



“Year-End Data Wrap Up”

Lauren Vredevelt *RHIA, CSTR*
Chair MTC Registrar Committee

.....reflecting on 2020

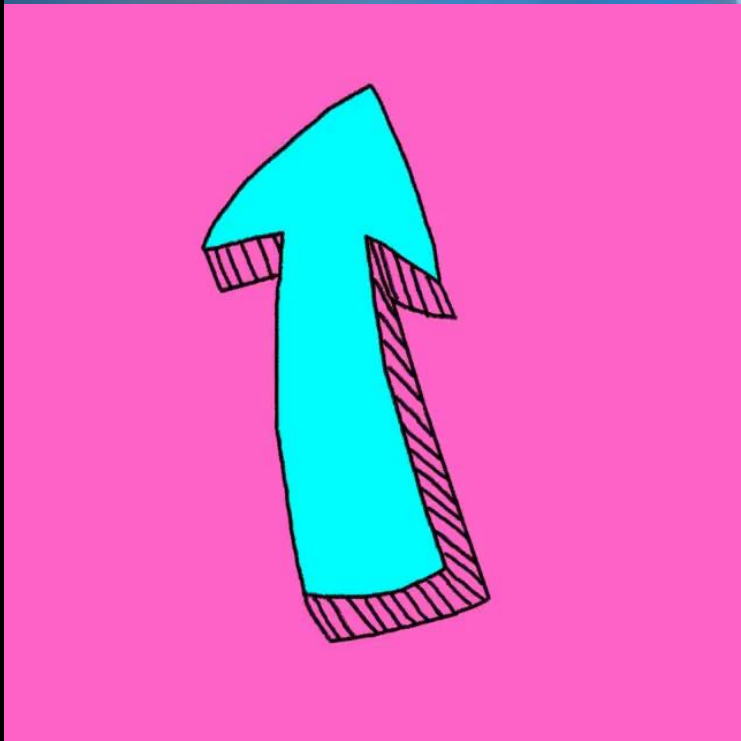
*Good
Vibes
Only*

THINK
POSITIVE!



YES!



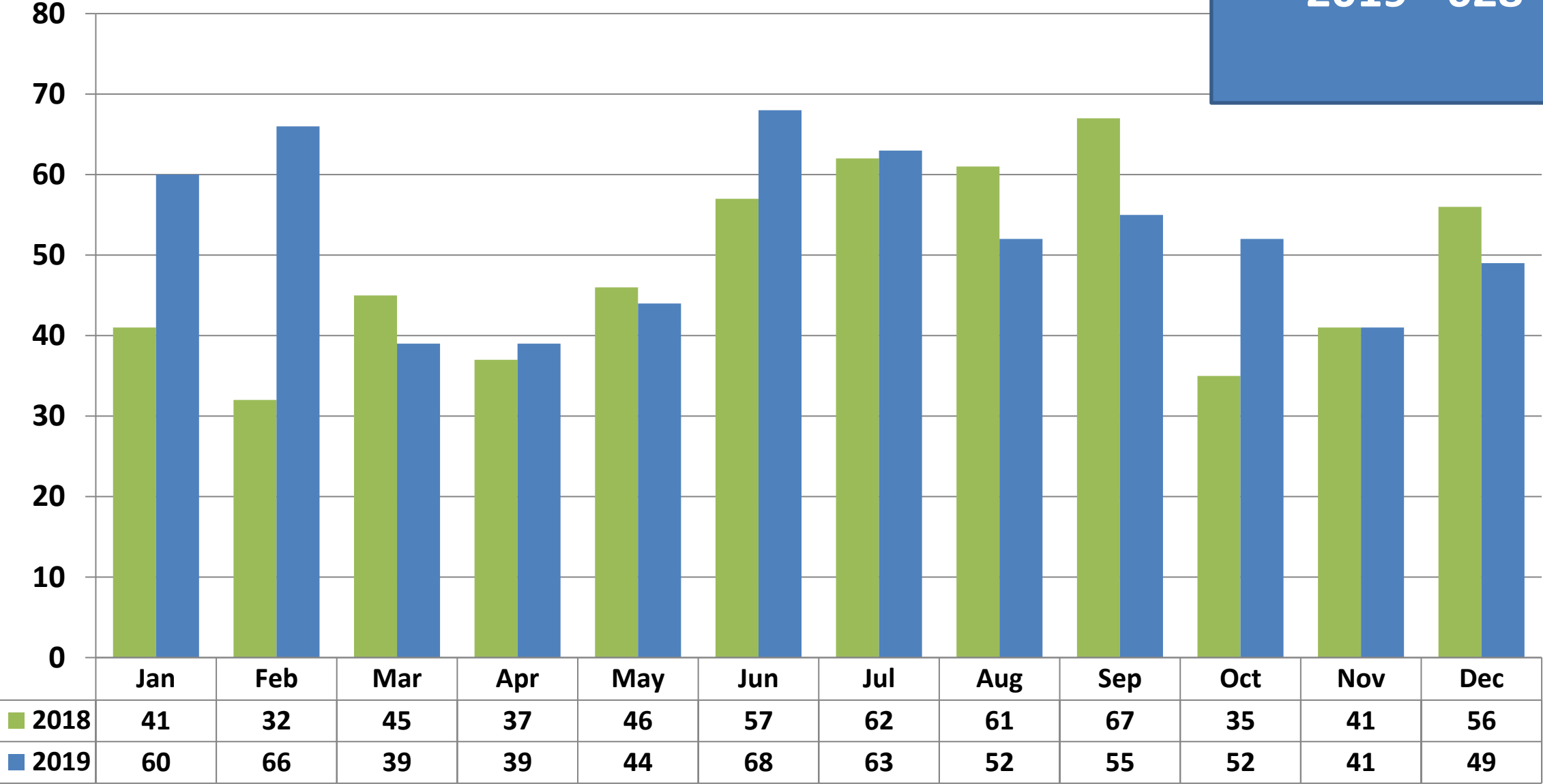




Trauma Patient Census

2018 2019

2018= 580
2019= 628

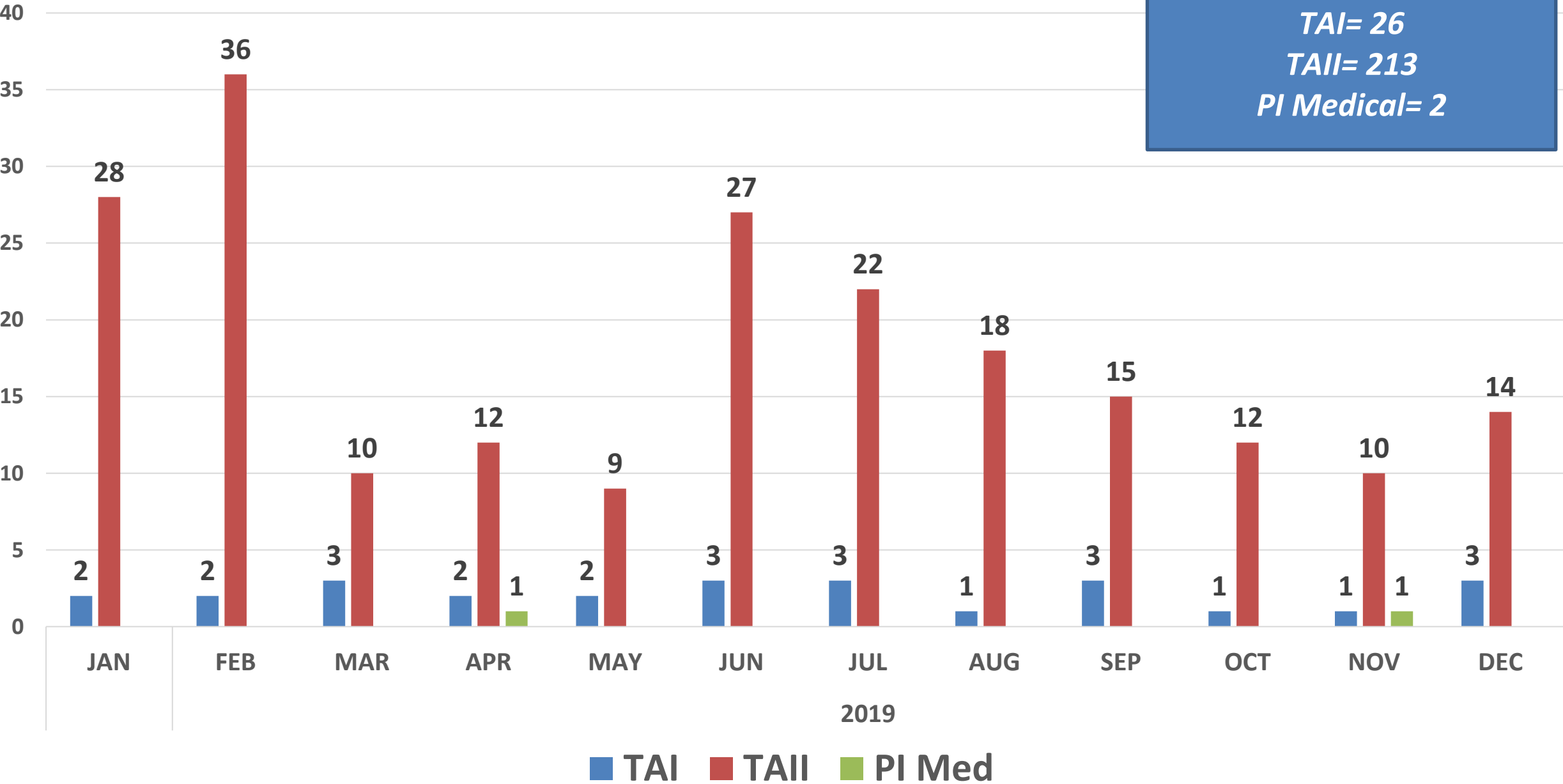


TRAUMA OVERVIEW

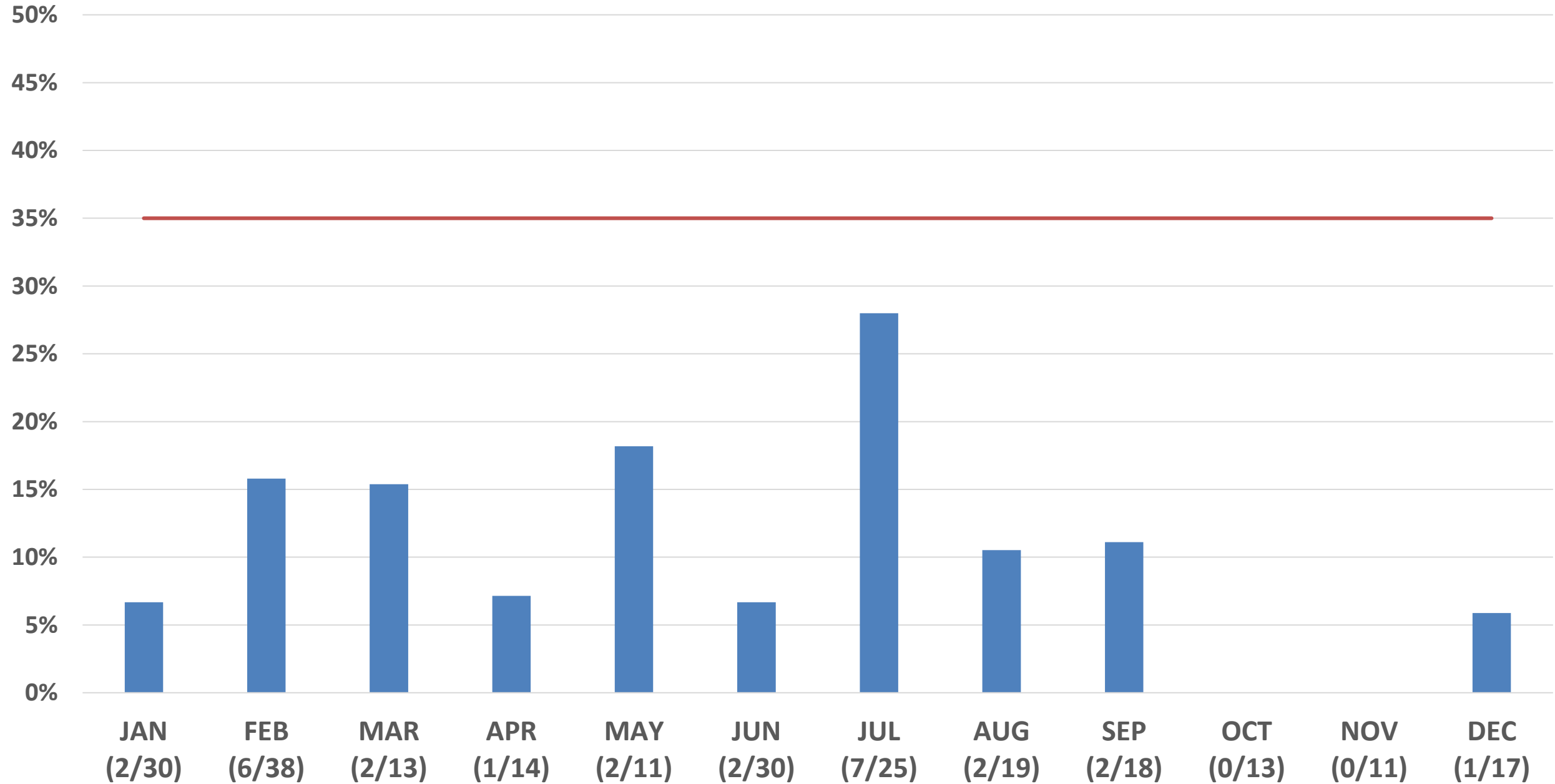
[illegible]

2019 TRAUMA ALERT LEVELS PER MONTH

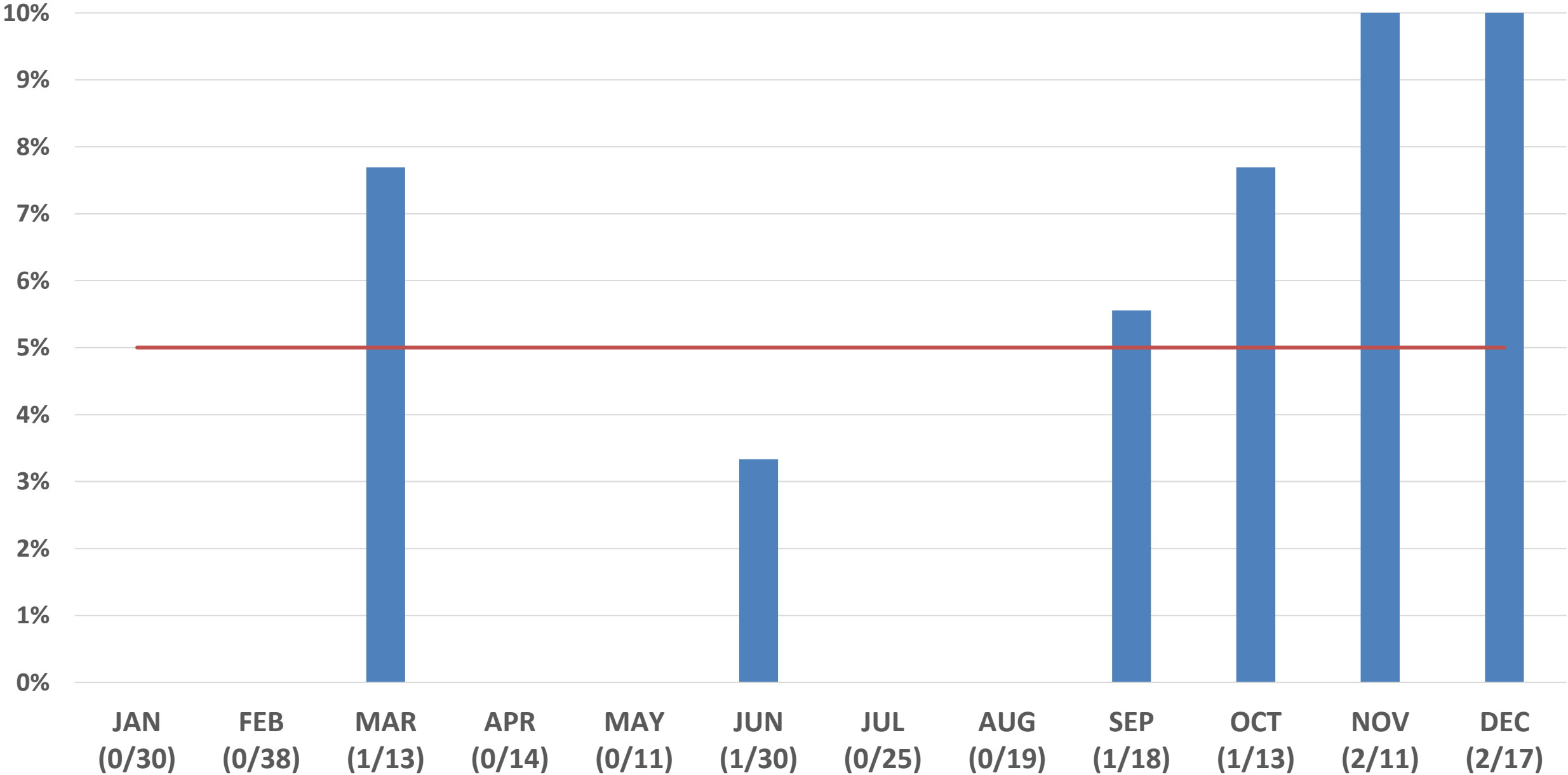
TAI= 26
TAII= 213
PI Medical= 2



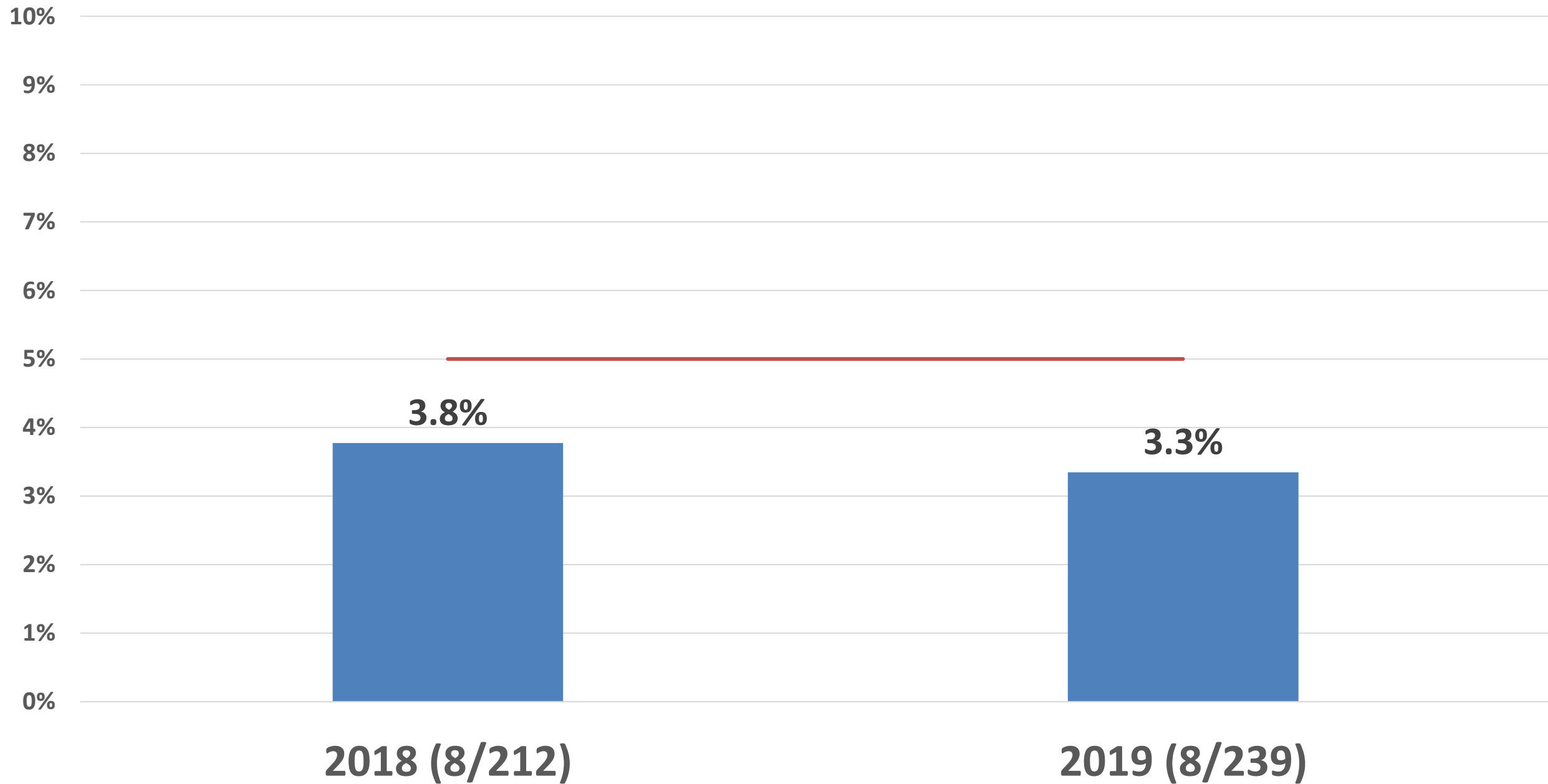
2019 Over Triage by Month



2019 Under Triage by Month



Annual Under Triage Rate



2019 ATTENDANCE RATE

2. Do the following trauma team members attend a minimum of 50% of the multidisciplinary trauma peer review committee meetings? (CD 16-15)

Trauma Team Member	Percentage
Trauma Medical Director (CD 5-10)	100%
General Surgeons on the call panel (CD 6-8)	100%
Emergency Medicine Representative or designee (CD 7-11)	100%
Orthopedic Liaison (CD 9-16)	100%
Anesthesiology Representative (CD 11-13)	100%
ICU Liaison (CD 11-62)	100%
Neurosurgical Representative (CD 8-13)	100%

Thank You

9. Trauma registries should be concurrent. At a minimum, does the registry have 80 percent of cases entered within 60 days of discharge? (CD 15–6) ☒ Yes ☐ No

**ALL 628 CASES WERE
ENTERED WITHIN 0-30 DAYS
OF DISCHARGE**

13. The information provided by a trauma registry is only as valid as the data entered. Does the facility have strategies for monitoring data validity? (CD 15–10)

☒ Yes ☐ No

DATE
_____*29564

Date Validated: _____
Validator: _____

DATA VALIDATION RECORD: 20 FIELDS			Goal = 95% Accuracy Rate			
Date Added to Validation Record	Field Name	Existing Data	Validation Data	Same	Change	Note
01/31/2012	PATIENT_NUMBER (Visit #)					
03/28/2013	ER_NUMBER (number of ER visits)					
01/31/2012	SEX					
01/31/2012	DOB					
01/31/2012	INJURY_DATE					
02/03/2014	TRANS					
01/31/2012	CAUSE_CODE					
11/23/2015	TRAUMA_TYPE					
11/23/2015	TEMPS2_C (ED Initial Temperature)					
02/03/2014	GLASGOW					
01/24/2014	PAYMENT_SOURCE					
01/31/2012	HOSPITAL_ARRIVAL_DATE					
10/04/2012	ADM_SVC					
03/29/2013	SBP2					
01/31/2012	ED_DISPOSITION_CODE					
01/31/2012	DC_DISPOSITION_CODE					
11/23/2015	AIS_CODE_1					
11/23/2015	ISS					
10/04/2012	HOSPITAL_DEPARTURE_DATE					
01/31/2012	OUTCOME					
TOTAL	20 FIELDS					

5 incorrect/520 fields verified=
99% coding accuracy rate

of Discrepancies _____ Accuracy Rate _____

2019 Mortality Information

- ISS DEATH RANGES
 - ISS 0-9:
 - ISS 10-15:
 - ISS 16-24:
 - ISS ≥ 25 :

 TOTAL

Gift of Life Organ Donations

Death Location

ED=

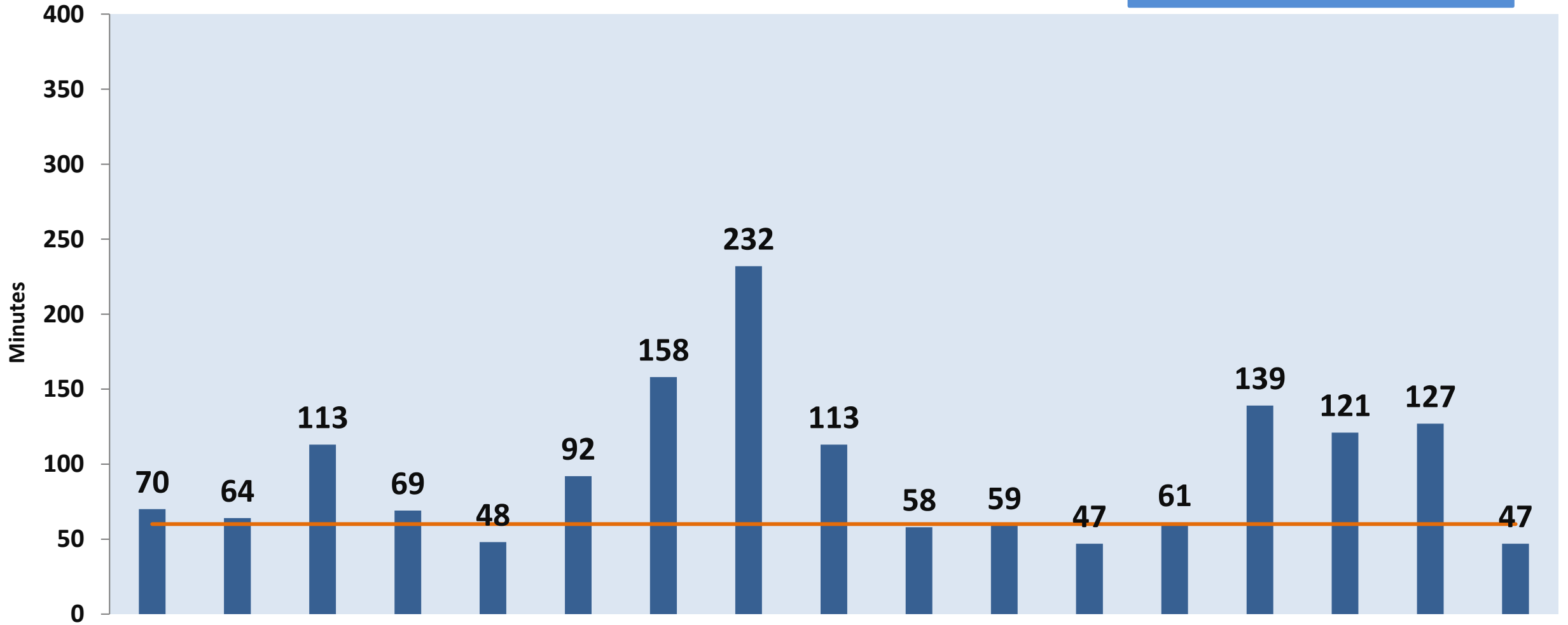
SO=

Floor=

TA1 XFER ED LOS 2019

5/17= 29%

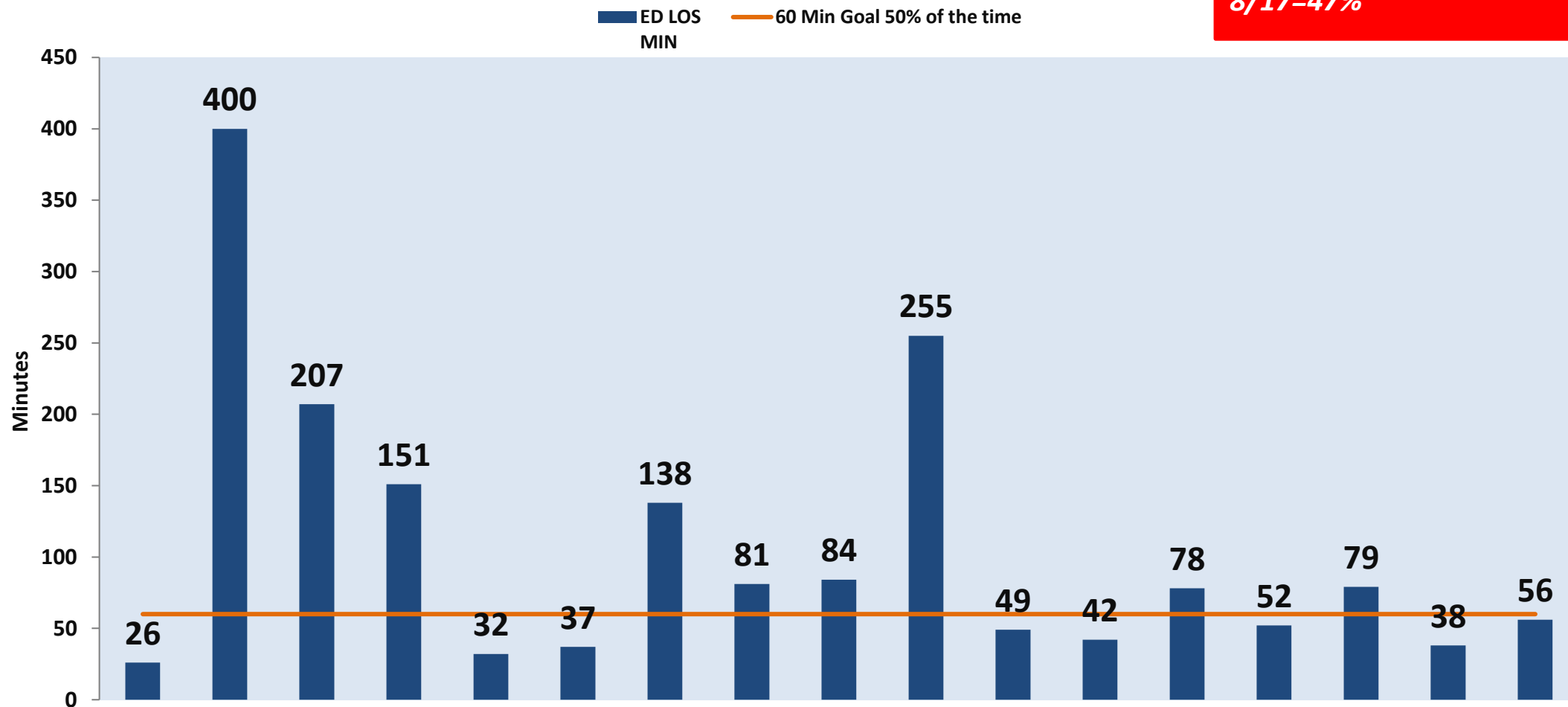
— 60 Min Goal 50% of the time



TA1 XFER ED LOS 2020

JAN-SEPT 25, 2020

8/17=47%



...When's the last time you?

- Cleaned up your registry?
- Cleaned up your desk & desk top?
- Read through the Orange book/TQIP/MTQIP/State PRQ?

....lets think about 2021

#Goals



2021

Transferring our sickest patients quickest!

STABLIZE & SHIP

ATLS= *Back to basics!*

“They’re not bleeding fluids their bleeding blood”

2021

Registrar CEU's

Thank you cards- *EMS TOO!*

Team education & development!

State of Michigan MTC - 2021 is our re-designation year!

2021

Michigan Trauma Coalition



Educational Presentations
Coding Scenarios
Ice Breaker Activity

Open positions=

VICE CHAIR

CORRESPONDING SECRETARY

Leadership Team Reps!



GIVE YOURSELF SOME GRACE!

THANK YOU!



Holland Hospital

Lauren Vredeveld, RHIA, CSTR

Trauma Registrar, Emergency Dept.

Chair Michigan Trauma Coalition Registrar Committee

602 Michigan Ave. Holland, MI 49423

P [\(616\) 394-3304](tel:(616)394-3304) | **C** [\(616\) 520-5064](tel:(616)520-5064) | **F** [\(616\) 394-3750](tel:(616)394-3750)

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