

Long Term Acute Care (LTAC) and Rehabilitation Reporting
of
Traumatic Brain Injury and Spinal Cord Injury
to the Texas EMS/Trauma Registry

January 2013

Law:

Texas Health and Safety Code, Title 2, Subtitle D

[Chapter 92. Injury Prevention and Control](#)

Rules – Texas Administrative Code (TAC):

Title 25, Part I: Texas Department of State Health Services (DSHS)

[Chapter 103. Injury Prevention and Control](#)

[Rule §103.2. Definitions:](#)

The following words and terms, when used in these sections, shall have the following meanings, unless the context clearly indicates otherwise.

(18) 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.

(24) 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.

[Rule §103.4. Who Shall Report and List of Reportable Injuries and Events:](#)

- (f) Acute or post-acute rehabilitation facility --
- (1) Traumatic brain injuries.
 - (2) Spinal cord injuries.

[Rule §103.8. Reporting Requirements for Acute or Post-Acute Rehabilitation Facilities:](#)

- (a) General Information.
- (1) All data should be transmitted at least quarterly; monthly electronic data submissions are recommended.
 - (2) A facility shall submit data to the Registry within three months of a patient's discharge from their facility.

(b) Data Elements and Methods.

(1) The following data elements must be submitted to the Registry for all required reportable events:

- (A) patient's name, race/ethnicity, sex, and date of birth;
- (B) date of injury and cause of injury;
- (C) date of admission, date of discharge, and discharge destination;
- (D) functional independence measure score at admission, functional independence measure score at discharge, and diagnoses; and
- (E) type of services provided, payor, and billed charges.

(2) If a specialized reporting system exists for a required reportable event, then the case or suspected case must be submitted to all relevant reporting systems as defined in its respective data dictionary.

Patients receiving treatment directly after acute care stay: Report patients who are receiving LTAC and/or Rehabilitation services directly after the event which caused the TBI or SCI (i.e. patients receiving treatment within 30 days after discharge from acute care.)

Mechanism to Report: Web data entry (URL will be provided after training on how to use the registry reporting system is completed).

Pilot Testing: Pilot testing will take place Feb. 4 – 22, 2013. If you would like to volunteer to test the web data entry process, please e-mail Laura.Berridge@dshs.state.tx.us.

Training: Every person who uses the DSHS reporting system is required to take training before being given a user name and password. (If you have already taken training and received your username and password, you do not have to repeat the training).

Web Data Entry of Rehab and LTAC Records:

[Tuesday, Feb. 26, 10:30 am – noon](#)

[Thursday, Feb. 28, 1:30 pm – 3:00 pm](#)

[Tuesday, March 5, 10:30 am – noon](#)

[Thursday, March 7, 1:30 pm – 3:00 pm](#)

To register for a training, please select the link for the day you wish to attend. After registering, you will receive a confirmation e-mail containing the link and telephone for accessing the training webinar.

Reporting Date: DSHS will implement LTAC and Rehabilitation Facility reporting March 1, 2013. Patients who present for treatment starting March 1, 2013 and who are receiving treatment directly following their acute care for the initial injury are required to be reported.