2013 Trauma Registry Data Elements (NTDB)

Demographic Information
Patient's Home Zip Code
Patient's Home Country
Patient's Home State
Patient's Home County
Patient's Home City
Alternate Home Residence
Date of Birth
Age
Age Units
Race
Ethnicity
Gender

Injury Information
Injury Incident Date
Injury Incident Time
Work-Related
Patient's Occupational Industry
Patient's Occupation
Primary E-Code
Location E-Code
Additional E-Code
Incident Location Zip Code
Incident Country
Incident State
Incident County
Incident City
Protective Devices
Child Specific Restraint
Airbag Deployment

Pre-Hospital Information
EMS Dispatch Date
EMS Dispatch Time
EMS Unit arrival Date at Scene or Transferring Facility
EMS Unit arrival Time at Scene or Transferring Facility
EMS Unit Departure Date from Scene or Transferring Facility

EMS Unit Departure Time from Scene or Transferring Facility
Transport Mode
Other Transport Mode
Initial Field Systolic Blood Pressure
Initial Field Pulse Rate
Initial Field Respiratory Rate
Initial Field Oxygen Saturation
Initial Field GCS – Eye
Initial Field GCS – Verbal
Initial Field GCS – Motor
Initial Field GCS – Total

ED/Acute Care Information
ED/Hospital Arrival Date
ED/Hospital Arrival Time
ED Discharge Disposition
Signs of Life
ED Discharge Date
ED Discharge Time

Initial Assessment Information
Initial ED/Hospital Systolic Blood Pressure
Initial ED/Hospital Pulse Rate
Initial ED/Hospital Temperature
Initial ED/Hospital Respiratory Rate
Initial ED/Hospital Respiratory Assistance
Initial ED/Hospital Oxygen Saturation
Initial ED/Hospital Supplemental Oxygen
Initial ED/Hospital GCS – Eye
Initial ED/Hospital GCS – Verbal
Initial ED/Hospital – Motor
Initial ED/Hospital – Total
Initial ED/Hospital GCS Assessment Qualifiers

Initial ED/Hospital – Height
Initial ED/Hospital – Weight
Alcohol Use Indicator
Drug Use Indicator

Diagnosis Information
Injury Diagnoses
AIS Predot Code
AIS Severity
ISS Body Region
AIS Version
Locally Calculated ISS

Co-Morbidity Information
Co-Morbid Conditions

Procedures Information
Hospital Procedures
Hospital Procedure Start Date
Hospital Procedure Start Time

Complications / PI Information
Hospital Complications

Outcome Information
Total ICU Length of Stay
Total Ventilator Days
Hospital Discharge Date
Hospital Discharge Time
Hospital Discharge Disposition
Primary Method of Payment

Indiana-Specific Data Element
Medical Record Number