



Florida
Trauma Registry
Manual

DOH Pamphlet 150-13

DATA DICTIONARY

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DICTIONARY OVERVIEW

Welcome to the Florida Department of Health Trauma Registry Manual Data Dictionary. This manual serves as a guide to the data elements which comprise the Florida Trauma Registry.

Registry Background

Florida's trauma system was established to provide timely definitive care to critically-injured patients to minimize death and long-term disability due to traumatic injury. The Trauma Program in the Bureau of Emergency Medical Oversight within the Division of Emergency Preparedness and Community Support (Trauma Program), implemented in 1985, has as its operational focus to facilitate, promote, and ensure that residents and visitors in Florida receive quality trauma care through planning, preparedness, and quality improvement. Part of accomplishing this task is collecting the necessary data to facilitate performance measurement and innovative research.

Dictionary Design

The Florida Data Dictionary (Florida dictionary) is designed as an add-on to the National Trauma Data Standard Data Dictionary (National dictionary). This means that, for a given trauma record, the fields described in the National dictionary should be submitted in addition to the fields described in the Florida dictionary. All of the parameters and edit checks described in the National dictionary remain in effect.

Dictionary Content

The National dictionary is divided into eleven *Field Sections*, as listed in the table below. The Florida dictionary adds fields to two of these eleven sections (as shown in **blue text** in the table below). In addition, the Florida dictionary adds one additional section, *Referring Hospital Information* (as shown in **dark red text** in the table below).

National Sect #	Florida Sect #	Field Sections	National Fields	Florida Fields
1	1	Demographic Information	12	7
2	N/A	Injury Information	19	No FL fields
3	N/A	Pre-Hospital Information	17	No FL fields
N/A	2	Referring Hospital Information	FL Only	5
4	3	Emergency Department Information	22	9
5	N/A	Hospital Procedure Information	4	No FL fields
6	N/A	Diagnoses Information	3	No FL fields
7	N/A	Injury Severity Information	5	No FL fields
8	N/A	Outcome Information	5	No FL fields
9	N/A	Financial Information	1	No FL fields
10	N/A	Quality Assurance Information	1	No FL fields
11	N/A	TQIP Process Measures	28	No FL fields

The Florida Trauma Data Standard (FLTDS), then, consist of these three sections and their associated 22 fields as referenced in the blue and red text in the table. The bulk of the content of this Florida data dictionary is the specification information for these data elements.

Field Contents

In the National and Florida data dictionaries, 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), the field might 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 the FLTDS described in this document, a “required” field is a field that can potentially cause a file or record rejection if it is *blank* – i.e. it does not contain a Field Data Value or have a Common Null Value as prescribed*.

**Note that in the National dictionary, each page describing a field has an attribute entry listed as “Required in NTDS” – or sometimes “Required in XSD” – and this attribute is marked as “Yes” for every field in the dictionary. This requirement information is distinct from the required fields as described in this dictionary.*

The table below lists the fields – both National fields and Florida fields – which are required to be “non-blank” in a trauma data submission. The first column in the table lists the field or field options, along with the condition under which the field is required (if appropriate). The second column denotes which type of data is required – either a Field Data (FD) value, one of the two Common Null (CN) values, or a specific CNV of either “Not Applicable” (NA) or “Not Known/Not Recorded” (NK). The third column indicates whether the requirement comes from the National dictionary (National), from the Florida dictionary (Florida), or results from Florida business rules applied in addition to the National business rules (NA+FL).

Required Fields	Required Value	Required By
D_07 Date of Birth	Field Data	NA+FL
D_08 Age (IF D_07 Date of Birth has CNV of NK or is “less than 24 hours”)	FD or CN	NA+FL
D_09 Age Units (IF D_07 Date of Birth has CNV of NK or is “less than 24 hours”)	FD or CN	NA+FL
D_10 Race	FD or NK	NA+FL
D_12 Sex	FD or NK	National
DF_01 Local Trauma Registry Number	Field Data	Florida
DF_02 Event Specific Patient Tracking Number	FD or NK	Florida
DF_03 Social Security Number	Field Data	Florida
DF_04 First Name	FD or NK	Florida
DF_06 Last Name	FD or CN	Florida
DF_07 Medical Record Number	Field Data	Florida
I_01 Injury Incident Date	Field Data	NA+FL
I_02 Injury Incident Time	Field Data	NA+FL
I_06 ICD-9 Primary E-Code OR I_07 ICD-10 Primary E-Code	Field Data	National
I_08 ICD-9 Location E-Code OR I_09 ICD-10 Location E-Code	Field Data	NA+FL
I_12 Incident Location Zip Code OR (I_13 Incident Country AND I_14 Incident State AND I_16 Incident City)	Field Data	NA+FL
P_01 EMS Dispatch Date (IF PF_01 EMS Report Status = “1 Complete”)	Field Data	NA+FL
P_02 EMS Dispatch Time (IF PF_01 EMS Report Status = “1 Complete”)	Field Data	NA+FL
P_05 EMS Departure Date (IF PF_01 EMS Report Status = “1 Complete”)	Field Data	NA+FL
P_06 EMS Departure Time (IF PF_01 EMS Report Status = “1 Complete”)	Field Data	NA+FL
P_17 Inter-Facility Transfer	Field Data	National
RF_01 Referring Hospital ID (IF P_17 Inter-Facility Transfer = “1 Yes”)	Field Data	Florida
RF_02 Referring Hospital Arrival Date (IF P_17 Inter-Facility Transfer = “1 Yes”)	Field Data	Florida
RF_03 Referring Hospital Arrival Time (IF P_17 Inter-Facility Transfer = “1 Yes”)	Field Data	Florida
RF_04 Referring Hospital Departure Date (IF P_17 Inter-Facility Transfer = “1 Yes”)	Field Data	Florida
RF_05 Referring Hospital Departure Time (IF P_17 Inter-Facility Transfer = “1 Yes”)	Field Data	Florida
ED_01 ED/Hospital Arrival Date	Field Data	National

Required Fields	Required Value	Required By
ED_03 Initial ED/Hospital Systolic Blood Pressure	FD or CN	National
ED_04 Initial ED/Hospital Pulse Rate	FD or CN	National
ED_06 Initial ED/Hospital Respiratory Rate	FD or CN	National
ED_07 Initial ED/Hospital Respiratory Assistance	FD or CN	National
ED_14 Initial GCS Assessment Qualifiers	FD or CN	National
ED_15 Initial ED/Hospital Height	FD or CN	National
ED_16 Initial ED/Hospital Weight	FD or CN	National
ED_19 ED Discharge Disposition	Field Data	National
ED_20 Signs of Life	Field Data	NA+FL
EDF_01 Trauma Alert Type	Field Data	Florida
EDF_02 Trauma Team Activation Level	Field Data	Florida
EDF_03 Trauma Team Activation Date (IF EDF_02 Trauma Team Activation Level = "1", "2", or "3")	Field Data	Florida
EDF_04 Trauma Team Activation Time (IF EDF_02 Trauma Team Activation Level = "1", "2", or "3")	Field Data	Florida
EDF_05 Trauma Specialist Type (IF EDF_02 Trauma Team Activation Level = "1", "2", or "3")	Field Data	Florida
EDF_06 Trauma Specialist Called Date (IF EDF_02 Trauma Team Activation Level = "1", "2", or "3")	Field Data	Florida
EDF_07 Trauma Specialist Called Time (IF EDF_02 Trauma Team Activation Level = "1", "2", or "3")	Field Data	Florida
EDF_08 Trauma Specialist Arrival Date (IF EDF_02 Trauma Team Activation Level = "1", "2", or "3")	Field Data	Florida
EDF_09 Trauma Specialist Arrival Time (IF EDF_02 Trauma Team Activation Level = "1", "2", or "3")	Field Data	Florida
DG_01 Co-Morbid Conditions	FD or CN	National
DG_02 ICD-9 Injury Diagnoses OR DG_03 ICD-10 Injury Diagnoses	Field Data	National
O_01 Total ICU Length of Stay	FD or CN	National
O_03 Hospital Discharge Date	FD or CN	National
O_05 Hospital Discharge Disposition	FD or NK	National
Q_01 Hospital Complications	FD or CN	National

TQIP Fields

Provisional and verified trauma centers must submit the TQIP fields. (See the National data dictionary for more information.).

Required Fields	Required Value	Required By
PM_01 Highest GCS Total	FD or CN	National
PM_02 GCS Motor Component of Highest GCS Total	FD or CN	National
PM_03 GCS Assessment Qualifier Component of Highest GCS Total	FD or CN	National
PM_04 Cerebral Monitor	FD or CN	National
PM_05 Cerebral Monitor Date	FD or CN	National
PM_06 Cerebral Monitor Time	FD or CN	National
PM_07 Venous Thromboembolism Prophylaxis Type	FD or CN	National
PM_08 Venous Thromboembolism Prophylaxis Date	FD or CN	National
PM_09 Venous Thromboembolism Prophylaxis Time	FD or CN	National
PM_10 Lowest ED SBP	FD or NK	National
PM_11 Transfusion Blood (4 Hours)	FD or NK	National
PM_12 Transfusion Plasma (4 Hours)	FD or NK	National
PM_13 Transfusion Platelets (4 Hours)	FD or NK	National
PM_14 Cryoprecipitate (4 Hours)	FD or NK	National

Required Fields	Required Value	Required By
PM_15 Transfusion Blood (24 Hours)	FD or NK	National
PM_16 Transfusion Plasma (24 Hours)	FD or NK	National
PM_17 Transfusion Platelets (24 Hours)	FD or NK	National
PM_18 Cryoprecipitate (24 Hours)	FD or NK	National
PM_19 Angiography	FD or CN	National
PM_20 Embolization Site	FD or CN	National
PM_21 Angiography Date (IF PM_19 Angiography is valued)	FD or NK	National
PM_22 Angiography Time (IF PM_19 Angiography is valued)	FD or NK	National
PM_23 Surgery For Hemorrhage Control Type	FD or CN	National
PM_26 Withdrawal Of Care	FD or CN	National

REPORTING REQUIREMENTS

Reporting Overview

Florida verified and provisional trauma centers are mandated to submit data to the Florida Department of Health, at a minimum, on a quarterly basis. The submitted data file(s) must contain (in total) the data for all trauma cases which were discharged during that quarter. The data files submitted and received by the Trauma Program each quarter are imported and stored within the State Trauma Registry (STR) for analysis and reporting to:

- Evaluate trauma patient care and trauma center performance via integration of trauma patient data and trauma center site survey information for quality assurance and improvement
- Link with databases of other providers in the continuum of care system to evaluate trauma system performance and track patient outcomes
- Determine disbursement amounts to be paid to verified trauma centers
- Perform medical research (as permitted under Sec. 395.404 and Chapter 405, F.S.)

Inclusion Criteria

The FLTDS uses the same record inclusion criteria as the National Trauma Data Standard (NTDS), with the addition of all trauma records from a Trauma Alert. See the National data dictionary for more details.

Submission Schedule

- A. Trauma Registry submission should be submitted electronically to the Next Generation Trauma Registry at the www.fltraumaregistry.com web site.
- B. Accounts to submit data are set up for each Florida verified or provisional trauma centers by the Florida Department of Health as part of the trauma center application and approval process.
- C. Data verification: Data reported to the Florida Trauma Registry must be verified (checked for completeness and accuracy) by the reporting hospital before submission 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/trauma center must be submitted to the registry by the following due dates:

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

- E. Data submitted to the state must have all data elements completed that are “required” in the data set for inclusion in the determination of a hospital’s trauma caseload volume. The data dictionary section of this manual details the field requirements of each data element and what values are accepted.
- F. The Department will only accept data in an XML file format based upon the NGTR XML Schema derived from this data dictionary. Records may not be submitted in another format.
- G. File Acceptance: Files that contain Level 1 or Level 2 errors, across both National and Florida fields, will be rejected and a report with the errors will be sent to the Trauma Center. These files will need to be corrected and resubmitted.

- H. The Department will return an initial data completion and quality report to the reporting trauma center within 10 business days of valid submission receipt. This report will show single records that are rejected.
- I. Record Acceptance: The criteria for an individual record being flagged is, any record containing one or more Level 3 errors and/or any record with 15 or more Level 4 errors. Flagged records will be returned to the hospital for verification of data, any errors will need to be corrected and resubmitted or the hospital will need to contact DOH at Trauma_Registry@doh.state.fl.us to verify the data is correct as is. Resubmissions must be received by the final submission due date. Records that are in excess of either of these error thresholds past the final quarterly/ extension submission due date will not be included in the Trauma caseload volume for purposes of reporting and disbursement of funds.
- J. The Department may audit (by site visit, desk audit or through an agent) a trauma center's medical records for the purpose of validating reported trauma registry data at any time.
- K. The Department will submit the National Trauma Data Bank (NTDB) and Trauma Quality Improvement Program (TQIP) data to the American College of Surgeons (ACS) for all Trauma Centers. The Department will submit data to ACS in accordance with the Florida quarterly submission schedule. Please note that submission dates of ACS and Florida may be represented differently in reporting.

Extension Requests

Extensions to the final submission due dates in the Florida Trauma Registry Manual, 2013 Edition may be granted by the Health Information and Policy Analysis Program for a maximum of 30 days from the final submission due date. A written request signed by the hospital's chief executive officer and trauma medical director must be received by the Program Administrator for the Health Information and Policy Analysis Program prior to the final submission due date (scanned image sent via email or FAX is acceptable).

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 or maternity leave are not considered "unforeseen" requests. Extensions must be approved by the program office and will not be granted verbally.

Please note an extension may cause DOH to miss the National data submission deadline to ACS (for the individual hospital) and therefore will affect ACS's reporting for that hospital.

Resubmissions

It is the responsibility of the reporting trauma center to correct any reporting errors and resubmit the data. The deadline for all trauma center resubmissions for consideration in the Trauma caseload volume is the final quarterly submission/extension due date. Any data submitted after that date will be kept for historical purposes but will not contribute to the reporting or the disbursement of funds.

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 business rule as well as the field name (data element), the level of the error, and any other descriptive information.

Error: <Business Rule Reference> <Field Name> <Level> <Description>

Where Level is defined as:

- **Level 1: Reject – XML format** - – any element that does not conform to the “rules” of the XSD. That is, these are errors that arise from XML data that cannot be parsed or would otherwise not be legal XML. 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 – Exclusion Criteria**
- **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**
 - **Level 5: Accept - Warning**

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. When data elements associated with the registry are to be electronically stored in a database or moved from one database to another using XML, the indicated null values should be applied.

- **[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-transport 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).

Required Elements

If a data element is defined to accept a Common Null Value, it may be implemented as optional in a trauma center’s local registry software system unless there is a business rule that has conditions where it may be required. When these data elements are exported for submission to Florida, the local registry software system should provide an appropriate Common Null Value as an attribute for those data elements in the XML submission file, unless it is required.

If a data element is defined to not accept a Common Null Value, it should be implemented as a required data element in a trauma center’s local registry software system. When these data elements are exported for submission to Florida, no Common Null Values will be accepted. If a Common Null Value is submitted, an error will be generated and the record will be rejected.

DEMOGRAPHIC INFORMATION

DF_01 Local Trauma Registry Number	
Field Definition	Unique identifier generated for a patient within the Trauma Center software application at your facility. It should be sequentially generated for each trauma patient for each trauma incident, and it should be unique from your facility's Medical Record Number.
Field Justification	Maintains a unique patient identifier for the event. <u>If the patient were to be admitted to the same trauma center for a different incident or event, a new trauma registry number would be generated.</u>
Data Format	<i>[number]</i>
XSD Type	<i>xs:integer</i>
XSD Element	<i>LocalRegNumber</i>
Multiple Entry	No – A trauma patient may have only one reported unique Local Trauma Registry Number for an incident.
Accepts Nulls	No – Common Null Values (CNVs) are not accepted
Required Field	Yes – This element is required in the Florida Trauma Data Standard (FLTDS)
Field Format	Up to 30 digits
Field Values	Relevant value for data element
Field Constraints	The field must contain a minimum of one character
Additional Info	The local trauma registry number may not be unique statewide, but it should be unique for a given combination of a particular patient at a particular facility for a particular incident.
Related Fields	

Rule ID	Level	Rule Description
50101	1	Invalid value (element must conform to data specification)
50102	2	Blank, field must be valued
50103	2	Not Applicable, field must be valued
50104	2	Not Known/Not Recorded, field must be valued

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
Field Justification	To create an unique identifier for patient / event information across multiple data systems and various organizations
Data Format	[text]
XSD Data Type	xs:AlphaDash
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 Trauma Data Standard (FLTDS)
Field Format	Up to 53 characters in the form: XXX_MMDDYYYY_LicNum_PatNum
Field Values	<p>The ESPTN is comprised of the following information:</p> <p>XXX A three character code indicating the type of agency: the code is either “EMS” for EMS agency, “HOS” for hospital agency, or “LAW” for law enforcement agency</p> <p>MM The two-digit month</p> <p>DD The two-digit day of the month</p> <p>YYYY The four-digit year</p> <p>LicNum The Florida state-issued license number of the agency</p> <p>PatNum The agency-assigned patient number</p>
Field Constraints	This field should contain at least 20 characters, consisting of the three-character agency type (1-3), the first underscore (4), the eight-digit date (5-12), the second underscore (13), a minimum three character Florida state-issued license number (14-16), the third underscore (17), and a minimum three character agency-assigned patient number (18-20)
Additional Info	<ul style="list-style-type: none"> ▪ The state-issued license number should be unique <u>within</u> an agency type, but may not be unique <u>across</u> agency types ▪ 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
References	

Rule ID	Level	Rule Description
50201	1	Invalid value (element must conform to data specification)
50202	2	Blank, this field must be valued or Not Known/Not Recorded
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
50205	4	The “MMDDYYYY” date in the ESPTN should not be later than the date of submission for the trauma registry data record
50206	5	The “LicNum” in the ESPTN should exist in the master list of license numbers for that agency type

DF_03 Social Security Number	
Field Definition	The U.S Government issued Social Security Number for the patient
Field Justification	Linkage to other data sources used to uniquely track the patient, either for this event, or for multiple events.
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 Trauma Data Standard (FLTDS)
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	
References	

Rule ID	Level	Rule Description
50301	1	Invalid value (element must conform to data specification)
50302	2	Blank, field must be valued
50303	2	Not Applicable, field must be valued
50304	2	Not Known/Not Recorded, field must be valued
50305	4	If the <i>NTDS Age</i> is greater than one year, then the <i>Social Security Number</i> should not be all zeros
50306	4	If the <i>NTDS Patient's Home Country</i> is the United States, then the <i>Social Security Number</i> should not be all fives

DF_04 First Name	
Field Definition	The patient’s first name, given as stated on birth certificate or change-of-name affidavit.
Field Justification	Linkage to other data sources used to uniquely track the patient, either for this event, or for multiple events.
Data Format	<i>[text]</i>
XSD Data Type	<i>xs:string</i>
XSD Element	<i>FirstName</i>
Multiple Entry	No – A trauma patient may have only one reported First Name.
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 Trauma Data Standard (FLTDS)
Field Format	Up to 30 characters. (Note that this element is encrypted by the State.)
Field Values	Relevant value for data element.
Field Constraints	If the element contains a field value, that value must contain at least one alphabetic character
Additional Info	If the First Name is unknown, and a Common Null Value of “Not Known” is not utilized, then the trauma center’s internal naming policies and standard should be followed.
References	

Rule ID	Level	Rule Description
50401	1	Invalid value (element must conform to data specification)
50402	3	Not Applicable, this field must be valued or Not Known/Not Recorded

DF_05 Middle Name	
Field Definition	The patient’s middle name or middle initial, given as stated on birth certificate or change-of-name affidavit.
Field Justification	Linkage to other data sources used to uniquely track the patient, either for this event, or for multiple events.
Data Format	<i>[text]</i>
XSD Data Type	<i>xs:string</i>
XSD Element	<i>MiddleName</i>
Multiple Entry	No – A trauma patient may have only one reported Middle Name.
Accepts Nulls	Yes – Common Null Values (CNVs) are accepted
Required Field	No – This element is not required in the Florida Trauma Data Standard (FLTDS)
Field Format	Up to 30 characters. (Note that this element is encrypted by the State.)
Field Values	Relevant value for data element.
Field Constraints	If the element contains a field value, that value must contain at least one alphabetic character
Additional Info	If the Middle Name is unknown, and a Common Null Value is not utilized, then the trauma center’s internal naming policies and standard should be followed.
References	

Rule ID	Level	Rule Description
50501	1	Invalid value (element must conform to data specification)

DF_06 Last Name	
Field Definition	The patient’s last name, given as stated on birth certificate or change-of-name affidavit.
Field Justification	Linkage to other data sources used to uniquely track the patient, either for this event, or for multiple events.
Data Format	<i>[text]</i>
XSD Data Type	<i>xs:string</i>
XSD Element	<i>LastName</i>
Multiple Entry	No – A trauma patient may have only one reported Last Name.
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 Trauma Data Standard (FLTDS)
Field Format	Up to 50 characters. (Note that this element is encrypted by the State.)
Field Values	Relevant value for data element.
Field Constraints	If the element contains a field value, that value must contain at least one alphabetic character
Additional Info	If the Last Name is unknown, and a Common Null Value of “Not Known” is not utilized, then the trauma center’s internal naming policies and standard should be followed.
References	

Rule ID	Level	Rule Description
50601	1	Invalid value (element must conform to data specification)
50602	3	Not Applicable, this field must be valued or Not Known/Not Recorded

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.
Field Justification	Linkage to other data sources used to uniquely track the patient, either for this event, or for multiple events.
Data Format	<i>[text]</i>
XSD Data Type	<i>xs:AlphaDash</i>
XSD Element	<i>MedicalRecNum</i>
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 Trauma Data Standard (FLTDS)
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.
References	

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

REFERRING HOSPITAL INFORMATION

RF_01 Referring Hospital ID	
Field Definition	The hospital from which the patient was referred, as selected from a list of hospitals in the state of Florida and additional hospitals. The Referring Hospital is the facility where the patient was given care before reaching your hospital. Admission to the Referring Hospital is not necessary.
Field Justification	
Data Format	[combo] single-choice
XSD Data Type	xs:string
XSD Element	ReferringHospitalId
Multiple Entry	No
Accepts Nulls	Yes – Common Null Values (CNVs) are accepted
Required Field	Conditional – This element must be non-blank (i.e. must be valued or have a CNV) when <i>NTDS Inter-Facility Transfer</i> is “1” (Yes)
Field Format	Twenty characters
Field Values	
Field Constraints	
Additional Info	
References	

Rule ID	Level	Rule Description
50801	1	Invalid value (element must conform to data specification)
50802	3	If <i>NTDS Inter-Facility Transfer</i> indicates a transfer took place, then <i>Referring Hospital Facility ID</i> must contain a valid ID value

RF_02 Referring Hospital Arrival Date	
Field Definition	The date of the patient's arrival at the referring hospital (the hospital where the patient was given care before reaching your hospital). Admission to the referring hospital is not necessary
Field Justification	
Data Format	[date]
XSD Data Type	xs:date
XSD Element	ReferringHospitalArrivalDate
Multiple Entry	No
Accepts Nulls	Yes – Common Null Values (CNVs) are accepted
Required Field	Conditional – This element must be non-blank (i.e. must be valued or have a CNV) when <i>NTDS Inter-Facility Transfer</i> is "1" (Yes)
Field Format	Ten characters formatted as YYYY-MM-DD.
Field Values	Valid calendar date
Field Constraints	From 1990-01-01 to 2030-12-31
Additional Info	
References	

Rule ID	Level	Rule Description
50901	1	Invalid value (element must conform to data specification)
50902	3	If <i>NTDS Inter-Facility Transfer</i> indicates a transfer took place, then <i>Referring Hospital Arrival Date</i> must contain a date value
50903	4	The date / time recorded in the <i>Referring Hospital Arrival Date / Time</i> fields must be later than or equal to the <i>NTDS Injury Incident Date / Time</i> fields

RF_03 Referring Hospital Arrival Time	
Field Definition	The time the patient arrived at the referring hospital
Field Justification	
Data Format	<i>[time]</i>
XSD Data Type	<i>xs:time</i>
XSD Element	<i>ReferringHospitalArrivalTime</i>
Multiple Entry	No
Accepts Nulls	Yes – Common Null Values (CNVs) are accepted
Required Field	Conditional – This element must be non-blank (i.e. must be valued or have a CNV) when <i>NTDS Inter-Facility Transfer</i> is “1” (Yes)
Field Format	Five characters formatted as HH:MM
Field Values	Valid 24-hour time
Field Constraints	From 00:00 to 23:59
Additional Info	See <i>Referring Hospital Arrival Date</i>
References	

<i>Rule ID</i>	<i>Level</i>	<i>Rule Description</i>
51001	1	Invalid value (element must conform to data specification)
51002	3	If <i>NTDS Inter-Facility Transfer</i> indicates a transfer took place, then <i>Referring Hospital Arrival Time</i> must contain a time value
51003	4	If <i>Referring Hospital Arrival Time</i> contains a time value, then <i>Referring Hospital Arrival Date</i> must contain a date value

RF_04 Referring Hospital Discharge Date	
Field Definition	The date of the patient's discharge from the referring hospital.
Field Justification	
Data Format	[date]
XSD Data Type	xs:date
XSD Element	ReferringHospitalDischargeDate
Multiple Entry	No
Accepts Nulls	Yes – Common Null Values (CNVs) are accepted
Required Field	Conditional – This element must be non-blank (i.e. must be valued or have a CNV) when <i>NTDS Inter-Facility Transfer</i> is "1" (Yes)
Field Format	Ten characters formatted as YYYY-MM-DD.
Field Values	Valid calendar date
Field Constraints	From 1990-01-01 to 2030-12-31
Additional Info	
References	

Rule ID	Level	Rule Description
51101	1	Invalid value (element must conform to data specification)
51102	3	If <i>NTDS Inter-Facility Transfer</i> indicates a transfer took place, then <i>Referring Hospital Discharge Date</i> must contain a date value
51103	4	The date / time recorded in the <i>Referring Hospital Discharge Date / Time</i> fields must be later than or equal to the <i>NTDS Injury Incident Date / Time</i> fields
51104	4	The date / time recorded in the <i>Referring Hospital Discharge Date / Time</i> fields must be later than or equal to the <i>Referring Hospital Arrival Date / Time</i> fields

RF_05 Referring Hospital Discharge Time	
Field Definition	The time of the patient's discharge from the referring hospital.
Field Justification	
Data Format	<i>[time]</i>
XSD Data Type	<i>xs:time</i>
XSD Element	<i>ReferringHospitalDischargeTime</i>
Multiple Entry	No
Accepts Nulls	Yes – Common Null Values (CNVs) are accepted
Required Field	Conditional – This element must be non-blank (i.e. must be valued or have a CNV) when <i>NTDS Inter-Facility Transfer</i> is "1" (Yes)
Field Format	Five characters formatted as HH:MM
Field Values	Valid 24-hour time
Field Constraints	From 00:00 to 23:59
Additional Info	
References	

<i>Rule ID</i>	<i>Level</i>	<i>Rule Description</i>
51201	1	Invalid value (element must conform to data specification)
51202	3	If <i>NTDS Inter-Facility Transfer</i> indicates a transfer took place, then <i>Referring Hospital Discharge Time</i> must contain a time value
51203	4	If <i>Referring Hospital Discharge Time</i> contains a time value, then <i>Referring Hospital Discharge Date</i> must contain a date value

EMERGENCY DEPARTMENT INFORMATION

EDF_01 Trauma Alert Type	
Field Definition	Type of trauma alert called in accordance with the state trauma scorecard criteria (Rule 64J-2.004, F.A.C., and Rule 64J-2.005, F.A.C.).
Field Justification	
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 Trauma Data Standard (FLTDS)
Field Format	One numeric digit
Field Values	See below
Field Constraints	From 1 to 7
Additional Info	
References	

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

Rule ID	Level	Rule Description
51301	1	Invalid value (element must conform to data specification)
51302	2	Blank, field must be valued
51303	2	Not Applicable, field must be valued
51304	2	Not Known/Not Recorded, field must be valued
51305	2	If <i>NTDS Age</i> is < 16 years then <i>Trauma Alert Type</i> cannot be '3' (GCS ≤ 12)
51306	3	If <i>Trauma Alert Type</i> is <u>not</u> '7' (NTA) then <i>Trauma Team Activation Level</i> must be "1", "2", or "3"

EDF_02 Trauma Team Activation Level	
Field Definition	Trauma Team Activation - Announcement of incoming trauma patient via pager system to assemble all members of the trauma team in the ED resuscitation area.
Field Justification	
Data Format	[combo] multiple-choice
XSD Data Type	xs:nonNegativeInteger
XSD Element	TeamActivationLevel
Multiple Entry	No
Accepts Nulls	No – Common Null Values (CNVs) are not accepted
Required Field	Yes – This element is required in the Florida Trauma Data Standard (FLTDS)
Field Format	One numeric digit
Field Values	See below
Field Constraints	From 1 to 4
Additional Info	
References	

Field Values	
1 Level 1 - Highest level of team activation at your institution using defined trauma triage guidelines.	2 Level 2 - Secondary level of team activation, if applicable, at your institution, using defined trauma triage guidelines.
3 Level 3 - The last type of notification / communication to the Trauma Team as defined in the user's Tertiary Activation system plan.	4 Trauma team not activated

Rule ID	Level	Rule Description
51401	1	Invalid value (element must conform to data specification)
51402	2	Blank, field must be valued
51403	2	Not Applicable, field must be valued
51404	2	Not Known/Not Recorded, field must be valued
51405	2	If <i>Trauma Team Activation Level</i> is "4" (Not Activated) then <i>Trauma Alert Type</i> must be "7" (NTA)

EDF_03 Trauma Team Activation Date	
Field Definition	The date that the trauma team corresponding to level 1, 2, or 3 was called (activated).
Field Justification	
Data Format	[date]
XSD Data Type	xs:date
XSD Element	TeamActivationDate
Multiple Entry	No
Accepts Nulls	Yes – Common Null Values (CNVs) are accepted
Required Field	Conditional – This element must be valued or have a CNV of “Not Known” when <i>Trauma Team Activation Level</i> is “1”, “2”, or “3”
Field Format	Ten characters formatted as YYYY-MM-DD.
Field Values	Valid calendar date
Field Constraints	From 1990-01-01 to 2030-12-31
Additional Info	
References	

<i>Rule ID</i>	<i>Level</i>	<i>Rule Description</i>
51501	1	Invalid value (element must conform to data specification)
51502	3	Not Applicable, field must be valued or “Not Known” if <i>Trauma Team Activation Level</i> is “1”, “2”, or “3”
51503	3	If (<i>Trauma Team Activation Level</i> is not a Common Null Value) then <i>Trauma Team Activation Date</i> must be completed and <i>Trauma Team Activation Time</i> must be completed
51504	3	If (<i>NTDS ED Arrival Date</i> and <i>NTDS ED Arrival Time</i> are completed) then <i>Trauma Team Activation Date</i> and <i>Trauma Team Activation Time</i> may be null or must be greater than or equal to <i>NTDS ED Arrival Date</i> and <i>NTDS ED Arrival Time</i> , respectively

EDF_04 Trauma Team Activation Time	
Field Definition	The time that the trauma team corresponding to level 1, 2, or 3 was called (activated).
Field Justification	
Data Format	<i>[time]</i>
XSD Data Type	<i>xs:time</i>
XSD Element	<i>TeamActivationTime</i>
Multiple Entry	No
Accepts Nulls	Yes – Common Null Values (CNVs) are accepted
Required Field	Conditional – This element must be valued or have a CNV of “Not Known” when <i>Trauma Team Activation Level</i> is “1”, “2”, or “3”
Field Format	Five characters formatted as HH:MM
Field Values	Valid 24-hour time
Field Constraints	From 00:00 to 23:59
Additional Info	
References	

Rule ID	Level	Rule Description
51601	1	Invalid value (element must conform to data specification)
51602	3	Not Applicable, field must be valued or “Not Known” if <i>Trauma Team Activation Level</i> is “1”, “2”, or “3”
51603	4	If <i>Trauma Team Activation Time</i> is completed, then <i>Trauma Team Activation Date</i> must also be completed

EDF_05 Trauma Specialist Type	
Field Definition	The type of specialist requested for the trauma alert.
Field Justification	
Data Format	[combo] multiple-choice
XSD Data Type	xs:nonNegativeInteger
XSD Element	SpecialistType
Multiple Entry	Yes – Maximum of 20
Accepts Nulls	Yes – Common Null Values (CNVs) are accepted
Required Field	Conditional – This element must be valued or have a CNV of “Not Known” when <i>Trauma Team Activation Level</i> is “1”, “2”, or “3”
Field Format	One numeric digit
Field Values	See below
Field Constraints	From 1 to 7
Additional Info	<p>A max of 20 Trauma Specialist ‘records’ may be specified. If there is a Trauma Alert, then a minimum of one Trauma Specialist ‘record’ must be specified with a type of (‘1’ Trauma Surgeon, ‘2’ Neurosurgeon, or ‘3’ Orthopedic Surgeon) and it should consist of the following data elements for each record:</p> <ul style="list-style-type: none"> Trauma Specialist Type Trauma Specialist Called Date Trauma Specialist Called Time Trauma Specialist Arrival Date Trauma Specialist Arrival Time
References	

Field Values	
1 Trauma Surgeon	2 Neurosurgeon
3 Orthopedic Surgeon	4 ED Physician
5 Anesthesiologist	6 Medical Doctor
7 Chief Resident	

Rule ID	Level	Rule Description
51701	1	Invalid value (element must conform to data specification)
51702	2	Not Applicable, field must be valued or “Not Known” if <i>Trauma Team Activation Level</i> is “1”, “2”, or “3”
51703	3	If <i>Trauma Alert Type</i> is not ‘7’ NTA (not an alert) then a minimum of one Trauma Specialist ‘record’ must be specified with a value of either ‘1’ Trauma Surgeon, ‘2’ Neurosurgeon, or ‘3’ Orthopedic Surgeon for <i>Trauma Specialist Type</i>
51704	4	If <i>Trauma Team Activation Level</i> is (‘1’ Level 1 or ‘2’ Level 2, or ‘3’ Level 3) then a minimum of one Trauma Specialist ‘record’ must be completed with a valid value for <i>Trauma Specialist Type</i>

EDF_06 Trauma Specialist Called Date	
Field Definition	The date at which assistance was requested. Corresponds to the value of the Trauma Specialist Type.
Field Justification	
Data Format	[date]
XSD Data Type	xs:date
XSD Element	SpecialistCalledDate
Multiple Entry	Yes – Maximum of 20
Accepts Nulls	Yes – Common Null Values (CNVs) are accepted
Required Field	Conditional – This element must be valued or have a CNV of “Not Known” when <i>Trauma Team Activation Level</i> is “1”, “2”, or “3”
Field Format	Ten characters formatted as YYYY-MM-DD.
Field Values	Valid calendar date
Field Constraints	From 1990-01-01 to 2030-12-31
Additional Info	May be null (not specified)
References	

Rule ID	Level	Rule Description
51801	1	Invalid value (element must conform to data specification)
51802	3	Not Applicable, field must be valued or “Not Known” if <i>Trauma Team Activation Level</i> is “1”, “2”, or “3”
51803	3	If (<i>Trauma Team Activation Date / Time</i> are not null) then <i>Trauma Specialist Called Date / Time</i> must be later than or equal to the <i>Trauma Team Activation Date / Time</i> , respectively
51804	3	<i>Trauma Specialist Called Date / Time</i> must be earlier than or equal to the <i>Trauma Specialist Arrival Date / Time</i> , respectively

EDF_07 Trauma Specialist Called Time	
Field Definition	The time at which assistance was requested. Corresponds to the value of the Trauma Specialist Type.
Field Justification	
Data Format	<i>[time]</i>
XSD Data Type	<i>xs:time</i>
XSD Element	<i>SpecialistCalledTime</i>
Multiple Entry	Yes – Maximum of 20
Accepts Nulls	Yes – Common Null Values (CNVs) are accepted
Required Field	Conditional – This element must be valued or have a CNV of “Not Known” when <i>Trauma Team Activation Level</i> is “1”, “2”, or “3”
Field Format	Five characters formatted as HH:MM
Field Values	Valid 24-hour time
Field Constraints	From 00:00 to 23:59
Additional Info	
References	

Rule ID	Level	Rule Description
51901	1	Invalid value (element must conform to data specification)
51902	3	Not Applicable, field must be valued or “Not Known” if <i>Trauma Team Activation Level</i> is “1”, “2”, or “3”
51903	4	If <i>Trauma Specialist Called Time</i> is completed, then <i>Trauma Specialist Called Date</i> must also be completed

EDF_08 Trauma Specialist Arrival Date	
Field Definition	The earliest date of arrival of the specialist at the patient's bedside, whether in the ED, OR, or ICU. Corresponds to the value of the Trauma Specialist Type.
Field Justification	
Data Format	[date]
XSD Data Type	xs:date
XSD Element	SpecialistArrivalDate
Multiple Entry	Yes – Maximum of 20
Accepts Nulls	Yes – Common Null Values (CNVs) are accepted
Required Field	Conditional – This element must be valued or have a CNV of “Not Known” when <i>Trauma Team Activation Level</i> is “1”, “2”, or “3”
Field Format	Ten characters formatted as YYYY-MM-DD.
Field Values	Valid calendar date
Field Constraints	From 1990-01-01 to 2030-12-31
Additional Info	
References	

<i>Rule ID</i>	<i>Level</i>	<i>Rule Description</i>
52001	1	Invalid value (element must conform to data specification)
52002	3	Not Applicable, field must be valued or “Not Known” if <i>Trauma Team Activation Level</i> is “1”, “2”, or “3”

EDF_09 Trauma Specialist Arrival Time	
Field Definition	The earliest time of arrival of the specialist at the patient's bedside, whether in the ED, OR, or ICU. Corresponds to the value of the Trauma Specialist Type
Field Justification	
Data Format	<i>[time]</i>
XSD Data Type	<i>xs:time</i>
XSD Element	<i>SpecialistArrivalTime</i>
Multiple Entry	Yes – Maximum of 20
Accepts Nulls	Yes – Common Null Values (CNVs) are accepted
Required Field	Conditional – This element must be valued or have a CNV of “Not Known” when <i>Trauma Team Activation Level</i> is “1”, “2”, or “3”
Field Format	Five characters formatted as HH:MM
Field Values	Valid 24-hour time
Field Constraints	From 00:00 to 23:59
Additional Info	See Trauma Specialist Type and Trauma Specialist Arrival for business rules involving Trauma Specialist Arrival Time
References	

<i>Rule ID</i>	<i>Level</i>	<i>Rule Description</i>
52101	1	Invalid value (element must conform to data specification)
52102	3	Not Applicable, field must be valued or “Not Known” if <i>Trauma Team Activation Level</i> is “1”, “2”, or “3”
52103	4	If <i>Trauma Specialist Arrival Time</i> is completed, then <i>Trauma Specialist Arrival Date</i> must also be completed