FLORIDA
ACUTE CARE
TRAUMA REGISTRY MANUAL

2016 Edition

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DOCUMENT CONTENTS

DICTIONARY OVERVIEW

Welcome to the Florida Department of Health Acute Care Trauma Registry Manual Data Dictionary. This manual serves as the requirement for the data elements within the Acute Care Module of the Next Generation Trauma Registry (NGTR).

Dictionary Design

The Florida Acute Care Trauma (FACT) Registry Manual encompasses Florida Trauma Data Standard (FTDS) data elements and data elements from the National Trauma Data Standard (NTDS). At a minimum, acute care hospitals must submit all fields listed in this manual designated as "Required" and "Conditional" when applicable; but may choose to submit all data elements pertinent to trauma patient treatment rendered at their facility. An acute care facility that chooses to participate fully in the Florida Trauma Registry must submit all of the Florida and National data elements listed in the FTDS. All fields not listed in this dictionary are considered "optional" and may be found at www.floridahealth.gov/certificates-and-registries/trauma-registry. If optional fields are reported, they will not be validated against established business rules listed in the FTDS and NTDS data dictionaries.

Field Contents

A field can be "non-blank" in one of two ways – it can contain a Field Data Value (FDV), or it can have a Common Null Value (CNV). For example, a Field Data Value that might be contained in the field *O_03 Hospital Discharge Date* would be "2013-04-05". But if the patient was not discharged from the hospital (e.g. the patient died in the ED), the field will instead have a Common Null Value of "Not Applicable".

A field cannot contain a Field Data Value and have a Common Null Value at the same time. This is because the two Common Null Values – (1) *Not Applicable*, and (2) *Not Known/Not Recorded* – are meant to serve as a "reason" for the lack of a Field Data Value in the element.

A field is described as "valued" (or "completed") when it contains a Field Data Value. A field is described as "non-blank" when it either contains a Field Data Value or has one of the Common Null Values. A field is described as "blank" (or "empty") when it neither contains a Field Data Value or has a Common Null Value, or is just simply absent from the submission file.

Required Fields

For the purposes of this manual a "required" field can potentially cause a file or record rejection if it is *blank* or omitted– i.e. it does not contain a Field Data Value or have a Common Null Value as outlined in the *Field Contents* section.

The table below lists the required and conditional fields for acute care hospital. Fields marked "required" are to be "non-blank" in an acute care trauma data submission. Fields marked as conditional must be completed, if applicable to the treatment of a trauma patient. All fields not listed in this manual, but exist in the FTDS and the NTDS dictionary are considered optional and may be submitted to the department.

The first column in the table below indicates if the data element is a FTDS or NTDS specific field, the second column is the data element name and the usage column denotes if the field is required or conditional.

Data Element	Data Element Name	Usage
NTDS	Date of Birth	Required
NTDS	Age	Conditional
NTDS	Age Units	Conditional
FTDS	Medical Record Number	Required
FTDS	Event Specific Patient Tracking Number (ESPTN)	Required
FTDS	Social Security Number	Required
NTDS	Injury Incident Date	Required
NTDS	Injury Incident Time	Required
NTDS	ICD-9 Primary E-Code	Conditional
NTDS	ICD-10 Primary E-Code	Conditional
NTDS	Incident Location Zip Code	Required
NTDS	Incident County	Conditional
NTDS	Transport Mode	Required
NTDS	Inter-Facility Transfer	Required
NTDS	ED/Hospital Arrival Date	Required
NTDS	ED/Hospital Arrival Time	Required
NTDS	ED Discharge Disposition	Required
NTDS	Signs of Life	Required
NTDS	ED Discharge Date	Required
NTDS	ED Discharge Time	Required
NTDS	Trauma Center Criteria	Conditional
NTDS	Vehicular, Pedestrian, Risk Injury	Conditional
FTDS	Trauma Alert	Required
NTDS	ICD-9 Injury Diagnosis	Conditional
NTDS	ICD-10 Injury Diagnosis	Conditional
NTDS	Locally Calculated ISS	Required
NTDS	Hospital Discharge Date	Required
NTDS	Hospital Discharge Time	Required
NTDS	Hospital Discharge Disposition	Required

REPORTING REQUIREMENTS

Reporting Overview

Florida acute care hospitals are required to submit data to the Department. Acute care hospitals must submit data on a quarterly basis. However, data may be submitted more frequently (i.e. daily, weekly, monthly). The submission must be through the web at www.fltraumaregistry.com. The data file(s) submitted must contain (in total) the data for all trauma cases meeting inclusion criteria which were discharged during that quarter. The Trauma Record Files submitted to the department, each quarter, are imported and stored within the NGTR for analysis.

Inclusion Criteria

Acute care hospitals will report all patients that are considered Trauma Alerts based on Rule 64J-2.001(14), Florida Administrative Code. In addition, patients that are injured as a result of a traumatic event and are transferred to a verified/provisional trauma center to receive a higher level of care, would be included. Injuries from a traumatic event include the following:

International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM): 800–959.9

International Classification of Diseases, Tenth Revision (ICD-10-CM):
S00-S99 with 7th character modifiers of A, B, or C ONLY. (Injuries to specific body parts – initial encounter)
T07 (unspecified multiple injuries)
T14 (injury of unspecified body region)
T20-T28 with 7th character modifier of A ONLY (burns by specific body parts – initial encounter)
T30-T32 (burn by TBSA percentages)

Submission Details

A. All data shall be submitted electronically to the Department at the www.fltraumaregistry.com web site.

B. Accounts to submit data are set up for each Florida acute care hospital by the Department.

C. Data verification: Data reported to the NGTR must be verified (checked for completeness and accuracy) by the reporting hospital before submitting to the Department.

D. Data may be submitted on a daily, weekly, monthly, or quarterly basis. Records of patients, sorted by the date of a death or discharge from the hospital center must be validated and submitted to the Department by the final due dates as listed below:

Reporting Quarter	Reporting Dates	Final Submission Due Dates
Quarter 1	January 1- March 31 Discharges	Due July 1
Quarter 2	April 1 - June 30 Discharges	Due October 1
Quarter 3	July 1 - September 30 Discharges	Due January 1
Quarter 4	October 1- December 31 Discharges	Due April 1

E. Data submitted to the Department must be a valid record in order to be used in the determination of a hospital's trauma patient volume. The data dictionary section of this manual details the field requirements of each data element and what values are accepted.

F. Files submitted shall align with the following naming standard: Hospital ID_Reporting-Period(Q1, Q2, Jan) _date (MM/DD/YY) (add _resubmission for files being resubmitted). The NGTR will only allow 50 characters in the file name including spaces, special characters and the .XML extension.

G. Hospitals that use the Department provided registry tool to enter data will have the submission file created and submitted to the registry by the web application. If hospitals choose to export their data from a third party software and upload the data into the registry, the data must conform to the XSD. The Department will only accept data in an XML file format based upon XSD derived from this data dictionary. **Records may not be submitted in another format or medium.**

H. File Acceptance: Must be the appropriate xml schema and contain all required field tags. Files that cannot be recognized as a valid format will not be processed and will not receive a submission report. In this case, the submitting hospital will receive notification that a problem occurred in processing the submission.

I. Record Acceptance: Records that contain Level 1 or Level 2 errors, in the FTDS, will cause that record to be rejected. The hospital will be required to correct these errors and resubmit to the NGTR for that record to be loaded into the database. A record may have up to 5 level 3 or 4 errors before being considered invalid. Notification of flagged records will be returned to the hospital for verification of data and correction and resubmission. Resubmissions must be received by the final submission due date. The acute care facility's total record count must be at least 90% valid for each quarter.

J. Hospitals that submit a data file will receive a submission report from the NGTR once the file has been processed. Records that are entered through the Web Registry will only be processed once the record has been put into the closed status. A daily process will submit all records that were closed that day. Those records will be submitted together and will be validated against applicable business rules. Upon completion of the validation process, a submission report will be sent to the submitting hospital. This report will outline the error level(s) and the records number(s) for review and correction.

K. The Department may audit (by site visit, desk audit or through an agent) an acute care hospital's medical records for the purpose of validating reported trauma registry data at any time.

Extension Requests

Extensions to the final submission due dates in the FACT may be granted by the Department for a maximum of 30 days from the final submission due date. A written request signed by the hospital's chief executive officer or designee must be received by the Department 30 days prior to the final submission due date (scanned image sent via email acceptable). These requests may be mailed to: Bureau of Emergency Medical Oversight, 4052 Bald Cypress Way Bin A-22 Tallahassee, FL 32399 or by email to Trauma.Registry@flhealth.gov

Extension requests are only granted for unforeseen factors beyond the control of the reporting facility. These factors must be specified in the written request for the extension along with documentation of efforts undertaken to meet the submission requirements. Staff vacations, maternity leave, and a failure to appropriately plan out the timeframe of a software upgrade are not considered "unforeseen" requests. Extensions must be approved by the Department and will not be granted verbally.

Registry Conventions

Error Levels

Any errors generated as a result of a failure to meet the condition defined within a business rule will reference the rule id, the data element, the level of the error, and the business rule description.

Error: <Business Rule Reference> <Data Element> <Level> <Description>

Where Level is defined as:

- *** Level 1: Reject – XML format –** any element that does not conform to the rules of the XSD. These errors may be from XML data that cannot be parsed or would otherwise not be legal XML file. Some errors in this Level do not have a Rule ID – for example: illegal tag, commingling of null values and actual data, out of range errors, etc.
- *** Level 2: Reject –** Inclusion criteria and/or critical to analyses – this level affects the fields needed to determine if the record meets the inclusion criteria for FTDS or are required for critical analyses
- Additional levels are defined for each data element in the Business Rules table
    - **Level 3: Flag – Major Data Error**
    - **Level 4: Flag – Minor Data Error**

Null Values

For any collection of data to be of value and reliably represent what was intended, a strong commitment must be made to ensure the correct documentation of incomplete data. In situations where a field data value is not known or appropriate for the data element, common null values must be used in accordance with the AFTDS.

- **[1]** *Not Applicable*: This null value code applies if, at the time of patient care documentation, the information requested was “Not Applicable” to the patient, the hospitalization or the patient care event. For example, variables documenting EMS care would be “Not Applicable” if a patient self-transports to the hospital.
- **[2]** *Not Known/Not Recorded:* This null value applies if, at the time of patient care documentation, information was “Not Known” (to the patient, family, health care provider) or no value for the element was recorded for the patient. This documents that there was an attempt to obtain information but it was unknown by all parties or the information was missing at the time of documentation. For example, injury date and time may be documented in the hospital patient care report as “Unknown”. Another example, Not Known/Not Recorded should also be coded when documentation was expected, but none was provided (i.e., no EMS run sheet in the hospital record for patient transported by EMS).

Definitions

ACS NTDB National Trauma Data Standard: Data Dictionary 2016 Admissions ("NTDS") – A manual that is developed by the American College of Surgeons (ACS) in order to create a standardized national trauma database.

American College of Surgeons ("ACS") - Nationally recognized scientific association of surgeons that improve the quality of care for the surgical patient by setting high standards for surgical education and practice.

Business Rule – A condition used to identify a data error. The business rule will have an associated Rule ID. The term "edit checks" is used by the NTDS and can be used interchangeably.

Data Element – Single category of information reported in a given trauma record that contains field values or other related points of data

Department – The Department of Health

Field Value – The data entered into a data element

Florida Acute Care Trauma (FACT) Registry Manual - A manual that is developed by the Department to act as a subset of the FTDS and NTDS for use by non-trauma center hospitals. This manual is incorporated into Florida Administrative Rule by reference.

Florida Trauma Registry Manual, Data Dictionary 2016 Edition ("FTDS") – A manual that is developed by the Department to act as a supplement to the NTDS. This manual identifies the requirements of the FTDS and state specific administrative components not covered by the NTDS. This manual is incorporated into Florida Administrative Rule by reference.

Next Generation Trauma Registry ("NGTR") – The electronic data collection and reporting system used by the Department to obtain records from provisional/verified trauma centers and acute care hospitals.

Transfer – Trauma patient that was transported to/from another hospital/trauma center by EMS, Air Ambulance, or other transport designed for trauma patients.

Trauma Patient Volume – The number of trauma patients reported by acute care hospitals to the Trauma Registry and validated by the Department.

Trauma Patient – A patient that meets the inclusion criteria of the FTDS.

Trauma Patient Discharge ("Discharge") – The date/time the patient stopped receiving trauma services. This would include the date/time of official discharge, transferred to hospice (in or out of the hospital), transferred to rehabilitation (in or out of hospital), or the date/time the patient is transferred to a service that requires a new hospital account.

Trauma Record – A collection of data elements that provide an account of each episode where a trauma patient received trauma services

Trauma Record File ("File") – A trauma record or a combination of trauma records that represent the treatment that was provided to a patient(s) meeting Florida inclusion criteria and submitted to the Department.

Trauma Service - Trauma service represents the primary structure for providing care for trauma patients. The service includes personnel and other resources necessary to ensure the appropriate and efficient provision of care.

Valid Record ("Valid") – A trauma record that meets Department standards for timeliness, completeness, and has not exceeded the error threshold for a given record.

XML Schema Definition ("XSD") – A document that specifies how to formally describe the elements in an Extensible Markup Language (XML). The XSD is used by NGTR to verify the data in a file. The current XSD is the FLTDS_2016.XSD Version 1.0 and is incorporated into rule by reference.

DATA DICTIONARY

DEMOGRAPHIC INFORMATION

D_07 DATE OF BIRTH	
Field Definition	The patient's date of birth.
Data Format	*[number]*
XSD Type	xs:date
XSD Element	DateOfBirth
Multiple Entry	No – A trauma patient may have only one reported date of birth.
Accepts Nulls	Yes, common null values
Required Field	Yes – This element is required in the National Trauma Data Standard (NTDS)
Field Format	Collected as YYYY-MM-DD
Field Values	Relevant value for data element
Field Constraints	**Minimum Constraint** 1890 **Maximum Constraint** 2030
Additional Info	
Related Fields	

Rule ID	*Level*	*Rule Description*
0601	1	Invalid value
0602	1	Date out of range
0603	2	Field is blank
0605	3	Not Known/Not Recorded, complete variables: Age and Age Units
0609	2	Date of Birth is later than ED/Hospital Arrival Date
0610	2	Date of Birth is later than ED Discharge Date
0611	2	Date of Birth is later than Hospital Discharge Date
0612	2	Date of Birth + 120 years must be less than ED/Hospital Arrival Date
0613	2	Field is Not Applicable

D_08 AGE	
Field Definition	The patient's age at the time of injury (best approximation).
Data Format	*[number]*
XSD Type	xs:integer
XSD Element	Age
Multiple Entry	No
Accepts Nulls	Yes, common null values
Required Field	Conditional– This element is required if Date of Birth is unknown
Field Format	
Field Values	Relevant value for data element
Field Constraints	**Minimum Constraint** 0 **Maximum Constraint** 120
Additional Info	• Used to calculate patient age in hours, days, months, or years. • If Date of Birth is "Not Known/Not Recorded", complete variables: Age and Age Units. • If Date of Birth equals ED/Hospital Arrival Date, then the Age and Age Units variables must be completed. • Must also complete variable: Age Units.
Related Fields	

Rule ID	*Level*	*Rule Description*
0701	1	Age is outside the valid range of 0 - 120
0703	2	Field cannot be blank when (1) Date of Birth equals ED/Hospital Arrival date or (2) Date of Birth is Not Known/Not Recorded
0704	3	Injury Date minus Date of Birth should equal submitted Age
0705	4	Age is greater than expected for the Age Units Specified. Age should not exceed 60 minutes, 24 hours, 30 days, 24 months, or 120 years. Please verify this is correct.
0707	2	Field must be Not Applicable when Age Units is Not Applicable
0708	2	Field must be Not Known/Not Recorded when Age Units is Not Known/Not Recorded

D_09 AGE UNITS	
Field Definition	The units used to document the patient's age (Hours, Days, Months, Years).
Data Format	*[number]*
XSD Type	xs:integer
XSD Element	AgeUnits
Multiple Entry	No
Accepts Nulls	Yes, common null values
Required Field	Conditional– This element is required if Date of Birth is unknown
Field Format	
Field Values	1. Hours 2. Days 3. Months 4. Years
Field Constraints	Enumerated List
Additional Info	• Used to calculate patient age in hours, days, months, or years. • If Date of Birth is “Not Known/Not Recorded”, complete variables: Age and Age Units. • If Date of Birth equals ED/Hospital Arrival Date, then the Age and Age Units variables must be completed. • Must also complete variable: Age.
Related Fields	

Rule ID	***Level***	***Rule Description***
0801	1	Value is not a valid menu option
0803	2	Field cannot be blank
0805	2	Field must be Not Applicable when Age is Not Applicable
0806	2	Field must be Not Known/Not Recorded when Age is Not Known/Not Recorded

DF_02 Event Specific Patient Tracking Number (ESPTN)	
Field Definition	Unique identifier for this patient for this event, generated by the first Florida state-licensed agency which renders service to the patient for the event
Data Format	*[text]*
XSD Data Type	*xs:String*
XSD Element	*ESPTN*
Multiple Entry	No – A trauma record may have only one ESPTN
Accepts Nulls	Partial – A Common Null Value (CNV) of "Not Known/Not Recorded" is valid
Required Field	Yes – This element is required in the Florida Acute Care Trauma Registry (FACT) Manual
Field Format	44 characters in the form: XXX_MMDDYYYY_LicNum_PatNum
Field Values	The ESPTN is comprised of the following information: XXX A three character code indicating the type of agency that is creating the EPSTN number: the code is either "EMS" for EMS agency, "HOS" for hospital agency, or "LAW" for law enforcement agency MM The two-digit month DD The two-digit day of the month YYYY The four-digit year LicNum The Florida state-issued license number of the agency PatNum The agency-assigned patient number
Field Constraints	This field should consist of the three-character agency type (1-3), the first underscore (4), the eight-digit date (5-12), the second underscore (13), a minimum/maximum ten characters for the Florida state-issued license number (padded with leading zeroes, if necessary) (14-23), the third underscore (24), and a minimum/maximum of 20 characters agency-assigned patient number (padded with leading zeroes, if necessary) (25-44).
Additional Info	▪ The state-issued license number should be unique within an agency type, but may not be unique across agency types. Hospitals should use the AHCA assigned file number ▪ The agency-assigned patient number should be unique for that patient within the context of that agency, but may not be unique across multiple events for the same patient within the agency ▪ Use the date the trauma patient arrived at your facility. This could be the ED or Hospital Arrival Date ▪ If the patient arrives at your facility without an ESPTN number, it is the reporting facility's responsibility to create one. This field is intended to be auto-generated by user action when a prior ESPTN is not documented by EMS or law enforcement agency
References	

Rule ID	*Level*	*Rule Description*
50201	1	Invalid value (element must conform to data specification)
50202	2	Field cannot be blank
50203	4	Not Applicable, this field must be valued or Not Known/Not Recorded
50204	4	The "MMDDYYYY" date in the ESPTN should not be earlier than the *NTDS I_01 Injury Incident Date* value

DF_03 Social Security Number	
Field Definition	The U.S Government issued Social Security Number for the patient
Data Format	*[text]*
XSD Data Type	*xs:string*
XSD Element	*PatientSsn*
Multiple Entry	No – A trauma patient may have only one reported Social Security Number.
Accepts Nulls	No – Common Null Values (CNVs) are not accepted
Required Field	Yes – This element is required in the Florida Acute Care Trauma Registry (FACT) Manual
Field Format	Eleven characters formatted as “nnn-nn-nnnn” where “n” is a number between 0 and 9. (Note that this element is encrypted by the State.)
Field Values	Relevant value for data element. If the SSN is unknown, use the following that pertain: 000-00-0000 = Infants who are 1 year old or less. 555-55-5555 = Non-Citizens 777-77-7777 = Not Available
Field Constraints	
Additional Info	Linkage to other data sources used to uniquely track the patient, either for this event, or for multiple events.
References	

Rule ID	*Level*	*Rule Description*
50301	1	Invalid value (element must conform to data specification)
50302	2	Field cannot be blank
50303	2	Field cannot be Not Applicable
50304	2	Field cannot be Not Known/Not Recorded
50305	4	If the patient’s age is greater than one year, then the *Social Security Number* should not be all zeros

DF_07 Medical Record Number	
Field Definition	The medical record number or other patient identifier on the transcript of the medical information about the patient.
Data Format	*[text]*
XSD Type	*xs:AlphaDash*
XSD Element	*MedicalRecNum*
Multiple Entry	No – A trauma patient may have only one reported Medical Record Number.
Accepts Nulls	No – Common Null Values (CNVs) are not accepted
Required Field	Yes – This element is required in the Florida Acute Care Trauma Registry (FACT) Manual
Field Format	Up to 20 characters. (Note that this element is encrypted by the State.)
Field Values	Relevant value for data element. If this number is unknown, a temporary number may be assigned.
Field Constraints	
Additional Info	The medical record number is unique to a given patient, but not unique to a particular incident. The other patient identifier will be your internal defined unique tracking number.
Related Fields	

Rule ID	***Level***	***Rule Description***
50701	1	Invalid value (element must conform to data specification)
50702	2	Field cannot be blank
50703	2	Not Applicable, field must be valued
50704	2	Not Known/Not Recorded, field must be valued

INJURY INFORMATION

I_01 INJURY INCIDENT DATE	
Field Definition	The date the injury occurred.
Data Format	
XSD Data Type	xs:date
XSD Element	IncidentDate
Multiple Entry	No
Accepts Nulls	Yes, common null values
Required Field	Yes – This element is required in the National Trauma Data Standard (NTDS)
Field Format	YYYY-MM-DD
Field Values	Relevant value for data element
Field Constraints	**Minimum Constraint** 1990 **Maximum Constraint** 2030
Additional Info	Estimates of date of injury should be based upon report by patient, witness, family, or health care provider. Other proxy measures (e.g., 911 call times) should not be used.
References	

Rule ID	***Level***	***Rule Description***
1201	1	Date is not valid
1202	1	Date out of range
1203	2	Field cannot be blank
1204	4	Injury Incident Date is earlier than Date of Birth
1208	4	Injury Incident Date is later than ED/Hospital Arrival Date
1209	4	Injury Incident Date is later than ED Discharge Date
1210	4	Injury Incident Date is later than Hospital Discharge Date

I_02 INJURY INCIDENT TIME	
Field Definition	The time the injury occurred.
Data Format	
XSD Data Type	xs:time
XSD Element	IncidentTime
Multiple Entry	No
Accepts Nulls	Yes, common null values
Required Field	Yes – This element is required in the National Trauma Data Standard (NTDS)
Field Format	Collected as HH:MM (HH:MM should be collected as military time.)
Field Values	Relevant value for data element
Field Constraints	**Minimum Constraint** 00:00 **Maximum Constraint** 23:59
Additional Info	Estimates of time of injury should be based upon report by patient, witness, family, or health care provider. Other proxy measures (e.g., 911 call times) should not be used.
References	

Rule ID	*Level*	*Rule Description*
1301	1	Time is not valid
1302	1	Time out of range
1303	2	Field cannot be blank
1307	4	Injury Incident Time is later than the ED/Hospital Arrival Time
1308	4	Injury Incident Time is later than the ED Discharge Time
1309	4	Injury Incident Time is later than the Hospital Discharge Time

I_06 ICD-9 PRIMARY EXTERNAL CAUSE CODE	
Field Definition	E-code used to describe the mechanism (or external factor) that caused the injury event.
Data Format	
XSD Data Type	xs:string
XSD Element	PrimaryECode
Multiple Entry	No
Accepts Nulls	Yes, common null values
Required Field	Conditional – This element or ICD-10 Primary E-Code must be completed.
Field Format	
Field Values	Relevant ICD-9-CM code value for injury event.
Field Constraints	
Additional Info	The Primary E-code should describe the main reason a patient is admitted to the hospital. ICD-9-CM codes will be accepted for this data element. Activity codes should not be reported in this field.
References	

Rule ID	*Level*	*Rule Description*
1701	1	E-Code is not a valid ICD-9-CM code
1702	2	Field cannot be blank (at least one ICD-9 or ICD-10 trauma code must be entered)
1703	4	External Cause Code should not be =(810.0, 811.0, 812.0, 813.0, 814.0, 815.0, 816.0, 817.0, 818.0, 819.0) and Age < 15
1704	2	Should not be 849.x
1705	3	External Cause Code should not be an activity code. ICD-9 Primary External Cause Code should be within the range of E800-999.9

I_07 ICD-10 PRIMARY EXTERNAL CAUSE CODE	
Field Definition	External Cause Code used to describe the mechanism (or external factor) that caused the injury event.
Data Format	
XSD Data Type	xs:string
XSD Element	PrimaryECodeIcd10
Multiple Entry	No
Accepts Nulls	Yes, common null values
Required Field	Conditional – This element or ICD-9 Primary E-Code must be completed.
Field Format	
Field Values	Relevant ICD-10-CM code value for injury event.
Field Constraints	
Additional Info	The Primary E-code should describe the main reason a patient is admitted to the hospital. ICD-10-CM codes will be accepted for this data element. Activity codes should not be reported in this field.
References	

Rule ID	*Level*	*Rule Description*
8901	1	E-Code is not a valid ICD-10-CM code
8902	2	Field cannot be blank (at least one ICD-9 or ICD-10 trauma code must be entered)
8904	2	Should not be Y92.X/Y92.XX/Y92.XXX (where X is A-Z or 0-9)
8905	3	ICD-10 External Cause Code should not be Y93.X/Y93.XX (where X is A-Z or 0-9)

I_12 INCIDENT LOCATION ZIP CODE	
Field Definition	The ZIP code of the incident location.
Data Format	
XSD Data Type	xs:zip
XSD Element	InjuryZip
Multiple Entry	No
Accepts Nulls	Yes, common null values
Required Field	Yes – This element is required in the National Trauma Data Standard (NTDS)
Field Format	5 or 9 digit code (XXXXX-XXXX).
Field Values	Relevant value for data element
Field Constraints	
Additional Info	If "Not Applicable" or "Not Recorded/Not Known," complete variable: Incident County. May require adherence to HIPAA regulations.
References	

Rule ID	*Level*	*Rule Description*
2001	1	Invalid value
2002	2	Field cannot be blank

I_15 INCIDENT COUNTY	
Field Definition	The county where the patient was found or to which the unit responded (or best approximation).
Data Format	
XSD Data Type	xs:string
XSD Element	IncidentCounty
Multiple Entry	No
Accepts Nulls	Yes, common null values
Required Field	Conditional – Only completed when Incident Location ZIP code is "Not Applicable" or "Not Recorded/Not Known."
Field Format	
Field Values	Relevant value for data element (three digit FIPS code).
Field Constraints	
Additional Info	Used to calculate FIPS code.
References	

Rule ID	*Level*	*Rule Description*
2301	1	Invalid value
2303	2	Field cannot be blank when Incident Location Zip Code is Not Applicable or Not Known/Not Recorded

PRE HOSPITAL INFORMATION

P_07 TRANSPORT MODE	
Field Definition	The mode of transport delivering the patient to your hospital.
Data Format	
XSD Data Type	xs:integer
XSD Element	TransportMode
Multiple Entry	No
Accepts Nulls	Yes, common null values
Required Field	Yes – This element is required in the National Trauma Data Standard (NTDS)
Field Format	
Field Values	1. Ground Ambulance 2. Helicopter Ambulance 3. Fixed-wing Ambulance 4. Private/Public Vehicle/Walk-in 5. Police 6. Other
Field Constraints	
Additional Info	
References	

Rule ID	*Level*	*Rule Description*
3401	1	Value is not a valid menu option
3402	2	Field cannot be blank

P_17 INTER-FACILITY TRANSFER	
Field Definition	Was the patient transferred to your facility from another acute care facility?
Data Format	
XSD Data Type	xs:integer
XSD Element	InterFacilityTransfer
Multiple Entry	No
Accepts Nulls	Yes, common null values
Required Field	Yes – This element is required in the National Trauma Data Standard (NTDS)
Field Format	
Field Values	1. Yes 2. No
Field Constraints	
Additional Info	Patients transferred from a private doctor's office, stand-alone ambulatory surgery center, or delivered to your hospital by a non-EMS transport are not considered an inter-facility transfers. Outlying facilities purporting to provide emergency care services or utilized to stabilize a patient are considered acute care facilities.
References	

Rule ID	*Level*	*Rule Description*
4401	2	Field cannot be blank
4402	1	Value is not a valid menu option
4404	3	Field should not be Not Known/Not Recorded
4405	2	Field cannot be Not Applicable

P_18 TRAUMA CENTER CRITERIA	
Field Definition	Physiologic and anatomic EMS trauma triage criteria for transport to a trauma center as defined by the Centers for Disease Control and Prevention and the American College of Surgeons-Committee on Trauma.
Data Format	
XSD Data Type	xs:integer
XSD Element	TraumaCenterCriterion
Multiple Entry	Yes, max 11
Accepts Nulls	Yes, common null values
Required Field	Conditional
Field Format	
Field Values	1. Glasgow Coma Score <= 13 2. Systolic blood pressure < 90 mmHg 3. Respiratory rate < 10 or > 29 breaths per minute (< 20 in infants aged < 1 year) or need for ventilatory support 4. All penetrating injuries to head, neck, torso, and extremities proximal to elbow or knee 5. Chest wall instability or deformity (e.g., flail chest) 6. Two or more proximal long-bone fractures 7. Crushed, degloved, mangled, or pulseless extremity 8. Amputation proximal to wrist or ankle 9. Pelvic fracture 10. Open or depressed skull fracture 11. Paralysis
Field Constraints	
Additional Info	• The null value "Not Applicable" should be used to indicate that the patient did not arrive by EMS. • The null value "Not Applicable" should be used if EMS Run Report indicates patient did not meet any Trauma Center Criteria. • The null value “Not Applicable” should be used if Trauma Alert Type is 7 • The null value "Not Known/Not Recorded" should be used if this information is not indicated, as an identical response choice, on the EMS Run Report or if the EMS Run Report is not available. • Check all that apply.
References	

Rule ID	*Level*	*Rule Description*
9501	1	Value is not a valid menu option
9502	2	Field cannot be blank

P_19 VEHICULAR, PEDESTRIAN, RISK INJURY	
Field Definition	EMS trauma triage mechanism of injury criteria for transport to a trauma center as defined by the Centers for Disease Control and Prevention and the American College of Surgeons-Committee on Trauma.
Data Format	
XSD Data Type	xs:integer
XSD Element	VehicularPedestrianOther
Multiple Entry	Yes, max 14
Accepts Nulls	Yes, common null values
Required Field	Conditional
Field Format	
Field Values	1. Fall adults: > 20 ft. (one story is equal to 10 ft.) 2. Fall children: > 10 ft. or 2-3 times the height of the child 3. Crash intrusion, including roof: > 12 in. occupant site; > 18 in. any site 4. Crash ejection (partial or complete) from automobile 5. Crash death in same passenger compartment 6. Crash vehicle telemetry data (AACN) consistent with high risk injury 7. Auto v. pedestrian/bicyclist thrown, run over, or > 20 MPH impact 8. Motorcycle crash > 20 mph 9. For adults > 65; SBP < 110 10. Patients on anticoagulants and bleeding Disorders 11. Pregnancy > 20 weeks 12. EMS provider judgment 13. Burns 14. Burns with Trauma
Field Constraints	
Additional Info	• The null value "Not Applicable" should be used to indicate that the patient did not arrive by EMS. • The null value "Not Applicable" should be used if EMS Run Report indicates patient did not meet any Vehicular, Pedestrian, Other Risk Injury criteria. • The null value “Not Applicable” should be used if Trauma Alert Type is 7 • The null value "Not Known/Not Recorded" should be used if this information is not indicated, as an identical response choice, on the EMS Run Report or if the EMS Run Report is not available. • Check all that apply.
References	

Rule ID	*Level*	*Rule Description*
9601	1	Value is not a valid menu option
9602	2	Field cannot be blank

EMERGENCY DEPARTMENT INFORMATION

ED_01 ED/HOSPITAL ARRIVAL DATE	
Field Definition	The date the patient arrived to the ED/hospital.
Data Format	*[date]*
XSD Data Type	xs:date
XSD Element	HospitalArrivalDate
Multiple Entry	No
Accepts Nulls	Yes, common null values
Required Field	Yes – This element is required in the National Trauma Data Standard (NTDS)
Field Format	YYYY-MM-DD
Field Values	Relevant value for data element.
Field Constraints	**Minimum Constraint** 1990 **Maximum Constraint** 2030
Additional Info	If the patient was brought to the ED, enter date patient arrived at ED. If patient was directly admitted to the hospital, enter date patient was admitted to the hospital. Collected as YYYY-MM-DD.
References	

Rule ID	*Level*	*Rule Description*
4501	1	Date is not valid
4502	1	Date out of range
4503	2	Field cannot be blank
4505	2	Field cannot be Not Known/Not Recorded
4509	2	ED/Hospital Arrival Date is later than ED Discharge Date
4510	2	ED/Hospital Arrival Date is later than Hospital Discharge Date
4511	3	ED/Hospital Arrival Date is earlier than Date of Birth
4512	3	ED/Hospital Arrival Date must be after 1993
4513	3	ED/Hospital Arrival Date minus Injury Incident Date must be less than 30 days
4515	2	Field cannot be Not Applicable

ED_02 ED/HOSPITAL ARRIVAL TIME	
Field Definition	The time the patient arrived to the ED/hospital.
Data Format	*[time]*
XSD Data Type	xs:time
XSD Element	HospitalArrivalTime
Multiple Entry	No
Accepts Nulls	Yes, common null values
Required Field	Yes – This element is required in the National Trauma Data Standard (NTDS)
Field Format	HH:MM. HH:MM should be collected as military time.
Field Values	Relevant value for data element.
Field Constraints	**Minimum Constraint** 00:00 **Maximum Constraint** 23:59
Additional Info	If the patient was brought to the ED, enter time patient arrived at ED. If patient was directly admitted to the hospital, enter time patient was admitted to the hospital.
References	

Rule ID	*Level*	*Rule Description*
4601	1	Time is not valid
4602	1	Time out of range
4603	2	Field cannot be blank
4607	4	ED/Hospital Arrival Time is later than the ED Discharge Time
4608	4	ED/Hospital Arrival Time is later than the Hospital Discharge Time

ED_19 ED DISCHARGE DISPOSITION	
Field Definition	The disposition of the patient at the time of discharge from the ED.
Data Format	
XSD Data Type	xs:integer
XSD Element	EdDischargeDisposition
Multiple Entry	No
Accepts Nulls	Yes, common null values
Required Field	Yes – This element is required in the National Trauma Data Standard (NTDS)
Field Format	
Field Values	1- Floor bed (general admission, non-specialty unit bed) 2- Observation unit (unit that provides < 24 hour stays) 3- Telemetry/step-down unit (less acuity than ICU) 4- Home with services 5- Deceased/Expired 6- Other (jail, institutional care, mental health, etc.) 7- Operating Room 8- Intensive Care Unit (ICU) 9- Home without services 10- Left against medical advice 11- Transferred to another hospital
Field Constraints	
Additional Info	The null value "Not Applicable" is used if the patient is directly admitted to the hospital. If ED Discharge Disposition is 4, 5, 6, 9, 10, 11, then Hospital Discharge Date, Time, and Disposition should be “Not Applicable”.
References	

Rule ID	***Level***	***Rule Description***
6101	1	Value is not a valid menu option
6102	2	Field cannot be blank
6104	2	Field cannot be Not Known/Not Recorded
6106	2	Field cannot be Not Applicable when Hospital Discharge Date is Not Applicable
6107	2	Field cannot be Not Applicable when Hospital Discharge Date is Not Known/Not Recorded
6108	2	Field cannot be Not Applicable when Hospital Discharge Disposition is Not Applicable
6109	2	Field cannot be Not Applicable when Hospital Discharge Disposition is Not Known/Not Recorded

ED_20 SIGNS OF LIFE	
Field Definition	Indication of whether patient arrived at ED/Hospital with signs of life.
Data Format	
XSD Data Type	xs:integer
XSD Element	DeathInEd
Multiple Entry	No
Accepts Nulls	Yes, common null values
Required Field	Yes – This element is required in the National Trauma Data Standard (NTDS)
Field Format	
Field Values	1 Arrived with NO signs of life 2 Arrived with signs of life
Field Constraints	
Additional Info	A patient with no signs of life is defined as having none of the following: organized EKG activity, pupillary responses, spontaneous respiratory attempts or movement, and unassisted blood pressure. This usually implies the patient was brought to the ED with CPR in progress.
References	

Rule ID	*Level*	*Rule Description*
6201	1	Value is not a valid menu option
6202	2	Field cannot be blank
6206	3	Field should not be Not Known/Not Recorded
6207	2	Field cannot be Not Applicable

ED_21 ED DISCHARGE DATE	
Field Definition	The date the patient was discharged from the ED.
Data Format	*[date]*
XSD Data Type	xs:date
XSD Element	EdDischargeDate
Multiple Entry	No
Accepts Nulls	Yes, common null values
Required Field	Yes – This element is required in the National Trauma Data Standard (NTDS)
Field Format	YYYY-MM-DD.
Field Values	Relevant value for data element.
Field Constraints	**Minimum Constraint 1990 Maximum Constraint 2030**
Additional Info	Used to auto-generate an additional calculated field: Total ED Time: (elapsed time from ED admit to ED discharge). If the patient is directly admitted to the hospital, code as “Not Applicable”.
References	

Rule ID	***Level***	***Rule Description***
6301	1	Date is not valid
6302	1	Date out of range
6303	2	Field cannot be blank
6307	2	ED Discharge Date is earlier than ED/Hospital Arrival Date
6308	2	ED Discharge Date is later than Hospital Discharge Date
6309	3	ED Discharge Date is earlier than Date of Birth
6310	3	ED Discharge Date minus ED/Hospital Arrival Date is greater than 365 days.

ED_22 ED DISCHARGE TIME	
Field Definition	The date the patient was discharged from the ED
Data Format	*[time]*
XSD Data Type	xs:time
XSD Element	EdDischargeTime
Multiple Entry	No
Accepts Nulls	Yes, common null values
Required Field	Yes – This element is required in the National Trauma Data Standard (NTDS)
Field Format	Collected as HH:MM. HH:MM should be collected as military time.
Field Values	Relevant value for data element.
Field Constraints	**Minimum Constraint 00:00 Maximum Constraint 23:59**
Additional Info	Used to auto-generate an additional calculated field: Total ED Time (elapsed time from ED admit to ED discharge). If the patient is directly admitted to the hospital, code as “Not Applicable”.
References	

Rule ID	*Level*	*Rule Description*
6401	1	Time is not valid
6402	1	Time out of range
6403	2	Field cannot be blank
6407	4	ED Discharge Time is earlier than the ED/Hospital Arrival Time
6408	4	ED Discharge Time is later than the Hospital Discharge Time

EDF_01 Trauma Alert ~~Type~~	
Field Definition	This field is used to capture if a trauma alert was called in accordance with the state trauma scorecard criteria.
Data Format	*[combo] single-choice*
XSD Data Type	*xs:nonNegativeInteger*
XSD Element	*TraumaAlertType*
Multiple Entry	No
Accepts Nulls	No – Common Null Values (CNVs) are not accepted
Required Field	Yes – This element is required in the Florida Acute Care Trauma (FACT) Manual
Field Format	One numeric digit
Field Values	See below
Field Constraints	From 5- 8
Additional Info	For the purposes of this field, Trauma Center Criteria refers to having at least one Field Data Value into either *Trauma Center Criterion* or *Vehicular, Risk, Pedestrian* fields.
References	

Field Values	
~~1 Red (single criterion)~~ Retired 2015	~~2 Blue (two criteria~~) Retired 2015
~~3 GCS ≤ 12~~ Retired 2015	~~4 Judgment EMT~~ Retired 2015
5 Judgment Hospital	6 Local (local criteria)
7 NTA (Not a Trauma Alert)	8 Trauma Center Criteria

Rule ID	***Level***	***Rule Description***
51301	1	Invalid value (element must conform to data specification)
51302	2	Field cannot be blank
51303	2	Not Applicable, field must be valued
51304	2	Not Known/Not Recorded, field must be valued
51307	2	If Trauma Alert is valued as 8, then either Trauma Center Criterion or Vehicular, Risk, Pedestrian must be valued.

DIAGNOSES INFORMATION

DG_02 ICD-9 INJURY DIAGNOSES	
Field Definition	Diagnoses related to all identified injuries.
Data Format	
XSD Data Type	xs:string
XSD Element	InjuryDiagnosis
Multiple Entry	Yes, max 50
Accepts Nulls	Yes, common null values
Required Field	Conditional - This element is required if ICD-10 Injury Diagnoses is not valued.
Field Format	
Field Values	Injury diagnoses as defined by ICD-9-CM code range: 800-959.9, except for 905 – 909.9, 910 – 924.9, 930 – 939.9. The maximum number of diagnoses that may be reported for an individual patient is 50
Field Constraints	**Minimum Length:** 3 **Maximum Length:** 6

Additional Info	• ICD-9-CM codes pertaining to other medical conditions (e.g., CVA, MI, co-morbidities, etc.) may also be included in this field. Used to auto-generate additional calculated fields:
	  ○ Abbreviated Injury Scale (six body regions)
	  ○ Injury Severity Score.
	• Business rule 6903 will not be checked if patient is classified as a Florida Trauma Alert as described by *EDF-01 Trauma Alert Type*.

References	

Rule ID	*Level*	*Rule Description*
6901	1	Invalid value
6902	2	Field cannot be blank, must either (1) contain a valid ICD-9 code or (2) be Not Applicable if not coding ICD-9
6903	2	If coding with ICD-9, then at least one diagnosis must be provided and meet inclusion criteria (ICD-9-CM 800 – 959.9, except for 905 – 909.9, 910 – 924.9, 930 – 939.9)
6904	4	Field should not be Not Known/Not Record

DG_03 ICD-10 INJURY DIAGNOSES	
Field Definition	Diagnoses related to all identified injuries.
Data Format	*[combo] multiple-choice*
XSD Data Type	xs:string
XSD Element	DiagnosisIcd10
Multiple Entry	Yes, max 50
Accepts Nulls	Yes, common null values
Required Field	Conditional – This element is required if ICD-9 Injury Diagnoses is not valued.
Field Format	
Field Values	Injury diagnoses as defined by ICD-10-CM code range S00-S99, T07, T14, T20-T28 and T30-T32 . The maximum number of diagnoses that may be reported for an individual patient is 100.
Field Constraints	**Minimum Length:** 3 **Maximum Length:** 8

Additional Info	• ICD-10-CM codes pertaining to other medical conditions (e.g., CVA, MI, co-morbidities, etc.) may also be included in this field. Used to auto-generate additional calculated fields:
	  ○ Abbreviated Injury Scale (six body regions)
	  ○ Injury Severity Score
	• Business rule 8703 will not be checked if patient is classified as a Florida Trauma Alert

References	

Rule ID	*Level*	*Rule Description*
8701	1	Invalid value
8702	2	Field cannot be blank, must either (1) contain a valid ICD-10 code or (2) be Not Applicable if not coding ICD-10
8703	2	If coding with ICD-10, then at least one diagnosis must be provided and meet inclusion criteria
8704	4	Field should not be Not Known/Not Recorded

Injury Severity Information

ISF_05 LOCALLY CALCULATED ISS	
Field Definition	The Injury Severity Score (ISS) that reflects the patient's injuries.
Data Format	*[combo] single-choice*
XSD Data Type	xs:integer
XSD Element	IssLocal
Multiple Entry	No
Accepts Nulls	Yes, common null values
Required Field	Yes – This element is required in AFTDS
Field Format	
Field Values	Relevant ISS value for the constellation of injuries
Field Constraints	Minimum Constraint 1 Maximum Constraint 75
Additional Info	This field is now a Florida Specific Field.
References	

Rule ID	*Level*	*Rule Description*
7401	1	Locally calculated ISS is outside the valid range of 1 - 75
7402	3	Value should be the sum of three squares
7403	2	Field cannot be blank

Outcome Information

O_03 HOSPITAL DISCHARGE DATE	
Field Definition	The date the patient was discharged from the hospital.
Data Format	*[date]*
XSD Data Type	xs:date
XSD Element	HospitalDischargeDate
Multiple Entry	No
Accepts Nulls	Yes, common null values
Required Field	Yes – This element is required in the National Trauma Data Standard (NTDS)
Field Format	YYYY-MM-DD
Field Values	Relevant value for data element.
Field Constraints	**Minimum Constraint 1990 Maximum Constraint 2030**
Additional Info	The null value "Not Applicable" is used if ED Discharge Disposition = 5 (Deceased/expired). The null value "Not Applicable" is used if ED Discharge Disposition = 4,6,9,10, or 11.
References	

Rule ID	***Level***	***Rule Description***
7701	1	Date is not valid
7702	1	Date out of range
7703	2	Field cannot be blank
7707	2	Hospital Discharge Date is earlier than ED/Hospital Arrival Date
7708	2	Hospital Discharge Date is earlier than ED Discharge Date
7709	3	Hospital Discharge Date is earlier than Date of Birth
7710	3	Hospital Discharge Date minus Injury Incident Date is greater than 365 days
7711	3	Hospital Discharge Date minus ED/Hospital Arrival Date is greater than 365 days
7712	2	Field must be Not Applicable when ED Discharge Disposition = 4,6,9,10, or 11
7713	2	Field must be Not Applicable when ED Discharge Disposition = 5 (Died)

O_04 HOSPITAL DISCHARGE TIME	
Field Definition	The time the patient was discharged from the hospital.
Data Format	*[time]*
XSD Data Type	xs:time
XSD Element	HospitalDischargeTime
Multiple Entry	No
Accepts Nulls	Yes, common null values
Required Field	Yes – This element is required in the National Trauma Data Standard (NTDS)
Field Format	HH:MM. HH:MM should be collected as military time
Field Values	Relevant value for data element.
Field Constraints	**Minimum Constraint 00:00 Maximum Constraint 23:59**
Additional Info	Used to auto-generate an additional calculated field: Total Length of Hospital Stay (elapsed time from ED/hospital arrival to hospital discharge). The null value "Not Applicable" is used if ED Discharge Disposition = 5 (Deceased/expired). The null value "Not Applicable" is used if ED Discharge Disposition = 4,6,9,10, or 11.
References	

Rule ID	*Level*	*Rule Description*
7801	1	Time is not valid
7802	1	Time out of range
7803	2	Field cannot be blank
7807	4	Hospital Discharge Time is earlier than the ED/Hospital Arrival Time
7808	4	Hospital Discharge Time is earlier than the ED Discharge Time
7809	2	Field must be Not Applicable when ED Discharge Disposition = 4,6,9,10, or 11
7810	2	Field must be Not Applicable when ED Discharge Disposition = 5 (Died)

O_05 HOSPITAL DISCHARGE DISPOSITION	
Field Definition	The time the patient was discharged from the hospital.
Data Format	*[combo] single-choice*
XSD Data Type	xs:integer
XSD Element	HospitalDischargeDisposition
Multiple Entry	No
Accepts Nulls	Yes, common null values
Required Field	Yes – This element is required in the National Trauma Data Standard (NTDS)
Field Format	
Field Values	1. Discharged/Transferred to a short-term general hospital for inpatient care 2. Discharged/Transferred to an Intermediate Care Facility (ICF) 3. Discharge/Transferred to home under care of organized home health service 4. Left against medical advice or discontinued care 5. Deceased/Expired 6. Discharged to home or self-care (routine discharge) 7. Discharged/Transferred to Skilled Nursing Facility (SNF) 8. Discharged/ Transferred to hospice care ~~9. RETIRED 2014 Discharged/Transferred to court/law enforcement.~~ 10. Discharged/Transferred to court/law enforcement 11. Discharged/Transferred to inpatient rehab or designated unit 12. Discharged/Transferred to Long Term Care Hospital (LTCH) 13. Discharged/Transferred to a psychiatric hospital or psychiatric distinct part unit of a hospital 14. Discharged/Transferred to another type of institution not defined elsewhere
Field Constraints	**Enumerated List**
Additional Info	Field value = 6, "home" refers to the patient's current place of residence (e.g., prison, Child Protective Services etc.). Field values based upon UB-04 disposition coding. Disposition to any other non-medical facility should be coded as 6. Disposition to any other medical facility should be coded as 14. The null value "Not Applicable" is used if ED Discharge Disposition = 5 (Deceased/expired). The null value "Not Applicable" is used if ED Discharge Disposition = 4,6,9,10, or 11.

Rule ID	*Level*	*Rule Description*
7901	1	Value is not a valid menu option
7902	2	Field cannot be blank
7903	2	Field must be Not Applicable when ED Discharge Disposition = 5 (Died)
7907	2	Field must be Not Applicable when ED Discharge Disposition = 4,6,9,10 or 11
7908	2	Field cannot be Not Applicable
7909	2	Field cannot be Not Known/Not Recorded when Hospital Arrival Date and Hospital Discharge Date are not: (1) blank, (2) Not Applicable, or (3) Not Known/Not Recorded

Change Log

Change Date	Discharge Year	Change Location	Field Name	Content Change
May-15	2016	Dictionary Design		Updated dictionary design section to reflect current acronyms
May-15	2016	Field Contents		Updated acronyms
May-15	2016	Required Fields		Updated acronyms and updated based on removed/added fields
May-15	2016	Reporting Overview		Provided clarification of this section and removed extraneous information
May-15	2016	Inclusion Criteria		Updated to provide specific guidance on how to determine inclusion in the registry. Clarified definition of an admission and provided a flow chart
May-15	2016	Submission Details		Refined section to provide clarification
May-15	2016	Definitions		Added a definition
May-15	2016	Data Fields		Removed business rules that were dependent on fields that were being removed from the FACT Manual
May-15	2016	Demographics	Trauma Registry Number	Removed
May-15	2016	Demographics	Medical Record Number	Added
May-15	2016	Demographics	Age	Added
May-15	2016	Demographics	Age Units	Added
May-15	2016	Demographics	ESPTN	Updated with clarifying information
May-15	2016	Pre-Hospital Information	EMS Dispatch Date	Removed
May-15	2016	Pre-Hospital	EMS Dispatch Time	Removed

		Information		
May-15	2016	Pre-Hospital Information	EMS Arrival on Scene Date	Removed
May-15	2016	Pre-Hospital Information	EMS Arrival on Scene Time	Removed
May-15	2016	Pre-Hospital Information	EMS Departure from Scene Date	Removed
May-15	2016	Pre-Hospital Information	EMS Departure from Scene Time	Removed
May-15	2016	Pre-Hospital Information	Trauma Center Criteria	Added
May-15	2016	Pre-Hospital Information	Vehicular, Pedestrian, Risk Injury	Added
May-15	2016	Referring Hospital Information	Referring Hospital ID	Removed
May-15	2016	Referring Hospital Information	Referring Hospital Arrival Date	Removed
May-15	2016	Referring Hospital Information	Referring Hospital Arrival Time	Removed
May-15	2016	Referring Hospital Information	Referring Hospital Discharge Date	Removed
May-15	2016	Referring Hospital Information	Referring Hospital Discharge Time	Removed
May-15	2016	Emergency Department Information	Initial ED/Hospital Systolic Blood Pressure	Removed
May-15	2016	Emergency Department Information	Initial ED/Hospital Pulse Rate	Removed
May-15	2016	Emergency Department Information	Initial ED/Hospital Respiratory Rate	Removed
May-15	2016	Emergency Department Information	Initial ED/Hospital GCS – Eye	Removed
May-15	2016	Emergency Department Information	Initial ED/Hospital GCS – Verbal	Removed
May-15	2016	Emergency Department Information	Initial ED/Hospital GCS – Motor	Removed

May-15	2016	Emergency Department Information	Initial ED/Hospital GCS Assessment Qualifiers	Removed
May-15	2016	Emergency Department Information	Trauma Alert Type	Updated menu choices and supporting business rules
August -15	2016	Injury Severity Information	Locally Calculated ISS	Updated field to be a Florida Specific due to removal from NTDS.
August -15	2016	Data Fields		Updated business rules to match current NTDB standards on various fields