



Australian Trauma Registry Bi-annual Bulletin

Welcome to the second bi-annual Australian Trauma Registry (ATR) Bulletin. The Bulletin will be distributed to all sites/registries each **February** and **August** and will provide current ATR information, including deadlines and report updates. If you have feedback or suggestions for future content, please email: emily.mckie@monash.edu.

Data Submission Deadlines

The Q3 (January to March 2018) data was due 31 July. Please submit ASAP if you have not already.

Please diarise the following 2018/19 deadlines:

- ★ **Q4** 2017/18 (Apr-Jun 2018) due **31 October 2018**
- ★ **Q1** 2018/19 (Jul-Sept 2018) due **31 January 2019**
- ★ **Q2** 2018/19 (Oct-Dec 2018) due **30 April 2019**

Q2 2017/18: A big **thank you** to the following who submitted their data by the due date: **ITIM (for NSW sites), Gold Coast University Hospital (GCUH), Royal Brisbane & Women's Hospital, Royal Darwin Hospital (RDH), Canberra Hospital, Royal Perth Hospital (RPH) and Princess Margaret Hospital (PMH).**

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**Q3 2017/18
(Jan-Mar 2018) is now
OVERDUE**

2015/16

ATR Annual Report

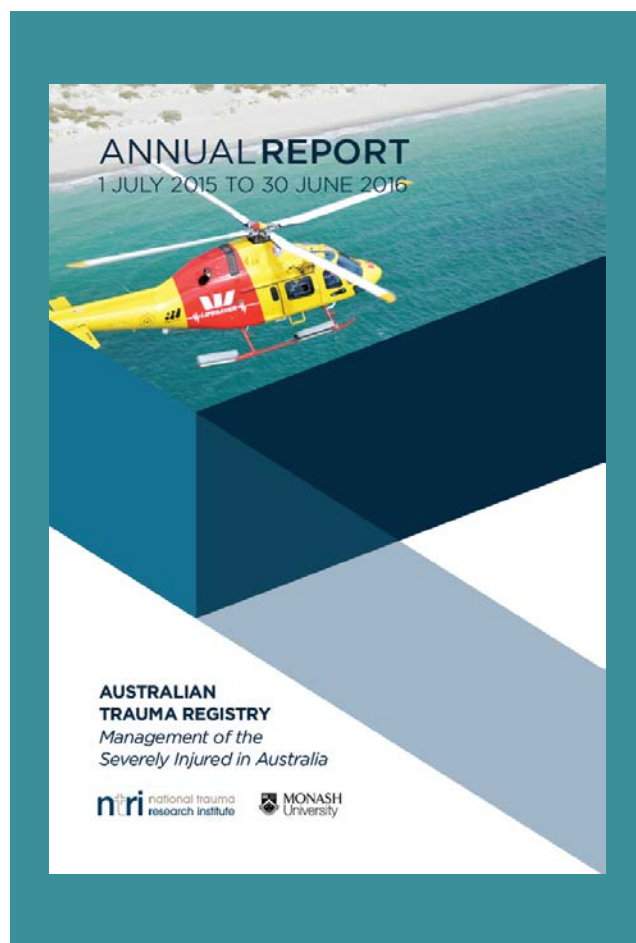
The ATR is pleased to announce the 2015/16 annual report has undergone final approval and is now available for viewing on the ATR website:

www.ntri.org.au/australian-trauma-quality-improvement-program-and-the-australian-trauma-registry/

The publication is an excellent way of showcasing the ATR to stakeholders and other external bodies.

The 2016/17 ATR annual report has also undergone final approval. It will be available in the coming weeks on the ATR website.

Print copies will also be available and sent to each site in the near future.



Data Dictionary and Data Quality Control

Please continue to quality check extracts before sending the data. Update your syntax in accordance with feedback provided by the ATR.

Some Common Errors:

- Leading zeros missing on date of birth – must be an 8-digit number
- **RefHospArrDateTime1** must be left blank if **OtherHospTransfer** is '2'.
- If **OtherHospTransfer** is '1', **RefHospId1**, **RefHospArrDateTime1**, **RefHospDeptDateTime1** & **RefHospTranspMode1** must all be filled in.
- If patient arrived to your hospital intubated, **ArrivalPatIntubated** is yes (1), **ArrivalRespiRate** should be 998, and **ArrivalTotalGCS** should be 98.
- Check **ArrivalPatIntubated** = 9 – are they supposed to be a 2? Often they have been defaulted to 9 but are in fact a known 'not intubated'.
- If patient is intubated, must complete VENTDAYS. Ventdays must be ≥ 1 . Please check to see if you can provide Blood alcohol if you do not already
- If the patient was not intubated, then date/time patient intubated should be blank.
- CT file – only include patients who had CT performed. This is not mandatory if the patient did not receive a CT. The date and time is only mandatory if the patient had a CT.

BNTMDS Working Group

The first meeting will be held at the Trauma 2018 conference in Perth, on Saturday 6th October from 12.30-1.30pm (lunch provided). The working group will be chaired by Professor Peter Cameron.

The working group will discuss and make necessary updates to the Bi-national Trauma Minimum Dataset (pictured) to ensure its accuracy and relevance moving into the future.

If you would like to be part of the working group and have not yet expressed interest, please email Emily McKie, emily.mckie@monash.edu



New ATR Collaborators

The agreement has been signed by all collaborators to now include Sunshine Coast University Hospital, the Tasmania State Trauma Registry and the New Zealand Major Trauma Network in the collaboration.

Road Trauma Dataset

Pilot Study

The pilot study for road trauma has been approved by the ATR Steering Committee and an ethics application has been submitted. The pilot will include all injuries caused by road-related transport accidents that present to the ED of any of the three major trauma services in Victoria, The Alfred Hospital, the Royal Melbourne Hospital and The Royal Children's Hospital. Monthly data will report nine non-identifying variables (the other variables will be used for improved data linkage with the ambulance service only, see variables listed in the green box).

Data will be derived directly from the emergency department systems and will not burden current data managers.

Variables

Demographics:

- date of birth
- age
- sex
- compensable fund (optional)
- unique identifier (i.e. inc. number)

Injury Event:

- date of injury
- injury cause
- injury place
- ambulance case number (if applicable)
- mode of arrival to emergency department
- date/time of arrival to emergency department
- discharge destination
- geolocations of injury location (latitude and longitude coordinates)

Risk Adjustment

The ATR has recently engaged a statistician from Monash University, to assist with some preliminary risk adjustment of variables in the 2016-17 ATR dataset. Initially this will involve quality checking data for completeness and accuracy and identifying those variables that will be appropriate for further analysis.

We will continue to provide updates.



Have you seen the ATR Web Page and joined the Australasian Trauma Network Forum?

All reports are published on the ATR webpage, located on the NTRI website. It also contains other useful information and links including the Trauma Forum:

www.ntri.org.au/australian-trauma-quality-improvement-program-and-the-australian-trauma-registry/

The forum is a great way to keep in the loop with peers and discuss relevant topics.

Future Events

The Australasian Trauma Society and the WA Trauma Symposium are pleased to invite you to attend Trauma 2018 being held from 5 – 7 October 2018 at the Parmelia Hilton Perth, Western Australia.

In 2018 the theme of the conference will be “Getting the basics right and embracing evidence-based change”. Along with a full program of pre-conference workshops this is a conference not to be missed