

Kansas Collector Users Group Meeting  
December 10, 2008  
SRS Learning Center, Room 2  
2600 SW East Circle Drive South  
Topeka, KS

Present: Dan Robinson, Dee Vernberg, Rosanne Rutkowski, Jan Miller, Alvian Fant,  
Conference Call: Amy Bucholtz , Lacy Scott, Julie Rieger , Sharon Ball , Voncille Dirks  
, Sharon Gehring , Janelle Dimond , Julie Unruh.

Meeting called to order at 1:00pm

**Welcome & Trauma Program Update:**

**Rosanne Rutkowski**

Rosanne introduced Dee to the group and provided an update on the changes in the trauma program. She discussed the pending registry update along with the moving of the server that houses the registry. The physical relocation of the server will allow DI more technical control of the web-based collector software. Once the relocation of the server is complete, DI will manage the bulk of the technical calls. KDHE will still manage user issues such as generating user ID and passwords, clinical questions (which will be handled by Dee), and providing basic software training. The trauma program is still in the process of hiring a part-time employee to maintain the access database and run data reports for Dee. Rosanne described the recent happenings of the ACT. [Click here to view the trauma web page containing the ACT minutes](#). The trauma program is looking to execute more data analysis, which will be the primary focus in the new annual report, projected to be released in early 2009. A new list serv has been developed for trauma coordinators of developing and developed centers. After a review of how well the coordinator list serv is utilized, another list serv maybe developed for trauma registrars. The board of EMS is working on a pre-hospital electronic system that will allow a registrar to view a PDF of a patient's record through a secure system. Rosanne briefly discussed the findings of the BIS assessment conducted August 26, 2008 ([click here to view the full BIS report](#)), and the program's efforts on updating the state trauma plan.

**Registry Update**

**Dee Vernberg**

**Regional Trauma Registry Training:** A registry sharing session will be held at Labette Community College on January 9, 2009 in the SE region from 10am to 3pm. A KRHS notice will be released shortly with detailed information and a registration form. Rosanne explained the Parsons meeting will be a sharing meeting and not a training session.

**Data entry:** Dee described how the changes in the coming update that will help in data analysis. She emphasized the need for the "specify box", located in the pre-hospital tab, and how that field greatly enhances data analysis. In order for collector to automatically populate the ISS and TRISS, the registrar must enter the ICD 9 codes in the large white field called the narrative field followed by clicking the "tri-code" button. The ISS and TRISS will also automatically populate if the registrar uses the AIS coder located on the next sub-tab under anatomical diagnoses, however, it is not advisable to utilize the

AIS coder if an individual has not attended an AIS coder class. The trauma program is planning on developing a cheat sheet of frequently used codes to assist new registrars in their data entry. Dee asked the group for suggestions that would be beneficial to have on the sheet. KU volunteered to send Dee a copy of their cheat sheet.

**Software Update:** The software update is expected to be released soon. A KRHIS notice of the update schedule will be sent to the registrars as soon as a solid schedule is formulated. DI will send software updates to all local users. When the central site system is updated at KDHE, the system will be down for about an hour. For this reason, the program is planning to schedule the central site update in the morning. The benchmark reports have been compiled and will be sent out shortly. Instead of sending out reports covering several quarters, Dee constructed this round of reports to cover all of 2007. After everything is caught up, the benchmark reports will continue to be released on a quarterly basis.

Discussion occurred concerning the initial vital signs inputted in the registry for patients who have been intubated and how that might affect the GCS score. Vital signs for the pre-hospital tab are the vital signs taken from the patient by first-responders at the scene of incident. The GCS under the pre-hospital tab is also only concerned with the GCS score taken by first-responders at the scene of incident. Initial GCS occurs with the initial vitals. The GCS qualifier is not used for alcohol or drugs the patient may have taken, but is an illustration of substances medical personnel may have procedurally administered which adversely affects the GCS.

#### **Further questions/discussions**

A question was posed concerning damage sustained from smoke inhalation and if it should be entered into the registry. Representatives from trauma centers explained they enter patients who suffered from smoke inhalation in the registry.

Besides ImageTrend's prehospital data collection software, another system called OPTISTAT is being used in both Kansas and Missouri. Discussion about how records are taken from the electronic EMS systems and how they are inputted into the registry circulated around the group.

Some facilities are having problems with the collector software (it is running slowly). For facilities that are having internal problems with the collector software, they need to contact DI for technical support.

**2009 Meeting Dates:** No one objected to the user group meeting dates for 2009: March 11, June 10, Sept 9, and Dec. 9.

**Items for Future Agendas:** For future user group meetings, Rosanne suggested either bench mark report discussions or having guest speakers discuss performance improvement, and how Critical Access can use the data they collect. The group gave a positive response toward having guest speakers.

A question was asked about how the registry can be utilized with grant writing. Specifically, is there a person or tool from the trauma program which can help facilities

to the next level as in education and PI? Rosanne explained it is for this reason she is focusing Dee's time on data analysis. Rosanne also explained it is her vision for the registry to address prevention in areas where certain injuries are occurring.

There was discussion regarding Kansas holding classes to certify individuals as trauma registrars. Currently, the state has not looked into such classes. The ATS ( American Trauma Society) will have a trauma registrar class in April but the location is still unknown. The class's expense is a concern. In order for the program to bring the registrar class to Kansas, a guaranteed number of participants would have to be achieved. It was asked whether completing an AIS coding class would be beneficial before attending the registrar certification class. A consensus among the group decided an AIS coding class would not be terribly beneficial for the registrar certification.

**Adjourn 1:50pm**