

Illinois Trauma Registry
Corporate Report Release Notes
Issue Date March 21, 2007

REPORT NAME: PATIENT DISTRIBUTION

Report Purpose—

The report is a series of several sub-reports of varying complexity, each displaying distributions of patient counts for one or more commonly-used categorical variables in tables arranged in a column-row grid format. Within the range of patient records delimited by user-defined selection criteria, the report provides a snapshot of the prevalence of certain characteristics describing the trauma patients themselves (age, gender, race, and ethnicity), their injuries (cause and type), and some aspects of their experience moving through the health care system, including trauma category, transport, emergency department, and hospital stay information.

Report Layout—

The report consists of 18 subreports displayed in 15 tabs, as follows:

Tab 1: **Age** (Age categories are 0<1; 1-4; 5-9; 10-14; 15-19; 20-24; 25-34; 45-54; 55-64; 75+; No Age.)

Tab 2: **Gender** (Gender categories are Male; Female; Unknown; and No Gender Entered.)

Tab 3: **Race** (Race categories are White; Black; Asian or Pacific Islander and subgroups; Native American and subgroups; Other; Unknown; and No Race Entered.)

Ethnicity (Ethnicity categories are Not of Hispanic Origin; Mexican; Puerto Rican; Cuban; Central or South American; Other Hispanic; Unknown, Hispanic; Unknown, Not Classified; and No Race Entered.) *

Tab 4: **Primary Cause of Injury** (First-level Cause of Injury categories are Intentional; Unintentional; Undefined; E-code out of Range; and E-code Not Entered. Second-level and third-level categories are nested under the first three first-level categories, and provide additional specificity about injury causes.)

Tab 5: **Secondary Cause of Injury** (Displays same categories as the previous tab.)

* For this category, HSVI patients are grouped in the "not entered" field of the report. This is because the system does not provide a way to select descriptors for this category when entering data for HSVI patients.

Illinois Trauma Registry Corporate Report Release Notes

- Tab 6: **Primary Injury Type** (Injury Type categories are Blunt; Penetrating; Not Applicable; and No Injury Type Entered.) *
Secondary Injury Type (Displays same categories as Primary Injury Type.) *
- Tab 7: **Initial Trauma Category Level** (Trauma Category levels are Category I; Category II; Not Entered; and Other.) *
- Tab 8: **Transportation Mode** (Transportation Mode categories are ALS Ground Ambulance; ILS Ground Ambulance; BLS Ground Ambulance; Air: Helicopter; Air: Fixed Wing Ambulance; Air: Non-Ambulance; Police/Public Safety Vehicle; Private Vehicle; Water Transportation/Boat; Other; Unknown; Not Applicable; and No Mode of Transport Entered.) *
- Tab 9: **Pre-hospital Times** (This sub-report contains two tables: the first displays the average, minimum, and maximum scene time, along with the number of records used to derive these statistics; the second contains the same measures, applied to transport time.)
- Tab 10: **Time and Day of Emergency Department Admission** (This sub-report consists of a table arranged in a column-row grid format with the days of the week as column headings and three time-of-day ranges displayed in military time (2300-0659, 0700-1459, 1500-2259) as well as day totals as row headings. Table cells contain counts for each day-of-week/time-of-day combination within the range of patients selected.)
- Tab 11: **Emergency Department Disposition** (ED Disposition Categories are Admitted to Observation; Admitted to Floor; Admitted to Intermediate Care/Telemetry Unit; Admitted to Intensive Care Unit; Admitted to Operating Room; Admitted to Neonatal/Pediatric Care Unit; Admitted to Burn Unit; Transferred to Another Hospital; Discharged Home or Self Care: Treat & Release; Discharged to Child Protection Agency; Discharged to Nursing Home/SNF/ICF/Residential; Discharged to Jail/Prison; Discharged to Psychiatric Hospital; Discharged to Rehabilitation Center; Left Against Medical Advice/Eloped; Expired-Dead on Arrival (DOA); Expired-With Resuscitation; Expired-Without Resuscitation; Other; Unknown; Not Applicable; and No Disposition Entered.)
- Tab 12: **Survival Status** (Survival Status categories are Expired Dead on Arrival; Expired without Resuscitation; Expired with Resuscitation; Patient Lived; and No Disposition Entered.)
- Tab 13: **Emergency Department Times** (This sub-report contains two tables: the first displays average, minimum, and maximum time a patient was in the emergency department, along with the number of records used to derive these statistics; the second applies only to records of patients who went to the operating room, and displays average, minimum, and maximum time

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Illinois Trauma Registry Corporate Report Release Notes

elapsed between a patient's arrival at the emergency department and his or her first operation.)

Tab 14: **Intensive Care Unit Length of Stay** (ICU LOS categories are Patients with an ICU Stay and Average Length of Stay.)

Hospital Length of Stay (Hospital LOS categories are Patients Who Lived; Patients Who Died After Emergency Department Discharge; Patients with No Discharge Disposition; and Patients with Hospital Length of Stay < 12 Hours. The sub-report includes length-of-stay frequency distributions and averages for the first three of these categories.)

Tab 15: **Hospital Discharge Disposition** (Discharge Disposition categories are Transferred to other Hospital or Sub Acute Hosp; Discharged Home or Self Care: Treat & Release; Discharged to Child Protection Agency; Discharged to Nursing Home/SNF/ICF/Residential; Discharged to Jail/Prison; Discharged to Psychiatric Hospital; Discharged to Rehabilitation Center; Left Against Medical Advice/Eloped; Discharged to Hospice Care; Morgue/Funeral Home/Medical Examiner/Coroner; Other; Unknown; Not Applicable; and Not Entered.)

Report Content—

Counts are based on patient record information. A patient will only be counted once in each subreport (i.e., the categories are mutually exclusive within a subreport).

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- 1) The Patient Distribution report is very resource intensive and may take longer to run than all or most other corporate reports.
- 2) In general, the best times to run this report are:
 - Before 8:00 AM,
 - From 9:30 AM thru 2:00 PM, or
 - After 8:00 PM.
- 3) Limiting the number of records selected will reduce the time needed to run the report.

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