

TEXAS Health and Human Services

Trauma Services Registry Hospital Data Management

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- Reporting Requirements
- Stakeholder Roles
- Identity and Access Management Online (IAMOnline)
- Submission Process
- Record Summary
- File Upload Process
- Submersion Patient Record
- Report Format Review
- Account Management
- Questions and Contact Information

EMSTR Reporting Requirements



Reporting Requirements

25 Texas Administrative Code (TAC), <u>Rule 103.7</u> states all hospitals shall submit data to the Texas Department of State Health Services (DSHS) EMSTR within ninety (90) calendar days of a patient's discharge from their facility.

- According to 25 TAC, <u>Rule 103.4</u>, reportable data includes:
 - Traumatic brain injuries (TBI);
 - Spinal cord injuries (SCI);
 - Submersion injuries; and
 - Other traumatic injuries.
- Specific International Classification of Diseases-Version 10-Clinical Modification (ICD-10-CM) codes are listed in the National Trauma Data Standard (NTDS) pages IV and V (in 2020 and 2023 versions).

EMSTR Submission Requirements

- 25 TAC, <u>Chapter 157</u> governs the EMS/Trauma Systems.
 - DSHS checks facility compliance during the initial or re-designation survey.
 - DSHS submits a compliance report to the surveying entity or Texas EMS Trauma and Acute Care Foundation (TETAF).
- A facility receives a criteria deficiency if they fail to submit patient records to the trauma registry in the 90-day requirement (25 <u>TAC, Chapter 103</u>).
- Facilities are responsible for the complete, accurate, and timely data submission even if a third-party submitter is used (25 <u>TAC, Chapter 103</u>).
- Facilities should notify DSHS (both EMSTR staff and the DSHS IAMOnline team) when locations change or facilities close.

Data Format Update

- In November 2023, EMSTR implemented the National Trauma Data Standard (NTDS) 2023 data dictionary definitions and the International Trauma Data Exchange (ITDX) 2023 data formats for all hospital patient records.
- The EMSTR data platform continues to accept the 2020 ITDX format. The EMSTR data platform <u>does not</u> accept NTDS 2017.

Stakeholder Role Descriptions



Stakeholder Roles

- Entity / Hospital Administration (Level 3):
 - Manages assigned users through the Texas Health and Human Services (HHS) new IAMOnline authentication platform;
 - Monitors data submissions;
 - Runs reports; and
 - Inputs data.
- Entity / Hospital Add / Edit (Level 2) Inputs data and runs reports where applicable.
- Entity / Hospital View Only (Level 1) Has view-only / read-only access.

Account Manager Role (Admin Level 3)

Monitor Data Submissions

- Entity Report:
 - Includes data submission by admission date;
 - Includes data submissions by submission date and submitter; and
 - Provides number of cases submitted.
- **Trauma Care Report** Provides a list of all cases submitted by the facility.
- Hospital Data Validity Report Provides patient record details with number and percent of valid, valid null, and invalid answers.

IAMOnline Process



IAMOnline (1 of 2)

- In November 2023, EMSTR began using the new IAMOnline platform.
- All Texas HHS applications will use IAMOnline.
- IAMOnline provides a more secure log-in process with an authentication feature.

TEXAS Health and Human Services	
IAMOnline - Sign In	
Username	
Keep me signed in	
Next	
Forgot Password? (HHS/DSHS Emails Only)	
<u>Request account as non-HHS employee, or</u> register organization	
Sign Acceptable Use Agreement	

IAMOnline (2 of 2)

To access the new EMSTR system, each person must complete the following one-time account set-up steps:



- Activate your account;
- \checkmark
- Set up security methods; and
- Review and acknowledge the Acceptable Use Agreement (AUA) form.

After completing these steps, you can access the EMSTR system directly by logging in to your IAMOnline My Apps dashboard.

Account Set Up



Setting Up Accounts

- New facilities must register through IAMOnline.
- Facilities previously in Maven and who did not receive an activation email must contact <u>injury.web@dshs.texas.gov</u> to maintain the legacy DSHS ID.
- If you need access to multiple facilities, you may be required to have multiple accounts, each with a unique email address.
- Resources, such as registration guides, are available on the EMSTR website.
- The EMSTR support team can help contact them at injury.web@dshs.texas.gov.

Access My Apps Dashboard Process



Access the My Apps Dashboard

After you set up your security methods, the system redirects you to your IAMOnline **My Apps** dashboard.



Acceptable Use Agreement (AUA)

- All tiles are locked with a lock icon until you acknowledge and sign the AUA form.
- To do this, select the "AUA" tile on your My Apps dashboard.



Acknowledge and Sign your AUA

- Carefully read and complete the AUA form.
- Once you complete the mandatory information and sign the form, click the "Submit" button to complete this portion.

l have read, und	Jerstand, and will comply with the requirements in the Information Security Acceptable Use Policy.
First Name	
First Name *	
Last Name	
Last Name *	
Your Work Em	ail *
G	mailinator.com
Your Work Pho	ne
l am (choose or	ie and explain below): *
 An employe 	e of HHSC (specify department and division)
O An employe	e of DSHS (specify department and division)
O An employe	e of another agency (specify agency, department, and division)
 A contractor 	(specify employer or non-state agency name)
An intern or	volunteer (specify agency department and division)

Date Agreement Signed *		C
08/09/2023		
		Submi
	Submit	Castin

Access EMSTR Process



Access EMSTR (1 of 2)

- Once you complete the AUA form, your My Apps dashboard tiles will unlock.
- To access EMSTR, select the "EMSTR Online" tile.

Acceptable User Ag	reement (AUA)			
	Ð	$\overline{\checkmark}$		
DEV: Forms	DEV: Access Requests	DEV: Manage My Access		
⊘ My Workflows: DE\	/&TEST			
	<u> </u>	*		_
DEV: Manage User Access	DEV: Approvals	DEV: Register Partner	DEV: Manage Partner	DEV: Supervisor Dashboard
Ø	*			
ENOTE O II				

Access EMSTR (2 of 2)

Once you select the **"EMSTR Online"** tile, the system will direct you to the EMSTR homepage.

MSTR Home Create Record Search Record Workflows File Upload Entity Reports Admi Settings Logou									
TEXAS Health and Human Services Texas Department of State Health Services Welcol	Texas Department of State Health Services Welcome to Texas Emergency Medical Services and Trauma Registry System								
→ Workflows									
Workflow Queue	Events								
Recently Accessed Records									
Record Id	Name	Record Type							
1000001976	Crystalb Testb	Patient Record - Hospital Submersion							
1000002673	crystal test2	Patient Record - Hospital Submersion							
<u>544</u>	crystalhospital2	Hospital							
1000001532	Test Crystal	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	<u>Glossary</u>	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							

Online Submission Process



Improved User Experience

The new system incorporates updated features and new functionalities throughout EMSTR for an improved user experience.

Calendar Feature

*Emergency Procedure	Department	1234	567									
*Procedure Performed Date/Time		07/03/2023 12:00 AM				AM		0	Procedure Performed Date/T			ormed Date/Time
		0	Jul		× 20	23	~	0	1 (1	Null Val	ues)	
		s	м	т	w	т	F	s	eset	Car	ncel	
								1	-	_	_	
		2	3	4	5	6	7	8	-			
ICD-10 Ho	spital Procedure O	9	10									Procedure Date,
		16										
		23		25		27		29				
		30							Date/Ti	me of Hor	inital Adr	nission (Null Values)
MM/dd/yyyy h		Time	е		1	2 AN	1~:	00 ~	Ducc, II			
		-		Det			Cla		-			

Quick date and time selection.

ollapsible Sections		
ijury Information - CPatient TestO - Patient Record	Drop Down I	Venus
Incident Date and Relative Information		
Incident ICD-10 Information	*Locally Calculated ISS	0
Incident Location Information	Mechanism of injury	Please Select
Incident Device and Relative Information	Injury type	Please Select
		Cut or Pierce
ndicates required field	*Indicates required field	Drowning or Submersion
	Indicates required neid	Fall
Save Cancel		Fire / Burn
	✓ Save Ø Cancel	Firearm
		Machinery

Easier page navigation to complete required fields.

Intuitive process that avoids page clutter.

Online Submission





To submit data manually, select "Create Record" from the navigation bar.

Create Record (1 of 2)

After selecting **"Create Record"** from the EMSTR toolbar, click the **"Patient Record - Hospital" Record Type** from the drop-down menu.

Record Inf	formation	
*Record Type	Please Select	•
	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	

Create Record (2 of 2)

- Enter the required information indicated by the asterisks (*).
- Click "Save".

Record Type		Patient Record - Hospital		•		
Add Person						
*First Name			Middle Name		*Last Name	
*Birth Date	mm/dd/yyyy		*Gender	Please Select		
Contact Info	ormation					
*Street						
*City			*State	Texas 🗸	*Zip Code	
*County	Please Select	•	*Country	USA		
*Submission Ve	ersion:			2023		•
ndicates required	d field					

Add Record Data

To add data to the patient record, complete each of the 15 Question Packages.

	Question Packages		
Question Package	Last Update	Updated By	Status
Outcome Information			Incomplete
Administrative			Incomplete
ITDX Record Control Information			Incomplete
<u>Agency/Responder</u>			Incomplete
Demographic Information			Incomplete
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

Finish Creating a Record

- After saving the information entered in the 15 question packages, view the completed record by navigating to the EMSTR toolbar.
- Select "Entity > Hospital > Hospital Patient Record".

EMSTR Welcome, Construction TEXAS Health and Human Services Texas Department of State Health Services	Welcome to Texas Emergency Medical Services and Trauma Registry System	Home Create Record Search Record W Hospital Facility Hospital Patient Record Hospital Submersion Pat [;] rd Hospital TBI SCL r	al File Upload Entity Reports al File Upload Entity al File Upload Entity al File Upload Entity al File Upload Entity al File
	Home Create Record Search Re	acord Workflows Eile Upla	ad Entity Reports
	Hospital Facility	Hospital	gs Logout

Hospital Facility	Hospital	gs Logout
Hospital Submersion Patient Record Hospital TBI SCI Patient Record		

Hospital Patient Record

You can view the patient records you submitted for your facility.

Hospital Facility	Hospital Patient	Hospital Submersion Patient	Hospital TBI SCI Patient						
	(Entities 1 - 2 of 2, Page: 1/1) + Clear filter 2 Export Patient Record(s)							Record(s)	
Record ID	•	Facility Name ≎	Created Date \$	Arrival Date	First Name ≎	Last Name ≎	Status \$	Action	
1000001532			2023/09/13		Test	Crystal	Open	Record Details	
100002685			2023/10/11		CPatient	TestO	Open	<u>Record Details</u>	
	(Entities 1 - 2 of 2, Page: 1/1) ◄ ◄ 1 ▷ ▷ 50 ∨								

To view a specific patient record, click "Record Details".



Record Summary Screen

On this screen you can view the list of patient records you submitted.

EMSTR Welcome, Lee Hospital005						Home Create Rec	ord Search Record WorkflowsFile Upl	load Entity Reports Lo	
Hospital Facility Hospital Patient Hospital Submersion Patient Hospit	tal TRI SCI Patient								
roupter series roupter series roupter series roupter									
		(Entities 1 -	50 of 108, Page: 1/3)			+ Add New Entity + Clear filter D Export Patient Record(
Record ID \$	Facility Name 🗢	Created Date 🌣	Arrival Date	First Name 🗢	Last Name \$	Status \$	Action		
49789		2023/05/27		Sm Test 6/20	one	Open	Record Details		
812893		2023/05/29		Tanuja	A	Open	Record Details		
668462		2023/06/29		Tanuja	A	Open	Record Details		
343858		2023/06/29		Tanuja	Test2	Open	Record Details		
362048		2023/07/05		sm test 7/5	test	Open	Record Details		
198220		2023/07/07		Tanuja	7/6	Open	Record Details		
605114		2023/07/11		Smi 7/11	test	Open	Record Details		
1000000190		2023/07/21		Dhanusha	One	Open	Record Details		
1000000191		2023/07/21	2023/07/11	Tanuja	2020	Open	Record Details		
1000000192		2023/07/21	2023/07/02	Tanuja	2023	Open	Record Details		
100000207		2023/07/21		2020	Dhanusha	Open	Record Details		
100000208		2023/07/21		Andrew	Barstow	Open	Record Details		
100000209		2023/07/21		Test	TQIP	Open	Record Details		
1000000216		2023/07/21	2023/07/03	Test	2020	Open	Record Details		
1000000219		2023/07/21		Peter	John	Open	Record Details		
100000286		2023/07/25	2023/07/01	smi 2020	test	Open	Record Details		
100000287		2023/07/25		smi 2023	test	Open	Record Details		
1000000332		2023/07/26		Test	Created date	Open	Record Details		
100000348		2023/07/27		Smi Test 7/27 2020	test	Open	Record Details		
1000000349		2023/07/27		smi test 7/27 2023	test	Open	Record Details		
100000361		2022/07/27		maetha	nation		Personal Details		

The column headers allow you to search and filter for records.

Record ID Facility Name Created Date	Arrival Date	First Name ≎	Last Name 🗢	Status	Action	
---------------------------------------	--------------	--------------	-------------	--------	--------	--

File Upload Process







File Upload

To submit data using the file upload method, select **"File Upload"** from the EMSTR navigation bar.

Select the Data File Format

- After selecting **File Upload** from the EMSTR toolbar, the system will take you to the **Data File Upload** page.
- Select "Hospital_XML_File" from the drop-down menu.

EMSTR Welcome,				Home Create Record Search I	Record Workflows File Uplo	oad Entity F	Reports Admin Settings Logout
Data File Upload							
Data File Format	Please Select	•		File	Choose File No file chosen		
 ∧ Upload ⊘ Cancel ? + Hospital_XMI 		File					
	Demographic_; EMS_XML_File	KML_File Recent (Queueo	l Roster Imports			
(Entities 1 - 50 of 306, Page: 1/7)							
Create Date ≎	Complete Date	Roster Format	٥	File		Status	Result
2023-10-10 14:16:22	2023-10-10 19:16:22	EMS_XML_File	EMS_2	023_V350_Sample_File.xml_[<u>Original Fil</u>	<u>e]</u>	Successful	<u>Download</u> Results
2023-10-06 13:21:08	2023-10-06 18:21:08	EMS_XML_File	2022-E	MS-1-Cardiac-Transport_venkat_devx	ml_[<u>Original File]</u>	Successful	<u>Download</u> <u>Results</u>

Data File Upload

Select "Choose File" and select the file from your computer.

EMSTR Welcome,		Home Create R	ecord Search Record File Upload Entity Reports Logout
	Data File Up	oad	
Data File Format	Hospital_XML_File	File	Choose File No file chosen
▲ Upload Ø Cancel Help	Send Email		

Once you've chosen the file, select the "Upload" button.

E			Home Create Ro	ecord Search Record File Upload Entity Reports Logout
		Data File Upl	oad	
	Data File Format	Hospital_XML_File	File	Choose File ITDX_2023-VleRecord.xml
	▲ Upload Ø Cancel Help	Send Email		

Validation Results (1 of 2)

After uploading the file, the system will send you an automatic Validation **Results** table notifying you of any errors.

Data File Upload						
Data File Format	Hospital_XML_File	File	Choose File No file chosen			
Vpload Ø Cancel Help						
	Vali	idation Results				
Record Count	1					
Valid Record Count	1					
Error	1 of the 1 records in the file have been successfully uploaded!					
Validation Results (2 of 2)

	Validation Results
Record Count	1
Valid Record Count	0
Error	1 of the 1 records were not uploaded due to errors: Hospital FacilityId 0771021 doesn't exist.

- If an error occurs, the Validations Results table includes a description of the error.
- After addressing the error, re-upload your file.
- After your file successfully uploads, the system sends you another Validation Results table.

File Submission Report

You will immediately receive a **File Submission Report** via email. This report includes additional report details.

08/02/2023 22:45 File Sul	bmission Report
Entity Number	null
Entity Name	
Report Period	02/01/2020 - 02/01/2020
Submission Date	08/02/2023 10:40 PM
Submission Number	100000731
Processed Date	08/02/2023 10:40 PM
Submitted By	
Total Records Submitted (new/resubmitted)	1 (1/0)
= Records with Errors [Rejected](%)	0 (0%)
= Records with Warnings [Accepted](%)	1 (100%)
= Records with no Errors/Warnings [Accepted](%)	0 (0%)
Total Records Accepted(%)	1 (100%)
Total Records Rejected(%)	0 (0%)
Total Records Incomplete(%)	0 (0%)

Details

	Record ID	Element Name[Tag]	Submitted Value	Dictionary Value	Flag	Description
0771	1002_12345678	IncidentTime	235100	235100	×	1304_IncidentTime: 1304: Injury Incident Time is later than EMS Dispatch Time
0771	1002_12345678	IncidentTime	235100	235100	w	1305_IncidentTime: 1305: Injury Incident Time is later than EMS Unit Arrival on Scene Time
0771	002_12345678	PulseRate	1	1	w	4804_PulseRate: 4807: The value is below 30

Recent Queued Roster Imports

You can access Feedback Reports from the **Recent Queued Roster Imports** screen on the data file upload page by selecting **"Download Results"**.

				Recent Q	ueued Roster Impor	ts
				(Entities 1 - 50 of 671, Page: 1/14) 📑	<pre><4 1 2 3 4 5</pre>	6 7 8 9 10 🔛 🕨
				File		
Create Date	Complete Date	Roster Format	\$		Status	Result
2023-07-28 20:51:29	2023-07-28 20:51:29	Hospital_XML_File	2020sampleSing	leRecord.xml_[Original File]	Successful	Download Results
2023-07-28 20:20:01	2023-07-28 20:20:00	EMS_XML_File	2022-EMS-1-Car	diac-Transport_v350.xml_[Original File]	Successful	Downlos sults
2023-07-28 19:32:52	2023-07-28 15:32:52	Hospital_XML_File	2020sampleMulti	ipleRecord_8_Records_2_new.xml <u>[Original File]</u>	Successful	D-
2023-07-28 15:13:39	2023-07-28 11:13:38	Demographic_XML_File	2022-DEM-2_v35	50.xml <u>[Original File]</u>	Successful	
2023-07-26 20:09:53	2023-07-26 16:09:53	Hospital_XML_File	ITDX_2023_Sam	ple.xml <u>[Original File]</u>	Succes	
2023-07-26 19:58:19	2023-07-26 15:58:19	Hospital_XML_File	2020sampleSingl	leRecord.xml_[Original File]	C.	1
2023-07-26 19:51:54	2023-07-26 15:51:53	Hospital_XML_File	2020sampleSingl	leRecord.xml_[Original File]		
2023-07-26 19:34:49	2023-07-26 15:34:35	EMS_XML_File	2022-EMS-1-Car	diac-Transport_v350.xml_[Original File]	Down	load Reculte
2023-07-26 19:29:15	2023-07-26 15:29:15	EMS_XML_File	2022-EMS-1-Car	diac-Transport_v350.xml_[Original File]	DOWI	IDau Results
2023-07-26 19:26:01	2023-07-26 15:26:01	EMS_XML_File	2022-EMS-1-Car	diac-Transport_v350.xml_[Original File]		<u></u>
2023-07-26 19:06:42	2023-07-26 15:06:41	EMS_XML_File	2022-EMS-1-Car	diac-Transport_v350.xml_[Original File]	Successful	Download Results
2023-07-26 18:44:17	2023-07-26 14:44:17	EMS_XML_File	2022-EMS-1-Car	diac-Transport_v350.xml_[Original File]	Successful	Download Results
2023-07-26 18:41:27	2023-07-26 14:41:26	EMS_XML_File	2022-EMS-1-Car	diac-Transport_v350.xml <u>[Original File]</u>	Successful	Download Results
2023-07-26 18:26:25	2023-07-26 14:26:25	Demographic_XML_File	2022-DEM-2_v35	50_schError_dAgency01==02.xml <u>[Original File]</u>	Successful	Download Results
2023-07-26 18:24:24	2023-07-26 14:24:24	Demographic_XML_File	2022-DEM-2_v35	50_schError_dAgency01==02.xml <u>[Original File]</u>	Successful	Download Results
2023-07-26 18:21:35	2023-07-26 14:21:35	Demographic_XML_File	2022-DEM-2_v35	50.xml_[<u>Original File]</u>	Successful	Download Results
2023-07-26 17:09:30	2023-07-26 13:09:29	Demographic_XML_File	2022-DEM-2_v35	50.xml_[<u>Original File]</u>	Successful	Download Results
2023-07-26 17:06:18	2023-07-26 13:06:18	Demographic_XML_File	2022-DEM-2_v35	50.xml_[<u>Original File]</u>	Successful	Download Results
2023-07-26 16:50:23	2023-07-26 12:50:22	Demographic_XML_File	2022-DEM-2_v35	50.xml <u>[Original File]</u>	Successful	Download Results

Feedback Report Example 1

Feedback Report with no errors, only warnings.

Total Records Submitted (new/resubmitted)	3 (3/0)
= Records with Errors [Rejected](%)	0 (0%)
= Records with Warnings [Accepted](%)	2 (66%)
= Records with no Errors/Warnings [Accepted](%)	1 (33%)
Total Records Accepted(%)	3 (100%)
Total Records Rejected(%)	0 (0%)
Total Records Incomplete(%)	0 (0%)

Rejected Records

Facility ID Patient ID Flag Description

Record Details (Warning & Incomplete)

Facility ID	Patient ID	EMSTR Record ID	Element Name[Tag]	Submitted Value	Dictionary Value	Flag	Description
1015031	2307150	301352722	EmsSbp	0	0	w	3607_EmsSbp: 3607: SBP value is below 30
1015031	2307150	301352722	EmsPulseRate	0	0	w	3707_EmsPulseRate: 3707: Pulse rate submitted is below 30
1015031	2307150	301352722	EmsRespiratoryRate	0	0	w	3807_EmsRespiratoryRate: 3807: The value submitted is below 5
1015031	2307150	301352722	PulseRate	0	0	w	4804_PulseRate: 4807: The value is below 30
1015031	2307150	301352722	RespiratoryRate	0	0	w	5007_RespiratoryRate: 5007: The value is below 5
1015031	2312063	301352724	Sbp	0	0	w	4707_Sbp: 4707: SBP value is below 30

Feedback Report Example 2

Rejected Records

Facility ID	Patient ID	Flag	Description
0703700	6508	E	11703_Angiography: 11703: Element cannot be Not Applicable when Packed Red Blood Cells or Whole Blood is greater than 0
0703700	6410	E	1211_IncidentDate: 1211: Field cannot be Not Applicable
0703700	6410	E	1310_IncidentTime: 1310: Field cannot be Not Applicable
0703700	6488	E	5103_RespiratoryAssistance: 5103:Element must be Not Applicable when Initial ED/Hospital Respiratory Rate is Not Known/Not Recorded

Record Details (Warning & Incomplete)

Facility ID	Patient ID	EMSTR Record ID	Element Name[Tag]	Submitted Value	Dictionary Value	Flag	Description
0703700	6446	301356596	PrimaryECodelcd10	Y93.44	Y93.44	w	8905_PrimaryECodelcd10: 8905: ICD-1 External Cause Code should not be Y93.X/Y93.XX (where X is A-Z or 0-9)
0703700	6443	301356606	HospitalDischargeOrdersWrittenDate	20241212	20241212	w	7710_HospitalDischargeOrdersWritten[7710: Hospital Discharge Date minus Ir

Feedback Report

with errors and warnings.

Submersion Patient Records Process



Texas Department of State Health Services

Submersion Patient Records

Trauma Registrars:

- Report all near and actual submersions;
- Enter data in the Registry Manual Data Entry System (file upload is not available); and
- Use the Patient Record Hospital Submersion option.

Submersion Online Submission



To submit data manually, select "Create Record" from the navigation bar.

Create Record

Create Submersion Record (1 of 2)

After selecting **Create Record** from the **EMSTR** toolbar, click the **"Patient Record - Hospital Submersion" Record Type** from the drop-down menu.

Create Event - Person Info	rmatio	n	
F	Record Inf	ormation	
*	Record Type	Please Select	•
		Please Select	
		Patient Record - EMS	- II:
		Patient Record - Hospital	- 11
		Patient Record - Hospital Submersion	
		Patient Record - Hospital TBI/SCI	
		Patient Record - JP/ME - Submersion	- 11
		Patient Record - JP/ME - TBI/SCI	
		Patient Record - Long Term Acute Care	_
		Datiant Decard Debabilitation	

Create Submersion Record (2 of 2)

- Enter the required information indicated by the asterisks (*).
- Once complete, click **"Save"** to save the record.

Record Informatio	n				
*Record Type	Patient Record	- Hospital Submersion			
Add Person					
*First Name		Middle Name		*Last Name	
*Birth Date mm/dd	i/yyyy 🗂	*Gender	Please Select		
Contact Information					
*Street					
*City		*State	Texas		
*Zip Code		*Zip Code (Null Values)	Please Select	•	
*County Please	Select 🔹	*Country	USA		
*Indicates required field					
Phone Number Enter Phor	ne	E-Mail			
Save Ø Cancel					× Clear ? H



Submersion Question Package (1 of 3)

To add patient record data, complete the **Question Package**.

			Record Summary (Patient)				
Basic Informa	tion	Notes	Notes Details					
Record ID	1000002673		UserName	Entry Date	Notes 🔺			
Record Type	Patient Record - Hospital Submersion		No records found.		•			
Person	crystal test2							
Status	Open	255 characters remaining.						
UUID	a6748cff- 70d5-437c- 99c9- d8752d7d1399	✓ Save						
Notifications	General Notifications							
Edit Patient Info	ormation							
Record Data	Record Data Record History							
	Question Packages							
	-	Juestion Package	Last Update	Updated By	Status			
Consolidate	<u>d</u>				Incomplete			

	Question Package	
onsolidated		

Submersion Question Package (2 of 3)

Enter the required information indicated by the asterisks (*).

Consolidated Question Package -	- Hospital Submersion		
▼ Event			
*Injury/Incident Date and Time	mm/dd/yyyy hh:mm	*Injury/Incident Date and Time (Null Values)	Please Select 🔹
*Incident Street Address			
*Incident State	Texas		
*Incident City		*Incident City (Null Values)	Please Select
*Incident Zipcode		*Incident Zipcode (Null Values)	Please Select
*Incident County	Please Select	*Incident County (Null Values)	Please Select
*Incident Country	Please Select		
Where did the incident occur?	Please Select	Where did the incident occur? (Null Values)	Please Select
Where was Water / Swimming Pool Located? (if applicable)	Please Select	Where was Water / Swimming Pool Located? (if applicable) (Null Values)	Please Select 🔹
What activity was the individual doing at the time of incident?	Please Select	What activity was the individual doing at the time of incident? (Null Values)	Please Select
Was this Incident Motor Vehicle Related?	Please Select	Was this Incident Motor Vehicle Related? (Null Values)	Please Select
What type of floatation device was the individual wearing at the time of the incident, if any?	Please Select	What type of floatation device was the individual wearing at the time of the incident, if any? (Null Values)	Please Select
Was the event witnessed?	Please Select	Was the event witnessed? (Null Values)	Please Select

Submersion Question Package (3 of 3)

- Complete the three sections Event, Individual Information, and Hospital Arrival/Discharge.
- Click **"Save"**.

Cance

Consolidated Question Package -	- Hospital Submersion			
• Event				
Individual Information				
 Hospital Arrival/Discharge 				_
The date the individual arrived at the emergency department (ED) or hospital	mm/dd/yyyy			
The date the individual was discharged from the hospital	mm/dd/yyyy	The date the individual was discharged from the hospital (Null Values)	Please Select	
The date the individual was discharged from the emergency department (ED)	mm/dd/yyyy	The date the individual was discharged from the emergency department (ED) (Null Values)	Please Select	
*The individual's disposition at the time of discharge	Please Select	*The individual's disposition at the time of discharge (Null Values)	Please Select	
*Indicates required field				

Patient Record Summary (1 of 2)

To view the Submersion Patient Record Summary, select "Entity > Hospital > Hospital Patient Submersion Patient Record".



Patient Record Summary (2 of 2)

On this screen you can view the submersion patient records for your facility.

Hospital Facility Hospi	tal Patient Hospital Submersion Patient	Hospital TBI SCI Patient			
(Entities	1 - 2 of 2, Page: 1/1)	► 50 ► + Add	New Entity + Clear filter	Export Patient Record Hospital Su	bmersion(s)
Record ID \$	First Name ≎	Middle Name \$	Last Name \$	Status \$ Action	
1000001976	Crystalb		Testb	Record Deta	ils
100002673	crystal		test2 Ope	en <u>Recor</u> r' <u>eta</u>	ils
	(Entities 1 -	2 of 2, Page: 1/1)	1 🔛 🕨 50 🗸		

To view a specific record, click "Record Details".

Record Details

NOTE – The patient record will be highlighted.

Record Summary Example (1 of 2)

A complete record summary example.

Basic Informa	tion	Notes	Notes Details		
Record ID	1000001976		UserNan	e Entry Date	Notes
Record Type	Patient Record - Hospital Submersion		No records found.		
Person	<u>Crystalb</u> Testb	255 characters remaining			
Status		✓ Save			
UUID					
Notifications	General Notifications				
dit Patient Info	rmation				
Record Data	Record History		Question Packages		
	Question	Package	Last Update	Updated By	Status

Record Summary Example (2 of 2)

The **Record History** tab provides record update details.

		Record History	
Time	Event	Message	User
10/11/2023 11:58 AM	Case Property updated	Edit Entity Information updated	Crystal Hospital
10/11/2023 11:56 AM	Question Package updated	Updated Question Package : Consolidated Question Package	Crystal Hospital
09/26/2023 08:43 AM	Case Created	Created Patient: Crystalb Testb	Crystal Hospital

Report Format Review



Texas Department of State Health Services

Accessing Reports

JP TBI SCI Data Dictionary

			Home Create	Record Search Record Workflows File Upload Entity Reports Admin Settings Logot
TEXAS Health and Human Services Health Services	Welco	ome to Texas Emergency and Trauma Registry	y Medical Services y System	Submission Status-XML Files No Reportable Data
Workflows				
Workflow Queue		Events		Reports Admin Settings Logout
 Recently Accessed Records 				Submission Status-XML Files No Reportable Data
Record Id	1	Name	Record Type	Data Submission
1000002685	(CPatient TestO	Patient Record - Hos	Additional Reports
1000001532	1	Test Crystal	Patient Record - Hos	Additional Reports
1000001976	(Crystalb Testb	Patient Record - Hospita	al Submersion
1000002673		crystal test2	Patient Record - Hospita	al Submersion
544		crystalhospital2	Hospital	
				More
Resources				
TX EMS/Trauma Home DSHS	1	TX EMS Trauma Systems DSHS	NHTSA.gov - Fundam	ental Components of Trauma Care
National EMS Information System	2	Glossary	NEMSIS Data Diction	ary
NTDS Data Dictionary	I	ITDX/NTDB Data Dictionary	JP Submersion Data I	Dictionary

NEMSIS Webservices User Guide

Rehab LTAC TBI SCI Data Dictionary

Hospital Reports

Administrators can access the following reports:

- Hospital Data Validity Report;
- Hospital Records Submitted by Submission Date & User;
- Hospital Records Submitted by Admission Month & Year;
- Trauma Care Report;
- Entity Reference Codes; and
- Entity No Reportable Data (NRD) Report.

Report Guide: EMSTR Reports - SHARP Reporting Guide (March 2024)

Common Errors / Issues

- Version number List the software version (v2020 or 2023) in first line of xml file: <ItdxRecords ItdxVersion="Itdx_v2020">
- Glasgow Coma Score (GCS) should be GCS or GCS 40 Both cannot be coded. Use GCS selections and code GCS 40 as Not known / Not recorded.
- Co-morbidity codes should comply with software version used.
- Record numbers for errors should be listed on feedback report.

If facility DSHS ID number is not activated, notify injury.web@dshs.texas.gov

Account Management



Texas Department of State Health Services

IAMOnline Home Page

Account management is available through IAMOnline.



Forgot Password (1 of 2)

- If you forget your password, you can reset it on your own.
- From the IAMOnline sign-in page, type your username in the **"Username"** box.

TEXAS Health and Human Services
IAMOnline - Sign In
Username
Keep me signed in
Next
Forgot Password? (HHS/DSHS Emails Only)
Request account as non-HHS employee, or register organization
Sign Acceptable Use Agreement

Forgot Password (2 of 2)



Reset Your Password (1 of 3)

Choose the **"Email"** or **"Phone"** method and click the **"Select"** button.



Reset Your Password (2 of 3)

- After selecting either Phone or Email, the system will prompt you to receive a code via SMS or Email.
 - NOTE The phone option was selected in this example.
- Select the "Receive a code via SMS" button to receive a verification code.



Reset Your Password (3 of 3)

- Step 1 Once you receive your verification code, enter it in the "Enter Code" box.
- Step 2 Select the **"Verify"** button.

TEXAS Health and Human Services	
Verify with your phone	
iohn.test7@amail.com	
(g) john teotr (gynameen)	
A code was sent to +1 XXX-XXX-8931. Enter the code below to verify.	
Carrier messaging charges may apply	
Enter Code	
1	ſ
<u></u>	
Verify	2
<u>Verify with something else</u> <u>Back to sign in</u>	_
Create a new account as a citizen	
Request account as non-HHS employee, or register organization	
Sian Acceptable Use Agreement	

IAMOnline Password Reset (1 of 2)

- After you enter your verification code, the system will redirect you to the Reset your IAMOnline password page.
- Step 1 Enter your new password in the "New password" box.
- Step 2 Re-enter your password in the "Re-enter password" box.



IAMOnline Password Reset (2 of 2)

Once you create a new password and re-enter your password, select the **"Reset Password"** button.

Reset your IAMOnline password	
Ø john.test7@gmail.com	
Password requirements:	
At least 0 sharestors	
At least 8 characters	
A jumercase letter	
A number	
A symbol	
No parts of your username	
Does not include vour first name	
Does not include vour last name	
Your password cannot be any of your last 6 passwords	
At least 1 day(s) must have elapsed since you last changed your pass	word
lew password	
	-
	C
e-enter password	
e-enter password	C
e-enter password	©
	٥
e-enter password	©
Sign me out of all other devices.	٥
Sign me out of all other devices.	٢
Sign me out of all other devices.	•

Reset Password Complete

After resetting your password, you will be logged in, and the system will redirect you to the **My Apps** dashboard.







Your account will lock after multiple incorrect password attempts. The system will send an email notifying you the account will automatically unlock after 30 minutes.



If you do not remember your password after the account unlocks, please reset your password.

Update Account (1 of 2)

TEXAS Realth and Human Services	Q Search your apps	DEV IAMOnline 🗡
🔒 My Apps	My Apps	
Acceptable User Agreem		
My Workflows: DEV & T	Acceptable User Agreement (AUA)	
My Applications		DEV IAMOnline
Add section 🕀		

Settings

Sign out

Preferences

Recent Activity

- On the right side of your **IAMOnline** dashboard, click the arrow to display the menu.
- Select the "Settings" link.

Update Account (2 of 2)

- Click the **"Edit"** button in the **Personal Information** section.
- Update your personal information:
 - Add a phone number;
 - Add details; and
 - Adjust security methods, including password and security questions.

Account	
L Personal Information	Edit

Edit

Injury Prevention Unit Websites

- Injury Prevention Unit: <u>dshs.texas.gov/injury-prevention</u>.
- EMSTR: <u>dshs.texas.gov/injury-prevention/ems-trauma-registries</u>.
- Hospital Registry: <u>dshs.texas.gov/injury-prevention/ems-trauma-</u> registries/hospital.
- IAMOnline Help: gatewayaw.hhs.state.tx.us/publicHelpGuide/Content/Q External/EXT HomePage.htm.
- New Platform Resources: <u>EMSTR New Platform Resources | Texas</u> <u>DSHS</u>.



Email – injury.web@dshs.texas.gov.

Data requests – <u>injury.epi@dshs.texas.gov</u>.
Thank You!

Trauma Services Registry Hospital Data Management

injury.web@dshs.texas.gov