

TRAUMA TIMES

A Communication of the Division of Trauma and Injury Prevention

Indiana State Department of Health

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Upcoming Events

- **Indiana Emergency Response Conference**
Sept. 18-21



- **IPAC/NVDRS Meetings**
Sept. 20
- **Columbus Day**
(state offices closed)
Oct. 14

Division Awarded CDC Grant

The Division of Trauma and Injury Prevention (DTIP) is proud to announce it has been awarded a \$21 million three-year Overdose Data to Action grant – a competitive funding opportunity offered by the Centers for Disease Control and Prevention. The grant will undertake multiple strategies that leverage high quality, comprehensive and timely data surveillance to drive state and local drug overdose prevention efforts. The DTIP plans on accomplishing the following with the awarded grant funding:

- 1) Collect, analyze, and disseminate timely syndromic emergency department (ED) data on suspected all drug, all opioid, heroin, and all stimulant overdoses. Increase timeliness of hospital/billing ED discharge data.

Continued on page 2

Division Awarded CDC Grant (continued from page 1)

2) Collect and disseminate descriptions of drug overdose death circumstances for all unintentional or undetermined intent drug overdose deaths. Participate in the State Unintentional Drug Overdose Reporting System (SUDORS) optional activity to collect preliminary opioid overdose death counts within a month of decedent date of death from a subset of interested high burden counties.



3) Conduct several innovative surveillance projects that will include tracking public health risk of the illicit opioid drug supply, linking overdose data from different sources within the same jurisdiction, linking Prescription Drug Monitoring Program (PDMP) data to other data systems, and conducting innovative morbidity/mortality data surveillance.

4) Enhance and maximize Indiana's PDMP.

5) Integrate state and local prevention and response efforts by partnering with the Marion County Public Health Department, implementing the Indiana Communities Advancing Recovery Efforts Extension for Community Healthcare Outcomes, and partnering with the Indiana Department of Education and the Indiana United Ways to implement school-based drug prevention programs.

6) Establish linkages to care for those with opioid use disorder by partnering with the Indiana Family and Social Services Administration to build infrastructure and service systems to support transportation costs, and partnering with PACE, Inc. to staff harm reduction sites with peer recovery coaches.

7) Provide support to providers and health care systems by creating and implementing online opioid-prescribing dentistry courses and working with EDs to implement post-overdose protocols.

8) Enhance public safety partnerships by providing harm reduction training to law enforcement officials and building collaborations among public health and public safety through the annual Public Safety and Public Health Opioid Conference.

9) Empower individuals to make safer choices by partnering with the Indianapolis Colts to advertise CDC's RxAwareness campaign, maintaining the OptIN website, which connects substance users to naloxone and treatment resources, and collecting data on adverse childhood experiences through the Behavioral Risk Factor Surveillance System.

10) Propose an innovative project focused on decreasing the rates of Hepatitis C in high-risk populations by training inmates as peer educators.

11) Serve as a peer-to-peer learning mentor for other states attempting to implement overdose fatality review teams.

Update from the Governor's Office

The U.S. Department of Health and Human Services has publicly [highlighted](#) preliminary Centers for Disease Control and Prevention (CDC) data for drug overdose deaths during 2018, and the number of drug overdose deaths declined in Indiana. Here's a quick rundown:

According to preliminary [data](#) from the CDC, fewer Hoosiers died of a drug overdose in 2018 compared to 2017.

- CDC data indicates that drug overdose deaths declined 12% in Indiana last year, improving faster than the national average.

The CDC attributes the decline to several factors, including community efforts on the ground.

Indiana's Next Level Recovery initiatives are also having an impact:

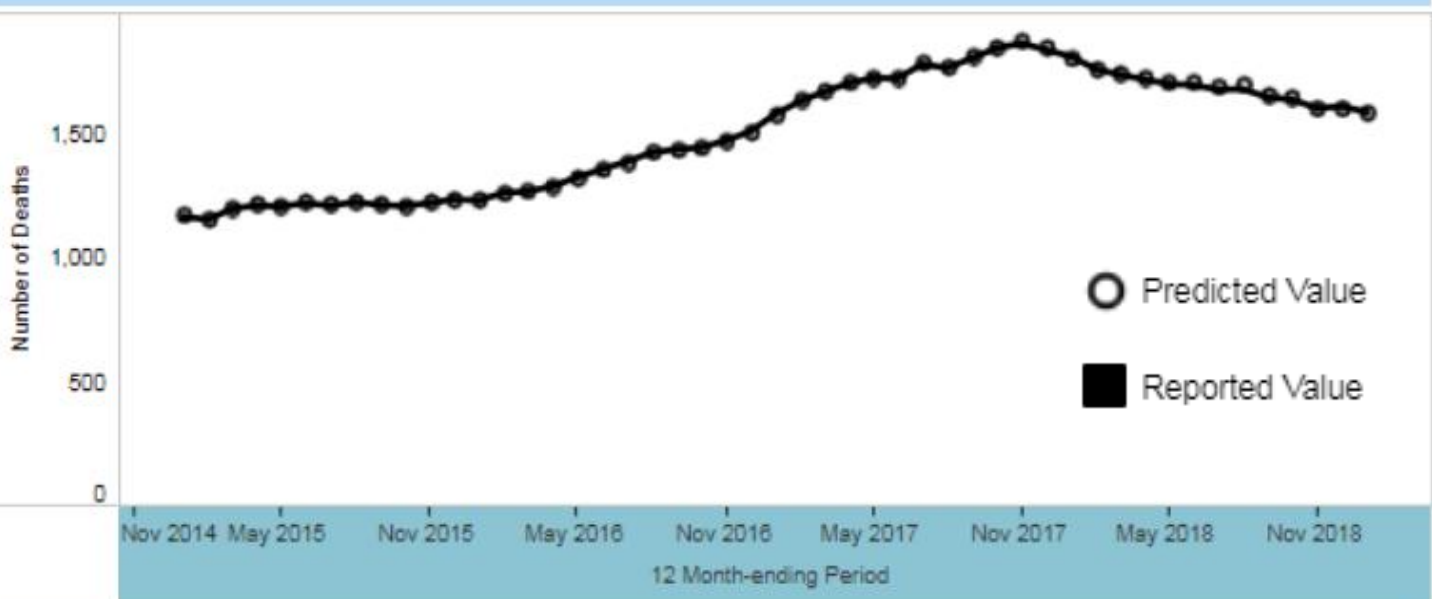
- The number of patients receiving medication-assisted treatment has risen.
- Distribution of overdose-reversing drugs is up
- Opioid prescriptions are down nationwide



The August version of the Next Level Recovery actions and progress report is [here](#).

When we see signs of progress, we know we're on the right track, but there's more to do. One life taken from us by a drug overdose is too many. We must continue our work to help more of our neighbors avoid overdose, recover, and live full and productive lives.

Figure 1a. 12 Month-ending Provisional Counts of Drug Overdose Deaths: Indiana



Trauma and Injury Prevention at the Indiana State Fair

This year, 10 divisions from the Indiana State Department of Health staffed booths at the Indiana State Fair for all 17 days of the fair, providing education about tobacco cessation, child passenger safety, drug overdose prevention, food safety, disease prevention, ways to prevent infant mortality and more. Educating Hoosiers about the risks of opioids and how to safely dispose of unused medication are key tools in Indiana's fight against the drug epidemic. To that end, our division provided information about prevention, treatment and recovery and distributed free at-home kits for the safe disposal of unused medications. The safe drug disposal bags were provided by Rx Abuse Leadership Initiative (RALI) Indiana through a donation to the Healthy Hoosiers Foundation.



Top right: Division Director Katie Hokanson hands Governor Holcomb a drug disposal bag. **Bottom left:** Pravy Nijjar talks to Governor Holcomb about child passenger safety. **Bottom right:** Intern Taylor Goodman hands out drug disposal bags.

Traumatic Brain Injury Special Emphasis Report

September is National Traumatic Brain Awareness Month. Traumatic brain injuries (TBIs) are a serious health concern in the United States and are a major cause of death and disability. In 2017 alone, more than 33,000 people sustained a TBI in Indiana. Emergency department (ED) visits accounted for the highest number of reported injuries (76 percent).



TBIs occur simultaneously with external causes of injury such as suicide, motor vehicle collisions and assaults. Suicide was the leading cause of injury among those who had died where TBI was reported as a cause of death on the death certificate alone or in combination with other injuries or conditions. Unintentional falls was the leading cause of injury among those who were treated and released from EDs and those who were hospitalized with a TBI alone or in combination with other injuries or conditions. In cases of ED visits, 25-44 year olds made up the largest category of those who sustained a TBI. For more serious injuries that required hospitalization or resulted in mortality, older adults (65 years old and older) made up the largest category of those who sustained a TBI. For more specific content pertaining to TBIs in Indiana, please visit the ISDH website: <https://www.in.gov/isdh/25396.htm>.

Newborn Screening Awareness Month (September)

September is Newborn Screening Awareness Month. Today, newborns in most states are screened for at least 29 different health conditions within the first few days of birth. This was due to Dr. Robert Guthrie's work in 1963 on developing a simple screening test for phenylketonuria (PKU). One such test is for neonatal abstinence syndrome (NAS). NAS is a group of problems that occurs when the newborn was exposed to opiates in utero, including heroin, codeine, oxycodone, morphine, alcohol, benzodiazepines and other classes of drugs. NAS causes a baby to feel withdrawal symptoms. Symptoms of NAS include the following:

- Body shakes, seizures, overactive reflexes and tight muscle
- Excessive crying or having a high-pitched cry
- Poor feeding and/or sleeping
- Breathing problems
- Fever, sweating or blotching skin
- Diarrhea or throwing up
- Stuffy nose or sneezing.



Complications from NAS can include an increased risk of low birthweight, jaundice, newborns needing to stay in the NICU, and newborns needing treatment with medicine. The March of Dimes has released a few guidelines on how to prevent NAS, which are found below:

- If you're pregnant and use any drugs that can cause NAS, tell your provider right away, but don't stop taking the drug without getting treatment from your provider first.
- If you're pregnant and addicted to opioids, ask your provider about medication-assisted treatment (MAT).
- If you're pregnant and you go to a provider who prescribes medicine to treat a health condition, make sure that the provider knows you're pregnant.
- If you're pregnant or thinking about getting pregnant, tell your provider about any drugs or medicine you take.

Resources:

<https://ncsacw.samhsa.gov/resources/opioid-use-disorders-and-medication-assisted-treatment/neonatal-abstinence-syndrome.aspx>

[https://www.marchofdimes.org/complications/neonatal-abstinence-syndrome-\(nas\).aspx](https://www.marchofdimes.org/complications/neonatal-abstinence-syndrome-(nas).aspx)

Pain Awareness Month (September)

September has been declared Pain Awareness Month. This is a time when organizations work to raise public awareness of issues in the area of pain and pain management. The Centers for Disease Control and Prevention (CDC) has released guidelines and a fact-sheet for prescribing opioids for chronic pain. The guidelines were developed to improve effective communication between providers and patients about the benefits and risks of opioid use for chronic pain, provide safer care for chronic pain patients, and to help reduce opioid use disorder. The CDC suggests nonpharmacological and non-opioid pharmacological therapies for chronic pain management. If opioid therapy is necessary for pain management, clinicians should establish treatment goals with patients and should discuss how opioid therapy will be discontinued if benefits do not outweigh the risks. These guidelines are not intended for patients who are in active cancer treatment, palliative care or end-of-life care.



Guidelines: https://www.cdc.gov/drugoverdose/pdf/Guidelines_Factsheet-a.pdf

Factsheet: https://www.cdc.gov/drugoverdose/pdf/guidelines_at-a-glance-a.pdf

Healthy Aging Month (Sept.) and Fall Prevention Awareness Day (Sept. 23)

While many view aging as limiting or a time to slow down, it can actually be the perfect time to explore new opportunities or reinvent yourself. Use Healthy Aging Month as a chance to challenge yourself to improve your physical, mental, social and financial well-being. Find a hobby where you can get outside of the home and engage with others. Not only will this stimulate your mind, but you will also build new friendships. Set a new goal for physical activity, such as taking a daily walk or training for a 5K. Engaging in exercise is a great way to inspire healthy aging. Whether you find a new hobby or pursue a new athletic goal, there's endless ways to bring about positive growth in your life.

Unintentional falls are the leading cause of injury-related emergency department visits, hospitalizations, and death for Hoosiers age 65 and older. Encourage healthy aging and feel confident in yourself by implementing these fall prevention tips.



Make your home safe. Most falls happen in the home, so it is important to identify ways to reduce your risk of falling. Remove clutter or furniture that blocks a walkway or may cause you to trip. Improve lighting with brighter lightbulbs, more lamps or nightlights to keep your home well-lit. Install handrails on the staircase and grab bars next to the tub and toilet to guide you as you walk or stand up.

Increase strength and balance. Activities that target strength and balance, such as Tai Chi, can strengthen your legs and make you feel more confident in your movements, ultimately reducing your risk of falling.

Have your eyes checked. Your eyesight plays an important role in walking and moving independently. Have your eyes checked by an eye doctor at least once per year and replace eyeglasses as your prescription changes. This will ensure that poor vision is not the cause of a fall.

Discuss proper footwear. Speak with your doctor or a foot specialist to find proper footwear for your specific needs. Shoes that give you proper foot support and traction will help prevent a fall.

Review your medications. Some medications or combinations of medications can cause you to feel tired or dizzy and may cause you to fall. Have your doctor or pharmacist review all of your medications to ensure that they do not increase your chances of a fall.

The ISDH Division of Trauma and Injury Prevention implements two fall prevention programs, CDC's STEADI (Stopping Elderly Accidents, Deaths & Injuries) Toolkit and Wisconsin Institute for Health Aging's Stepping On program. For more information about these programs and how you can get involved, contact Pravy Nijjar, PNijjar@isdh.IN.gov or 317-234-1304.



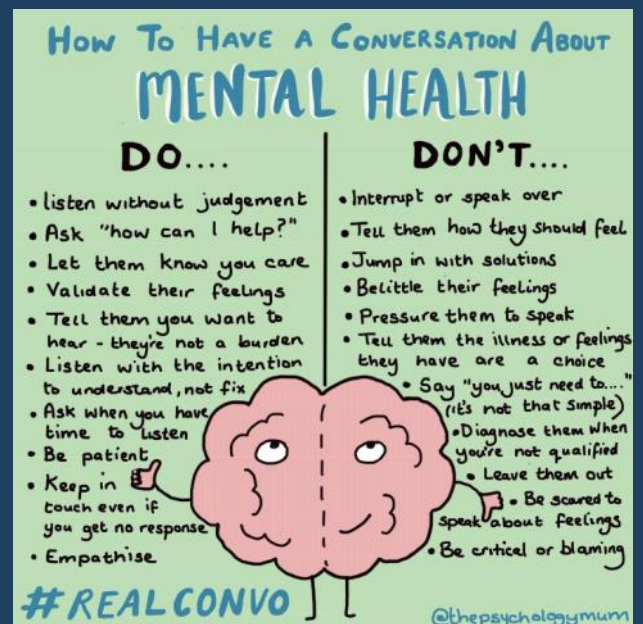
Source: <https://www.cdc.gov/homeandrecreationalafety/falls/adultfalls.html>

National Suicide Prevention Week

National Suicide Prevention Week 2019 is hosted by the American Foundation for Suicide Prevention (AFSP). This week-long awareness is Sept. 8-14. There are several ways to get involved in your community or create a larger impact across the globe. You can watch suicide prevention leaders and activists talk about how having a #RealConvo is beneficial for mental health. You can take action by walking to fight suicide, bring prevention to your school, or even give a monetary donation to the organization. AFSP provides resources for finding mental care or crisis services. Visit <https://afsp.org/campaigns/national-suicide-prevention-week-2019/> for ways to stay connected and up-to-date on the week-long activities, and find graphics available to download and share on social media. Indiana is fighting suicide prevention by targeting populations it affects the most. As a state, the suicide rate is 16.4 per 100,000 people while the national average is at 14 per 100,000. Males have a six times higher suicide rate compared to females. Those ages 45-54 years old also bear the largest burden for taking one's life. Visit our website for a list of resources in the community that aide in suicide prevention and postvention. (<https://www.in.gov/isdh/25392.htm>)

Ways to start a #RealConvo about mental health:

- "I don't know what you're going through, but I'm here to listen"
- "I care about you"
- "I'm right here with you"
- Do not place judgment
- Do not assign or imply blame
- Be patient
- Don't disappear
- Don't give up



New EMS Resource: *Rural Community Ambulance Agency Transformation*

We are pleased to announce the availability of a new EMS resource from the Technical Assistance and Services Center (TASC), a program of the National Rural Health Resource Center. This resource was supported by the Federal Office of Rural Health Policy and coordinated by TASC. Please share this resource with rural ambulance agencies and partners as appropriate.

TASC helps ambulance agency leaders in rural America assess their agency's readiness to transform to the level of care that is a people-centered and rewards positive patient outcomes through value-based payment. It provides assistance to rural ambulance agency leaders in succeeding with moving from volume to value in their agency's culture and operations.

Rural Community Ambulance Agency Transformation consists of a self-assessment and associated resource collections in the areas of the Critical Access Hospital Blueprint for Performance Excellence, adapted specifically for rural ambulance agencies, from the Baldrige Excellence Framework for Health Care. Leaders are encouraged to complete the assessment periodically to monitor their progress and receive updated resources to guide their continued journey.

Resource available here: <https://www.ruralcenter.org/tasc/rural-community-ambulance-agency-transformation>.

National Recovery Month (September)

National Recovery Month is a nationally-recognized observance held each September by the Substance Abuse and Mental Health Services Administration (SAMHSA). The primary purpose of this month is to celebrate those in recovery and sharing their success stories. The month also serves to elevate new evidence-based treatment and recovery methods as well as celebrate those working to help be part of the solution.

National Recovery Month is in its 30th year and to celebrate the occasion, it is introducing a new logo in the form of a purple “r.” This year’s theme is “Join the Voices for Recovery: Together We are Stronger,” emphasizing the need to work together to share resources and build networks. As a part of the theme, SAMHSA has created a Recovery Month toolkit to help organizations create their own events and educate their communities. To access any of these materials, simply click [here](#).

During the month, there are several events happening in Central Indiana to celebrate National Recovery month. The Family and Social Services Administration (FSSA) will host the Indiana Annual Recovery Month Symposium (INARMS) from September 23-24. This

symposium is specifically designed to overlap with recovery month and has even adopted the 2019 SAMHSA theme. To register for this event, simply click [here](#). The Indiana Addictions Issues Coalition is also hosting an event centered on celebrating recovery. This event features a motorcycle ride and is aptly named the Recovery Ride and Rally. Don’t have a motorcycle? No worries. They also have a walk that will be taking place at the White River State Park. To find out more information about this event, click [here](#). PACE, Public Advocates in Community Re-Entry, are also hosting an event, their Recovery Month Celebration & 5K walk. If you are interested in participating in their 5K or Recovery Celebration, check out the event page [here](#).

Of course, Indiana is much larger than Indianapolis and there are many events happening around the state such as the Town Manager’s Recovery Ride in Whiteland (information [here](#)), the PEACE Zone 5th Annual Art of Recovery event in Evansville (information [here](#)), and the National Recovery Month Celebration being hosted in Portage (information [here](#)). To find out about more local events in your area, contact your Local Coordinating Council (information found [here](#)) or a local recovery group.



HEALTH IQ

You can now ask Amazon Alexa to “Launch CDC Health IQ” and then play a fun health trivia game.



“Alexa, play CDC Health IQ.”



Choose from three levels of difficulty or be surprised by selecting a random mix. Race against the clock to earn more points or use hints when you are stumped. Each quiz delivers a mix of five questions.

DO YOU HAVE
a story to tell
ABOUT OPIOID
USE DISORDER?

*We'd like to
hear your story.*

**THE INDIANA STATE MUSEUM WOULD LIKE TO SHARE
STORIES OF REAL PEOPLE CAUGHT UP IN THE CRISIS
TO INCREASE AWARENESS AND REDUCE THE STIGMA.**

**Please leave a brief message about what you'd like to share with us,
then tell us how to get in touch with you.**

**Stories@indianamuseum.org
(317) 234-3857**

Indiana State Museum • 650 W. Washington Street • Indianapolis, IN 46204

New online training available for coroners!

The Association of State and Territorial Health Officials (ASTHO) released its August drug-specificity training for coroners. Check out this [video](#) to learn more about completing the death certificate for drug toxicity deaths.

Injury Prevention Observances and Events September 2019

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2 Labor Day: State offices closed	3 IUPUI Student Health Fair	4	5	6	7
8 Nat'l Suicide Prevention Week	9 Nat'l Suicide Prevention Week	10 World Suicide Prevention Day	11 Nat'l Suicide Prevention Week	12 Nat'l Suicide Prevention Week	13 Nat'l Suicide Prevention Week	14 Nat'l Suicide Prevention Week
15	16	17 Church Leader Roundtables: Tackling Suicide	18 Interfaith Health and Wellness Sum- mit	19 East Central Indiana Drug Prevention Summit	20 IPAC/NVDRS Indiana Emer- gency Response Booth	21
22	23 IN-ARMS NASW Falls Prevention Awareness Day	24 IN-ARMS NASW	25	26	27	28 Indianapolis Celebration of Lives Lost
29	30 NICU Awareness Day	<ul style="list-style-type: none"> • Healthy Aging Month • National Recovery Month • National TBI Awareness Month • Newborn Screening Awareness Month • Pain Awareness Month 				

2019 Trauma Regional Advisory Council (TRAC) meetings

District 1: Oct. 17 and Dec. 19

District 2: Sept. 3

District 3: Oct. 10, and Dec. 12

District 4: Oct. 3

District 5: Sept. 18, and Dec. 18

District 6: Nov. 21

District 8: Nov. 25

District 10: Oct. 24

More information can be found here:

<https://www.in.gov/isdh/26644.htm>

Injury Prevention Observances and Events October 2019

Sun	Mon	Tue	Wed	Thu	Fri	Sat
		1	2	3	4	5
6 Mental Illness Awareness Week	7 Mental Illness Awareness Week	8 Mental Illness Awareness Week	9 Mental Illness Awareness Week	10 Mental Illness Awareness Week	11 Mental Illness Awareness Week	12 Mental Illness Awareness Week
13	14 Columbus Day (state offices closed)	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31	• Eye Injury Prevention Month	

Eye Injury Prevention Month (October)

Approximately, 2000 U.S. workers sustain job-related eye injuries each day. Workplace injury is the leading cause of eye trauma and can cause missed work days, vision loss, and in some cases blindness. Safety experts have reported that approximately 90 percent of these work-related eye injuries could have been less severe or avoided completely with the proper eye protection.

The most common eye injuries in the workplace are injuries from:

- Flying objects
- Tools
- Particles
- Chemicals
- Harmful radiation
- Any combination



Steps to take to protect your eyes and vision in the workplace:

- Know the eye safety dangers in your workplace
- Eliminate as many hazards as possible before starting work

- Use proper eye protection including but not limited to: goggles, face shields, welding helmets, full-face respirators, non-prescription and prescription glasses
- Keep your eye protection in good condition and make sure it fits properly
- Have an emergency sterile eyewash solutions and a first aid kit readily available

The American Academy of Ophthalmology also warns people wear eye protection at home when doing yard work, home repairs, cleaning, and cooking in order to protect their vision from debris and chemicals. The AAO also suggests that individuals wear UV-protective sunglasses or goggles while outside.

Sources:

<https://www.preventblindness.org/eye-safety-work>

<https://www.cdc.gov/niosh/topics/eye/default.html>

https://nei.nih.gov/sites/default/files/health-pdfs/HVMPreventingInjuries_Tagged.pdf

<https://www.aao.org/eye-health/tips-prevention/preventing-injuries>

<https://www.osha.gov/SLTC/eyefaceprotection/>

Mental Illness Awareness Week (Oct. 6-12)

Opioid Use Disorder and Mental Illness

In 2013, Opioid Use Disorder (OUD) was introduced into the fifth edition of the DSM 5, the psychiatric diagnosing manual for healthcare professionals, as a diagnosable and treatable mental illness. Previous to this time, OUD was often perceived as a character flaw and not an actual mental disorder. According the National Institutes of Health, any form of drug addiction is considered a mental illness because addiction changes the brain in fundamental ways resulting in compulsive behaviors that weakens one’s ability to control impulses regardless of the negative consequences, similar to other mental illnesses.

Those individuals who suffer from OUD are also more likely to have mental comorbidities, or two or more mental disorders occurring in the same person. These comorbidities can occur in a few ways. One of which being an individual who has a mental health disorder such as anxiety or depression and begins using opioids to self-medicate and in turn develops OUD. Or an individual with OUD may form anxiety or depression from the opioid use. An individual may also experience both a mental health disorder and a substance use disorder (SUD) at the same time without one causing the other. According to the National Institutes of Health

SAY THIS	NOT THIS
Person with opioid use disorder	Addict, user, druggie, junkie, abuser
Disease	Drug habit
Person living in recovery	Ex-addict
Person arrested for a drug violation	Drug offender
Substance dependent	Hooked
Medication is a treatment tool	Medication is a crutch
Had a setback	Relapsed
Maintained recovery; substance-free	Stayed clean
Negative drug screen	Clean
Positive drug screen	Dirty drug screen

National Council for Behavioral Health, "Language Matters" (2015)

about half of people who experience a mental illness will also experience a SUD and vice versa.

In 2016, approximately 2.1 million Americans suffered from OUD. According to the American Psychiatry Association there was a 22-fold increase in the total number of deaths involving fentanyl and other synthetic opioids from 2002 to 2017. On October 27, 2017 the opioid crisis was declared a nationwide Public Health Emergency. In order to combat this epidemic, prescription drug monitoring programs and state prescription drug laws were put into place across the United States. However, no one thought of the implications of stigma that those with OUD would face while trying to combat this mental illness. The Indiana State Department of Health encourages everyone to do their part in this epidemic by recognizing OUD as mental illness, encouraging those affected by this disorder to seek and receive assistance through a treatment program, and to avoid using language that is stigmatizing to those who suffer from addiction.

<https://www.cdc.gov/drugoverdose/training/oud/accessibile/index.html>,
 <https://www.samhsa.gov/find-help/disorders>,
 <https://www.drugabuse.gov/publications/drugfacts/comorbidity-substance-use-disorders-other-mental-illnesses>,
 <https://www.drugabuse.gov/publications/research-reports/common-comorbidities-substance-use-disorders/part-1-connection-between-substance-use-disorders-mental-illness>,
 <https://www.psychiatry.org/patients-families/addiction/opioid-use-disorder/opioid-use-disorder>,
 <https://www.in.gov/recovery/files/oud-language-matters.pdf>,
 <https://www.in.gov/isdh/27758.htm>

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Visit our website at indianatrauma.org.

Follow us on Twitter: [@INDTrauma](https://twitter.com/INDTrauma)



Indiana State
Department of Health
Trauma and Injury Prevention