# EMERGENCY MEDICAL SERVICES AND TRAUMA REGISTRIES ONLINE SUBMISSION GUIDE



TEXAS Health and Human Services

Texas Department of State Health Services Emergency Medical Services and Trauma Registries (EMSTR) Online Submission File Upload Guide for:

> Emergency Medical Services (EMS) Providers Hospitals Justices of the Peace (JPs) Medical Examiners (MEs) Rehabilitation Facilities Long Term Acute Care (LTAC) Facilities

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# **1. Introduction**

The Texas Department of State Health Services (DSHS) Emergency Medical Services and Trauma Registries (EMSTR) is a statewide passive surveillance system that collects reportable events data from Emergency Medical Services (EMS) providers, hospitals, justices of the peace (JPs), medical examiners (MEs), and long-term acute care (LTAC) and rehabilitation facilities. EMSTR includes four registries:

- The EMS Registry;
- The Acute Traumatic Injury Registry;
- The Traumatic Brain Injury (TBI) Registry and Spinal Cord Injury (SCI) Registry; and
- The Submersion Registry.

You will access all Texas Health and Human Services (HHS) applications, including EMSTR, through the Identity and Access Management Online (IAMOnline) platform. IAMOnline provides single sign-on, multifactor authentication, and password reset self-service capabilities. The authorization feature enables request management processes, automated access management workflows, certification, and reporting.

# 2. Overview

The EMSTR program prepared training materials for all providers who report data to the registries. This online submission user guide is to provide step-by-step instructions for EMS, hospitals, JPs, MEs, LTAC facilities, and rehabilitation facilities to submit data to the EMSTR application using the free state online submission process. Providers should review the following:

- Activate your new account by following the instructions in the IAMOnline registration email sent to your inbox, or, if you did not have access to the registry prior to November 2023, by requesting access to EMSTR in IAMOnline;
- Secure your new account with a password and multifactor authentication;
- Sign in to access the My Apps dashboard and sign the Acceptable Use Agreement (AUA);
- Access the EMSTR application from the My Apps dashboard;
- Submit data into the EMSTR application;
- Run reports; and
- Manage account access through self-service functions.

## **3. Data Format Requirements**

#### **Hospital Providers:**

The new EMSTR application includes the National Trauma Data Standard (NTDS) 2023 data dictionary definitions and the International Trauma Data Exchange (IDTX) 2023 data formats for all hospital patient records. The EMSTR application will continue to accept the 2020 ITDX format.

Note – After 11/09/2023, the new EMSTR application will <u>not</u> accept the NTDS 2017 format.

#### **EMS Providers:**

By 11/20/2023, the new EMSTR application will upgrade to the National EMS Information System (NEMSIS) version 3.5.

Note – After 11/09/2023, EMSTR will not accept NEMSIS version 3.3.4.

# **4. IAMOnline Account**

#### **Request an IAMOnline Account**

If you have not accessed your EMSTR account in the past year, DSHS did not migrate your account to the new system.

To begin, contact **injury.web@dshs.texas.gov**. Once you request an IAMOnline account, the HHS system will send you an activation email and you can continue with the **Activate New Account** section of this guide.

If you are a migrated user, meaning you reported data to the registry prior to 11/10/2022, continue to Activate New Account within this guide.

#### **Activate New Account**

The HHS system will send migrated users who reported to the EMSTR application since 11/10/2022 an activation email to their organization's employee email address.

To access your account, find the email from **noreply@okta.com** in your email inbox. Check your junk folder if you do not see it in your inbox. Click the **"Activate Account**" button.



**Note** – This link will only be active for **seven (7) days** from receipt of the email for security purposes. If it has been more than seven days since you received your activation email, request access to EMSTR by following the **Add EMSTR Access steps** under the **Manage Account Access** section of this guide.

## 5. Set up security methods

After selecting **"Activate Account"**, the HHS system will immediately prompt you to set up your security methods to protect your account with a **Password**, your **Phone**, and a **Security Question**. This is known as multifactor authentication.

	Set up security methods
	@dshs.texas.gov
	Security methods help protect your IAMOnline account by ensuring only you have access.
Set up	required
	Password Choose a password for your account Used for access Set up
C	Phone Verify with a code sent to your phone Used for access or recovery Set up
۲	Security Question Choose a security question and answer that will be used for signing in Used for recovery Set up
Back to	<u>o sign in</u>
Create	a new account as a citizen
Reque	st account as non-HHS employee, or register organization
Sign Ad	cceptable Use Agreement

#### Password

You need a password to access the account as the system provides a single sign-on to all HHS applications.

To set up a **Password**, click the **"Set up"** button.



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You must create a password that meets all the HHS organization's requirements listed below:

- At least eight (8) characters in length;
- A lowercase letter;
- An uppercase letter;
- A number;
- A symbol;
- Does not include any parts of the user's username;
- Does not include the user's first name;
- Does not include the user's last name;
- The password cannot be any of the user's previous six (6) passwords; and
- At least one (1) day must have passed since you last changed your password.

****	
Set up password	
() @dshs.texas.gov	
Password requirements: • At least 8 characters • A lowercase letter • An uppercase letter • A number • A symbol • No parts of your username • Does not include your first name • Does not include your last name • Your password cannot be any of your last 24 passwords	
Enter password	
	0
Re-enter password	
	0
Next	

- Create a new password by typing it in the **"Enter password"** text box and re-entering it in the **"Re-enter password"** text box.
- Click the **"Next"** button.
  - $\circ$  **Tip** Click the password reveal icon to see the typed text.  $\odot$
  - **Tip** If an error message appears, re-read the password requirements, and create a different password.

#### Phone

To set up your phone number, select the **"SMS"** (short messaging service) or **"Voice call"** option. The **SMS** option will send a text message to your phone and the **Voice call** option will send an automated call. The phone number must be a valid U.S. number.



Example of SMS option selected.

## Short Messaging Service (SMS)

You can use your phone number to verify the account. The automated HHS system will send a verification code to your phone number via **SMS** (text).

- The **Country** must be the United States (+1).
- Type your ten-digit phone number in the **Phone number** text box. This phone number must be able to receive an SMS. *Carrier messaging charges may apply*.
- Click the "Receive a code via SMS" button.

	Enter your phone number to receive a verification code via SMS.		
<ul> <li>SMS</li> <li>Voice call</li> </ul>			
Country		_	
United States	τ.		
Phone number			
+1			
Receive a code via SMS			

• The HHS system will send an automated code to the listed phone number via SMS (text message).

Set up phone authentication (a) (a) (a) (a) (b) (c) (c) (c) (c) (c) (c) (c) (c
Enter Code

• Type the code you receive in the text box and click the "Verify" button.

#### Voice Call

The second option to verify the account is a voice call. The system can provide an automated **verification code** via **Voice call**.

- The **Country** code must be for the United States (+1).
- Type the **Phone number** in the text box to receive a code by voice call.
- Click the "Receive a code via voice call" button.

Set up phone authentication				
0				
Enter your phone number to receive a verification code via voice call.				
⊖ sms				
Voice call				
Country				
United States 🔻				
Phone number Extension				
Receive a code via voice call				

• Type the code provided by the voice call in the **Enter Code** text box and click the "Verify" button.



#### **Security Question**

Set up a security question to protect the account.

• Click the **"Set up"** button.

		Set up security methods
	8	@dshs.texas.qov
	Security methods help protect	your IAMOnline account by ensuring only you have access.
Set up	required	
0	Security Question Choose a security question and answer that will be Used for recovery Set up	e used for signing in

You can either Choose a security question or Create your own security question.

• If creating a security question, create one that cannot be guessed by others, even those who know you well, for security purposes.

Set up security question	
(8) @dshs.texas.gov	
Choose a security question	
Create my own security question	
Choose a security question	
What is the food you least liked as a child?	*
Answer	
	0
Verify	

- To choose a security question, select the "Choose a security question" option.
- Select the drop-down icon T and scroll to select a security question.
- Type your answer in the **Answer** box and click the **"Verify"** button.

Set up security question
8 @dshs.texas.gov
Choose a security question
○ Create my own security question
Choose a security question
What is the food you least liked as a child?
Answer
©
Verify

# 6. Welcome to the MyApps Dashboard

Your account set up is now complete and you can access your MyApps dashboard.

- This centralized dashboard will hold all HHS applications, systems, and software within one place for you to easily access and use.
- IAMOnline will also allow you to request and easily manage EMSTR application access.



# 7. Acceptable Use Agreement (AUA)

All application access tiles are locked with a lock icon until you complete the **Acceptable Use Agreement** form (AUA). To review and sign the AUA form, click the **"Acceptable Use Agreement"** tile located on the dashboard.



## **Review and Sign the AUA Form**

The **AUA** tile on the **My Apps** dashboard will take you directly to the AUA form for review and completion.

- You must sign this form once a year, every year.
- The automated HHS system will send email reminders in the following frequency to remind you to complete the form:
  - A first warning is provided fifteen (15) days before your AUA form expires;
  - A second warning is provided ten (10) days before your AUA form expires;
  - A third warning is provided five (5) days before your AUA form expires;
  - A fourth warning is provided each day until your AUA form reaches the expiration date; and
  - A fifth and final warning is provided on the expiration date, 365 days following its last review and signature.
- If you forget to sign the form, all application access tiles will lock until the form is reviewed and signed.

• Once you sign the form, the HHS system will unlock and renew your application access.



#### AUA Form Acknowledgement

After you carefully read the AUA form, you must acknowledge and sign the agreement.

- Check the box located next to the statement, "I acknowledge that I read and understood the agreement, and I agree to comply with its terms."
- Input your **"First Name"** and **"Last Name"** into the respective text boxes located at the bottom of the use agreement.
- Select and identify your role as an employee, contractor, or intern with your associated organization.

• Click the **"Submit"** button once you have carefully read the AUA form and complete all required entry fields.

Acknowledgement
I have read, understand, and will comply with the requirements in the Information Security Acceptable Use Policy.
First Name
First Name *
Last Name
Last Name *
Your Work Email *
@dshs.texas.qov
Your Work Phone
I am (choose one and explain below): *
<ul> <li>An employee of HHSC (specify department and division)</li> </ul>
<ul> <li>An employee of DSHS (specify department and division)</li> </ul>
<ul> <li>An employee of another agency (specify agency, department, and division)</li> </ul>
<ul> <li>A contractor (specify employer or non-state agency name)</li> </ul>
<ul> <li>An intern or volunteer (specify agency, department, and division)</li> </ul>
O ther (specify below if you are an advisory council member or an employee of a private provider)
Date Agreement Signed *

Submit

08/09/2023

After submitting your AUA form, toggle back to your **MyApps** dashboard webpage.

🛞 My App	s Dashboard   ST	age Iam 🗙	🛞 IAMOnline	- Home	×
Infriend (1)     Import Specific Units of State S					ዲ ዶ ሲ
Emiliar           Home         My Work -           Your signed AUA Form has been successfully submitted. That	nk you.				
Home	Sign AUA Form	Policy Violations	> Approvals	> Manage My A	ccess >
Latest Violation Work Items	Both マ	O My Access Reviews	0	Latest Approvals	
Currently no da	ta	Cu	urrently no data		Currently no data

Refresh your browser by clicking the refresh button.

← (	3	Ô	https://	iamonline.hhs.state.tx.us/app/UserHome
-----	---	---	----------	--

After refreshing your browser, your IAMOnline **MyApps** dashboard tiles will unlock.

TEXAS Realth and Human Services	Q Search your apps						IAMOnline 🗸
<ul> <li>My Apps</li> <li>Acceptable User Agreem</li> <li>My Applications</li> <li>Add section (*)</li> <li>Notifications (2)</li> </ul>		cceptable User Agreement (AUA)	Manage Access (Beta)			Sort V	
		y Applications Supervisor Dashbaard Approvals	** Wanage User Access	Access Requests	Manage Partner Organization	Register Partner Organization	

# 8. Subsequent Sign in

Once you successfully set up your account and access the **MyApps** dashboard, the sign-in process is simplified.

- Access the IAMOnline sign-in page.
- Sign in with your **username** (email).
- Enter your username in the text box and click the "Next" button.

TEXAS Health and Human Services	
IAMOnline - Sign In	
Username	
Keep me signed in	
Next	

- The HHS system will prompt you to enter the password associated with your username.
- Enter your password into the text box and click the "Verify" button.

	TEXAS Health and Human Services
	****
	Verify with your password
	Ø     Ø     Ø     Ø     Ø
Password	
	٩
	Verify

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• The HHS system will prompt you to verify your account using the registered phone number entered during the account creation process. Select the **"Receive a code via SMS."** 



Example of SMS process.

• Enter the code sent via SMS into the text box. Click the **"Verify"** button to continue.

	TEXAS Health and Human Services	
	Verify with your phone @dshs.texas.gov	
	A code was sent to +1 XXX-XXX- Enter the code below to verify.	
Enter Code	Carrier messaging charges may apply	
1		
	Verify	

• The HHS system will redirect you to the IAMOnline **MyApps** dashboard. Select the application tile you need to access.

TEXAS Multi and Remain Services	Q Search your apps						
<ul> <li>My Apps</li> <li>Acceptable User Agreem</li> <li>My Applications</li> <li>Add section (*)</li> <li>Notifications (2)</li> </ul>		My Apps Acceptable User Ag  EMSTR Online	reement (AUA)				Sort <b>v</b>
		My Applications	Forms	••• Manage User Access	Access Requests	 Manage Partner Organization	Register Partner Organization

• Additional account management information is in the Manage Account Access section.

# 9. Accessing EMSTR

• To access the EMSTR Online application, select the **"EMSTR Online"** tile from the **MyApps** dashboard.

TEXAS Realith and Human Services	Q Bearch your apps					
<ul> <li>My Apps</li> <li>Acceptable User Agreem</li> <li>My Applications</li> <li>Add section ①</li> <li>Notifications ②</li> </ul>		Authorized Help Guide				Sort V
	S	Applications ispervisor aashboard Approvals	Manage User Access	Access Requests	Manage Partner Organization	Register Partner Organization

• After selecting the **EMSTR Online** tile from the **MyApps** dashboard, the HHS system will direct you to the EMSTR application.

EMSTR Welcome, Hospital1		Home   Create Record   Search Record   Workflows   File Upload   Entity   Reports   Admin   Settings   Logout
Health and Human	to Texas Emergency Medical Services and Trauma Registry System	
* Workflows		
Workflow Queue	Events	
Recently Accessed Records		
Record Id	Name	Record Type
1000002276	Michael Test	Patient Record - Hospital
		More
* Resources		
TX EMS/Trauma Home DSHS	TX EMS Trauma Systems DSHS	NHTSA.gov - Fundamental Components of Trauma Care
National EMS Information System	Glossary	NEMSIS Data Dictionary
NTDS Data Dictionary	ITDX/NTDB Data Dictionary	JP Submersion Data Dictionary
JP TBI SCI Data Dictionary	Rehab LTAC TBI SCI Data Dictionary	NEMSIS Webservices User Guide
* Feedback/Tutorial		
Review User Training Slides	Review Group Administrator Training Slides	Contact/Provider Feedback

## **10. Online Submission Process**

#### Navigate to the Create Record link from the Home Page

 To begin the online submission process, navigate to the EMSTR toolbar and select the "Create Record" link.



#### **Create a Record**

- After selecting the **Create Record** link, select the correct record type.
- Note the record types you are able to view in the drop-down menu will vary based on your access.

Create Event - Person Informa	ation		
	Record Inf	ormation	
	*Record Type	Please Select	-
		Patient Record - EMS	
		Patient Record - Hospital	
		Patient Record - Hospital Submersion	
		Patient Record - Hospital TBI/SCI	
		Patient Record - JP/ME - Submersion	
		Patient Record - JP/ME - TBI/SCI	
		Patient Record - Long Term Acute Care	
		Patient Record - Rehabilitation	

- The available record types include the following:
  - Patient Record- EMS This record type is for all EMS patient records;
  - Patient Record- Hospital This record type is for all trauma hospital patient records;
  - Patient Record- JP/ME- Submersion This record type is for justices of the peace (JPs) and medical examiners (MEs) to submit submersion records;
  - **Patient Record- JP/ME- TBI/SCI** This record type is for JPs and MEs to submit traumatic brain injury (TBI) and spinal cord injury (SCI) case records;

- **Patient Record- Long Term Acute Care –** This record type is for all long-term acute care (LTAC) facility patient records;
- Patient Record- Rehabilitation This record type is for all rehabilitation patient records;
- Patient Record- Hospital Submersion This record type is for all hospital submersion records; and
- Patient Record- Hospital TBI/SCI This record type is for all hospital TBI and SCI records.

#### **Complete the Record Type**

- Once you select the record type you want to enter, the EMSTR application will prompt you to complete the corresponding information.
- The information is sectioned in three categories:
  - **Record Information**;
  - Add Person; and
  - **Contact Information**.
- To complete the patient record, fill in the required fields indicated by asterisks (\*).

The photo below is a Patient Record-Hospital Record Summary page screenshot:

<b>Record Information</b>						
*Record Type		Patient Record - Hospital	•			
Add Person						
*First Name			Middle Name		*Last Name	
*Birth Date	mm/dd/yyyy	0	*Birth Date (Null Values)	Please Select		
*Gender	Please Select	*	*Gender (Null Values)	Please Select		
Contact Information	ı					
*Street						
*City						
*State	Texas	•				
*Zip Code						
*County	Please Select	•				
*Country	USA	•				
*Submission Version	2023	•				
*Indicates required field						
Save Ø Cancel						X Clear ? Help

- Important note on the **Submission Version** text field:
  - Please Note The new EMSTR application is compliant with the National Trauma Data Standard (NTDS) 2023 and the International Trauma Data Exchange (ITDX) 2023 data formats.
  - For Hospitals The new EMSTR application will continue to accept the 2020 NTDS/ITDX formats.
  - For EMS The new EMSTR application is compliant with National EMS Information System (NEMSIS) version 3.5 data format.

*Submission Version	2023	-
	2023	
*Indicates required field	2020	

• Once you complete the required fields, select the **"Save"** button on the bottom right of the **Patient Record** Page.

The photo below is a Patient Record- Hospital with example data screenshot:

*Record Type		Patient Record - Hospital		-					
Add Person									
*First Name	Mike		м	iddle Name		*Last Name	Test		
*Birth Date	09/02/1980								
*Gender	Male	•							
Contact Informatio	n								
*Street	1234 Main Street	•							
		-							
*City	Austin								
*State	Texas	•							
*Zip Code	78701								
*County	Travis	•							
*Country	USA	•							
*Submission Version	2023		•						
*Indicates required field									
							_		
✓ Save Ø Cancel								× Clear	? H

• If you need to delete the patient record, select the "Cancel" button.

#### **Patient Records Completion**

• Upon successful record completion, the EMSTR application will direct you to the **Record Summary** Page. The example shown below is for the Hospital Patient Record Summary:

MSTR	Welcome,	Hospital1		Home   Create Record   Search Record   Workflow	s   File Upload   Entity   Reports   Admin   Settings   Logout
			Record Summary (Ho	spital Patient)	
Basic Informa	ation	Notes	Notes Details		
Record ID	1000002276		UserName	Entry Date	Notes
Record Type	Patlent Record - Hospital		No records found.		v
Person	<u>Michael</u> Test	255 characters remaining.			
Status	Open	✓ Save			
Notifications	General Notifications Concerns				
Edit Hospital Information					
	atient Record				
Record Data	Concerns Re	cord History			
			Question Packag		
		Question Package	Last Update	Updated By	Status
Outcome Info					Incomplete
Administrativ	control Informatio	•			Incomplete Incomplete
Agency/Resp		Ш			Incomplete
Demographic			10/02/2023	Hospital1	Complete
Hospital Proc			10/02/2023	riospitora.	Incomplete
Diagnosis Inf					Incomplete
-	ity Information		10/03/2023	STGTesting SmithaAnup	Complete
Pre-Hospital					Incomplete

#### **Question Packages**

- Question Packages are groups of questions specific to a topic that users must fill out. Packages will differ depending on **Record Type** selection.
- From here, you will complete each **Question Package** by clicking on the name of each question package.

	Question Pac
Question Package	Last Update
Outcome Information	
Administrative	
ITDX Record Control Information	
<u>Agency/Responder</u>	
Demographic Information	10/02/2023
Hospital Procedure	
Diagnosis Information	
Injury Severity Information	10/03/2023
Pre-Hospital Information	
Emergency Department Information	
Financial Information	
Trauma Quality Improvement	
Injury Information	
Hospital Complications	

- This example shows the question packages for the **Patient Record Hospital** record type.
- Note question packages will change based on the type of record you select.

An enlarged photo of the Patient Record-Hospital question packages is shown below:

Question Package
Outcome Information
Administrative
ITDX Record Control Information
<u>Agency/Responder</u>
Demographic Information
Hospital Procedure
Diagnosis Information
Injury Severity Information
Pre-Hospital Information
Emergency Department Information
Financial Information
Trauma Quality Improvement
Injury Information
Hospital Complications
Surgeon Specific Reporting

• Once you select a **Question Package**, you will see some information is auto populated based on your patient record information entry.

 You must complete the fields indicated with an asterisk \* to save the question package to the patient record. The system will not allow you to save until all fields are complete. Example – The data in the Age text field is automatically calculated from the date of birth entered in the patient record.

Demographic Information - Ash	ley - Patient Record - Hospital				
*Patient's First Name	Ashley	Patient's Middle Name/Initial		*Patient's Last Name	Test
*Patient's Home Address	1234 Main Street	*Patient's Home Zip/Postal Code	78701		
*Alternate Home Residence (Null Values)	Not applicable				
*Patient's Home Country	USA 💌				
*Patient's Home State	Texas				
"Patient's Home County	Travis				
*City	Austin	Social Security Number			
*Date of Birth	06/17/1976 0				
*Age	47	*Age Units	Years		
*Race	•	*Ethnicity	Please Select		
*Sex	Female	Medical Record Number			
*Indicates required field					
Save Cancel					? Help

#### Non-Applicable Information

- As you complete the question packages, there might be required fields that are **Not Applicable** to your record.
- For example, the **Outcome Information** question package in the **Patient Record** -**Hospital** record type requires you to complete the **Total ICU** (intensive care unit) **Length of Stay** and **Total Ventilator Days** text fields.
- As noted in the question package, the provider must enter **'Not Applicable'** if the patient did not enter the ICU or spend time on a ventilator.

Outcome Information - N	Mike Test - Patient Record -	Hospital		
			u may utilize the optional fields for both Total ICU Length of Stay and Total Ventilator Days to J or spend time on ventilator, please enter 'Not Applicable' into the appropriate null value fields	
* Total ICU Length of Stay		* Total ICU Length of Stay (Null Values)	Please Select 🔹	
* Total Ventilator Days		* Total Ventilator Days (Null Values)	Please Select 🔹	
* Hospital Discharge Orders Written Date	MM/dd/yyyy hh:mm aa	* Hospital Discharge Orders Written Date (Null Values)	Please Select 🔹	
* Hospital Discharge Physical Date	MM/dd/yyyy hh:mm aa	* Hospital Discharge Physical Date (Null Values)	Please Select 🔹	
* Hospital Discharge Disposition	Please Select	* Hospital Discharge Disposition (Null Values)	Please Select 🔹	
*Indicates required field				
✓ Save Ø Cancel				? Help

- The required fields with the drop-down menu feature will also include **Not applicable** as an option.
- If you select **Not applicable**, the corresponding fields will disappear from the question package.

• For example, when you select **"Not applicable"** from the **Total Ventilator Days (Null Values)** field, the **Total Ventilator Days** field will automatically populate to **Not applicable**.

## Not applicable selected for the Total Ventilator Days (Null Values) field example:

Outcome Information -	Michael Test - Pati	ent Rec	ord - Hospital		
	al information, such as IO				I fields for both Total ICU Length of Stay and Total pend time on ventilator, please enter 'Not Applicable' into
* Total ICU Length of Stay (Null Values)	Not applicable	•			_
* Total Ventilator Days			* Total Ventilator Days (Null Values)	Please Select	
* Hospital Discharge Orders Written Date	MM/dd/yyyy hh:mm aa	Ĩ	* Hospital Discharge Orders Written Date (Null Values)	Please Select 🔹	
* Hospital Discharge Physical Date	MM/dd/yyyy hh:mm aa		* Hospital Discharge Physical Date (Null Values)	Please Select	
* Hospital Discharge Disposition	Please Select	•	* Hospital Discharge Disposition (Null Values)	Please Select	
*Indicates required field					
Save Ø Cancel					

## **Total Ventilator Days** field disappearing from the question package example:

Outcome Information - Michael Test - Patient Re	ecord - Hospital
	ys in whole numbers for the entire stay. You may utilize the optional fields for both Total ICU Length of Stay and Total ission and Discharge dates. If the patient did not enter the ICU or spend time on ventilator, please enter 'Not Applicable' into
* Total ICU Length of Stay (Null Not applicable  Values)	
* Total Ventilator Days (Null Values) Not applicable	
* Hospital Discharge Orders Written MM/dd/yyyy hh:mm aa 0 Date	* Hospital Discharge Orders Written Please Select  Date (Null Values)
* Hospital Discharge Physical Date MM/dd/yyyy hh:mm aa 0	* Hospital Discharge Physical Date Please Select   (Null Values)
* Hospital Discharge Disposition Please Select	* Hospital Discharge Disposition Please Select
*Indicates required field	
Save Cancel	

#### **Example Question Package**

*Patient's First Name	Michael	Patient's Middle Name/Initial		*Patient's Last Name	Test
*Patient's Home Address	1234 Main Street	*Patient's Home Zip/Postal Code	78701		
*Patient's Home Country	US				
*Patient's Home State	Texas				
*Patient's Home County	Travis				
*Patient's Home City	Austin	Social Security Number			
*Date of Birth	02/24/1981				
*Age	42	*Age Units	Years		
*Race	White X	*Ethnicity	Please Select		
*Sex (Null Values)	Not applicable	Medical Record Number			
Indicates required field					
Save Ø Cancel					? Help

Below is a **Demographic Information** question package example:

• Once you complete the required information, select the **"Save"** button at the bottom of the screen.

🖌 Save 🛛 Ø Ca	Cancel

- As you complete each question package, the EMSTR application will redirect you to the **Record Data** tab of the **Record Summary Page**.
- The example below shows the Last Update made on the Question Package, who it was Updated By, and the Status.

tecord Data Concerns Record History			
	Question Packages		
Question Package	Last Update	Updated By	Status
Outcome Information			Incomplete
Administrative			Incomplete
ITDX Record Control Information			Incomplete
Agency/Responder			Incomplete
Demographic Information	10/02/2023	Hospital1	Complete
Hospital Procedure			Incomplete
Diagnosis Information			Incomplete
Injury Severity Information			Incomplete
Pre-Hospital Information			Incomplete
Emergency Department Information			Incomplete
Financial Information			Incomplete
Trauma Quality Improvement			Incomplete
Injury Information			Incomplete
Hospital Complications			Incomplete
Surgeon Specific Reporting			Incomplete

#### **Record Summary Page**

- The Record Summary Page includes three tabs:
  - **Record Data**;
  - $\circ~$  Concerns; and
  - **Record History**.

R	Concerns Record History			
		Question Packag	es	
	Question Package	Last Update	Updated By	Status
	Outcome Information			Incomplete
	Administrative			Incomplete
	ITDX Record Control Information			Incomplete
	Agency/Responder			Incomplete
	Demographic Information	10/02/2023	Hospital1	Complete

#### Record Data Tab

- The Record Data tab contains the Question Packages.
  - If you need to update any record data, navigate to the **Record Data** tab and select the appropriate **Question Package**.

Record Data Concerns Record History					
Question					
Question Package	Last Update				
Outcome Information					
Administrative					
ITDX Record Control Information					
<u>Agency/Responder</u>					
Demographic Information	10/02/2023				
Hospital Procedure					
Diagnosis Information					
Injury Severity Information	10/03/2023				
Pre-Hospital Information					
Emergency Department Information					
Financial Information					
Trauma Quality Improvement					
Injury Information					
Hospital Complications					
Surgeon Specific Reporting					

## **Concerns Tab**

• The **Concerns** tab can add your issues or concerns with the record data.

				Conc	erns				
Concern	Description	Person Information	Last Update	Severity	Status	Notes	Updated By	Create Date	Action
No record	s found.								

• To add a concern, click the "Add Concern" button.



- Once you select the **Add Concern** button, the EMSTR application will prompt you to add details about your concern.
- Add a "Description".

Add Concern				
Concern	Manual			
*Description	The patient's zip code is not populating in the system.			
*Severity	Please Select			
*Status	Please Select 🔹			
Notes				
Save 🛛 Ca	ancel	A		

• Select the **"Severity"** from the drop-down menu.

Add Concern	×
Concern	Manual
*Description	The patient's zip code is not populating in the system.
*Severity	Please Select
*Status	Please Select
Notes	Low Medium High Very High
Save 🧕 🤇	Cancel

• Select the **"Status"** from the drop-down menu.

Add Concern	×
Concern	Manual
*Description	The patient's zip code is not populating in the system.
*Severity	Low
*Status	Please Select
Notes	Please Select Active Resolved
Save 🛛 C	ancel

• Add any notes you want to include in the "Notes" section.

Add Concern		×
Concern	Manual	
*Description	The patient's zip code is not populating in the system.	
*Severity	Low	
*Status	Active	
Notes	N/A	
Save Ø Ca	ancel	đ

• Once you add notes, select the "Save" button to save the concern in the Concerns tab.



#### **Record History Tab**

• The **Record History** tab shows record details such as record creation time, the **Event** type, and the **User** who created the event.

Record Data Concerns	Record History				
Record History					
Time	Event	Message	User		
10/03/2023 02:43 PM	Question Package updated	Updated Question Package: Injury Severity Information			
10/03/2023 02:40 PM	Question Package updated	Updated Question Package: Injury Severity Information			
## Search Records

## Overview

Most users can only search for their facility records. If you are an administrator, please follow the steps in the administrator guide found on the EMSTR New Platform Resources link.

• To search for a record, navigate to the **EMSTR** toolbar and click the **"Search Record"** link.



- Once you click the **Search Record** button, the EMSTR application will take you to the **Search Records** page.
- Select the drop-down menu to select the "Record Type".

Search Records					
*Record Type	Please Select				
	Please Select				
	Hospital				
	Patient Record - Hospital				
	Patient Record - Submersion				
	Patient Record - TBI/SCI				

The photo below is from a hospital provider view:

Once you select the **Record Type**, search for a record by using any of the text fields in the **Search Criteria** area.

**NOTE** – the example below searches for a **hospital** record using the **Facility Name** text field.

Search Records		
*Record Type Hospital	Record ID Number	DSHS Number
Search Criteria	-	
Facility Name	Create Date From:	Create Date To:
Test	mm/dd/yyyy	mm/dd/yyyy
Address	State	Zip Code
	Please Select	
Search Clear		

After typing in the search criteria information, select the **"Search"** button.

Search Records		
*Record Type Hospital	Record ID Number	DSHS Number
Search Criteria		
Facility Name	Create Date From:	Create Date To:
Test	mm/dd/yyyy	mm/dd/yyyy
Address	State	Zip Code
	Please Select 🔹	
Search Clear		

Upon selecting the search button, the relevant record(s) will appear.

	Record ID Number ≎	DSHS Number \$	Facility Name ≎		Address ≎	State \$	Zip Code \$
Record Type				Create Date \$			
Hospital	454948385			06/23/2023		ТХ	79221
Hospital	100000225			07/24/2023		ТХ	78755
Hospital	100000369			07/27/2023		TX	78701
Hospital	70			07/31/2023		TX	73301
<u>Hospital</u>	71			07/31/2023		TX	73301
<u>Hospital</u>	99			08/01/2023		ТХ	77003
Hospital	101			08/02/2023		ТХ	77003
Hospital	139			08/03/2023		ТХ	73301
Hospital	143			08/03/2023		ТХ	73301
Hospital	171			08/07/2023		ТХ	77003
Hospital	215			08/08/2023		ТХ	77003
Hospital	218			08/08/2023		ТХ	78701
Hospital	100000720			08/09/2023		ТХ	78755
Hospital	277			08/15/2023		ТХ	73301
Hospital	384			08/23/2023		ТХ	73301
Hospital	386			08/23/2023		ТХ	75206
Hospital	387			08/23/2023		ТХ	73301
Hospital	388			08/23/2023		ТХ	79338
lospital	414			08/29/2023		ТХ	78751
Hospital	469			09/05/2023		ТХ	78701

To select the record you want to see, click the link in the **"Record Type"** column of the **Search Results** table.

Record Type	Record ID Number \$	DSHS Number \$	Facility Name ≎	Create Date \$	Address ≎	State \$	Zip Code \$
Hospital	454948385			06/23/2023		TX	79221
Hospital	100000225			07/24/2023		TX	78755
Hospital	100000369			07/27/2023		ТХ	78701
Hospital	70			07/31/2023		TX	73301
Hospital	71			07/31/2023		ТХ	73301
Hospital	99			08/01/2023		ТХ	77003
Hospital	101			08/02/2023		ТХ	77003
Hospital	139			08/03/2023		ТХ	73301
Hospital	143			08/03/2023		ТХ	73301
Hospital	171			08/07/2023		ТХ	77003
<u>Hospital</u>	215			08/08/2023		ТХ	77003
<u>Hospital</u>	218			08/08/2023		ТХ	78701
<u>Hospital</u>	100000720			08/09/2023		TX	78755
<u>Hospital</u>	277			08/15/2023		ТХ	73301
Hospital	384			08/23/2023		ТХ	73301
Hospital	386			08/23/2023		ТХ	75206
Hospital	387			08/23/2023		ТХ	73301
Hospital	388			08/23/2023		ТХ	79338
lospital	414			08/29/2023		ТХ	78751
Hospital	469			09/05/2023		ТХ	78701

Once you select the record type, the EMSTR application will take you to the **Record Summary** page where you can update record data, add concerns, and view record history.

			Record Summary (He	ospital)	
Basic Informa	tion	Notes	Notes Details		
Record ID	454948385		UserName	Entry Date	Notes
Record Type	Hospital		No records found.	,	
Primary Hospital	test				
Status	Inactive				
Notifications	General Notifications Concerns	255 characters remaining.			
DSHS ID					
Edit Entity Infor	mation				
Record Data	Concerns Recor	rd History	Question Packages		
	Question Packag	e Hos	pital Last Update	Updated By	Status
Administrativ		test	Frank obraste	- posted by	Incomplete
General Infor		test			Incomplete
Entity Import		test			Incomplete

## **11. Reports**

EMS and hospital report users, Add/Edit Level 2, and Admin Level 3 users will have access to run the **Submission Status XML files**, **No Reportable Data** (NRD) reports, and **Data Submission** reports.

## **Submission Status XML Files**

### Overview

The **Submission Status-XML Files** report is a feature that allows you to search for the uploaded patient XML file status.

## Searching for the status of a report:

To search the status of an XML file, access the **Reports** tab from the **EMSTR** navigation bar.



Select the "Submission Status-XML Files" option from the drop-down menu.



To find the XML file(s) associated with a patient, type their name in the "Name" text field.

Submission Status-XML F	iles			
Type Hospital Patient	*Name			
XML Submissions History (Expand to See	Detailed Information)			
Year :	File Name :	Report Period o	Entity Name o	Submitted Number •
No records found.				
Back				7 Help

Once you type the patient's name, the associated XML file(s) will appear.

s	ubmission Status-XN	1L Files			
Туре	Hospital Patient	• Name June Doe - 100	0002676		
ХМ	L Submissions History (Expand t	o See Detailed Information)			
	Year \$	File Name ≎	Report Period 🗧	Entity Name 🗧	Submitted Number $\diamond$
0	2023	Hospitaltest7.xml	02/01/2023 - 02/01/2023	Hospital2	<u>1000002678</u>
0	Back				? Help

To view the status submission report, click the "Submitted Number".

S	ubmission Status-XN	4L Files			
Тур	Hospital Patient	*Name June Doe - 10	000002676		
ХМ	L Submissions History (Expand t	o See Detailed Information)			
	Year ≎	File Name 🗧	Report Period $\diamond$	Entity Name 🗧	Submitted Number 🗧
0	2023	Hospitaltest7.xml	02/01/2023 - 02/01/2023	Hospital2	1000002678
0	Back				? Help

# After selecting the **Submitted Number**, a **File Submission Report** pdf version will download.

10/11/2023 11:0	0 AM File Submiss	ion Repor	t		
Entity Number			2271149		
Entity Name			Hospital2		
Report Period			02/01/2023 -	02/01	/2023
Submission Date			10/11/2023 1	1:00	AM
Submission Numb	er		1000002676		
Processed Date			10/11/2023 1	1:34	AM
Submitted By					
Total Records Sub	mitted (new/resubmitte	ed)	1 (1/0)		
= Records with Err	rors [Rejected](%)		0 (0%)		
= Records with Wa	arnings [Accepted](%)		1 (100%)		
= Records with no [Accepted](%)	Errors/Warnings		0 (0%)		
Total Records Acc	epted(%)		1 (100%)		
Total Records Rej	ected(%)		0 (0%)		
Total Records Inco	omplete(%)		0 (0%)		
Details					
Record ID	Element Name[Tag]	Submitted Value	Dictionary Value	Flag	Description
2271149_12345678	IncidentTime	235100	235100	w	1304_IncidentTime: 1304: Injury Incident Time is later than EMS Dispatch Time

To view details of the XML file, select the drop-down button.

Submission Statu	s-XML Fil	es			
Type Hospital Patient			1000002676		
XML Submissions His					
	0	2023	Report Period 🗧	Entity Name 🗧	Submitted Number $\diamond$
0 202	•	2025	02/01/2023 - 02/01/2023	Hospital2	<u>1000002678</u>
Back			J		? Help

The XML Submissions History details will display.

rpe	Hospital Patient	*Name June Doe - 100	0002676		
ML Submis	sions History (Expand to	See Detailed Information)			
	Year ≎	File Name ≎	Report Period >	Entity Name 🗧	Submitted Number 🗧
2023		Hospitaltest7.xml	02/01/2023 - 02/01/2023	Hospital2	100002678
Submitted	Date	10/11/2023 11:34 AM	E	ntity Id	2271149
Processed	Date and Time	10/11/2023 11:34 AM	S	ubmitted By	
Total Record Submitted	rds Submitted (New/Re- )(%)	- 1 (1/0)	R	ecords with Errors [Rejected] (%)	0 (0%)
Records wi (%)	th Warnings [Accepted]	1 (100%)		ecords with No Errors/Warnings Accepted] (%)	0 (0%)
Total Recor	rds [Accepted] (%)	1 (100%)	Тс	otal Records [Rejected] (%)	0 (0%)
Total Recor	rds [Incomplete] (%)	0 (0%)			

## No Reportable Data (NRD) Reports

#### **Overview**

You should submit the NRD report for any month the facility you are reporting for does not have data to submit. You need to submit NRD reports for current or past dates, but you cannot submit a NRD for a future date.

## Submitting a NRD Report:

To run a NRD report, access the "**Reports**" tab from the **EMSTR** navigation bar.



Select **"No Reportable Data"** from the drop-down menu.



Indicate the NRD "Year" and "Month" using the drop-down menus.

No Reportable Data				
Entity Type Hospital	*Entity Name - Record ID Hospital2-421			
NRD Year Please Select • Please Select 2022	NRD Month Please Select	NRD Indicated By	Date NRD Indicated Action 10/09/2023 Cancel	Add New ? Help
2023 No Reportable Data History				· neip
NRD Year 🗘	NRD Month 🗘	NRD Indicated By 🗘	Date NRD Indicated 🗘	Actions
2023	September	mackenzie.hospital1@mailinator.com	10/09/2023	Delete
L				
No Reportable Data				
Entity Type Hospital	*Entity Name - Record ID Hospital2-421 *			
NRD Year 2023 •	NRD Month Please Select Perrorary	NRD Indicated By	Date NRD Indicated Action 10/09/2023 Cancel	Add New
✓ Save	April May			? Help
No Reportable Data History	June			
NRD Year ≎	July August	NRD Indicated By 🗘	Date NRD Indicated 🗘	Actions
2023				
2023	Sept mt September	mackenzie.hospital1@mailinator.com	10/09/2023	Delete

After you add the NRD year and month, click the **"Add New"** button to submit the NRD.

No Reportable Data				
Entity Type Hospital	*Entity Name - Record ID Hospital2-421 *			
NRD Year 2023	NRD Month September •	NRD Indicated By	Date NRD Indicated Action 10/09/2023 Car	n ncel Add New
✓ Save Ø Cancel				? Help
No Reportable Data History				
NRD Year 🗘	NRD Month 🗘	NRD Indicated By 🗘	Date NRD Indicated 🗘	Actions
No records found.				

Upon selecting the **Add New** button, you will see the report in the **No Reportable Data History** table.

No Reportable Data				
Entity Type EMS Facility	*Entity Name - Record ID			
NRD Year Please Select	NRD Month Please Select	NRD Indicated By	Date NRD Indicated	Action Cancel Add New
✓ Save Ø Cancel				? Help
No Reportable Data History				
NRD Year 🗢	NRD Month 🗢	NRD Indicated By 🗢	Date NRD Indicated 🗢	Actions
2023	September		09/12/2023	Delete

If you made an error and need to remove the NRD, you can select the **"Delete"** button from the **No Reportable Data History** table.

No Reportable Data				
Entity Type Hospital	*Entity Name - Record ID Hospital2-421 *			
NRD Year Select	NRD Month Please Select	NRD Indicated By mackenzie.hospital1@maili	Date NRD Indicated	Action Cancel Add New
✓ Save Ø Cancel				? Help
No Reportable Data History				
NRD Year ≎	NRD Month 🗘	NRD Indicated By 🗘	Date NRD Indicated 🗘	Actions
2023	September		10/09/2023	Delete

## **Data Submission Reports**

#### Overview

If you have not submitted an NRD report for your facility for 90 days up to 180 days, you will receive an email\_from the EMSTR application. If you receive an email, you must submit the **data submission report**.

## How to submit a data submission report

To submit a data submission report, access the "Reports tab" from the EMSTR navigation bar.



Select **Data Submission** from the drop-down menu.



Upon selecting **Data Submission** from the Reports drop-down, a new page will open.

Complete each required field indicated by asterisks (\*). The system will not allow you to save until all fields are complete.

Data Submission								
* Data Submission								
Entity Type	Hospital	*Entity	Name - Record ID		Hospital2-421	1		
"Is data submission up to date? Missing submission time frame Contact notes	No  90 days	Contact	attempted?	- -	Yes	۲		
Letter sent date	MM/DD/YYYY 0	*Reason	for missing submission		Entity closed	×		
Date RAC was notified	MM/DD/YYYY	Process	ng agent		Mackenzie Ho	ospital1	]	
Date regulatory notified	MM/DD/YYYY							
Add New								
Is data submission up to date? Missing submission time frame Contact attempter	d? Contact Notes Letter	sent date Reason for missing submission	Specify other reason	Date RAC was notified	Processing Agent	Date regulatory notified	Date added	Delete
No records found.								
✓ Save  Ø Cancel								? Help

Once you've completed the required fields, select the "Add New" button.

Data Submission			
▼ Data Submission			
Entity Type	Hospital	*Entity Name - Record ID	Hospital2-421
"Is data submission up to date? Missing submission time frame	No  90 days	Contact attempted?	Yes
Contact notes	MM/DD/YYYYY 0	*Reason for missing submission	Entity closed
Date RAC was notified Date regulatory notified	MM/DD/YYYY 0	Processing agent	Mackenzie Hospital1
Add New	MM/DD/YYYY 0		
Is data submission up Missing submission to date? Contact attempted time frame	ed? Contact Notes Letter sent date	Reason for missing submission Specify other reason Date RAC was notified	d Processing Agent Date regulatory notified Date added Delete
No records found.			
✓ Save			7 Help

After selecting Add New, select the "Save" button to save the report.

ata Submission											
Entity Type		(	Hospital		*Entity	Name - Record ID		Hospital2-4	21		
'Is data submission up to	date?	1	Please Select	•							
Missing submission time fr	ame	Ì	Please Select		Contact	attempted?		Please Selec	ct 🗸		
Contact notes		ĺ					1				
etter sent date		(	MM/DD/YYYY	0	*Reasor	for missing submission		Please Selec	ct -	-	
Date RAC was notified		ſ	MM/DD/YYYY	۵	Processi	ng agent		Mackenzie H	lospital1		
Date regulatory notified		(	MM/DD/YYYY	8							
Add New											
Is data submission up to date?	Missing submission time frame	Contact attempted?	Contact Notes	Letter sent date	Reason for missing submission	Specify other reason	Date RAC was notified	Processing Agent	Date regulatory notified	Date added	D
No	90 days	Yes			Entity closed			Mackenzie Hospital1		10/09/2023	

The system will notify you if your data did not save.

# **12. Manage Account Access**

## **Important Note on Role-Based Access**

Application access is grouped by role, so you must select the correct EMSTR role access that fits your access needs.

EMSTR has three (3) role types:

- EMSTR View Only Level 1;
- EMSTR Add/Edit Level 2; and
- EMSTR Admin Level 3.

Once you type "EMSTR" into the **Search Access** textbox, three types of results will appear: **EMSTR** <u>View Only Level 1</u>, EMSTR <u>Add/Edit Level 2</u> and EMSTR <u>Admin Level 3</u>.

- Example End-users that need limited application access should only request EMSTR View Only Level 1 access.
- *Example Facility users* that submit data for their facility but are not the facility administrator should select the *EMSTR Add/Edit Level 2*
- Example Organization Administrators requesting application access should select the EMSTR Admin Level 3 access.

## Manage User Access Overview

All users can request to add or remove application access through your **MyApps** dashboard. After logging in to IAMOnline, the **My Apps** dashboard will appear on the screen. Select the **"Manage User Access"** tile to manage account access. Facility administrators and account managers can reference the Organization Administrative User Slides for additional details.

TEXAS Reakh and Human Services	Q Search your apps						
<ul> <li>My Apps</li> <li>Acceptable User Agreem</li> <li>My Applications</li> <li>Add section ①</li> </ul>		My Apps ⊙ Acceptable User Ag 	reement (AUA)				Sort •
Notifications (2)		EMSTR Online	Authorized Help Guide				
		My Applications					
		Supervisor Dashboard	Forms	 Manage User Access	 Access Requests	 Manage Partner Organization	Register Partner Organization
		 Approvals					

#### Add EMSTR Access

#### Overview

If you did not previously have access to the EMSTR application because you are new to your organization or are now responsible for submitting data on behalf of your facility, you must request access to the EMSTR application.

- Click the "Add Access" tab to request application access.
- The tab will turn a light grey when selected.

📰 Home My Work 🗸	€ 🔺
Manage My Access	🖌 Help
<b>Manage My Access</b> Select access you would like to add or remove.	<b>2</b> Review and Submit Look over your selections and confirm.
Add Access	Remove Access
Search By Keywords 🗸 Search Access	Q T Filters V

## Search for EMSTR

Type "EMSTR" in the Search by Keywords box.

<b>::</b> +	lome	My Work 👻						9		•		•
Manage	e My	Access									🕑 Hel	р
<b>1</b> N Se	<b>Mana</b> ielect ac	ge My Access ccess you would like to add	or remove.		2	Review a		confirm.				
		Add Ac	cess				Remove	e Access				
	Se	earch By Keywords 🗸	emstr	-			۹	<b>▼</b> Fil	ters	•		

Select the button with the **Magnifying Glass Icon** to search for the application.

📰 Home My Work 🕶	
Manage My Access	🛛 Help
<b>Manage My Access</b> Select access you would like to add or remove.	<b>2</b> Review and Submit Look over your selections and confirm.
Add Access	Remove Access
Search By Keywords 🗸 🛛 EMSTR	Q T Filters V

## Select the Correct User Role

Once you select the magnifying glass icon button—

- Click on the check mark icon to select the EMSTR role type you are requesting.
- The check mark icon will turn green once selected.



Once you select the appropriate EMSTR role level, select the "Next" button.



## EMS facility providers view example:

1 Manage My Access Select access you would like to add or remove.	2 Review and Submit  Look over your selections and confirm.
Add Access 🕕	Remove Access
EMSTR	Q T Filters V
Add 1 Showing	1-3 of 3
EMSTR EMS View Only Level 1	Details
EMSTR EMS ADMIN LVL3 Type: Role Owner: HHS_WG_DSHS_EMSTR_Data Stewards	
EMSTR EMS Admin Level 3	Details
EMSTR EMS Admin Level 3 Type: Role Owner: HHS_WG_DSHS_EMSTR_Data Stewards	
EMSTR EMS Add Edit Level 2	Details
EMSTR EMS Add Edit Level 2 Type: Role Owner: HHS_WG_DSHS_EMSTR_Data Stewards	
Add 1 Showing	s1-3 of 3
	ert

## Enlarged picture of the role types:



# Hospital providers view example:

1 Manage My Access Select access you would like to add or remove.		2 Review and Submit Look over your selections and confirm.	
	Add Access 1	Re	move Access
	emstr	c	₹ Filters ◄
Add 1		howing 1-3 of 3	
<ul> <li>EMSTR Hospital Admin Level 3</li> </ul>			Details
EMSTR Hospital Admin Level 3 Type: Role Owner: HHS_WG_DSHS_EMSTR_Data St	ewards		
EMSTR Hospital Add Edit Level 2			Details
Hospital Add/Edit (Level 2) Type: Role Owner: HHS_WG_DSHS_EMSTR_Data St	ewards		
<ul> <li>EMSTR Hospital View Only Level 1</li> </ul>			Details
Hospital View Only (Level 1) <b>Type:</b> Role <b>Owner:</b> HHS_WG_DSHS_EMSTR_Data St	ewards		
Add 1		showing 1-3 of 3	
		Next	

# Enlarged picture of the role types:

<ul> <li>EMSTR Hospital Admin Level 3</li> </ul>
EMSTR Hospital Admin Level 3 Type: Role Owner: HHS_WG_DSHS_EMSTR_Data Stewards
EMSTR Hospital Add Edit Level 2
Hospital Add/Edit (Level 2) Type: Role Owner: HHS_WG_DSHS_EMSTR_Data Stewards

### **Review and Submit the Request**

Once you select your requested application role type, the HHS system will direct you to the **Review and Submit** page.

Manage My Access	© Help
Manage My Access           Select access you would like to add or remove.	2 Review and Submit Look over your selections and confirm.
Add Access 1 items selected	•
× EMSTR EMS Add Edit Level 2	Details
EMSTR EMS Add Edit Level 2 Type: Role Owner: HHS_WG_DSHS_EMSTR_Data Stewards	

- For a business justification, you are required to leave a comment.
- To leave a comment, select the comment bubble.



- Leave a comment to explain why you are requesting EMSTR access.
- Click the **"Save"** button.

An example comment is shown below:

Business Justification and Assignment	Note 🗶
Business Justification	Assignment Note
l need EMSTR Add/Edit Level 2 access to submit o	lata on behalf of X Hospital.
	Cancel Save

Once you save your comment, the comment bubble icon will change from white with a red outline to green.

Manage My Access	C Help
Manage My Access Select access you would like to add or remove.	2 Review and Submit  Uook over your selections and confirm.
Add Access 1 items selected	
× EMSTR EMS Add Edit Level 2	Details
EMSTR EMS Add Edit Level 2 Type: Role Owner: HHS_WG_DSHS_EMSTR_Data Stewards	
Previous	Cancel Submit

After reviewing your request, select the **"Submit"** button.

Manage My Access	• Help
1 Manage My Access Select access you would like to add or remove.	2 Review and Submit The Adventional Confirm.
Add Access 1 items selected	•
× EMSTR EMS Add Edit Level 2	petails
EMSTR EMS Add Edit Level 2 Type: Role Owner: HHS_WG_DSHS_EMSTR_Data Stewards	
Previous	ancel Submit

## **Request Overview**

Once you submit your EMSTR application access request, your request will go through an approval process. If you are requesting **EMSTR Add/Edit Level 2** access, your organization administration will review and then the DSHS Injury Prevention Unit EMSTR team will review and approve. If you are designated as your organization's administrator or requesting **EMSTR Admin Level 3** access, the system will send your request directly to the Injury Prevention Unit EMSTR team to approve.

## **Track your Request**

After you submit your access request, you can track the status. The HHS system will send notification emails to EMSTR approvers to approve the request as it moves through the approval process.

- Navigate to the MyApps dashboard within IAMOnline.
- Select the "Access Requests" tile.



## Access Requests

Here, you can view your access requests and details.

🗮 Home My Work 🕶	P 🔺 EMS1 🕶
Access Requests 2	Sort by: Date 🗸 🛛 🐺 Filter 🗸 Search by Identity, Request ID or Externa
Request Access:     EMS1       Requested by     EMS1 on 8/29/23       Request ID: 17732	Details >
Request completed on 9/5/23  Add Role EMSTR EMS View Only Level 1	Complete

To view additional details, select the "Details" button.

🗮 Home My Work 🗸	
Access Requests 2	Sort by: Date V
Request Access:     EMS1       Requested by     EMS1 on 8/29/23   Request ID: 17732	Details 🗲
✓ Request completed on 9/5/23	
Add Role: EMSTR EMS View Only Level 1	Complete

Once you select the **Details** button, the HHS system will take you to the **Access Request Details** page.

< Acce	ess Reques	t for	EMS1							
Access Re	quest ID: 17732					Current Step: End				
Type: Requ	uest Access					Request Date: 8/29/2	3 12:12 PM			
Requester	EMS1					Completion Date: 9/5	/23 10:06 AM			
Requestee	e: EMS1					Verification Date: 9/5	/23 10:06 AM			
Completio	on Status: Success					Execution Status: Cor	npleted			
Priority: N	lormal									
Request	ltems									
Operation	ltem 🔺	Value	Display Value	Account	Applicatio	n Classifications	Comments	Approval Status	Provisioning Status	Attachments
Add	assignedRoles	EMSF EMS View Only Level	EMSTR EMS View Only Level		IdentityIQ		l would like access please.	Finished	Finished	
Show 5 🗸					Showing 1-1	1 of 1				

#### **Remove EMSTR Access**

All users can remove their own EMSTR access. Please note—users will immediately lose access.

#### **Remove Access**

- To remove access, click the "Remove Access" tab to remove application access for a user.
- The tab will turn a light grey when selected.

≣	Home	My Work 🕶	? ▲
Man	age My ,	Access	<b>O</b> Help
<b>1 Manage My Access</b> Select access you would like to add or remove.		ge My Access cess you would like to add or remove.	<b>2</b> Review and Submit Look over your selections and confirm.
		Add Access	Remove Access
	Se	earch Current Access	Q T Filters V

#### Select your user role

Once you complete the search process, select the correct EMSTR role.

• Click the **"X"** icon to select the application and role.



- To *remove* application access, the **X** icon will turn red when selected.
- Select the **"Next"** button.



# EMS facility providers view example:

1 Manage My Access Select access you would like to add or	remove.	2 Review and Submit Look over your selections and confirm.		0
	Add Access	Remove	Access 1	
	EMSTR	۹	▼ Filters ♥	
Remove 1	Show	ng 1-2 of 2		
× EMSTR EMS Admin Level 3			Detai	ls
Status: Assigned EMSTR EMS Admin Level 3 Type: Role Owner: HHS_WG_DSHS_EMS <sup>**</sup>	TR_Data Stewards			
EMSTR EMS View Only Level 1			Detai	ls
Status: Assigned EMSTR EMS ADMIN LVL3 Type: Role Owner: HHS_WG_DSHS_EMS	TR_Data Stewards			
		Next		

Enlarged photo of the role types:

Remove 1
× EMSTR EMS Admin Level 3
Status: Assigned
EMSTR EMS Admin Level 3
Type: Role Owner: HHS_WG_DSHS_EMSTR_Data Stewards
EMSTR EMS View Only Level 1
Status: Assigned
EMSTR EMS ADMIN LVL3
Type: Role Owner: HHS_WG_DSHS_EMSTR_Data Stewards
Remove 1

Hospital providers view example:

Manage My Access					🛛 Help
1 Manage My Access Select access you would like to	add or remove.	2 Review and Submit Look over your selections and confirm.			0
	Add Access		Remove Ac	cess 1	
	EMSTR		۹	▼ Filters ∨	
Remove 1		Showing 1-1 of 1			
EMSTR Hospital Admin L     Status: Assigned     EMSTR Hospital Admin Level 3	evel 3				Details
Type: Role Owner: HHS_WG_DSH	HS_EMSTR_Data Stewards				
Remove 1		Showing 1-1 of 1			
		Next			

Enlarged picture of the role type:

Remove 1
× EMSTR Hospital Admin Level 3
<b>Status:</b> Assigned EMSTR Hospital Admin Level 3
<b>Type:</b> Role <b>Owner:</b> HHS_WG_DSHS_EMSTR_Data Stewards
Remove 1

## **Review and Submit:**

Once you select the application role type you are removing, the HHS system will direct you to the **Review and Submit** page.

Manage My Access	🕑 Help
1 Manage My Access Select access you would like to add or remove.	2 Review and Submit Look over your selections and confirm.
Remove Access 1 items selected	•
× EMSTR Hospital Admin Level 3	Details
EMSTR Hospital Admin Level 3 Type: Role Owner: HHS_WG_DSHS_EMSTR_Data Stewards	

- For a business justification, you are required to leave a comment.
- To leave a comment, select the comment bubble.



- Leave a comment to explain why you are removing EMSTR access.
- Click the **"Save"** button.

Example comment shown below:

Comment	×
I am moving out of the Trauma department, please remove my access to EMSTR.	
	Cancel Save

Once you save your comment, the comment bubble icon will change from white with a red outline to green.

Manage My Access	O Help
1 Manage My Access Select access you would like to add or remove.	2 Review and Submit Look over your selections and confirm.
Remove Access 1 items selected	•
× EMSTR Hospital Admin Level 3	Details
EMSTR Hospital Admin Level 3 Type: Role Owner: HHS_WG_DSHS_EMSTR_Data Stewards	
Previo	ous Cancel Submit

#### After reviewing your request, select the "Submit" button.

Manage My Access	€ Help
1 Manage My Access Select access you would like to add or remove.	2 Review and Submit Look over your selections and confirm.
Remove Access 1 items selected	•
× EMSTR Hospital Admin Level 3	Details
EMSTR Hospital Admin Level 3	
Type: Role Owner: HHS_WG_DSHS_EMSTR_Data Stewards	
Previo	us Cancel Submit

### **Important Note**

Once you submit your request, your access will be immediately removed from the EMSTR application. There is no approval process for removing EMSTR application access.

# **13. Self-Service Account Management**

IAMOnline offers self-service capabilities such as updating your user profile and resetting your password.

## **Update User Profile**

You can update your profile.

- Click the upper right side of the MyApps dashboard.
- Click the "Settings" link.



• On the right side of the dashboard, click the **"Edit"** button in the **Personal Information** section.



- You can update your personal information:
  - Add details;
  - Add a phone number; and
  - Adjust your security methods including password and security questions.

## Forgot Password

If you forget your password, you can reset the password on your own.

• On the IAMOnline sign-in page, type your Username and click the "Next" button.

Health and Human Services		
	IAMOnline - Sign In	
Username		
john.test	7@gmail.com	
Keep me s	igned in Next	
Eorgot Passw	Next	
Eorgot Passw Create a new	Next ord?.(HHS/DSHS Emails Only)	

• Click the **"Forgot password?"** link.

	TEXAS Health and Human Services
	****
	Verify with your password (a) john.test7@gmail.com
Password	
	0
	Verify
Forgot passw Block to kight	
Create a new	account as a citizen
the local data and the local data and	
	ount as non-HHS employee, or register organization

Two options exist to reset the password – **Email** or **Phone**. IAMOnline will use your preferred option to verify the account so only one option is needed. Follow the steps for **Email** or **Phone**.

Reset yo	our password
(Ø joh	n.test7@gmail.com
	wing security methods to reset password.
Email	Select
C Phone	Select
Back to sign in	
Create a new account as a	citizen
Create a new account as a Request account as non-H	

## Email

Two options exist to verify the account with email and only one of the below steps needs to be followed – Email Verification Link or Email Verification Code.

Next to Email, click the "Select" button.



Verify the email address is correct and click the **"Send me an email"** button.



## **Reset Password Button**

The first option is the **Reset Password** button.

• After selecting the **"Send me an email"** button, the system will send you an **IAMOnline Password Reset email** to verify your account.



- Click the **"Reset Password"** button in the email and follow the instructions on IAMOnline.
- Continue to the **Reset your Password** section of this guide.

### **Email Verification Code**

The second option is the email verification code.

• If you're unable to use the **Reset Password** button, navigate to the sign-in page and click the **"Enter a verification code instead"** link.



You can find the code in the IAMOnline Password Reset email.



Type the code you receive in the text box and click the **"Verify"** button.

Verify with your email
8
Haven't received an email? Send again
ent you a verification email. Click the verification link a your email to continue or enter the code below. Code
Verify

## **Reset your Password**

- Enter your new password in the "New password" box, then re-enter your password in the "Re-enter password" box.
- Once you re-enter your password, select the **"Reset Password"** button and follow the instructions on IAMOnline.

Password requirements:	
At least 8 characters	
A lowercase letter	
An uppercase letter	
A number	
• A symbol	
No parts of your username	
Does not include your first name	
Does not include your last name	
Password can't be the same as your last 6 passwords	
<ul> <li>At least 1 day(s) must have elapsed since you last changed your password</li> </ul>	
New password	
	0
Re-enter password	
	ø
Sign me out of all other devices.	
Reset Password	

## Phone

You can reset your password using your phone number to verify your account. To reset your password using the Phone option click the **"Select"** button next to **Phone** on the forgot password webpage.



### **Receive a code via SMS**

• Click the "Receive a code via SMS" button. Carrier messaging charges may apply.



## Verify your Account

- The HHS system will send a code to the registered phone number via SMS.
- Type the code you receive in the text box and click the **"Verify"** button.

	Verify with your phone
	8
4	Haven't received an SMS? Send again
A co	de was sent to your phone . Enter the code below to verify.
	Carrier messaging charges may apply
Entei	Code
479	pes
	Verify

### **Reset your Password**

- Enter your new password in the "New password" box, then re-enter your password in the "Re-enter password" box.
- Once you re-enter your password, select the **"Reset Password"** button and follow the instructions on IAMOnline.

Password requirements:	
At least 8 characters	
A lowercase letter	
An uppercase letter	
A number	
A symbol	
No parts of your username	
<ul> <li>Does not include your first name</li> </ul>	
Does not include your last name	
Password can't be the same as your last 6 passwords	
<ul> <li>At least 1 day(s) must have elapsed since you last changed your password</li> </ul>	
New password	
	0
Re-enter password	
	ø
Sign me out of all other devices.	
Reset Password	

# 14. Account Locked

After multiple incorrect password attempts, your account will lock. The HHS system will send an email notifying you that your account will automatically unlock after 30 minutes.

- If you do not remember your password after the account unlocks in 30 minutes, you can reset your own password. Please refer to step **Forgot Password** for instructions.
- If you need the password reset for urgent reasons (within 30 minutes), call the HHS Help Desk at 512-438-4720 or 855-435-7181 (toll free).

# **15. Contact Information**

If you have specific EMSTR questions, submit them via email to injury.web@dshs.texas.gov.

For IAMOnline questions, visit the Texas Department of State Health Services (DSHS) IAMOnline website here.

# **General Informational Page**

## **General Information**

The Emergency Medical Services and Trauma Registries (EMSTR) is made up of four registries – the EMS Registry; the acute Traumatic Injury Registry; the Traumatic Brain Injury Registry / Spinal Cord Injury Registry; and the Submersion Registry. EMSTR is a statewide passive surveillance system that collects reportable event data from EMS providers, hospitals, justices of the peace, medical examiners, and rehabilitation facilities. Texas is home to one of the largest EMS registries in the U.S. with more than 4 million records submitted annually.



Texas Department of State Health Services

## **Our Goals**

- To ensure a robust registry reporting framework for recording reportable traumas, submersions, traumatic brain injuries, spinal cord injuries, and EMS runs in Texas.
- To reduce the burden of injury to the public resulting from preventable occurrences using trend analysis.
- To provide data as close to real-time as possible for local, state, and national leadership use.

## **Our Mission**

To improve the Texans' health, safety, and well-being through good stewardship of public resources with a focus on core public health functions.

## **Contact Information**

**Emergency Medical Services and Trauma Registries** Texas Department of State Health Services 1100 West 49<sup>th</sup> Street Mail Code 1922 Austin, Texas 78756

For program inquiries: injury.web@dshs.texas.gov

dshs.texas.gov/injury-prevention/emstrauma-registries

Emergency Medical Services and Trauma Registries dshs.texas.gov/injuryprevention/ems-trauma-registries/