



Texas EMS Trauma Registry - Frequently Asked Questions (FAQs)

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[What is the Texas EMS & Trauma Registries and its purpose?](#)

The Texas EMS & Trauma Registries is an online reporting system that collects legislatively mandated data on all EMS runs, traumatic brain injuries, spinal cord injuries, submersions, and other traumatic injuries based on a specified criterion.

The purpose of the Texas EMS & Trauma Registries is to monitor and analyze the EMS and trauma care systems. The registry incorporates national EMS and hospital data standards in addition to Texas custom questions to analyze the EMS and trauma care system and to benchmark Texas within its twenty-two trauma service areas and between other states.

Data is used to perform epidemiological investigations to identify public health issues and support injury prevention projects to ultimately improve the efficiency and quality of care patients receive in the State of Texas.

[Who is required to report data to the EMS & Trauma Registries?](#)

*As stated in the **[Texas Administrative Code Title 25, Part 1, Chapter 103, Rule §103.4](#)**, the following are the responsible entities required to report to the EMS & Trauma Registries:*

- *EMS Providers*

- Hospitals
- Acute or Post-Acute Rehabilitation Facilities
- Justice of the Peace
- Medical Examiners
- Physicians

If the above listed professionals or organizations choose to notify a local or regional health authority to respond on their behalf, the local or regional health authority must report to the EMS & Trauma Registries within ten (10) workdays.

What are the Texas Data Reporting Requirements and Rules?

1. **Health and Safety Code, Title 2, Chapter 92, Subchapter A**
 - Section 92.003
2. **Texas Administrative Code Title 25, Part 1, Chapter 103**
 - §103.5 – EMS Providers
 - §103.6 – Physicians, Medical Examiners and Justices of the Peace
 - §103.7 – Hospitals
 - §103.8 – Acute or Post-Acute Rehabilitation Facilities

What reports do an entities submit to the EMS & Trauma Registries?

EMS

All runs, as defined in the Texas EMS & Trauma Registries EMS Data Dictionary, must be submitted electronically to the department's online EMS & Trauma Registries.

Texas Administrative Code, Title 25, Part 1, Chapter 103, Rule §103.5

A run is a resulting action from a call for assistance where an EMS provider is dispatched to, responds to, provides care to, or transports a person. That includes trauma and medical, emergency and non-emergency, transport and non-transport runs.

Texas Administrative Code, Title 25, Part 1, Chapter 103, Rule §103.2

Hospital

Hospitals shall submit all major trauma cases where the patient died or arrived dead, was admitted for more than 48 hours, was transferred in to your hospital, or was transferred out to another hospital. Hospitals also submit all traumatic spinal cord injuries, traumatic brain injuries, and submersions. Refer to the definitions on the following link for more details on case inclusion.

EMS & Trauma Registries Reporting Rules

Acute or Post-Acute Rehabilitation Facilities

Traumatic brain injury (TBI): An acquired injury to the brain, including brain injuries caused by anoxia due to submersion incidents. The following International Classification of Diseases 9th Revision Clinical Modification (ICD-9-CM) diagnostic codes are to be used to identify cases of traumatic brain injury: 800.0-801.9, 803.0-804.9, and 850.0-854.1. The ICD-9-CM diagnostic code to be used to identify traumatic brain injury caused by anoxia due to submersion incidents is 348.1 or 994.1.

Spinal cord injury (SCI): An acute, traumatic lesion of the neural elements in the spinal canal, resulting in any degree of sensory deficit, motor deficits, or bladder/bowel dysfunction. The following International Classification of Diseases 9th Revision Clinical Modification (ICD-9-CM) diagnostic codes are to be used to identify cases of traumatic spinal cord injury: 806.0-806.9 and 952.0-952.9.

EMS & Trauma Registries Reporting Rules

Texas Administrative Code, Title 25, Part 1, Chapter 103, Rule §103.2

Justice of the Peace

Submersion injury: The process of experiencing respiratory impairment from submersion/immersion in liquid.

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Texas Administrative Code, Title 25, Part 1, Chapter 103, Rule §103.2

Medical Examiners

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Physicians

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ICD-9-CM diagnostic code to be used to identify traumatic brain injury caused by anoxia due to submersion incidents is 348.1 or 994.1.

Spinal cord injury (SCI): An acute, traumatic lesion of the neural elements in the spinal canal, resulting in any degree of sensory deficit, motor deficits, or bladder/bowel dysfunction. The following International Classification of Diseases 9th Revision Clinical Modification (ICD-9-CM) diagnostic codes are to be used to identify cases of traumatic spinal cord injury: 806.0-806.9 and 952.0-952.9.

Note: *However, a physician shall be exempt from reporting, if a hospital or acute or post-acute rehabilitation facility admitted the patient and fulfilled the reporting requirements as stated in §103.7 of this title (relating to Reporting Requirements for Hospitals) or §103.8 of this title (relating to Reporting Requirements for Acute or Post-Acute Rehabilitation Facilities).*

The professionals or organizations listed in this section must send all reports of injuries and events listed in this section to the Registry. If the above listed professionals or organizations choose to notify a local or regional health authority to respond on their behalf, the local or regional health authority must report to the Registry within ten workdays.

EMS & Trauma Registries Reporting Rules

Texas Administrative Code, Title 25, Part 1, Chapter 103, Rule §103.2

What data does an EMS and Hospital provider include in the report?

EMS

All of the required data fields listed in the EMS Data Dictionary, in the file format described in the data dictionary should be included. The link to the EMS Data dictionary can be found in:

<http://www.dshs.state.tx.us/injury/registry/datadict.shtm>

Hospital

For trauma hospitalizations, all of the required fields listed in the Hospital Data Dictionary, in the file format described in the data dictionary, should be included. For submersions, all requested fields should be included in the web-data entry.

<http://www.dshs.state.tx.us/injury/registry/datadict.shtm>

How often does an EMS and Hospital provider send data?

EMS

All data should be transmitted at least quarterly; monthly electronic data submissions are recommended.

EMS providers shall submit data to the Registry within ninety days of the date of call for assistance.

Hospital

All data should be transmitted at least quarterly; monthly electronic data submissions are recommended.

Hospitals shall submit data to the Registry within ninety days of a patient's discharge from their facility.

Hospitals must submit No Reportable Data (NRD) to the online system within ninety days of any given month that the hospital did not treat or document a required reportable event.

What is the deadline for data submission for EMS and Hospital?

EMS

Data shall be submitted within ninety days from the date of call for assistance. The EMS & Trauma Registries recommend that EMS providers and Third Parties submit data monthly.

When there is no data for a particular month, the EMS provider shall submit a No Reportable Data (NRD) using the online system within ninety days of that month.

Hospital

Data shall be submitted within ninety days from the date of discharge. The EMS & Trauma Registries recommend that hospitals and Third Parties submit data monthly.

When there is no data for a particular month, the hospital shall submit a No Reportable Data (NRD) using the online system within ninety days of that month.

How can entities submit data to the EMS & Trauma Registries?

Data shall be sent electronically via web-data entry or file upload. Each entity will establish an account with the EMS & Trauma Registries and use the online system for submitting data. Entities may use their own software or the free online system for entering data. Submersion data shall be sent using the web-data entry method upon logging into the EMS & Trauma Registries.

May an EMS and Hospital provider submit data through a Third Party (e.g. RAC, billing agency, etc.)?

Yes, EMS and Hospital providers are allowed to submit data through a Third Party. However, it is the responsibility of the individual EMS and Hospital provider to ensure that its data is reported to the EMS & Trauma Registries.

How to set up an account with EMS & Trauma Registries?

Once a license has been issued by DSHS Regulatory Licensing Unit and verification of the license has been received by the entity, an email may be submitted to the Customer Service Team at injury.web@dshs.state.tx.us or you may call the toll free number at 1-800-242-3562. Please provide the name of the entity, a contact name, phone number and reason for request. The toll free number is a recording to receive your messages. You will

not reach a real person; however, a response will be made to your request in 3-5 business days.

How to set up the Account Manager(s) account?

There are two methods in which an Account Manager account can be created:

- 1. The first method is a systematic process through the Registration Portal. Through this process an Account Manager can be identified and assigned a login name and password.*
- 2. Secondly, is if there is already an existing Account Manager, they can create/assign a second Account Manager.*
 - If an Account Manager has not been established in the EMS & Trauma Registries for the entity, an Administrative Representative of the entity may send a request to the Injury Epidemiology & Surveillance Branch (IESB) customer service email address **injury.web@dshs.state.tx.us**.*

How to add User(s) to an entity's account?

The Account Manager(s) has the ability to add a user to an entity's account. Instructions on how to add a user can be found in the link below.

<http://www.dshs.state.tx.us/injury/registry/AddUser.shtm>

What is a DSHS ID Number?

Each entity has a system generated number which is used as the DSHS personal identifier for the EMS & Trauma Registries.

What is a License Number (State Provider Number)?

Each entity is issued a license number when they were registering their facility with the DSHS Regulatory Licensing Unit. For any questions regarding licensing, please follow the link below.

<http://www.dshs.state.tx.us/regulatory/>

Where to get an Entity's DSHS ID?

*For the security of Patients' data, DSHS IDs are not posted on an open website. An email can be sent to **injury.web@dshs.state.tx.us** requesting your DSHS ID. Your DSHS ID can also be accessed by logging in to your entity's account and following these steps:*

- 1. On the main page, click on Search for an existing record;*
- 2. In the "Search Event" section under the Search criteria, look for the "Record Type" drop-down and select the appropriate entity type.*
- 3. Click on the "Search" button; the name of the entity will be displayed on right side of the Search Event, under the "Search Results".*

4. Double click on the name of the entity and the "Record Summary" page will be displayed.
5. The DSHS ID will be seen under the "Basic Information" and subheading "Notifications".

[How to request to delete a record \(duplicate or invalid record\)?](#)

To request deletion of a duplicate or invalid record, submit an email to **injury.web@dshs.state.tx.us**. Specify the data or record ID to be deleted. A 3-5 day turnaround should be expected.

[How to request data from the EMS & Trauma Registries?](#)

To request data, send an email to **injury.web@dshs.state.tx.us** specifying which data you would like. One of the program staff will contact you to discuss your request. To request a Public Use Data File (PUDF), complete the Public Use Data Usage Agreement form on the website (**<http://www.dshs.state.tx.us/injury/data/PUDF.doc/>**) and email it to **injury.web@dshs.state.tx.us**.

[How do you know if your data has been submitted?](#)

1. For web-data entry, your record is submitted the moment you click "save." To confirm the total number of records submitted for your entity, send an email to **injury.web@dshs.state.tx.us**.
2. For file upload, a submission status display will be shown when the file is uploaded. It will show the status as processed or unprocessed. When the file is processed, a link will be provided. Click the result link to see the status. You may also check the status in the Question Package by clicking the "Submission Status" line. This method may also be used to verify the records submitted when an entity uses a third party vendor to submit data.

[How to request access for a Third Party Agency?](#)

Please note, the program is currently reviewing the Business Associate Agreement process and are drafting an updated policy to allow for the submission of affidavits. When this new policy and affidavit have completed review and are available, stakeholders will be informed, and this FAQ will be updated accordingly. (09/30/2014)

A Business Associate Agreement (BAA) should be uploaded to the entities' account, and then an email is to be sent to **injury.web@dshs.state.tx.us** to inform DSHS staff that a BAA has been uploaded and ready for review and approval. Once DSHS reviews and approves the BAA, the identified Third Party Agency will be given access to the entity's account and will be able to submit data on behalf of the entity. An email will be sent to the entity informing them of the access granted.

The entity is responsible for monitoring the submission of its data by their data by their Third Party Agency.

What are the current requirements of a valid Business Associate Agreements (BAA)?

1. Name of Entity
2. Name of Third Party Agency
3. Effective Date
4. Signatures of both parties (Entity and Third Party Billing Agency)

Who can upload a Business Associate Agreement (BAA)?

Entity Account Managers must log on to the EMS & Trauma Registries system and upload their BAA.

How to report submersion data?

Submersion data at this time can only be reported via web-data entry. Details on how to do web-data entry can be found in

<http://www.dshs.state.tx.us/injury/registry/Training.shtm>

What is the difference between an Account Manager and a User?

- *An Account Manager* in the EMS/Trauma Registry has access to add, edit and inactivate users; along with permissions to upload Business Associates Agreements (BAA) for all entities they have been granted access. They may also submit data for their entity.
- *A User* has permissions to only submit data for their entity.

What is the difference between Required and Mandatory Elements?

- A Required element can accept Null Values (i.e. Not Applicable or Not Known / Not Recorded)
- A Mandatory element must be answered with a correct value; if a correct value is not answered for a mandatory field, the record ***will be rejected from the system*** (i.e. Entering a value for First Name).

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