND
5067 Innovis Health	Fargo ND
5018 Sanford Health (Formerly MeritCare Hospital)	Fargo ND
5068 Sanford Health South (Formerly MeritCare South)	Fargo ND
5065 Triumph Hospital Central Dakotas	Fargo ND
5080 Veterans Administration	Fargo ND
5063 Prairie Psychiatric Center	Fargo ND
5084 PHS Hospital	Fort Totten ND
5085 PHS Hospital	Fort Yates ND
5019 Garrison Memorial Hospital	Garrison ND
5020 Unity Medical Center	Grafton ND
5082 Air Force Base	Grand Forks ND
5021 Altru Hospital	Grand Forks ND
5066 Richard P. Stadter Psychiatric Center	Grand Forks ND
5023 St. Aloisius Medical Center	Harvey ND
5024 Sakakawea Medical Center	Hazen ND
5025 West River Regional Medical Center	Hettinger ND
5026 Hillsboro Medical Center Hospital	Hillsboro ND
5057 Anne Carlsen School	Jamestown ND
5027 Jamestown Hospital	Jamestown ND
5060 North Dakota State Hospital	Jamestown ND
5028 Kenmare Community Hospital	Kenmare ND
5029 Cavalier County Memorial Hospital	Langdon ND
5030 Linton Hospital	Linton ND
5031 Lisbon Area Health Services	Lisbon ND
5064 Triumph Hospital Central Dakotas	Mandan ND
5034 Union Hospital	Mayville ND
5035 Nelson County Health System	McVille ND
5081 Air Force Base	Minot ND
5036 Trinity - St. Josephs	Minot ND
5055 Trinity Hospitals	Minot ND

5086 PHS Hospital	New Town ND
5040 Northwood Deaconess Health Center	Northwood ND
5041 Oakes Community Hospital	Oakes ND
5042 First Care Health Center	Park River ND
5043 Richardton Health Center	Richardton ND
5045 Presentation Medical Center	Rolla ND
5046 Heart of America Medical Center	Rugby ND
5047 Mountrail County Medical Center	Stanley ND
5048 Tioga Medical Center	Tioga ND
5059 Community Memorial Hospital	Turtle Lake ND
5050 Mercy Hospital of Valley City	Valley City ND
5051 McKenzie County Memorial Hospital	Watford City ND
5052 Mercy Medical Center	Williston ND
5053 Wishek Community Hospital	Wishek ND

Rehabilitation Facilities

6001 Medcenter One	Bismarck ND
6002 St. Alexius Medical Center	Bismarck ND
6003 Sanford Health (Formerly MeritCare)	Fargo ND
6099 Altru Rehabilitation Center	Grand Forks ND
6004 Trinity Health	Minot ND

Appendix C (Out of State Health Facility Codes)

Appendix C (Out of State Health Facility Codes)

Out of State in Alphabetical Order by City	City State
5421 Avera St. Lukes -SD	Aberdeen SD
5430 University of Colorado -CO	Aurora CO
5088 St. Francis Medical Center –MN	Breckenridge MN
5431 Denver Children's	Denver CO
5406 St. Marys Regional -MN	Detroit Lakes MN
5400 Abbott Northwestern -MN	Minneapolis MN
5401 Abbott Northwestern -MN	Minneapolis MN
5403 Hennepin County -MN	Minneapolis MN
5407 University of Minnesota -MN	Minneapolis MN
5422 Mobridge Regional Hospital	Mobridge SD
5423 Rapid City Regional -SD	Rapid City SD
5404 North Memorial –MN	Robbinsdale MN
5420 Avera Mckennan -SD	Sioux Falls SD
5424 Sioux Valley -SD	Sioux Falls SD
5402 Children's Hospital -MN	St. Paul MN
5405 Regions Hospital –MN	St. Paul MN

5503 Other Canadian Hospital
5504 Other Colorado Hospital
5500 Other Minnesota Hospital
5502 Other Montana Hospital
5501 Other South Dakota Hospital
9999 Unspecified

Appendix D (Skilled Nursing Home Facility Codes)

Appendix D (Skilled Nursing Home Facilities)

Skilled Nursing Home Facilities in Alphabetical Order by City

1101 Aneta Parkview Health Center	Aneta ND
1102 Arthur Good Samaritan Center	Arthur ND
1103 Ashley Medical Center	Ashley ND
1104 Knife River Care Center	Beulah ND
1105 Baptist Home	Bismarck ND
1106 Medcenter One Subacute Care Unit	Bismarck ND
1107 Missouri Slope Lutheran Care Center	Bismarck ND
1108 St. Alexius Transitional Care Unit	Bismarck ND
1109 Medcenter One St. Vincents Care	Bismarck ND
1110 Bottineau Good Samaritan Center	Bottineau ND
1112 Southwest Healthcare Services	Bowman ND
1113 Towner County Living Center	Cando ND
1115 Golden Acres Manor	Carrington ND
1116 Wedgewood Manor	Cavalier ND
1117 Cooperstown Medical Center	Cooperstown ND
1118 Crosby Good Samaritan Center	Crosby ND
1119 Devils Lake Good Samaritan Center	Devils Lake ND
1120 Heartland Care Center	Devils Lake ND
1121 St. Benedict's Health Center	Dickinson ND
1122 St. Luke's Home	Dickinson ND
1123 Dunseith Community Nursing Home	Dunseith ND
1124 Jacobson Memorial Hospital Care Center	Elgin ND
1125 Prince of Peace Care Center	Ellendale ND
1126 Maryhill Manor	Enderlin ND
1127 Bethany Homes	Fargo ND
1129 Elim Care Center	Fargo ND
1130 Manorcare Health Services	Fargo ND
1131 Sanford Health TCU (Formerly Meritcare)	Fargo ND
1132 Rosewood on Broadway	Fargo ND
1133 Villa Maria Health Care	Fargo ND
1134 Four Seasons Health Care Center	Forman ND
1135 Garrison Memorial Hospital Nursing Facility	Garrison ND
1136 Benedictine Living Center of Garrison	Garrison ND
1137 Marian Manor Healthcare Center	Glen Ullin ND
1138 Lutheran Sunset Home	Grafton ND
1139 Valley Eldercare Center	Grand Forks ND
1140 Woodside Village	Grand Forks ND
1141 St. Gerard's Community Nursing Home	Hankinson ND
1142 St. Aloisius Medical Center-LTC	Harvey ND
1143 Tri-County Retirement and Nursing Home	Hatton ND
1144 Hillcrest Care Center	Hettinger ND
1145 Hillsboro Medical Center Nursing Home	Hillsboro ND
1146 Central Dakota Village	Jamestown ND
1147 Hi-Acres Manor Nursing Center	Jamestown ND

1148 Kenmare Community Hospital SNU	Kenmare ND
1149 Hill Top Home of Comfort	Killdeer ND
1150 Lakota Good Samaritan Center	Lakota ND
1151 St. Rose Care Center	Lamoure ND
1152 Maple Manor Care Center	Langdon ND
1153 Larimore Good Samaritan Center	Larimore ND
1155 North Dakota Veterans Home	Lisbon ND
1156 Parkside Lutheran Home	Lisbon ND
1157 Dacotah Alpha	Mandan ND
1158 Medcenter One Care Center	Mandan ND
1159 Luther Memorial Home	Mayville ND
1160 Nelson County Health System Care Center	McVille ND
1161 Manorcare Health Services	Minot ND
1162 Trinity Homes	Minot ND
1163 North Central Good Samaritan Center	Mohall ND
1164 Mott Good Samaritan Nursing Center	Mott ND
1165 Napoleon Care Center	Napoleon ND
1166 Lutheran Home of the Good Shepherd	New Rockford ND
1167 Elm Crest Manor	New Salem ND
1169 Northwood Deaconess Health Center	Northwood ND
1170 Oakes Manor Good Samaritan Center	Oakes ND
1171 Osnabrock Good Samaritan Center	Osnabrock ND
1172 Park River Good Samaritan Center	Park River ND
1173 Rock View Good Samaritan Center	Parshall ND
1174 Rolette Community Care Center	Rolette ND
1175 Heart of America Nursing Facility	Rugby ND
1176 Mountrail Bethel Home	Stanley ND
1177 Medcenter One Golden Manor	Steele ND
1178 Strasburg Nursing Home	Strasburg ND
1179 Tioga Medical Center LTC	Tioga ND
1180 Prairieview Health Care Center	Underwood ND
1181 Sheyenne Care Center	Valley City ND
1182 Souris Valley Care Center	Velva ND
1183 St. Catherine's Living Center	Wahpeton ND
1184 Pembilier Nursing Center	Walhalla ND
1185 The Good Shepherd Home	Watford City ND
1186 Westhope Home	Westhope ND
1187 Bethel Lutheran Home	Williston ND
1188 Wishek Home for the Aged	Wishek ND

Appendix E (ND/SD/MN/MT Zip Codes)

NORTH DAKOTA

58001 Abercrombie 701
58002 Absaraka 701
58210 Adams 701
58472 Adrian 701
58310 Agate 701
58220 Akra 701
58830 Alamo 701
58831 Alexander 701
58454 Alfred 701
58031 Alice 701
58845 Alkabo 701
58520 Almont 701
58311 Alsen 701
58833 Ambrose 701
58004 Amenia 701
58620 Amidon 701
58710 Anamoose 701
58212 Aneta 701
58711 Antler 701
58830 Appam 701
58558 Apple Valley 701
58261 Ardoch 701
58494 Arena 701
58005 Argusville 701
58365 Armourdale 701
58835 Arnegard 701
58006 Arthur 701
58214 Arvilla 701
58413 Ashley 701
58734 Aurelia 701
58710 Aylmer 701
58007 Ayr 701
58220 Backoo 701
58386 Baker 701
58521 Baldwin 701
58712 Balfour 701
58313 Balta 701
58124 Bank of the West 701
58713 Bantry 701
58421 Barlow 701
58008 Barney 701
58344 Bartlett 701
58384 Barton 701
58216 Bathgate 701
58773 Battleview 701
58621 Beach 701
58316 Belcourt 701
58784 Belden 701
58622 Belfield 701
58716 Benedict 701
58562 Bentley 701
58792 Bergen 701
58415 Berlin 701
58718 Berthold 701
58788 Berwick 701
58523 Beulah 701
58416 Binford 701
58501 BIS 701
58317 Bisbee 701
58501 Bismarck 701
58502 Bismarck 701
58503 Bismarck 701
58504 Bismarck 701
58505 Bismarck 701
58506 Bismarck 701
58507 Bismarck 701
58718 Blaisdell 701
58009 Blanchard 701
58401 Bloom 701
58121 Blue Cross 701
58563 Blue Grass 701
58801 Bonetraill 701
58421 Bordulac 701
58318 Bottineau 701
58721 Bowbells 701
58418 Bowdon 701
58225 Bowesmont 701
58623 Bowman 701
58524 Braddock 701
58017 Brampton 701
58356 Brantford 701
58570 Breien 701
58356 Bremen 701
58104 Briarwood 701
58351 Brinsmade 701
58529 Brisbane 701
58321 Brocket 701
58420 Buchanan 701
58639 Bucyrus 701
58011 Buffalo 701
58623 Buffalo Springs 701
58801 Buford 701
58722 Burlington 701
58495 Burnstad 701
58646 Burt 701
58723 Butte 701
58218 Buxton 701
58219 Caledonia 701
58352 Calio 701
58323 Calvin 701
58324 Cando 701
58528 Cannon Ball 701
58528 Cannonball 701
58783 Carbury 701
58725 Carpio 701
58421 Carrington 701
58529 Carson 701
58838 Cartwright 701
58012 Casselton 701
58422 Cathay 701
58220 Cavalier 701
58220 Cavalier AFS 701
58013 Cayuga 701
58530 Center 701
58079 Chaffee 701
58831 Charbonneau 701
58763 Charlson 701
58423 Chaseley 701
58015 Christine 701
58325 Churchs Ferry 701
58492 Clementsville 701
58424 Cleveland 701
58016 Clifford 701
58758 Clifton 701
58352 Clyde 701
58017 Cogswell 701

58531 Coleharbor 701
58018 Colfax 701
58844 Colgan 701
58046 Colgate 701
58727 Columbus 701
58220 Concrete 701
58233 Conway 701
58425 Cooperstown 701
58425 Cooperstwn 701
58830 Corinth 701
58721 Coteau 701
58734 Coulee 701
58426 Courtenay 701
58327 Crary 701
58040 Crete 701
58365 Crocus 701
58730 Crosby 701
58222 Crystal 701
58467 Crystal Springs 701
58223 Cummings 701
58224 Dahlen 701
58413 Danzig 701
58021 Davenport 701
58428 Dawson 701
58429 Dazey 701
58731 Deering 701
58060 Delamere 701
58788 Denbigh 701
58430 Denhoff 701
58733 Des Lacs 701
58301 Devils Lake 701
58431 Dickey 701
58601 Dickinson 701
58602 Dickinson 701
58625 Dodge 701
58734 Donnybrook 701
58735 Douglas 701
58421 Dover 701
58327 Doyon 701
58736 Drake 701
58225 Drayton 701
58249 Dresden 701
58532 Driscoll 701
58626 Dunn Center 701
58760 Dunning 701
58329 Dunseith 701
58059 Durbin 701
58075 Dwight 701
58631 Eagles Nest 701
58481 Eckelson 701
58760 Eckman 701
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Appendix F (North Dakota Century Code/Administrative Rules)

CHAPTER 23-01.2
TRAUMA AND EMERGENCY MEDICAL SYSTEM

23-01.2-01. Trauma system established - Duties of health council. The health council, in conjunction with the state department of health, may establish and maintain a comprehensive trauma system for the state. The trauma system may include standards for the following components:

1. A system plan.

2. Prehospital emergency medical services.

3. Hospitals, for which the standards must include:

   a. Standards for designation, redesignation, and dedesignation of trauma centers.

   b. Standards for evaluation and quality improvement programs for designated trauma centers. The standards must require each trauma center to collect quality improvement data and to provide specified portions to the department for use in state and regional trauma quality improvement programs.

   c. Qualifications for trauma center personnel.

4. A trauma registry. Data in the trauma registry is not subject to subpoena or discovery or introduction into evidence in any civil action. Designated trauma centers must participate in the trauma registry. A hospital not designated as a trauma center must provide to the registry a minimum set of data elements for all trauma patients as determined by the health council.

5. A trauma quality improvement program to monitor the performance of the trauma system. The proceedings and records of the program are not subject to subpoena or discovery or introduction into evidence in any civil action arising out of any matter that is the subject of consideration by the program.

23-01.2-02. Physician immunity for voluntary medical direction. A physician is immune from liability while providing voluntary medical direction.

23-01.2-03. Trauma center designation.

1. Effective January 1, 2011, a hospital that offers emergency services to the public shall meet trauma center designation standards and participate in the trauma system.

2. The state health council shall adopt rules that allow provisional trauma designation status for a hospital that is partially compliant with trauma designation standards. When issuing a provisional trauma designation, the state health council shall allow a reasonable amount of time, determined by the department, for a hospital to fully meet all trauma designation standards.

ARTICLE 33-38
STATE TRAUMA SYSTEM

Chapter
33-38-01 Trauma System Regulation

CHAPTER 33-38-01
TRAUMA SYSTEM REGULATION

Section
33-38-01-01 Definitions
33-38-01-02 Trauma System
33-38-01-03 Activation of Trauma Codes for Trauma Patients
33-38-01-04 Emergency Medical Services
33-38-01-05 Local Emergency Medical Services Transport Plans
33-38-01-06 Trauma Center Designation
33-38-01-07 Trauma Center Revocation of Designation
33-38-01-08 State Trauma Registry
33-38-01-09 Quality Improvement Process
33-38-01-10 State Trauma Committee Membership
33-38-01-11 Trauma Regions - Regional Trauma Committee
33-38-01-12 Trauma Center Name Restriction
33-38-01-13 Level IV Trauma Center Designation Standards
33-38-01-14 Level V Trauma Center Designation Standards

33-38-01-01. Definitions. Words defined in North Dakota Century Code chapter 23-01.2 have the same meaning in this chapter. As used in this chapter:

1. "Advanced trauma life support" means the most current edition of the course as developed by the American college of surgeons - committee on trauma, or its equivalent, as determined by the department.

2. "Department" means the state department of health.

3. "Emergency medical services" means the system of personnel who provide medical care from the time of injury to hospital admission.

4. "Local emergency medical services transport plans" means plans developed by emergency medical services, medical directors, and hospital officials which establish the most efficient method to transport trauma patients.

5. "Major trauma patient" means any patient that meets the criteria in step one or two of the field triage decision scheme provided by the American college of surgeons, committee on trauma, as published by the most current edition of the Resources for Optimal Care of the Injured Patient.

6. "Online medical control" consists of directions given over the telephone or by radio directly from the medical director or designated physician.

7. "Provisional designation" means a state process of designating a facility as a trauma center based on American college of surgeons or

department standards for a period determined by the department and the state trauma committee or until an American college of surgeons verification visit or state designation visit is completed.

8. "Trauma" means tissue damage caused by the transfer of thermal, mechanical, electrical, or chemical energy, or by the absence of heat or oxygen.

9. "Trauma center" means a facility that has made a commitment to serve the trauma patient, has met the standards of the trauma system, and has obtained designation as a trauma center.

10. "Trauma code" includes the activation and assembly of the trauma team to provide care to the major trauma patient.

11. "Trauma quality improvement program" means a system of evaluating the prehospital, trauma center, and rehabilitative care of trauma patients.

12. "Trauma registry" includes the collection and analysis of trauma data from the trauma system.

13. "Trauma team" includes a group of health care professionals organized to provide care to the trauma patient.

History: Effective July 1, 1997; amended effective June 1, 2001; July 1, 2010.
General Authority: NDCC 23-01.2-01
Law Implemented: NDCC 23-01.2-01

33-38-01-02. Trauma system. A statewide trauma system shall be adopted by the state health council. The trauma system shall consist of the following:

1. Standardized definition of major trauma patient.
2. Trauma code activation protocols.
3. Local emergency medical services transport plans.
4. Trauma center designation process.
5. Revocation of trauma center designation process.
6. Statewide trauma registry.
7. Quality improvement process.
8. State trauma committee.
9. Four regional trauma committees.
10. Injury prevention.

History: Effective July 1, 1997; amended effective July 1, 2010.
General Authority: NDCC 23-01.2-01
Law Implemented: NDCC 23-01.2-01

33-38-01-03. Activation of trauma codes for trauma patients. Emergency medical services and trauma centers shall assess patients and activate a trauma code.

1. Emergency medical services must activate a trauma code if the trauma patient meets one or more of the criteria in step one, two, or three of the field triage decision scheme, provided by the current edition of the American college of surgeons Resources for Optimal Care of the Injured Patient. Step four of the field triage scheme may be used as discretionary criteria for activating trauma code. The field triage scheme is used as a minimal standard and additional activation criteria may be added.

2. A level I, level II, or level III trauma center must follow the minimum criteria for highest level of activation set by the American college of surgeons committee on trauma.

3. A level IV and level V trauma center must activate a trauma code if the trauma patient meets one or more of the criteria in step one, two, or three of the field triage decision scheme, provided by the current edition of the American college of surgeons Resources for Optimal Care of the Injured Patient. Step four of the field triage scheme may be used as discretionary criteria for activating trauma code. The field triage scheme is used as a minimal standard and additional activation criteria may be added.

History: Effective July 1, 1997; amended effective July 1, 2010.
General Authority: NDCC 23-01.2-01
Law Implemented: NDCC 23-01.2-01

33-38-01-04. Emergency medical services. All emergency medical services licensed or certified by the department shall establish each of the following:

1. Trauma code activation protocols.

2. Trauma patient care protocols that have been reviewed and approved by a medical director.

3. Local emergency medical services transport plans.

History: Effective July 1, 1997.
General Authority: NDCC 23-01.2-01
Law Implemented: NDCC 23-01.2-01

33-38-01-05. Local emergency medical services transport plans. Emergency medical services shall develop local emergency medical services transport plans for the transport of trauma patients meeting the criteria in step one, two, three, or four of the □eld triage decision scheme, provided by the current edition of the American college of surgeons Resources for Optimal Care of the Injured Patient by appropriate means to the nearest designated trauma center.

1. Emergency medical services may bypass the nearest designated trauma center for a higher level trauma center provided that it does not result in an additional thirty minutes or more of transport time. If the additional transport time would be greater than thirty minutes, the transporting emergency medical services personnel must contact online medical direction for permission to bypass or as defined in the transport protocol.

2. If there are multiple trauma centers in the community, the major trauma patient meeting one or more of the criteria in step one or two of the field triage decision scheme provided by the current edition of the American college of surgeons Resources for Optimal Care of the Injured Patient should be taken to a trauma center per local emergency medical trauma transport plans approved by the department and state trauma committee.

History: Effective July 1, 1997; amended effective June 1, 2001; July 1, 2010.
General Authority: NDCC 23-01.2-01
Law Implemented: NDCC 23-01.2-01

33-38-01-06. Trauma center designation.

1. Five levels of hospital designation must be established.

2. Hospitals applying for level I, level II, or level III designation shall present evidence of having current trauma center verification from the American college of surgeons. The department shall issue designation with an expiration date consistent with the American college of surgeons verification expiration date.

3. Hospitals applying for level IV and level V trauma center designation must submit an application to the department. Once the application is approved by the department, an onsite verification visit shall be conducted by the department or its designee. The verification team shall compile a report. The application and report will be reviewed by the state trauma committee. If approved, the department shall issue the designation for up to three years to the facility.

4. Hospitals without trauma center designation or currently designated as a level IV or level V trauma center planning to apply for a level I, level II, or level III trauma center designation may apply for a provisional designation by submitting an application to the department. Once the application is approved by the department, an onsite visit shall be conducted by a team designated by the state trauma committee. The team shall compile a report. The application and report will be reviewed by the state trauma committee. If approved, the department shall issue a provisional designation for a maximum of twenty-four months. During these twenty-four months, the facility must complete an American college of surgeons verification visit.

5. Provisional trauma center designations for level I, level II, or level III trauma centers may be issued by the department to hospitals with deficiencies identified by the American college of surgeons and that are partially compliant with the trauma center standards. Hospitals must submit a plan of correction within one month after notification for deficiencies that are identified by the verification team. The plan of correction will be reviewed by the state trauma committee. If approved, the department may issue a provisional designation to the hospital for up to eighteen months or until another American college of surgeons verification visit is completed.

6. Provisional trauma center designations for level IV and level V trauma centers may be issued by the department to hospitals with deficiencies identified by the site survey team and reviewed by the state trauma committee and are partially compliant with the trauma center standards. Hospitals must submit a plan of correction within one month after notification for deficiencies that are identified by the site survey team. The plan of correction will be reviewed by the state trauma committee. If approved, the department may issue a provisional designation for up to twelve months to the hospital or until another state designation visit is completed.

7. The health council, in establishing a comprehensive trauma system, may designate an out-of-state hospital as a trauma center within □fty miles of any border of North Dakota.

History: Effective July 1, 1997; amended effective June 1, 2001; July 1, 2010.
General Authority: NDCC 23-01.2-01
Law Implemented: NDCC 23-01.2-01

33-38-01-07. Trauma center revocation of designation. The department may revoke designation of a trauma center if evidence exists that the facility does not meet the required trauma center standards. The department or its designee may inspect any trauma center or applicant for trauma center designation at any time for compliance with the standards. Designation must be revoked if a facility denies or refuses inspection.

Failure to follow an approved plan of correction or maintain trauma center designation standards will result in:

1. Revocation of the trauma center's designation.

2. Notification to the division of health facilities regarding the failure to comply with state law.

3. Placement of a public notice in the newspapers in the area which the hospital is located to notify the public of the enforcement action to be imposed and the effective dates. The department shall notify

the hospital in writing of the impending notice fifteen days prior to the publication of the notice.

History: Effective July 1, 1997; amended effective July 1, 2010.
General Authority: NDCC 23-01.2-01
Law Implemented: NDCC 23-01.2-01

33-38-01-08. State trauma registry. The department shall establish a trauma registry including the minimum data elements. All hospitals must report the minimum data elements to the department.

Reporting shall occur by a method approved by the department. Information may not be released from the state trauma registry except as permitted by North Dakota Century Code sections 23-01-15 and 23-01-02.1.

History: Effective July 1, 1997; amended effective June 1, 2001; July 1, 2010.
General Authority: NDCC 23-01.2-01
Law Implemented: NDCC 23-01.2-01

33-38-01-09. Quality improvement process. A quality improvement process shall be established by the state trauma committee. The process must include evaluation criteria that will provide guidelines for acceptable standards of care, address system issues, and monitor patient outcomes.

The regional committees shall evaluate the trauma system within their regions based upon the evaluation criteria. The regional trauma committee shall make recommendations to emergency medical services and trauma centers in the development of plans to improve the system.

History: Effective July 1, 1997; amended effective July 1, 2010.
General Authority: NDCC 23-01.2-01
Law Implemented: NDCC 23-01.2-01

33-38-01-10. State trauma committee membership. The state trauma committee membership must include the following:

1. One member from the North Dakota committee on trauma - American college of surgeons, appointed by the committee.

2. One member from the American college of emergency physicians - North Dakota chapter, appointed by the chapter.

3. One member from the North Dakota health care association, appointed by the association.

4. One member from the North Dakota medical association, appointed by the association.

5. One member from the North Dakota EMS association - basic life

support, appointed by the association.

6. One member from the North Dakota EMS association - advanced life support, appointed by the association.

7. One member from the North Dakota nurses association, appointed by the association.

8. One member on the faculty of the university of North Dakota school of medicine and health sciences, appointed by the dean of the medical school.

9. One member from the North Dakota emergency nurses association, appointed by the association.

10. One member from Indian health service, appointed by the Aberdeen area director of the service.

11. One member from accredited trauma rehabilitation facilities, appointed by the state health council.

12. One member who is a hospital trauma coordinator, appointed by the trauma coordinators committee.

13. The medical director of the division of emergency medical services and trauma of the department.

14. The regional trauma committee chair from each region, if not representing an association.

15. One member representing injury prevention, appointed by the health council.

16. One member representing the public appointed by the health council.

17. One member representing the legislative assembly selected by the health council.

18. One member representing emergency preparedness and response appointed by the department.

19. One member representing pediatric physicians appointed by the North Dakota American academy of pediatrics.

20. Four additional ad hoc members, appointed by the health council.

History: Effective July 1, 1997; amended effective June 1, 2001; July 1, 2010.
General Authority: NDCC 23-01.2-01
Law Implemented: NDCC 23-01.2-01

33-38-01-11. Trauma regions - Regional trauma committee. The state trauma committee shall establish four trauma regions. The regions must be designated northwest, northeast, southeast, and southwest. An emergency medical service or trauma center that is located within fifteen miles [24.14 kilometers] of a regional boundary may request to function within another region. This request shall be reviewed and is subject to approval by the state trauma committee.

The state trauma committee shall appoint a regional trauma committee to serve each trauma region. The regional committees may consist of members representing the following:

1. North Dakota committee on trauma - American college of surgeons.

2. North Dakota chapter of American college of emergency physicians.

3. Physician of a level IV and level V trauma center.
4. Level IV or level V hospital representative.

5. All hospital trauma coordinators within the region.

6. Accredited rehabilitation facility representative.

7. Indian health service or tribal government representative.

8. North Dakota EMS association.

9. Other members, chosen by the state trauma committee.

History: Effective July 1, 1997; amended effective June 1, 2001; July 1, 2010.
General Authority: NDCC 23-01.2-01
Law Implemented: NDCC 23-01.2-01

33-38-01-12. Trauma center name restriction. No health care facility in North Dakota may use the title "trauma center" or otherwise hold itself out as a trauma center unless the facility is designated by the department as a trauma center.

History: Effective July 1, 1997.
General Authority: NDCC 23-01.2-01
Law Implemented: NDCC 23-01.2-01

33-38-01-13. Level IV trauma center designation standards. The following standards must be met to achieve level IV designation:

1. Trauma team activation plan.

2. Trauma team leader must be a physician currently certified in advanced

trauma life support who is on call and available within twenty minutes. If the trauma team leader is not current in advanced trauma life support, the facility must provide a backup physician that is current in advanced trauma life support to assess and evaluate the trauma patients meeting step one, two, or three of the field triage decision scheme, provided by the current edition of the American college of surgeons Resources for Optimal Care of the Injured Patient when the noncertified physician is on call. If backup cannot be provided, the facility must go on diversion and notify the surrounding emergency medical services and the department.

3. The facility must have transfer agreements with facilities capable of caring for major trauma patients, burn care, pediatric trauma management, acute spinal cord and traumatic brain injury management, and rehabilitation services for long-term care.

4. Equipment for resuscitation and life support as determined by the department and state trauma committee.

5. Quality improvement programs, to include:

   a. Focused audit of selected criteria.

   b. Trauma registry in accordance with section 33-38-01-08.

   c. Focused audit for all trauma deaths.

   d. Morbidity and mortality review.

   d. Medical nursing audit, utilization review, and issue review.

6. Trauma transfer protocol to identify trauma patients whose condition may require care which exceeds current resources available.

History: Effective June 1, 2001; amended effective July 1, 2010.
General Authority: NDCC 23-01.2-01
Law Implemented: NDCC 23-01.2-01

33-38-01-14. Level V trauma designation standards. The following standards must be met to achieve level V designation:

1. Trauma team activation plan.

2. Trauma team leader must be on call and available within twenty minutes. The trauma team leader must be one of the following:

   a. A physician who is current in advanced trauma life support.

   b. A physician assistant, whose supervising physician has delegated to the physician assistant the authority to provide care to trauma

patients and is current in advanced trauma life support.

c. A nurse practitioner whose scope of practice entails the care of trauma patients, is current in advanced trauma life support, and whose scope of practice is approved by the state board of nursing.

d. If the trauma team leader is not current in advanced trauma life support, the facility must provide a backup team leader that is current in advanced trauma life support to assess and evaluate the trauma patients meeting step one, two, or three of the field triage decision scheme, provided by the current edition of the American college of surgeons Resources for Optimal Care of the Injured Patient when the noncertified provider is on call. If backup cannot be provided, the facility must go on diversion and notify the surrounding emergency medical services and the department.

3. The facility must have transfer agreements with facilities capable of caring for major trauma patients, burn care, pediatric trauma management, acute spinal cord and traumatic brain injury management, and rehabilitation services for long-term care.

4. Equipment for resuscitation and life support as determined by the department.

5. Quality improvement programs to include:

a. Focused audit of selected criteria.

b. Trauma registry in accordance with section 33-38-01-08.

c. Focused audit for all trauma deaths.

d. Morbidity and mortality review.

e. Medical nursing audit, utilization review, and issue review.

f. Current advanced trauma life support certified physician review of all trauma codes managed by a physician assistant or nurse practitioner within seventy-two hours. This may be either the consulting or transfer receiving physician.

6. Trauma transfer protocols to identify trauma patients whose condition may require care which exceeds current resources available.

History: Effective June 1, 2001; amended effective July 1, 2010.
General Authority: NDCC 23-01.2-01
Law Implemented: NDCC 23-01.2-01

Appendix G (Temperature Conversion Chart)

Temperature Conversion Chart

Fahrenheit	Celsius	Fahrenheit	Celsius	Fahrenheit	Celsius
89	31.66	93.5	34.16	97.9	36.61
89.1	31.72	93.6	34.22	98	36.66
89.2	31.77	93.7	34.27	98.1	36.72
89.3	31.83	93.8	34.33	98.2	36.77
89.4	31.88	93.9	34.38	98.3	36.83
89.5	31.94	94	34.44	98.4	36.88
89.6	32	94.1	34.5	98.5	36.94
89.7	32.05	94.2	34.55	98.6	37
89.8	32.11	94.3	34.61	98.7	37.05
89.9	32.16	94.4	34.66	98.8	37.11
90	32.22	94.5	34.72	98.9	37.16
90.1	32.27	94.6	34.77	99	37.22
90.2	32.33	94.7	34.83	99.1	37.27
90.3	32.38	94.8	34.88	99.2	37.33
90.4	32.44	94.9	34.94	99.3	37.38
90.5	32.5	95	35	99.4	37.44
90.6	32.55	95.1	35.05	99.5	37.5
90.7	32.61	95.2	35.11	99.6	37.55
90.8	32.66	95.3	35.16	99.7	37.61
90.9	32.72	95.4	35.22	99.8	37.66
91	32.77	95.5	35.27	99.9	37.72
91.1	32.83	95.6	35.33	100	37.77
91.2	32.88	95.7	35.38	100.1	37.83
91.3	32.94	95.8	35.44	100.2	37.88
91.4	33	95.9	35.5	100.3	37.94
91.5	33.05	96	35.55	100.4	38
91.6	33.11	96.1	35.61	100.5	38.05
91.7	33.16	96.2	35.66	100.6	38.11
91.8	33.22	96.3	35.72	100.7	38.16
91.9	33.27	96.4	35.77	100.8	38.22
92	33.33	96.5	35.83	100.9	38.27
92.1	33.38	96.6	35.88	101	38.33
92.2	33.44	96.7	35.94	101.1	38.38
92.3	33.5	96.8	36	101.2	38.44
92.4	33.55	96.9	36.05	101.3	38.5
92.5	33.61	97	36.11	101.4	38.55
92.6	33.66	97.1	36.16	101.5	38.61
92.7	33.72	97.2	36.22	101.6	38.66
92.8	33.77	97.3	36.27	101.7	38.72
92.9	33.83	97.4	36.33	101.8	38.77
93	33.88	97.5	36.38	101.9	38.83
93.1	33.94	97.6	36.44	102	38.88
93.2	34	97.7	36.5	102.1	38.94
93.3	34.05	97.8	36.55	102.2	39
93.4	34.11				

Appendix H (Weight Conversion Chart)

Weight Conversion Chart

lbs	kg	lbs	kg	lbs	kg	lbs	kg	lbs	kg	lbs	kg
1	0.5	61	27.5	121	55	181	82	241	109.5	301	136.5
2	1	62	28	122	55.5	182	82.5	242	110	302	137
3	1.5	63	28.5	123	56	183	83	243	110	303	137.5
4	2	64	29	124	56.5	184	83.5	244	110.5	304	138
5	2.5	65	29.5	125	56.5	185	84	245	111	305	138.5
6	2.5	66	30	126	57	186	84.5	246	111.5	306	139
7	3	67	30.5	127	57.5	187	85	247	112	307	139.5
8	3.5	68	31	128	58	188	85	248	112.5	308	139.5
9	4	69	31.5	129	58.5	189	85.5	249	113	309	140
10	4.5	70	32	130	59	190	86	250	113.5	310	140.5
11	5	71	32	131	59.5	191	86.5	251	114	311	141
12	5.5	72	32.5	132	60	192	87	252	114.5	312	141.5
13	6	73	33	133	60.5	193	87.5	253	115	313	142
14	6.5	74	33.5	134	61	194	88	254	115	314	142.5
15	7	75	34	135	61.5	195	88.5	255	115.5	315	143
16	7.5	76	34.5	136	61.5	196	89	256	116	316	143.5
17	7.5	77	35	137	62	197	89.5	257	116.5	317	144
18	8	78	35.5	138	62.5	198	90	258	117	318	144.5
19	8.5	79	36	139	63	199	90.5	259	117.5	319	144.5
20	9	80	36.5	140	63.5	200	90.5	260	118	320	145
21	9.5	81	36.5	141	64	201	91	261	118.5	321	145.5
22	10	82	37	142	64.5	202	91.5	262	119	322	146
23	10.5	83	37.5	143	65	203	92	263	119.5	323	146.5
24	11	84	38	144	65.5	204	92.5	264	120	324	147
25	11.5	85	38.5	145	66	205	93	265	120	325	147.5
26	12	86	39	146	66	206	93.5	266	120.5	326	148
27	12.5	87	39.5	147	66.5	207	94	267	121	327	148.5
28	12.5	88	40	148	67	208	94.5	268	121.5	328	149
29	13	89	40.5	149	67.5	209	95	269	122	329	149.5
30	13.5	90	41	150	68	210	95.5	270	122.5	330	149.5
31	14	91	41.5	151	68.5	211	95.5	271	123	331	150
32	14.5	92	41.5	152	69	212	96	272	123.5	332	150.5
33	15	93	42	153	69.5	213	96.5	273	124	333	151
34	15.5	94	42.5	154	70	214	97	274	124.5	334	151.5
35	16	95	43	155	70.5	215	97.5	275	125	335	152
36	16.5	96	43.5	156	71	216	98	276	125	336	152.5
37	17	97	44	157	71	217	98.5	277	125.5	337	153
38	17	98	44.5	158	71.5	218	99	278	126	338	153.5
39	17.5	99	45	159	72	219	99.5	279	126.5	339	154
40	18	100	45.5	160	72.5	220	100	280	127	340	154.5
41	18.5	101	46	161	73	221	100.5	281	127.5	341	154.5
42	19	102	46.5	162	73.5	222	100.5	282	128	342	155
43	19.5	103	46.5	163	74	223	101	283	128.5	343	155.5
44	20	104	47	164	74.5	224	101.5	284	129	344	156
45	20.5	105	47.5	165	75	225	102	285	129.5	345	156.5

lbs	kg	lbs	kg	lbs	kg	lbs	kg	lbs	kg	lbs	kg
46	21	106	48	166	75.5	226	102.5	286	130	346	157
47	21.5	107	48.5	167	76	227	103	287	130	347	157.5
48	22	108	49	168	76	228	103.5	288	130.5	348	158
49	22	109	49.5	169	76.5	229	104	289	131	349	158.5
50	22.5	110	50	170	77	230	104.5	290	131.5	350	159
51	23	111	50.5	171	77.5	231	105	291	132	351	159.5
52	23.5	112	51	172	78	232	105.5	292	132.5	352	160
53	24	113	51.5	173	78.5	233	105.5	293	133	353	160.5
54	24.5	114	51.5	174	79	234	106	294	133.5	354	161
55	25	115	52	175	79.5	235	106.5	295	134	355	161.5
56	25.5	116	52.5	176	80	236	107	296	134.5	356	162
57	26	117	53	177	80.5	237	107.5	297	134.5	357	162.5
58	26.5	118	53.5	178	80.5	238	108	298	135	358	163
59	27	119	54	179	81	239	108.5	299	135.5	359	163.5
60	27	120	54.5	180	81.5	240	109	300	136	360	164

Appendix I (Procedure Easy Codes)

NTDB	Description	ICD Code	
CPR	CPR	99.60	Cardiopulmonary Resuscitation
"	"	99.63	Closed Chest Massage
"	"	37.91	Open Cardiac Massage
"	"	93.93	Mouth to Mouth Resuscitation
CHEST	Chest decompression	34.09	Needle Decompression (Intercostal Stab)
MAST	MAST	93.58	
FLUIDS	Intravenous fluids	99.99	
ABDPELCT	Abdominal/Pelvis CT	88.01	Abdominal CT, Abdominal & Pelvis CT
"	"	88.02	Other Abdominal Tomography
"	"	88.38	Other CT (Pelvis)
B.BOARD	Backboard	93.42	This is the code for Other Spinal Traction
"	"	93.59	Other immobilization (strapping)
BURN	Burn Care	93.57	Dressing
"	"	86.28	Nonincisional Debridement Burn, Wound or Infection
"	"	86.22	Incisional Debridement Burn, Wound or Infection
"	"	86.09	Escarotomy
"	"	86.65	Porcine, Pigskin Graft
"	"	86.69	Skin Graft, Partial or Split Thickness
"	"	86.60	Free (autogenous) Graft
"	"	86.63	Full Thickness Graft
"	"	86.65	Heterograft
"	"	86.66	Homograft
"	"	86.70	Island Flap Graft
"	"	86.70	Pedicle Flap Graft
"	"	86.71	Delayed
"	"	86.75	Revision
CARDIO	Cardioversion/Defibrillation	99.61	Atrial
"	"	99.62	External, Defibrillation
CAST	Cast of extremity	93.53	Immobilization,
"	"	93.54	Plaster or Tray Splint, Musculoskeletal splinting
"	"	79.00	Fracture Reduction with Cast, Splint
"	"	79.70	Cast or Splint for Dislocation of Joint
"	"	93.51	Plaster Jacket
C.COLLAR	Cervical Collar	93.52	C-Collar, Molded and Minerva
CHEST	Chest Tube	34.04	
CHESTCT	Chest CT	87.41	CT of Thorax
"	"	87.42	Other Tomography of Thorax
CLOSED	Closed Reduction (Fx)	21.71	Closed Reduction of Nasal Fracture
"	"	76.70	Reduction of Facial Fx not otherwise Specified
"	"	76.71	Closed Reduction of Malar and Zygomatic Fracture
"	"	76.73	Closed Reduction of Maxillary Fracture
"	"	76.75	Closed Reduction of Mandibular Fracture

STATE	Description	ICD Code	
"	"	76.78	Other Closed Reduction of Facial Fracture
"	"	76.93	Closed Reduction of Temporomandibular Dislocation
"	"	31.64	Closed Reduction Larynx
"	Closed Reduction (Dislocation)	79.70	Closed Reduction Unspecified Site
"	"	79.71	Closed Reduction Shoulder
"	"	79.72	Closed Reduction Elbow
"	"	79.73	Closed Reduction Wrist
"	"	79.74	Closed Reduction Hand or Finger
"	"	79.75	Closed Reduction Hip
"	"	79.76	Closed Reduction Knee
"	"	79.77	Closed Reduction Ankle
"	"	79.78	Closed Reduction Foot or Toes
"	"	79.79	Closed Reduction Other Specified Site
"	Closed Reduction (Fx)	79.00	Closed Reduction Fx Unspecified Site
"	"	79.01	Closed Reduction Humerus
"	"	79.11	Closed Reduction Humerus with Internal Fixation
"	"	79.02	Closed Reduction Ulna, Radius or Arm
"	"	79.12	Closed Reduction Ulna, Radius or Arm with Internal Fixation
"	"	79.03	Closed Reduction Carpal, Metacarpal or Hand Not otherwise Specified
"	"	79.13	Closed Reduction Carpal, Metacarpal or Hand not Otherwise Specified with Internal Fixation
"	"	79.04	Closed Reduction Phalanges of Hand
"	"	79.14	Closed Reduction Phalanges of Hand with Internal Fixation
"	"	79.05	Closed Reduction Femur
"	"	79.15	Closed Reduction Femur with Internal Fixation
"	"	79.06	Closed Reduction Fibula, Tibia or Leg not Otherwise Specified
"	"	79.16	Closed Reduction Fibula, Tibia or Leg not Otherwise Specified with Internal Fixation
"	"	79.07	Closed Reduction Tarsal, Metatarsal or Foot not Otherwise Specified
"	"	79.17	Closed Reduction Tarsal, Metatarsal or Foot not Otherwise Specified with Internal Fixation
"	"	79.08	Closed Reduction Phalanges of Foot
"	"	79.18	Closed Reduction Phalanges of Foot with Internal Fixation
"	"	79.09	Closed Reduction of Other Specified Bone
"	"	79.19	Closed Reduction of Other Specified Bone with Internal Fixation
"	"	02.02	Closed Reduction of Skull
"	"	03.53	Closed Reduction of Vertebra
CO2MON	CO2 Monitor	99.99	

STATE	Description	ICD Code	
COFAC	Coagulation Factor Administration	99.06	Transfusion Coagulation Factors
"	"	99.05	Transfusion of Platelets
"	"	99.09	Transfusion of Other Substance
CRIC	Cricothyrotomy	31.1	For Assistance with Breathing
CT	Other CT Not listed	88.38	
EKG	Electrocardiogram (aka: ECG)	89.52	12 or More Leads
FFP	Fresh Frozen Plasma	99.07	Transfusion of Other Serum, Plasma
FOLEY	Indwelling Foley Catheter	57.94	
HEADCT	Head CT	87.03	Head
"	"	87.02	Brain or Skull
"	"	87.04	Other tomography of Head
"	"	88.38	Other CT (facial)
INTUB	Intubation	96.01	Insertion of nasopharyngeal airway
"	"	96.02	Insertion of oropharyngeal airway
"	"	96.03	Insertion of esophageal obturator airway
"	"	96.04	Insertion of endotracheal tube
"	"	96.05	Other intubation of respiratory tract
OR	All OR procedures not formally specified	99.99	
OTHER	Unspecified Other Procedure	99.99	
OXY	Oxygen Administration	93.96	
PLATE	Administration of Platelets	99.05	**Also Under Coagulation factors**
RBC	Administration of Packed Red Blood	99.04	
SPLINT	Splint	93.54	Plaster or Tray Splint, Musculoskeletal splinting **Also Under Cast**
SU	Suture (**Lacerations**)	54.63	Abdominal Wall
"	***(NOT an all inclusive list)***	54.61	Secondary (Abdominal Wall)
"	"	28.7	Adenoid Fossa
"	"	07.44	Adrenal (gland)
"	"	39.52	Aneurysm (cerebral) (peripheral)
"	"	49.71	Anus
"	"	83.64	Other Suture of Tendon
"	"	39.53	Arteriovenous Fistula
"	"	39.30	Suture Unspecified Blood Vessel
"	"	39.31	Artery (Including Aorta)
"	"	39.32	Vein
		51.71	Common Bile Duct
"	"	51.79	Bile Duct NOS (hepatic duct)
"	"	57.81	Bladder
"	"	85.81	Breast
"	"	33.41	Bronchus
"	"	33.43	Lung
"	"	83.99	Bursa
"	"	82.99	Hand (Operative)

STATE	Description	ICD Code	
"	"	09.73	Canaliculus
"	"	46.75	Cecum, Colon (large intestine)
"	"	02.11	Cerebral Meninges (dura mater)
"	"	67.61	Cervix (traumatic laceration)
"	"	34.71	Chest wall
"	"	27.61	Palate
"	"	10.6	Conjunctiva
"	"	11.51	Cornea, scleral
"	"	11.53	Conjunctival flap
"	"	34.82	Diaphragm
"	"	46.71	Duodenum
"	"	03.59	Spinal
"	"	18.4	Ear, External
"	"	63.51	Epididymis, Spermatic Cord
"	"	63.81	Vas Deferens
"	"	42.82	Esophagus
"	"	16.89	Eyeball
"	"	08.81	Eyebrow, Eyelid
"	"	51.91	Gallbladder
"	"	83.65	Fascia or Muscle
"	"	82.46	Fascia or Muscle of Hand
"	"	05.39	Sympathetic Nerve or Ganglion
"	"	24.32	Gingiva (gum)
"	"	37.49	Heart, Pericardium
"	"	46.73	Ileum, jejunum (small intestine, except duodenum)
"	"	81.96	Joint Capsule
"	"	81.93	Capsule or Ligament of Upper Extremity
"	"	81.94	Capsule or Ligament of Ankle or Foot
"	"	81.95	Capsule or Ligament of other Lower Extremity
"	"	55.81	Kidney
"	"	54.64	Peritoneum, Omentum
"	"	31.61	Larynx
"	"	81.96	Ligament
"	"	54.73	Other repair of peritoneum (gastric ligament)
"	"	27.51	Lip
"	"	50.61	Liver
"	"	54.75	Mesentery
"	"	27.52	Mouth
"	"	15.7	Extraocular Muscle or Tendon
"	"	04.3	Nerve, cranial or peripheral
"	"	21.81	Nose
"	"	52.95	Pancreas
"	"	71.71	Perineum, Pelvic Floor
"	"	64.41	Penis, Scrotum Skin
"	"	29.51	Pharynx
"	"	34.93	Pleura
"	"	48.71	Rectum
"	"	14.59	Retina (reattachment)

STATE	Description	ICD Code	
"	"	86.59	Skin and Subcutaneous closure Other sites (scalp) (adhesives, sutures, staples)
"	"	12.81	Sclera
"	"	41.95	Spleen
"	"	44.61	Stomach
"	"	83.61	Tendon Sheath
"	"	62.61	Testis
"	"	07.93	Thymus
"	"	06.93	Thyroid Gland
"	"	25.51	Tongue
"	"	31.71	Trachea
"	"	44.42	Duodenum
"	"	56.82	Ureter
"	"	58.41	Urethra
"	"	69.41	Uterus
"	"	70.71	Vagina
TET	Tetanus	99.38	
TRAC	Traction	93.41	Spinal Traction (tongs or halo)
"	"	93.42	Other Spinal Traction
"	"	93.43	Intermittent Skeletal Traction
"	"	93.44	Other Skeletal Traction
"	"	93.45	Thomas Splint Traction
"	"	93.46	Other Skin Traction of Limbs (tapes, boots, Buck's or Gallows)
TRACH	Tracheostomy	31.1	Temporary Tracheostomy
"	"	31.21	Mediastinal Tracheostomy
"	"	31.29	Other Permanent Tracheostomy
VENT	Mechanical Ventilation	96.70	Continuous Mechanical Ventilation of Unspecified duration
"	"	96.71	Continuous Mechanical Ventilation for less than 96 consecutive hours
"	"	96.72	Continuous Mechanical Ventilation for more than 96 consecutive hours
WARMFL	Warm Fluids Administered	99.99	
WARMPT	Warming of Patient	99.99	
XRAY	Other x-ray not specified	88.39	Other and Unspecified
"	***(This IS NOT an all inclusive list)***	87.05	Contrast dacryocystogram (tear duct)
"	"	87.06	Contrast Radiogram of Nasopharynx
"	"	87.09	Other Soft Tissue X-Ray of Face, Head and Neck (adenoid, larynx, salivary gland, thyroid region, nasolacrimal duct,nasopharynx)
"	"	87.11	Full-Mouth X-ray of Teeth
"	"	87.12	Other Dental X-ray (panorex, orthodontic Cephalogram, root canal x-rays)
"	"	87.13	Temporomandibular Contrast Arthrogram
"	"	87.14	Contrast Radiogram of Orbit
"	"	87.15	Contrast Radiogram of Sinus

STATE	Description	ICD Code	
"	"	87.16	Other X-ray of Facial Bones (frontal area, mandible, maxilla, nasal sinuses, nose, orbit, supraorbital area, symphysis menti, zygomaticomaxillary complex
"	"	87.17	Other X-ray of Skull (Lateral, Sagittal, Tangential)
"	"	87.21	Contrast Myelogram (Head)
"	"	87.31	Endotracheal Bronchogram
"	"	87.32	Other Contrast Bronchogram
"	"	87.36	Xerography of Breast
"	"	87.37	Other Mammography
"	"	87.38	Sinogram of Chest Wall (fistulogram of chest wall)
"	"	87.39	Other Soft Tissue of Chest Wall
"	"	87.52	Intravenous Cholangiogram (examine bile ducts with IV contrast)
"	"	87.54	Other Cholangiogram (NOT percutaneous or intraoperative)
"	"	87.59	Other Biliary Tract X-ray (cholecystogram)
"	"	87.61	Barium Swallow
"	"	87.62	Upper GI Series
"	"	87.63	Small Bowel Series
"	"	87.64	Lower GI Series
"	"	87.65	Other X-ray of Intestine
"	"	87.66	Contrast Pancreatogram
"	"	87.69	Other Digestive Tract X-Ray
"	"	87.73	Intravenous Pyelogram
"	"	87.74	Retrograde Pyelogram
"	"	87.76	Retrograde Cystogram (exam bladder and urethra with contrast through Catheter into bladder
"	"	87.77	Other Cystogram
"	"	87.79	Other X-ray of Urinary System (KUB)
"	"	87.81	X-ray Gravid Uterus
"	"	87.85	X-ray of Fallopian Tubes and Uterus
"	"	87.89	Other X-ray of Female Genital Organs
"	"	87.91	Contrast Seminal Vesiculogram
"	"	87.92	Other X-ray of Prostate and Seminal Vesiculogram
"	"	87.94	Contrast Vasogram
"	"	87.99	Other x-ray of male Genital Organs
"	"	88.03	Sinogram of Abdominal Wall (fistulogram of abdominal wall)
"	"	88.09	Other Soft Tissue of Abdominal Wall
"	"	88.11	Pelvic Opaque Dye Contrast Radiography
"	"	88.14	Retroperitoneal Fistulogram
"	"	88.16	Other retroperitoneal X-ray
"	"	88.19	Other X-ray of Abdomen (flat plate)

STATE	Description	ICD Code	
"	"	88.31	Skeletal Series (X-ray whole skeleton)
"	"	88.32	Contrast Arthrogram (NOT temporomandibular)
"	"	88.33	Other Skeletal x-ray
"	"	88.35	Other Soft Tissue X-ray of Upper Limb
"	"	88.37	Other Soft Tissue X-ray of Lower Limb
XRAYSPINE	X-ray of Spine (CS, TS, LS, SS)	87.22	CS
"	"	87.23	TS
"	"	87.24	LS & SS
"	"	87.29	Other x-ray of Spine NOS
XRAYCH	X-ray of Chest (Skeletal)	87.43	Rib, Sternum, and Clavicle
"	"	87.44	Routine chest x-ray, so described
"	"	87.39	Other Soft Tissue x-ray chest wall
"	"	87.49	Other CXR, NOS of Bronchus, Diaphragm, Heart, Lung, Mediastinum and Trachea
XRAYARM	X-ray of Arm (Skeletal)	88.21	Skeletal X-ray of Shoulder and Upper Arm
"	"	88.22	Skeletal X-ray of Elbow and Forearm
"	"	88.23	Skeletal X-ray of Wrist and Hand
"	"	88.24	Skeletal X-ray of Upper limb, Not otherwise specified
XRAYLEG	X-ray of Leg (Skeletal)	88.26	Skeletal X-ray of pelvis and hip
"	"	88.27	Skeletal X-ray of thigh, knee, and lower leg
"	"	88.28	Skeletal X-ray of ankle and foot
"	"	88.29	Skeletal X-ray of lower limb, Not otherwise specified
US	Ultrasound	88.71	US of Head & Neck
"	"	88.72	US of Heart (Echo, TEE)
"	"	88.73	US of Other Sites of Thorax (Aortic Arch, Breast & Lung)
"	"	88.74	US of Digestive System
"	"	88.75	US of Urinary System
"	"	88.76	US of Abdomen & Retroperitoneum (including FAST)
"	"	88.77	US of Peripheral Vascular System
"	"	88.78	US of Gravid Uterus
"	"	88.79	Other Diagnostic US (multiple sites, non-gravid uterus, total body)

Appendix J (Procedure Code Look Up)

PROCEDURE CODE LOOK-UPS

CODE	IMMOBILIZATION
93.59	Spine Board
93.52	Application Neck Support (collar)
93.54	Application Splint (plaster or tray)
93.58	Mast Pants
93.46	Other Skin Tract Limbs
93.45	Traction Splint (Hare, Thomas, Sager)
93.53	Cast (fiberglass, plastic, plaster)
	AIRWAY
31.1	Cricothyroidotomy, Temporary Trach
96.01	Insert Nasopharyngeal Airway
96.02	Insert Oropharyngeal Airway
96.04	Intubate, Endotracheal
96.05	Other Intubation of Respiratory Tract
34.04	Chest Tube
34.09	Needle Decompression
93.96	Oxygen Administration
	CPR
99.60	Cardiopulmonary Resuscitation
99.63	Closed Chest Massage
93.93	Mouth to Mouth
99.62	Cardioversion, Defibrillation
	WOUND CARE
86.28	Nonincisional Debridement Wound
96.59	Wound Irrigation
93.56	Application of Pressure Dressing
	SUTURE
86.59	Suture Skin/SQ Tissue of Other Sites
18.4	Suture Ear, External
08.81	Suture Eyebrow or Eyelid
27.51	Suture Lip
27.52	Suture Mouth
21.81	Suture Nose
24.32	Suture Gingiva
25.51	Suture Tongue
39.31	Suture Artery
39.32	Suture Vein
	TRANSFUSION

CODE	ULTRASOUND
88.71	Diagnostic US Head & Neck
88.72	Diagnostic US of Heart (TEE, echo)
88.73	Diagnostic US of Thorax
88.74	Diagnostic US of Digestive System
88.75	Diagnostic US of Urinary System
88.76	Diagnostic US of Abd & Retroperitoneum (**FAST**)
88.77	Diagnostic US Peripheral Vascular System
88.78	Diagnostic US of Gravid Uterus
88.79	Other Diagnostic US (multiple, total body)
	MRI
88.91	MRI of Brain & Brain Stem
88.92	MRI of Chest & Myocardium
88.93	MRI of Spinal Canal, Cord
88.94	MRI of Musculoskeletal
88.95	MRI of Pelvis, Prostate, Bladder
88.97	MRI Other and Unspecified
	CT SCANS
87.03	CT Head
87.41	CT Thorax
87.71	CT Kidney
88.01	CT Abdomen
88.38	CT Other Skeletal
	X-RAY EXTREMITIES (Skeletal)
88.21	Shoulder & Upper Arm
88.22	Elbow & Forearm
88.23	Wrist & Hand
88.24	Upper Limb Not Specified
88.26	Pelvis & Hip
88.27	Thigh, Knee & Lower Leg
88.28	Ankle & Foot
88.29	Lower Limbs Not Specified
88.33	Other Skeletal
	X-RAYS
87.16	Facial
87.17	Skull
87.22	C-Spine
87.23	T-Spine

99.00	Perioperative autologous (cellsaver)		87.24	L-Spine
99.04	Packed Cells		87.29	Other Spine
99.05	Platelets		87.43	Ribs, Sternum & Clavicle
99.06	Coagulation Factors		87.44	Routine Chest
99.07	Other Serum (plasma)		87.49	Other Chest (mediastinum, trachea)
99.08	Blood Expander		87.76	Retrograde Cystourethrogram
			87.79	KUB
			88.09	Soft Tissue of Abdominal Wall
			88.19	Abdomen
			87.12	Panogram

CODE	CLOSED REDUCTION of DISLOCATION		CODE	CLOSED REDUCTION of FRACTURE
79.70	Unspecified			WITHOUT INTERNAL FIXATION
79.71	Shoulder		79.00	Unspecified
79.72	Elbow		79.01	Humerus
79.73	Wrist		79.02	Radius & Ulna
79.74	Hand & Finger		79.03	Carpals & Metacarpals
79.75	Hip		79.04	Phalanges of Hand
79.76	Knee		79.05	Femur
79.77	Ankle		79.06	Tibia & Fibula
79.78	Foot & Toe		79.07	Tarsals & Metatarsals
79.79	Other Specified		79.08	Phalanges of Foot
			79.09	Other Specified Bone
CODE	MISC		CODE	MISC
37.0	Pericardiocentesis		96.70	Continuous Mechanical Ventilation Unspecified Time
38.91	Arterial Line Insertion		96.71	Continuous Mechanical Ventilation <96 Hours
87.77	Cystogram		96.72	Continuous Mechanical Ventilation >96 Hours
83.14	Fasciotomy		93.41	Spinal *Traction* (Halo or tongs)
99.38	Tetanus		02.94	Insertion(application) Tongs or Halo
89.52	EKG		02.2	Ventriculostomy
54.25	Peritoneal Lavage		01.26	Intracranial Pressure Monitoring
96.07	NG tube for Decompression			
57.94	Indwelling Bladder Catheter			
57.17	Percutaneous Suprapubic Catheter			

Appendix K (Occupational Code Definitions)

OCCUPATIONAL CODE DEFINITIONS

BUS (Business and Financial Operations)

Administrative Services Managers
Advertising
Agricultural Managers
Chief Executives
Compensations and Benefits Managers
Computer and Information Systems Managers
Construction Managers
Education Administrators
Education Administrators, All Other
Education Administrators, Elementary and Secondary School
Education Administrators, Postsecondary
Education Administrators, Preschool and Child Care Center/Program
Engineering Managers
Farm, Ranch, and Other Agricultural Managers
Farmers and Ranchers
Financial Managers
Food Service Managers
Funeral Directors
Gaming Managers
General and Operations Managers
Human Resources Managers
Industrial Production Managers
Legislators
Lodging Managers
Managers, All Other
Marketing
Medical and Health Services Managers
Miscellaneous Managers
Natural Sciences Managers
Postmasters and Mail Superintendents
Promotions
Property, Real Estate, and Community Association Managers
Public Relations
Purchasing Managers
Sales Managers
Social and Community Service Managers
Training and Development Managers
Transportation, Storage, and Distribution Manager

ARC (Architecture and Engineering Occupations)

Engineers
Architects
Cartographers
Drafters
Mapping Technicians
Surveyors

COM (Community and Social Service Occupations)

Clergy
Counselors
Directors, Religious Activities and Education
Health Educators
Miscellaneous Community and Social Service Specialists
Probation Officers and Correctional Treatment Specialists

Religious Workers
Social and Human Service Assistants
Social Workers

ED (Education, Training and Library Occupations)

Adult Literacy, Remedial Education, and GED Teachers and Instructors
Agricultural Sciences Teachers, Postsecondary
Anthropology and Archeology Teachers, Postsecondary
Archivists
Art, Drama, and Music Teachers, Postsecondary
Arts, Communications, and Humanities Teachers, Postsecondary
Atmospheric, Earth, Marine, and Space Sciences Teachers, Postsecondary
Audio-Visual Collections Specialists
Biological Science Teachers, Postsecondary
Business Teachers, Postsecondary
Chemistry Teachers, Postsecondary
Communications Teachers, Postsecondary
Computer Science Teachers, Postsecondary
Conservators
Criminal Justice and Law Enforcement Teachers, Postsecondary
Curators
Economics Teachers, Postsecondary
Education and Library Science Teachers, Postsecondary
Education Teachers, Postsecondary
Education, Training, and Library Workers, All Other
Elementary and Middle School Teachers
Engineering and Architecture Teachers, Postsecondary
English Language and Literature Teachers, Postsecondary
Environmental Science Teachers, Postsecondary
Farm and Home Management Advisors
Foreign Language and Literature Teachers, Postsecondary
Forestry and Conservation Science Teachers, Postsecondary
Geography Teachers, Postsecondary
Graduate Teaching Assistants
Health Specialties Teachers, Postsecondary
Health Teachers, Postsecondary
History Teachers, Postsecondary
Home Economics Teachers, Postsecondary
Instructional Coordinators
Law Teachers, Postsecondary
Law, Criminal Justice, and Social Work Teachers, Postsecondary
Librarians
Library Science Teachers, Postsecondary
Library Technicians
Life Sciences Teachers, Postsecondary
Math and Computer Teachers, Postsecondary
Mathematical Science Teachers, Postsecondary
Miscellaneous Postsecondary Teachers
Miscellaneous Teachers and Instructors
Museum Technicians
Nursing Instructors and Teachers, Postsecondary
Other Education, Training, and Library Occupations
Other Teachers and Instructors
Philosophy and Religion Teachers, Postsecondary
Physical Sciences Teachers, Postsecondary
Physics Teachers, Postsecondary
Political Science Teachers, Postsecondary
Postsecondary Teachers

Postsecondary Teachers, All Other
Preschool and Kindergarten Teachers
Primary, Secondary, and Special Education School Teachers
Psychology Teachers, Postsecondary
Recreation and Fitness Studies Teachers, Postsecondary
Secondary School Teachers
Self-Enrichment Education Teachers
Social Sciences Teachers, Postsecondary
Social Sciences Teachers, Postsecondary, All Other
Social Work Teachers, Postsecondary
Sociology Teachers, Postsecondary
Special Education Teachers, Middle School
Special Education Teachers, Preschool, Kindergarten, and Elementary School
Special Education Teachers, Secondary School
Teacher Assistants
Vocational Education Teachers, Middle School
Vocational Education Teachers, Postsecondary
Vocational Education Teachers, Secondary School

HEALTH (Health Care Practitioners and Technical Occupations)

Anesthesiologists
Athletic Trainers
Audiologists
Cardiovascular Technologists and Technicians
Chiropractors
Dental Hygienists
Dentists, All Other Specialists
Diagnostic Medical Sonographers
Diagnostic Related Technologists and Technicians
Dietetic Technicians
Dietitians and Nutritionists
Emergency Medical Technicians and Paramedics
Family and General Practitioners
Health Diagnosing and Treating Practitioner Support Technicians
Health Diagnosing and Treating Practitioners
Health Diagnosing and Treating Practitioners, All Other
Health Technologists and Technicians
Health Technologists and Technicians, All Other
Internists, General
Licensed Practical and Licensed Vocational Nurses
Medical and Clinical Laboratory Technologists
Medical Records and Health Information Technicians
Miscellaneous Health Practitioners and Technical Workers
Nuclear Medicine Technologists
Obstetricians and Gynecologists
Occupational Health and Safety Specialists and Technicians
Occupational Therapists
Opticians, Dispensing
Optometrists
Oral and Maxillofacial Surgeons
Orthodontists
Orthotists and Prosthetists
Pediatricians, General
Pharmacists
Pharmacy Technicians
Physical Therapists
Physician Assistants
Physicians and Surgeons

Podiatrists
Prosthodontists
Psychiatric Technicians
Psychiatrists
Radiation Therapists
Radiologic Technologists and Technicians
Recreational Therapists
Registered Nurses
Respiratory Therapists
Respiratory Therapy Technicians
Speech-Language Pathologists
Surgeons
Surgical Technologists
Therapists
Therapists, All Other
Veterinarians
Veterinary Technologists and Technicians

PRO (Protective Service Occupations)

Animal Control Workers
Bailiffs, Correctional Officers, and Jailers
Crossing Guards
Detectives and Criminal Investigators
Fire Inspectors and Investigators
First-Line Supervisors/Managers of Correctional Officers
First-Line Supervisors/Managers of Police and Detectives
First-Line Supervisors/Managers, Fire Fighting and Prevention Workers
First-Line Supervisors/Managers, Law Enforcement Workers
First-Line Supervisors/Managers, Protective Service Workers
First-Line Supervisors/Managers, Protective Service Workers, All Other
Fish and Game Wardens
Forest Fire Inspectors and Prevention Specialists
Gaming Surveillance Officers and Gaming Investigators
Law Enforcement Workers
Lifeguards, Ski Patrol, and Other Recreational Protective Service Workers
Miscellaneous Protective Service Workers
Parking Enforcement Workers
Police and Sheriff's Patrol Officers
Private Detectives and Investigators
Protective Service Workers, All Other
Security Guards
Transit and Railroad Police

MAIN (Building and Grounds Cleaning and Maintenance Occupations)

Building Cleaning and Pest Control Workers
Building Cleaning Workers, All Other
First-Line Supervisors/Managers of Housekeeping and Janitorial Workers
First-Line Supervisors/Managers of Landscaping, Lawn Service, and Groundskeeping Workers
Grounds Maintenance Workers
Grounds Maintenance Workers, All Other
Janitors and Cleaners
Landscaping and Groundskeeping Workers
Maids and Housekeeping Cleaners
Pest Control Workers
Pesticide Handlers, Sprayers, and Applicators, Vegetation
Supervisors, Building and Grounds Cleaning and Maintenance Workers
Tree Trimmers and Pruners

SALE (Sales and Related Occupations)

Advertising Sales Agents
Cashiers
Counter and Rental Clerks and Parts Salespersons
Door-To-Door Sales Workers, News and Street Vendors, and Related Workers
First-Line Supervisors/Managers of Non-Retail Sales Workers
First-Line Supervisors/Managers of Retail Sales Workers
First-Line Supervisors/Managers, Sales Workers
Gaming Change Persons and Booth Cashiers
Insurance Sales Agents
Miscellaneous Sales and Related Workers
Models, Demonstrators, and Product Promoters
Other Sales and Related Workers
Real Estate Brokers and Sales Agents
Retail Sales Workers
Retail Salespersons
Sales and Related Workers, All Other
Sales Engineers
Sales Representatives, Services
Sales Representatives, Services, All Other
Sales Representatives, Wholesale and Manufacturing, Technical and Scientific Products Sales Representatives, Wholesale and Manufacturing, Except Technical and Scientific Products
Securities, Commodities, and Financial Services Sales Agents
Telemarketers
Travel Agents

FARM (Farming, Fishing and Forestry Occupations)

Agricultural Equipment Operators
Agricultural Inspectors
Agricultural Workers
Agricultural Workers, All Other
Animal Breeders
Fallers
Farm Labor Contractors
Farm workers and Laborers, Crop, Nursery, and Greenhouse
Farm workers, Farm and Ranch Animals
First-Line Supervisors/Managers of Farming, Fishing, and Forestry Workers
Fishers and Related Fishing Workers
Fishing and Hunting Workers
Forest, Conservation, and Logging Workers
Graders and Sorters, Agricultural Products
Hunters and Trappers
Log Graders and Scalers
Logging Equipment Operators
Logging Workers, All Other
Miscellaneous Agricultural Workers

REP (Installation, Maintenance and Repair Occupations)

Aircraft Mechanics and Service Technicians
Automotive Glass Installers and Repairers
Automotive Service Technicians and Mechanics
Avionics Technicians
Bicycle Repairers
Bus and Truck Mechanics and Diesel Engine Specialists
Camera and Photographic Equipment Repairers
Coin, Vending, and Amusement Machine Servicers and Repairers
Commercial Divers
Computer, Automated Teller, and Office Machine Repairers

Control and Valve Installers and Repairers
Control and Valve Installers and Repairers, Except Mechanical Door
Electric Motor, Power Tool, and Related Repairers
Electrical and Electronic Equipment Mechanics, Installers, and Repairers
Electrical and Electronics Installers and Repairers, Transportation Equipment
Electrical and Electronics Repairers, Commercial and Industrial Equipment
Electrical and Electronics Repairers, Powerhouse, Substation, and Relay
Electronic Equipment Installers and Repairers, Motor Vehicles
Electronic Home Entertainment Equipment Installers and Repairers
Fabric Menders, Except Garment
Farm Equipment Mechanics
First-Line Supervisors/Managers of Mechanics, Installers, and Repairers
Heating, Air Conditioning, and Refrigeration Mechanics and Installers
Heavy Vehicle and Mobile Equipment Service Technicians and Mechanics
Helpers--Installation, Maintenance, and Repair Workers
Home Appliance Repairers
Industrial Machinery Installation, Repair, and Maintenance Workers
Industrial Machinery Mechanics
Installation, Maintenance, and Repair Workers, All Other
Line Installers and Repairers
Locksmiths and Safe Repairers
Maintenance and Repair Workers, General
Maintenance Workers, Machinery
Manufactured Building and Mobile Home Installers
Mechanical Door Repairers
Medical Equipment Repairers
Millwrights
Miscellaneous Electrical and Electronic Equipment Mechanics, Installers, and Repairers
Miscellaneous Installation, Maintenance, and Repair Workers
Miscellaneous Vehicle and Mobile Equipment Mechanics, Installers, and Repairers
Mobile Heavy Equipment Mechanics, Except Engines
Motorboat Mechanics
Motorcycle Mechanics
Musical Instrument Repairers and Tuners
Other Installation, Maintenance, and Repair Occupations
Outdoor Power Equipment and Other Small Engine Mechanics
Precision Instrument and Equipment Repairers
Precision Instrument and Equipment Repairers, All Other
Radio and Telecommunications Equipment Installers and Repairers
Radio Mechanics
Rail Car Repairers
Recreational Vehicle Service Technicians
Refractory Materials Repairers, Except Brickmasons
Riggers
Security and Fire Alarm Systems Installers
Signal and Track Switch Repairers
Small Engine Mechanics
Supervisors of Installation, Maintenance, and Repair Workers
Telecommunications Equipment Installers and Repairers, Except Line Installers
Tire Repairers and Changers
Vehicle and Mobile Equipment Mechanics, Installers, and Repairers
Watch Repairers

TRANS (Transportation and Material Moving Occupations)

Air Traffic Controllers and Airfield Operations Specialists
Air Transportation Workers
Aircraft Cargo Handling Supervisors
Ambulance Drivers and Attendants, Except Emergency Medical Technicians

Bridge and Lock Tenders
Bus Drivers, School
Bus Drivers, Transit and Intercity
Captains, Mates, and Pilots of Water Vessels
Cleaners of Vehicles and Equipment
Commercial Pilots
Conveyor Operators and Tenders
Crane and Tower Operators
Dredge, Excavating, and Loading Machine Operators
Driver/Sales Workers and Truck Drivers
Excavating and Loading Machine and Dragline Operators
First-Line Supervisors/Managers of Helpers, Laborers, and Material Movers, Hand
First-Line Supervisors/Managers of Transportation and Material-Moving Machine and Vehicle Operators
Gas Compressor and Gas Pumping Station Operators
Hoist and Winch Operators
Industrial Truck and Tractor Operators
Laborers and Freight, Stock, and Material Movers, Hand
Laborers and Material Movers, Hand
Loading Machine Operators, Underground Mining
Locomotive Engineers and Operators
Locomotive Firers
Machine Feeders and Offbearers
Material Moving Workers
Material Moving Workers, All Other
Motor Vehicle Operators
Motor Vehicle Operators, All Other
Motorboat Operators
Other Transportation Workers
Packers and Packagers, Hand
Parking Lot Attendants
Pump Operators, Except Wellhead Pumpers
Pumping Station Operators
Rail Transportation Workers
Rail Transportation Workers, All Other
Rail Yard Engineers, Dinkey Operators, and Hostlers
Railroad Brake, Signal, and Switch Operators
Railroad Conductors and Yardmasters
Refuse and Recyclable Material Collectors
Sailors and Marine Oilers
Service Station Attendants
Ship and Boat Captains and Operators
Ship Engineers
Shuttle Car Operators
Subway and Streetcar Operators
Supervisors, Transportation and Material Moving Workers
Tank Car, Truck, and Ship Loaders
Taxi Drivers and Chauffeurs
Traffic Technicians
Transportation Inspectors
Transportation Workers, All Other
Truck Drivers, Heavy and Tractor-Trailer
Truck Drivers, Light or Delivery Services
Water Transportation Workers
Wellhead Pumpers

MAN (Management Occupations)

Administrative Services Managers
Advertising, Marketing, Promotions, Public Relations, and Sales Managers

Agricultural Managers
Chief Executives
Compensation and Benefits Managers
Computer and Information Systems Managers
Construction Managers
Education Administrators
Education Administrators, All Other
Education Administrators, Elementary and Secondary School
Education Administrators, Postsecondary
Education Administrators, Preschool and Child Care Center/Program
Engineering Managers
Farm, Ranch, and Other Agricultural Managers
Farmers and Ranchers
Financial Managers
Food Service Managers
Funeral Directors
Gaming Managers
General and Operations Managers
Human Resources Managers
Human Resources Managers, All Other
Industrial Production Managers
Legislators
Lodging Managers
Managers, All Other
Medical and Health Services Managers
Miscellaneous Managers
Natural Sciences Managers
Operations Specialties Managers
Other Management Occupations
Postmasters and Mail Superintendents
Property, Real Estate, and Community Association Managers
Purchasing Managers
Social and Community Service Managers
Top Executives
Training and Development Managers
Transportation, Storage, and Distribution Managers

COMP (Computer and Mathematical Occupations)

Actuaries
Computer and Information Scientists, Research
Computer Programmers
Computer Software Engineers
Computer Software Engineers, Applications
Computer Software Engineers, Systems Software
Computer Specialists
Computer Specialists, All Other
Computer Support Specialists
Computer Systems Analysts
Database Administrators
Mathematical Science Occupations
Mathematical Science Occupations, All Other
Mathematical Technicians
Mathematicians
Network and Computer Systems Administrators
Network Systems and Data Communications Analysts
Operations Research Analysts
Statisticians

SCI (Life, Physical and Social Science Occupations)

Agricultural and Food Science Technicians
Agricultural and Food Scientists
Animal Scientists
Anthropologists and Archeologists
Astronomers and Physicists
Biochemists and Biophysicists
Biological Scientists
Biological Scientists, All Other
Biological Technicians
Chemical Technicians
Chemists and Materials Scientists
Clinical, Counseling, and School Psychologists
Conservation Scientists and Foresters
Economists
Environmental Science and Protection Technicians, Including Health
Epidemiologists
Food Scientists and Technologists
Forensic Science Technicians
Forest and Conservation Technicians
Geographers
Geological and Petroleum Technicians
Geoscientists
Historians
Hydrologists
Life Scientists
Life Scientists, All Other
Life, Physical, and Social Science Technicians
Life, Physical, and Social Science Technicians, All Other
Market and Survey Researchers
Medical Scientists
Microbiologists
Miscellaneous Life Scientists
Miscellaneous Life, Physical, and Social Science Technicians
Miscellaneous Physical Scientists
Miscellaneous Social Scientists and Related Workers
Nuclear Technicians
Physical Scientists
Physical Scientists, All Other
Political Scientists
Psychologists
Social Science Research Assistants
Social Scientists and Related Workers
Social Scientists and Related Workers, All Other
Sociologists
Soil and Plant Scientists
Urban and Regional Planners
Zoologists and Wildlife Biologists

LEGAL (Legal Occupations)

Administrative Law Judges, Adjudicators, and Hearing Officers
Arbitrators, Mediators, and Conciliators
Court Reporters
Judges, Magistrate Judges, and Magistrates
Judges, Magistrates, and Other Judicial Workers
Law Clerks
Lawyers, Judges, and Related Workers
Legal Support Workers

Legal Support Workers, All Other
Miscellaneous Legal Support Workers
Paralegals and Legal Assistants
Title Examiners, Abstractors, and Searchers

ENT (Art, Design, Entertainment, Sports and Media Occupations)

Actors, Producers, and Directors
Announcers
Art and Design Workers
Art Directors
Artists and Related Workers
Artists and Related Workers, All Other
Athletes and Sports Competitors
Athletes, Coaches, Umpires, and Related Workers
Audio and Video Equipment Technicians
Broadcast News Analysts
Broadcast Technicians
Camera Operators, Television, Video, and Motion Picture
Coaches and Scouts
Commercial and Industrial Designers
Craft Artists
Dancers and Choreographers
Designers
Designers, All Other
Entertainers and Performers, Sports and Related Workers
Entertainers and Performers, Sports and Related Workers, All Other
Fashion Designers
Film and Video Editors
Fine Artists, Including Painters, Sculptors, and Illustrators
Floral Designers
Graphic Designers
Interior Designers
Interpreters and Translators
Media and Communication Equipment Workers, All Other
Media and Communication Workers
Media and Communication Workers, All Other
Merchandise Displayers and Window Trimmers
Multi-Media Artists and Animators
Music Directors and Composers
Musicians, Singers, and Related Workers
News Analysts, Reporters and Correspondents
Photographers
Public Address System and Other Announcers
Public Relations Specialists
Radio and Television Announcers
Radio Operators
Reporters and Correspondents
Set and Exhibit Designers
Sound Engineering Technicians
Technical Writers
Television, Video, and Motion Picture Camera Operators and Editors
Umpires, Referees, and Other Sports Officials
Writers and Authors
Writers and Editors

HS (Health Care Support Occupations)

Dental Assistants
Healthcare Support Workers, All Other

Home Health Aides
Massage Therapists
Medical Assistants
Medical Equipment Preparers
Medical Transcriptionists
Miscellaneous Healthcare Support Occupations
Nursing Aides, Orderlies, and Attendants
Nursing, Psychiatric, and Home Health Aides
Nursing, Psychiatric, and Home Health Aides
Occupational and Physical Therapist Assistants and Aides
Occupational Therapist Assistants and Aides
Other Healthcare Support Occupations
Pharmacy Aides
Physical Therapist Assistants and Aides
Psychiatric Aides
Veterinary Assistants and Laboratory Animal Caretakers

FOOD (Food Preparation and Serving Related Occupations)

Bartenders
Chefs and Head Cooks
Combined Food Preparation and Serving Workers, Including Fast Food
Cooks
Cooks and Food Preparation Workers
Cooks, All Other
Cooks, Fast Food
Cooks, Institution and Cafeteria
Cooks, Private Household
Cooks, Restaurant
Cooks, Short Order
Counter Attendants, Cafeteria, Food Concession, and Coffee Shop
Dining Room and Cafeteria Attendants and Bartender Helpers
Dishwashers
Fast Food and Counter Workers
First-Line Supervisors/Managers, Food Preparation and Serving Workers
Food and Beverage Serving Workers
Food Preparation and Serving Related Workers, All Other
Food Preparation Workers
Food Servers, Nonrestaurant
Hosts and Hostesses, Restaurant, Lounge, and Coffee Shop
Other Food Preparation and Serving Related Workers
Supervisors, Food Preparation and Serving Workers
Waiters and Waitresses

PER (Personal Care and Service Occupations)

Amusement and Recreation Attendants
Animal Care and Service Workers
Animal Trainers
Baggage Porters, Bellhops, and Concierges
Barbers and Cosmetologists
Child Care Workers
Costume Attendants
Embalmers
Entertainment Attendants and Related Workers
Entertainment Attendants and Related Workers, All Other
First-Line Supervisors/Managers of Gaming Workers
First-Line Supervisors/Managers of Personal Service Workers
Fitness Trainers and Aerobics Instructors
Flight Attendants

Funeral Attendants
Funeral Service Workers
Gaming and Sports Book Writers and Runners
Gaming Dealers
Gaming Service Workers, All Other
Gaming Services Workers
Gaming Supervisors
Hairdressers, Hairstylists, and Cosmetologists
Locker Room, Coatroom, and Dressing Room Attendants
Makeup Artists, Theatrical and Performance
Manicurists and Pedicurists
Miscellaneous Entertainment Attendants and Related Workers
Miscellaneous Personal Appearance Workers
Motion Picture Projectionists
Nonfarm Animal Caretakers
Other Personal Care and Service Workers
Personal and Home Care Aides
Personal Appearance Workers
Personal Care and Service Workers, All Other
Recreation and Fitness Workers
Residential Advisors
Shampooers
Skin Care Specialists
Slot Key Persons
Supervisors, Personal Care and Service Workers
Tour and Travel Guides
Tour Guides and Escorts
Transportation Attendants
Transportation Attendants, Except Flight Attendants and Baggage Porters
Transportation, Tourism, and Lodging Attendants
Ushers, Lobby Attendants, and Ticket Takers

OFFICE (Office and Administrative Support Occupations)

Bill and Account Collectors
Billing and Posting Clerks and Machine Operators
Bookkeeping, Accounting, and Auditing Clerks
Brokerage Clerks
Cargo and Freight Agents
Communications Equipment Operators
Communications Equipment Operators, All Other
Computer Operators
Correspondence Clerks
Couriers and Messengers
Court, Municipal, and License Clerks
Credit Authorizers, Checkers, and Clerks
Customer Service Representatives
Data Entry and Information Processing Workers
Data Entry Keyers
Desktop Publishers
Dispatchers
Dispatchers, Except Police, Fire, and Ambulance
Eligibility Interviewers, Government Programs
Executive Secretaries and Administrative Assistants
File Clerks
Financial Clerks
First-Line Supervisors/Managers of Office and Administrative Support Workers
Gaming Cage Workers
Hotel, Motel, and Resort Desk Clerks

Human Resources Assistants, Except Payroll and Timekeeping
Information and Record Clerks
Information and Record Clerks, All Other
Insurance Claims and Policy Processing Clerks
Interviewers, Except Eligibility and Loan
Legal Secretaries
Library Assistants, Clerical
Loan Interviewers and Clerks
Mail Clerks and Mail Machine Operators, Except Postal Service
Material Recording, Scheduling, Dispatching, and Distributing Workers
Medical Secretaries
Meter Readers, Utilities
New Accounts Clerks
Office and Administrative Support Workers, All Other
Office Clerks, General
Office Machine Operators, Except Computer
Order Clerks
Other Office and Administrative Support Workers
Payroll and Timekeeping Clerks
Police, Fire, and Ambulance Dispatchers
Postal Service Clerks
Postal Service Mail Carriers
Postal Service Mail Sorters, Processors, and Processing Machine Operators
Postal Service Workers
Procurement Clerks
Production, Planning, and Expediting Clerks
Proofreaders and Copy Markers
Receptionists and Information Clerks
Reservation and Transportation Ticket Agents and Travel Clerks
Secretaries and Administrative Assistants
Secretaries, Except Legal, Medical, and Executive
Shipping, Receiving, and Traffic Clerks
Statistical Assistants
Stock Clerks and Order Fillers
Supervisors, Office and Administrative Support Workers
Switchboard Operators, Including Answering Service
Telephone Operators
Tellers
Weighers, Measurers, Checkers, and Samplers, Recordkeeping
Word Processors and Typists

CONS (Construction and Extrication Occupations)

Boilermakers
Brickmasons, Blockmasons, and Stonemasons
Carpenters
Carpet, Floor, and Tile Installers and Finishers
Cement Masons, Concrete Finishers, and Terrazzo Workers
Construction and Building Inspectors
Construction and Related Workers, All Other
Construction Equipment Operators
Construction Laborers
Construction Trades Workers
Continuous Mining Machine Operators
Derrick, Rotary Drill, and Service Unit Operators, Oil, Gas, and Mining
Drywall Installers, Ceiling Tile Installers, and Tapers
Earth Drillers, Except Oil and Gas
Electricians
Elevator Installers and Repairers

Explosives Workers, Ordnance Handling Experts, and Blasters
Extraction Workers
Extraction Workers, All Other
Fence Erectors
First-Line Supervisors/Managers of Construction Trades and Extraction Workers
Floor Layers, Except Carpet, Wood, and Hard Tiles
Floor Sanders and Finishers
Glaziers
Hazardous Materials Removal Workers
Helpers, Construction Trades
Helpers, Construction Trades, All Other
Helpers--Brickmasons, Blockmasons, Stonemasons, and Tile and Marble Setters
Helpers--Carpenters
Helpers--Electricians
Helpers--Extraction Workers
Helpers--Painters, Paperhangers, Plasterers, and Stucco Masons
Helpers--Pipelayers, Plumbers, Pipefitters, and Steamfitters
Helpers--Roofers
Highway Maintenance Workers
Insulation Workers, Floor, Ceiling, and Wall
Insulation Workers, Mechanical
Mine Cutting and Channeling Machine Operators
Mining Machine Operators
Mining Machine Operators, All Other
Operating Engineers and Other Construction Equipment Operators
Other Construction and Related Workers
Painters and Paperhangers
Painters, Construction and Maintenance
Paving, Surfacing, and Tamping Equipment Operators
Pile-Driver Operators
Pipelayers, Plumbers, Pipefitters, and Steamfitters
Plasterers and Stucco Masons
Rail-Track Laying and Maintenance Equipment Operators
Reinforcing Iron and Rebar Workers
Rock Splitters, Quarry
Roof Bolters, Mining
Roofers
Roustabouts, Oil and Gas
Segmental Pavers
Septic Tank Servicers and Sewer Pipe Cleaners
Service Unit Operators, Oil, Gas, and Mining
Sheet Metal Workers
Structural Iron and Steel Workers
Supervisors, Construction and Extraction Workers
Tile and Marble Setters

PROD (Production Occupations)

Aircraft Structure, Surfaces, Rigging, and Systems Assemblers
Assemblers and Fabricators
Assemblers and Fabricators, All Other
Bakers
Bookbinders and Bindery Workers
Butchers and Meat Cutters
Butchers and Other Meat, Poultry, and Fish Processing Workers
Cabinetmakers and Bench Carpenters
Cementing and Gluing Machine Operators and Tenders
Chemical Plant and System Operators
Chemical Processing Machine Setters, Operators, and Tenders

Cleaning, Washing, and Metal Pickling Equipment Operators and Tenders
Coating, Painting, and Spraying Machine Setters, Operators, and Tenders
Coil Winders, Tapers, and Finishers
Computer Control Programmers and Operators
Computer-Controlled Machine Tool Operators, Metal and Plastic
Cooling and Freezing Equipment Operators and Tenders
Crushing, Grinding, and Polishing Machine Setters, Operators, and Tenders
Crushing, Grinding, Polishing, Mixing, and Blending Workers
Cutters and Trimmers, Hand
Cutting and Slicing Machine Setters, Operators, and Tenders
Cutting Workers
Cutting, Punching, and Press Machine Setters, Operators, and Tenders, Metal and Plastic
Dental Laboratory Technicians
Drilling and Boring Machine Tool Setters, Operators, and Tenders, Metal and Plastic
Electrical and Electronic Equipment Assemblers
Electrical, Electronics, and Electromechanical Assemblers
Electromechanical Equipment Assemblers
Engine and Other Machine Assemblers
Etchers and Engravers
Extruding and Drawing Machine Setters, Operators, and Tenders, Metal and Plastic
Extruding and Forming Machine Setters, Operators, and Tenders, Synthetic and Glass Fibers
Extruding, Forming, Pressing, and Compacting Machine Setters, Operators, and Tenders
Fabric and Apparel Patternmakers
Fiberglass Laminators and Fabricators
First-Line Supervisors/Managers of Production and Operating Workers
Food and Tobacco Roasting, Baking, and Drying Machine Operators and Tenders
Food Batchmakers
Food Cooking Machine Operators and Tenders
Food Processing Workers
Forming Machine Setters, Operators, and Tenders, Metal and Plastic
Foundry Mold and Coremakers
Furnace, Kiln, Oven, Drier, and Kettle Operators and Tenders
Furniture Finishers
Gas Plant Operators
Grinding and Polishing Workers, Hand
Grinding, Lapping, Polishing, and Buffing Machine Tool Setters, Operators, and Tenders, Metal and Plastic
Heat Treating Equipment Setters, Operators, and Tenders, Metal and Plastic
Helpers--Production Workers
Inspectors, Testers, Sorters, Samplers, and Weighers
Jewelers and Precious Stone and Metal Workers
Job Printers
Lathe and Turning Machine Tool Setters, Operators, and Tenders, Metal and Plastic
Laundry and Dry-Cleaning Workers
Lay-Out Workers, Metal and Plastic
Machine Tool Cutting Setters, Operators, and Tenders, Metal and Plastic
Machinists
Meat, Poultry, and Fish Cutters and Trimmers
Medical Appliance Technicians
Medical, Dental, and Ophthalmic Laboratory Technicians
Metal Furnace and Kiln Operators and Tenders
Metal Workers and Plastic Workers
Metal Workers and Plastic Workers, All Other
Metal-Refining Furnace Operators and Tenders
Milling and Plating Machine Setters, Operators, and Tenders, Metal and Plastic
Miscellaneous Assemblers and Fabricators
Miscellaneous Food Processing Workers
Miscellaneous Plant and System Operators
Miscellaneous Production Workers
Miscellaneous Woodworkers

Mixing and Blending Machine Setters, Operators, and Tenders
Model Makers and Patternmakers, Metal and Plastic
Model Makers and Patternmakers, Wood
Molders and Molding Machine Setters, Operators, and Tenders, Metal and Plastic
Molders, Shapers, and Casters, Except Metal and Plastic
Molding, Coremaking, and Casting Machine Setters, Operators, and Tenders, Metal and Plastic
Multiple Machine Tool Setters, Operators, and Tenders, Metal and Plastic
Nuclear Power Reactor Operators
Numerical Tool and Process Control Programmers
Ophthalmic Laboratory Technicians
Other Production Occupations
Packaging and Filling Machine Operators and Tenders
Painters, Transportation Equipment
Painting Workers
Painting, Coating, and Decorating Workers
Paper Goods Machine Setters, Operators, and Tenders
Photographic Process Workers and Processing Machine Operators
Plant and System Operators
Plating and Coating Machine Setters, Operators, and Tenders, Metal and Plastic
Pourers and Casters, Metal
Power Plant Operators, Distributors, and Dispatchers
Prepress Technicians and Workers
Pressers, Textile, Garment, and Related Materials
Printers
Printing Machine Operators
Printing Workers
Production Workers, All Other
Rolling Machine Setters, Operators, and Tenders, Metal and Plastic
Sawing Machine Setters, Operators, and Tenders, Wood
Semiconductor Processors
Separating, Filtering, Clarifying, Precipitating, and Still Machine Setters, Operators, and Tenders
Sewers, Hand
Sewing Machine Operators
Shoe and Leather Workers and Repairers
Shoe Machine Operators and Tenders
Slaughterers and Meat Packers
Stationary Engineers and Boiler Operators
Structural Metal Fabricators and Fitters
Tailors, Dressmakers, and Sewers
Team Assemblers
Textile Bleaching and Dyeing Machine Operators and Tenders
Textile Cutting Machine Setters, Operators, and Tenders
Textile Knitting and Weaving Machine Setters, Operators, and Tenders
Textile Machine Setters, Operators, and Tenders
Textile Winding, Twisting, and Drawing Out Machine Setters, Operators, and Tenders
Textile, Apparel, and Furnishings Workers
Textile, Apparel, and Furnishings Workers, All Other
Timing Device Assemblers, Adjusters, and Calibrators
Tire Builders
Tool and Die Makers
Tool Grinders, Filers, and Sharpeners
Upholsterers
Water and Liquid Waste Treatment Plant and System Operators
Welders, Cutters, Solderers, and Brazers
Welding, Soldering, and Brazing Machine Setters, Operators, and Tenders
Woodworkers
Woodworkers, All Other
Woodworking Machine Setters, Operators, and Tenders
Woodworking Machine Setters, Operators, and Tenders, Except Sawing

MILITARY (Military-Specific Occupations)

Air Crew Members
Air Crew Officers
Aircraft Launch and Recovery Officers
Aircraft Launch and Recovery Specialists
Armored Assault Vehicle Crew Members
Armored Assault Vehicle Officers
Artillery and Missile Crew Members
Artillery and Missile Officers
Command and Control Center Officers
Command and Control Center Specialists
First-Line Enlisted Military Supervisor/Managers
First-Line Supervisors/Managers of Air Crew Members
First-Line Supervisors/Managers of All Other Tactical Operations Specialists
First-Line Supervisors/Managers of Weapons Specialists/Crew Members
Infantry
Infantry Officers
Military Enlisted Tactical Operations and Air/Weapons Specialists and Crew Members
Military Enlisted Tactical Operations and Air/Weapons Specialists and Crew Members, All Other
Military Officer Special and Tactical Operations Leaders/Managers
Military Officer Special and Tactical Operations Leaders/Managers, All Other
Radar and Sonar Technicians
Special Forces
Special Forces Officers

Appendix L (Comorbid/Complication Definitions)

CO-MORBID CONDITIONS

Alcoholism: To be determined based upon the brief screening tool used at your institution. Documented past or present abuse/excessive usage of ETOH.

Ascites: The presence of fluid accumulation (other than blood) in the peritoneal cavity noted on physical examination, abdominal ultrasound, or abdominal CT/MRI.

Bleeding disorder: Any condition that places the patient at risk for excessive bleeding due to a deficiency of blood clotting elements (e.g., vitamin K deficiency, hemophilia, thrombocytopenia, chronic anticoagulation therapy with Coumadin, Plavix, or similar medications). Do not include the patient on chronic aspirin therapy.

Chemotherapy for cancer within 30 days: A patient who had any chemotherapy treatment for cancer in the 30 days prior to admission. Chemotherapy may include, but is not restricted to, oral and parenteral treatment with chemotherapeutic agents for malignancies such as colon, breast, lung, head and neck, and gastrointestinal solid tumors as well as lymphatic and hematopoietic malignancies such as lymphoma, leukemia, and multiple myeloma.

Congenital Anomalies: Defined as documentation of a cardiac, pulmonary, body wall, CNS/spinal, GI, renal, orthopedic, or metabolic congenital anomaly.

Congestive heart failure: Defined as the inability of the heart to pump a sufficient quantity of blood to meet the metabolic needs of the body or can do so only at an increased ventricular filling pressure. To be included, this condition must be noted in the medical record as CHF, congestive heart failure, or pulmonary edema with onset or increasing symptoms within 30 days prior to injury. Common manifestations are:

1. Abnormal limitation in exercise tolerance due to dyspnea or fatigue
2. Orthopnea (dyspnea on lying supine)
3. Paroxysmal nocturnal dyspnea (awakening from sleep with dyspnea)
4. Increased jugular venous pressure
5. Pulmonary rales on physical examination
6. Cardiomegaly
7. Pulmonary vascular engorgement

Current smoker: A patient who has smoked cigarettes in the year prior to admission. Do not include patients who smoke cigars or pipes or use chewing tobacco.

Currently requiring or on dialysis: Acute or chronic renal failure prior to injury that was requiring periodic peritoneal dialysis, hemodialysis, hemofiltration, or hemodiafiltration.

CVA/residual neurological deficit: A history prior to injury of a cerebrovascular accident (embolic, thrombotic, or hemorrhagic) with persistent residual motor, sensory, or cognitive dysfunction. (e.g., hemiplegia, hemiparesis, aphasia, sensory deficit, impaired memory).

Diabetes mellitus: Diabetes mellitus prior to injury that required exogenous parenteral insulin or an oral hypoglycemic agent. Do not include a patient if diabetes is controlled by diet alone.

Disseminated cancer: Patients who have cancer that:

1. Has spread to one site or more sites in addition to the primary site AND
2. In whom the presence of multiple metastases indicates the cancer is widespread, fulminant, or near terminal. Other terms describing disseminated cancer include “diffuse,” “widely metastatic,” “widespread,” or

"carcinomatosis." Common sites of metastases include major organs (e.g., brain, lung, liver, meninges, abdomen, peritoneum, pleura, and bone).

Do Not Resuscitate (DNR) status: The patient had a Do-Not-Resuscitate (DNR) document or similar advance directive recorded prior to injury.

Esophageal varices: Esophageal varices are engorged collateral veins in the esophagus which bypass a scarred liver to carry portal blood to the superior vena cava. A sustained increase in portal pressure results in esophageal varices which are most frequently demonstrated by direct visualization at esophagoscopy.

Functionally dependent health status: Pre-injury functional status may be represented by the ability of the patient to complete activities of daily living (ADL) including: bathing, feeding, dressing, toileting, and walking. This item is marked YES if the patient, prior to injury, was partially dependent or completely dependent upon equipment, devices or another person to complete some or all activities of daily living. Formal definitions of dependency are listed below:

1. Partially dependent: The patient requires the use of equipment or devices coupled with assistance from another person for some activities of daily living. Any patient coming from a nursing home setting who is not totally dependent would fall into this category, as would any patient who requires kidney dialysis or home ventilator support that requires chronic oxygen therapy yet maintains some independent functions.

2. Totally dependent: The patient cannot perform any activities of daily living for himself/herself. This would include a patient who is totally dependent upon nursing care, or a dependent nursing home patient. All patients with psychiatric illnesses should be evaluated for their ability to function with or without assistance with ADLs just as the non-psychiatric patient.

History of angina within past 1 month: Pain or discomfort between the diaphragm and the mandible resulting from myocardial ischemia. Typically angina is a dull, diffuse (fist sized or larger) substernal chest discomfort precipitated by exertion or emotion and relieved by rest or nitroglycerine. Radiation often occurs to the arms and shoulders and occasionally to the neck, jaw (mandible, not maxilla), or interscapular region. For patients on anti-anginal medications, enter yes only if the patient has had angina within one month prior to admission.

History of Myocardial Infarction within past 6 months: The history of a non-Q wave, or a Q wave infarction in the six months prior to injury as diagnosed in the patient's medical record.

History of revasc/amp for PVD (History of revascularization/amputation for peripheral vascular disease): Any type of angioplasty or revascularization procedure for atherosclerotic PVD (e.g., aortafemoral, femoral-femoral, femoral-popliteal) or a patient who has had any type of amputation procedure for PVD (e.g., toe amputations, transmetatarsal amputations, below the knee or above the knee amputations). Patients who have had amputation for trauma or resection of abdominal aortic aneurysms would not be included.

Hypertension requiring medication: History of a persistent elevation of systolic blood pressure >140 mm Hg and a diastolic blood pressure >90 mm Hg requiring an antihypertensive treatment (e.g., diuretics, beta blockers, ACE inhibitors, calcium channel blockers).

Impaired sensorium: Patients should be noted to having an impaired sensorium if they had mental status changes, and/or delirium in the context of a current illness prior to injury. Patients with chronic or longstanding mental status changes secondary to chronic mental illness (e.g., schizophrenia) or chronic dementing illnesses (e.g., multi-infarct dementia, senile dementia of the Alzheimer's type) should also be included. For pediatric populations, patients with documented behavior disturbances, attention disorders, delayed learning or delayed development should be included.

Prematurity: Defined as documentation of premature birth, a history of bronchopulmonary dysplasia, ventilator support for greater than 7 days after birth, or the diagnosis of cerebral palsy. Premature birth is defined as infants delivered before 37 weeks from the first day of the last menstrual period.

Obesity: Defined as a Body Mass Index of 40 or greater.

Respiratory Disease: Defined as severe chronic lung disease, chronic asthma; cystic fibrosis; or COPD (such as emphysema and /or chronic bronchitis) resulting in any one or more of the following:

1. Functional disability from COPD (e.g., dyspnea, inability to perform ADLs)
2. Hospitalization in the past for treatment of COPD
3. Requires chronic bronchodilator therapy with oral or inhaled agents
4. An FEV1 of <75% of predicted on pulmonary function testing

Do not include patients whose only pulmonary disease is *acute* asthma. Do not include patients with diffuse interstitial fibrosis or sarcoidosis.

Steroid use: Patients that required the regular administration of oral or parenteral corticosteroid medications (e.g., Prednisone, Decadron) in the 30 days prior to injury for a chronic medical condition (e.g., COPD, asthma, rheumatologic disease, rheumatoid arthritis, inflammatory bowel disease). Do not include topical corticosteroids applied to the skin or corticosteroids administered by inhalation or rectally.

HOSPITAL COMPLICATIONS

Abdominal compartment syndrome: Defined as the sudden increase in the intra-abdominal pressure resulting in alteration in the respiratory mechanism, hemodynamic parameters, and renal perfusion. Typically patients with this syndrome are critically ill and require ventilator support and/or reoperation.

Abdominal fascia left open: No primary surgical closure of the fascia or intra-abdominal packs left at conclusion of primary laparotomy (damage control).

Acute renal failure: A patient who did not require dialysis prior to injury, who has worsening renal dysfunction after injury requiring hemodialysis, ultrafiltration, or peritoneal dialysis. If the patient refuses treatment (e.g., dialysis), the condition is still considered present.

ARDS: Adult (Acute) Respiratory Distress Syndrome: ARDS occurs in conjunction with catastrophic medical conditions, such as pneumonia, shock, sepsis (or severe infection throughout the body, sometimes also referred to as systemic infection, and may include or also be called a blood or blood-borne infection), and trauma. It is a form of sudden and often severe lung failure characterized by $PaO2/FiO2 \leq 200$, decreased compliance, and diffuse bilateral pulmonary infiltrates without associated clinical evidence of CHF. The process must persist beyond 36 hours and require mechanical ventilation.

Base deficit: Defined as a value greater than 4 at any time during admission. This number is reported as a component of arterial or venous blood gases. The number may be reported by the lab as Base Deficit, or as Base Excess with a negative value.

Bleeding: Any transfusion (including autologous) of five or more units of packed red blood cells or whole blood given from the time the patient is injured up to and including 72 hours later. The blood may be given for any reason.

Cardiac arrest with CPR: The absence of a cardiac rhythm or presence of chaotic cardiac rhythm that results in loss of consciousness requiring the initiation of any component of basic and/or advanced cardiac life support.

Coagulopathy: Defined as twice the upper limit of the normal range for PT or PTT in a patient without a pre-injury bleeding disorder of this magnitude.

Coma: Defined as significantly impaired level of consciousness (exclude transient disorientation or psychosis) for greater than 24 hours.

Decubitus ulcer: Defined as a "pressure sore" resulting from pressure exerted on the skin, soft tissue, muscle, or bone by the weight of an individual against a surface beneath. Individuals unable to avoid long periods of uninterrupted pressure over bony prominences are at increased risk for the development of necrosis and ulceration.

Deep surgical site infection: Defined as an infection that occurs within 30 days after an operation and the infection appears to be related to the operation. The infection should involve deep soft tissues (e.g., fascial and muscle layers) at the site of incision and at least one of the following:

1. Purulent drainage from the deep incision but not from the organ/space component of the surgical site.
2. A deep incision spontaneously dehisces or is deliberately opened by a surgeon when the patient has at least one of the following signs or symptoms: fever (> 38 C), localized pain, or tenderness, unless site is culture-negative.
3. An abscess or other evidence of infection involving the deep incision is found on direct examination, during reoperation, or by histopathologic or radiologic examination.
4. Diagnosis of a deep incision infection by a surgeon or attending physician.

Note:
Report infections that involve both superficial and deep incision sites as deep surgical site infection.

Delayed Diagnosis: Diagnosis made after 24 hours and/or tertiary assessment; prior to discharge or transfer.

Drug or alcohol withdrawal syndrome: Defined as a set of **symptoms that may occur when a person who has been drinking too much alcohol or habitually using certain drugs suddenly stops. Symptoms may include:** actvation syndrome (e.g., tremulousness, agitation, rapid heart beat and high blood pressure), seizures, hallucinations or delirium tremens.

Deep Vein Thrombosis (DVT)/thrombophlebitis: The formation, development, or existence of a blood clot or thrombus within the vascular system, which may be coupled with inflammation. This diagnosis may be confirmed by a venogram, ultrasound, or CT. The patient must be treated with heparin and/or coumadin or warfarin, and/or placement of a vena cava filter or clipping of the vena cava.

Extremity compartment syndrome: Defined as a condition in which there is swelling and an increase in pressure within a limited space (a fascial compartment) that presses on and compromises blood vessels, nerves, and/or tendons that run through that compartment. Compartment syndromes usually involve the leg but can also occur in the forearm, arm, thigh, and shoulder.

Graft/prosthesis/flap failure: Mechanical failure of an extracardiac vascular graft or prosthesis including myocutaneous flaps and skin grafts requiring return to the operating room or a balloon angioplasty.

Intracranial pressure elevation: Defined as intracranial pressure greater than 25 Torr for greater than 30 minutes.

Missed Diagnosis: Diagnosis made after discharge or transfer.

Myocardial infarction: A new acute myocardial infarction occurring within 30 days of injury manifested by new Q-waves on ECG.

Organ/space surgical site infection: Defined as an infection that occurs within 30 days after an operation and infection involves any part of the anatomy (eg, organs or spaces) other than the incision, which was opened or manipulated during a procedure; and at least one of the following, including:
1. Purulent drainage from a drain that is placed through a stab wound or puncture into the organ/space;
2. Organisms isolated from an aseptically obtained culture of fluid or tissue in the organ/space;
3. An abscess or other evidence of infection involving the organ/space that is found on direct examination, during reoperation, or by histopathologic or radiologic examination; or
4. Diagnosis of an organ/space SSI by a surgeon or attending physician.

Pneumonia: Patients with evidence of pneumonia that develops during the hospitalization. Patients with pneumonia must meet at least one of the following two criteria:

Criterion 1. Rales or dullness to percussion on physical examination of chest AND any of the following:
a. New onset of purulent sputum or change in character of sputum
b. Organism isolated from blood culture
c. Isolation of pathogen from specimen obtained by transtracheal aspirate, bronchial brushing, or biopsy

Criterion 2. Chest radiographic examination shows new or progressive infiltrate, consolidation, cavitation, or pleural effusion AND any of the following:
a. New onset of purulent sputum or change in character of sputum
b. Organism isolated from the blood
c. Isolation of pathogen from specimen obtained by transtracheal aspirate, bronchial brushing, or biopsy
d. Isolation of virus or detection of viral antigen in respiratory secretions
e. Diagnostic single antibody titer (IgM) or fourfold increase in paired serum samples (IgG) for pathogen
f. Histopathologic evidence of pneumonia

Pulmonary embolism: Defined as a lodging of a blood clot in a pulmonary artery with subsequent obstruction of blood supply to the lung parenchyma. The blood clots usually originate from the deep leg veins or the pelvic venous system. Consider the condition present if the patient has a V-Q scan interpreted as high probability of pulmonary embolism or a positive pulmonary arteriogram or positive CT angiogram.

Stroke/CVA: Following injury, patient develops an embolic, thrombotic, or hemorrhagic vascular accident or stroke with motor, sensory, or cognitive dysfunction (e.g., hemiplegia, hemiparesis, aphasia, sensory deficit, and impaired memory) that persists for 24 or more hours.

Superficial surgical site infection: Defined as an infection that occurs within 30 days after an operation and infection involves only skin or subcutaneous tissue of the incision and at least one of the following:

1. Purulent drainage, with or without laboratory confirmation, from the superficial incision.
2. Organisms isolated from an aseptically obtained culture of fluid or tissue from the superficial incision.
3. At least one of the following signs or symptoms of infection: pain or tenderness, localized swelling, redness, or heat and superficial incision is deliberately opened by the surgeon, unless incision is culture-negative.
4. Diagnosis of superficial incisional surgical site infection by the surgeon or attending physician.

Do not report the following conditions as superficial surgical site infection:

1. Stitch abscess (minimal inflammation and discharge confined to the points of suture penetration).
2. Infected burn wound.
3. Incisional SSI that extends into the fascial and muscle layers (see deep surgical site infection).

Systemic sepsis: Defined as definitive evidence of infection, plus evidence of a systemic response to infection. This systemic response is manifested by TWO or more of the following conditions:

1. Temp >38 degrees C or <36 degrees C
2. Sepsis with hypotension despite adequate fluid resuscitation combined with perfusion abnormalities that may include, but are not limited to, lactic acidosis, oliguria, or an acute alteration in mental status. Patients who are on inotropic or vasopressor agents may not be hypotensive at the time that perfusion abnormalities are measured.
3. HR >90 bpm
4. RR >20 breaths/min or PaCO2 <32 mmHg (<4.3 kPa)
5. WBC >12,000 cell/mm3, <4000 cells/mm3, or >10% immature (band) forms

Unplanned intubation: Patient requires placement of an endotracheal tube and mechanical or assisted ventilation because of the onset of respiratory or cardiac failure manifested by severe respiratory distress, hypoxia, hypercarbia, or respiratory acidosis. In patients who were intubated in the field or Emergency Department, or those intubated for surgery, unplanned intubation occurs if they require reintubation after being extubated.

Wound disruption: Separation of the layers of a surgical wound, which may be partial or complete, with disruption of the fascia.

Operative and/or essential procedures is defined as procedures performed in the Operating Room, Emergency Department, or Intensive Care Unit that were essential to the diagnoses, stabilization, or treatment of the patient's specific injuries. Repeated diagnostic procedures (e.g., repeated CT scan) should not be recorded (record only the first procedure).

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