

New Mexico Trauma Data Preliminary Report 2012

9/4/2013

Trauma Program

EMS Bureau

Epidemiology and Response Division

New Mexico Department of Health

Introduction

This preliminary report utilizes the methods described for the 2005 – 2011 report. It provides a look at a small portion of the 2012 data that has been submitted. This report will be finalized, to include a more comprehensive look at various data fields with input from the Trauma Performance Improvement Committee and TSFA, in early 2014.

RESULTS – 2012 Data

Definitive Patient Care Records (DPC)

A total of 6944 records were submitted by all reporting facilities in 2012. This number excludes the Texas facilities designated as New Mexico Trauma Centers, of which there are three (3). Figure 1 provides the percent of records submitted by level of trauma centers. There are currently 11 New Mexico trauma centers submitting data to the STR. In addition, there are nine (9) facilities submitting as part of the VTR. Of those 9, two (2) are developing trauma centers.

Figure 1

**Percent of Trauma Records Submitted by Level of Trauma Center
2012
N=6944**

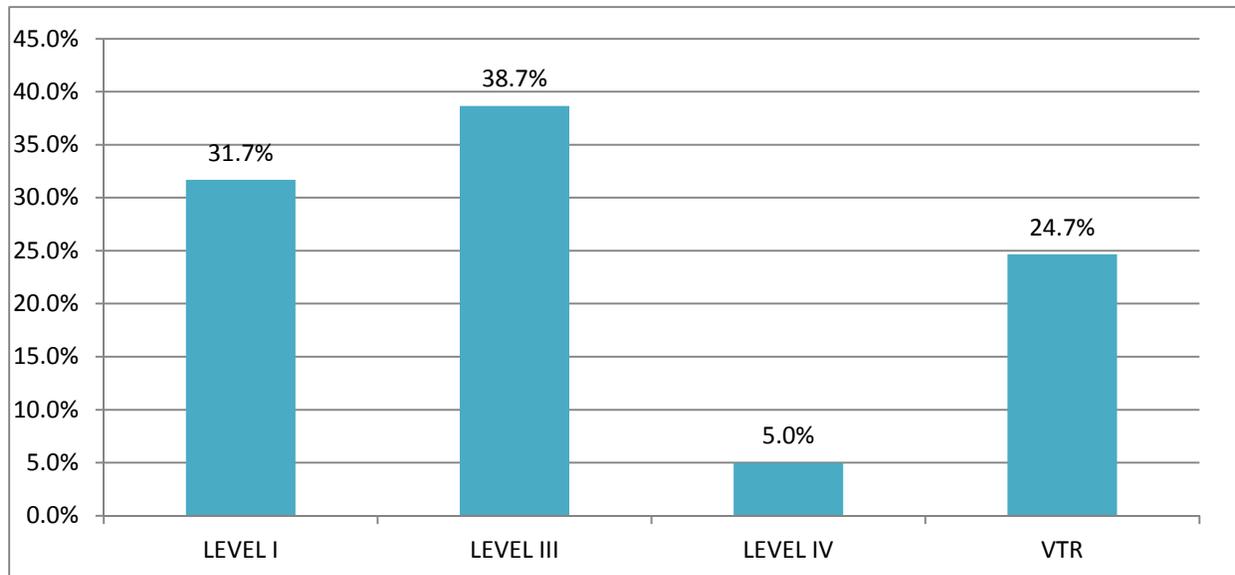


Table 1

**Number of records defined as Definitive Patient Care Records
By Reporting Level of Trauma Center
2012**

LEVEL OF TRAUMA CENTER (TC)	TOTAL
Level I Trauma Centers (1)	2200
Level III Trauma Centers (6)	2338
Level IV Trauma Centers (4)	249
VTR (9)	1325
Grand Total	6112

RESULTS

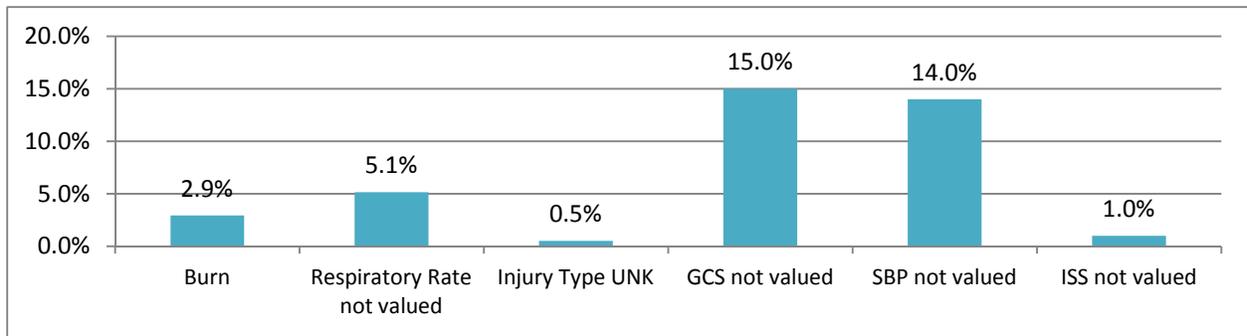
Data Quality

TRISS ANALYSIS

Figure 2 focuses on suitability for TRISS analyses. Of the 6,112 DPC records, 79.7% were suitable, down from the 2005-2011 report of 84.7%. Of the 1,243 records that were suitable the majority of records had GCS and SPB not valued. It appears that this is an education issue at the facility level for abstraction.

Figure 2

**Percent of fields not valued for TRISS analysis
2012
N=1243**

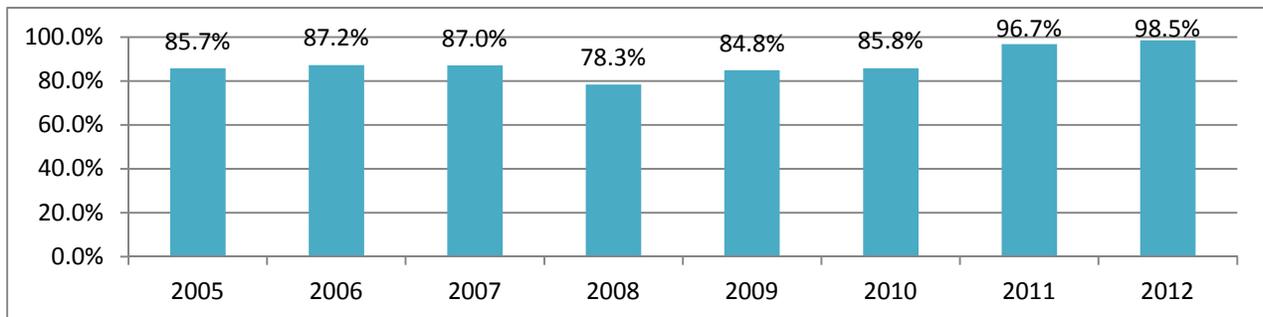


Race/Ethnicity

In Figure 3, it shows that in 2012, 98.5% of race/ethnicity were reported, which is less than 2% not reported. As a result, analysis of race/ethnicity can be significant for further study of trauma.

Figure 3

**Percent of Race/Ethnicity reported by Year
Definitive Patient Care Records
2005 through 2012
N=38401**



Demographics

The following figures and tables describe some characteristics of the population contained in the DCP records. Figure 4 shows the age and gender distribution. This is relatively unchanged from previous years. Males continue to outnumber females in all age categories, except for the age of 65 and older. The age group of 25-34, accounts for 13.6% of trauma related injuries, while >85% is number 5, with falls being the major cause of injury. All other age groups were less than 10%

Figure 4

**Age Range by Gender
Definitive Care Records
2012
N=6112**

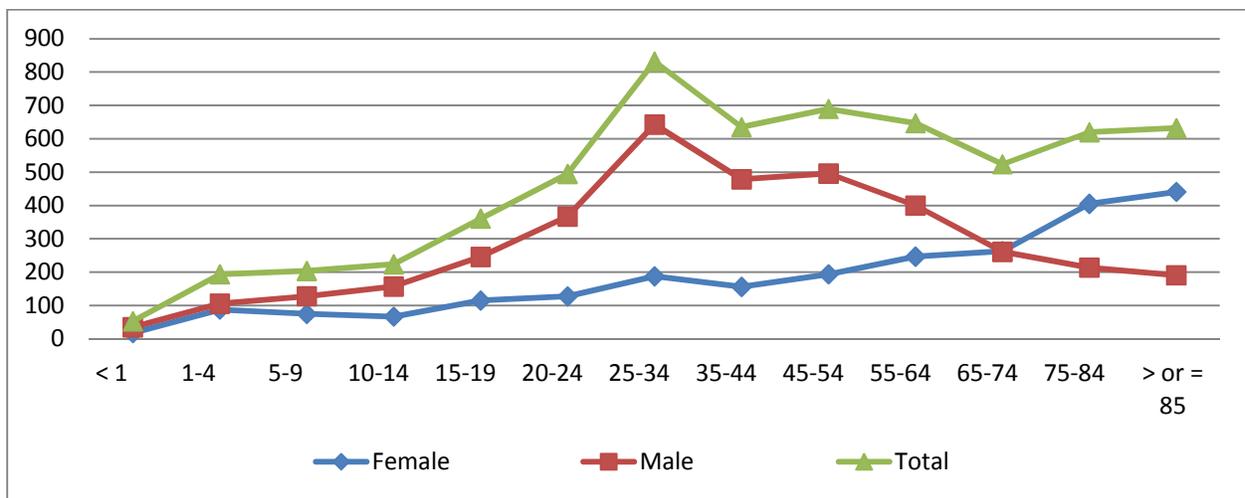
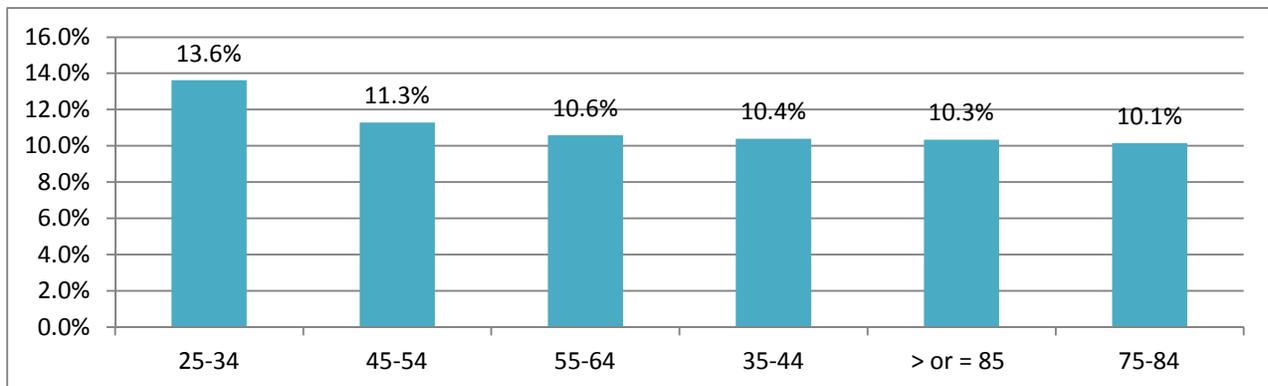


Figure 5

**Trauma Records by Age Range
Definitive Patient Care Records
N=6112**

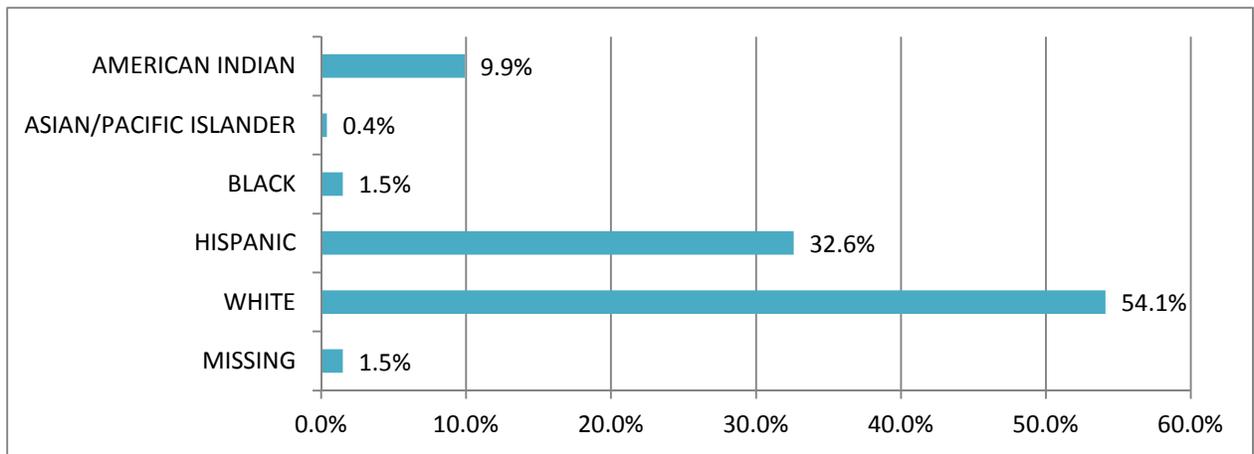


Race/Ethnicity

Figure 6 shows an increase from the 2005-2011 report for category of White from 44.7% to 54.1% in 2012.

Figure 6

Percent of Trauma Records by Race/Ethnicity Definitive patient Care Records 2012 N=6112



Alcohol/Drug Testing

As noted by Tables 2 and 3 an increase in reporting is noted for alcohol and drug use. There is a decrease in missing values for alcohol from 85.7% in the 2005 through 2011 report to 16.3% in 2012, and drug use from 79.1% to 38.8%. There is also an increase in testing for alcohol from 8.2% to 41.3%.

Table 2

Alcohol Use Definitive Patient Care Records 2012

ALCOHOL USE	NUMBER	PERCENT
No (not suspected - not tested)	2482	40.6%
No (confirmed by test)	1595	26.1%
Yes (confirmed by test - trace levels)	634	10.4%
Yes (confirmed by test - beyond legal limit)	404	6.6%
Missing	997	16.3%
TOTAL	6112	100.0%

Table 3

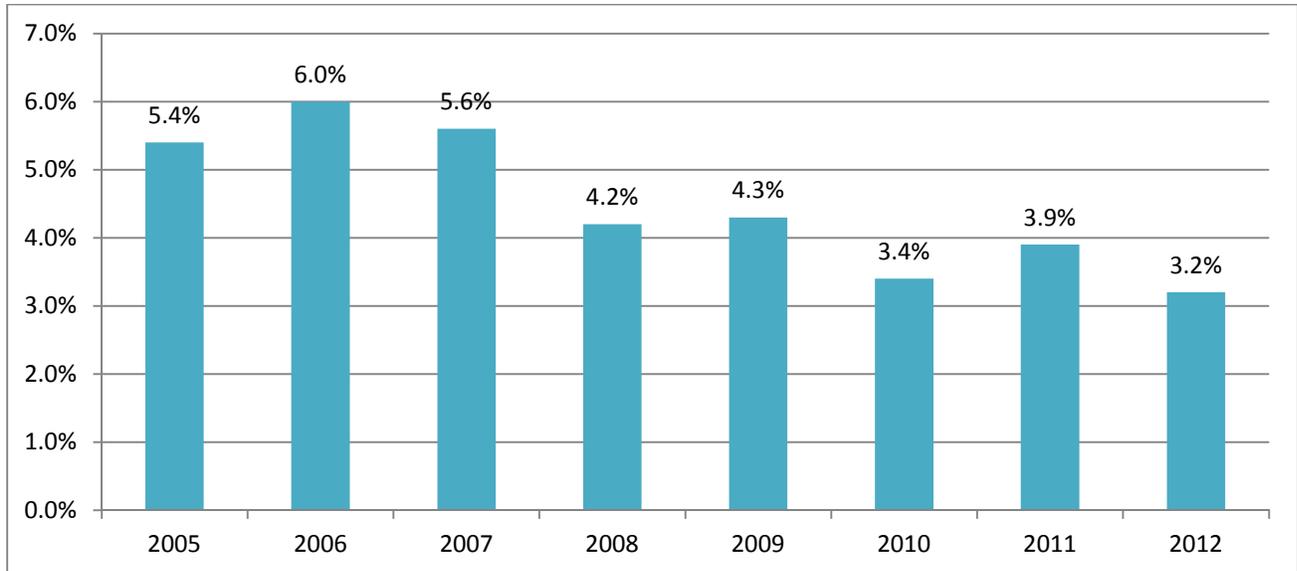
Drug Use Definitive patient Care Records 2012

DRUG USE	NUMBER	PERCENT
No (not suspected - not tested)	2868	46.9%
No (confirmed by test)	273	4.5%
Yes (confirmed by test – prescription drug)	228	3.7%
Yes (confirmed by test – illegal drug use)	369	6.0%
Missing	2374	38.8%
TOTAL	6112	100.0%

Figure 7 shows patients discharged from facilities with an outcome of dead. The average mortality has decreased from 5.4% in 2005 to 3.2% in 2012.

Figure 7

**Percent of Trauma Records with an Outcome of Death
Definitive Patient Care Records
2012
N=201**



Transfers to UNM

Figure 8 shows the percentage of trauma patients seen at UNMH for each year from 2007 – 2012 that were transfers from other facilities. Figure 9 is the percentage of trauma patients seen at UNMH for each year shown that were transferred specifically from Level III trauma centers, while Figures 10 & 11 are the percentages of trauma patients seen at UNMH that were transferred from Level IV trauma centers and non-designated hospitals, respectively. Please note that, in all four graphs, the percentage shows a decrease from 2007 to 2012.

Figure 8

Transfers to UNM from All Facilities 2007 through 2012 N=4305

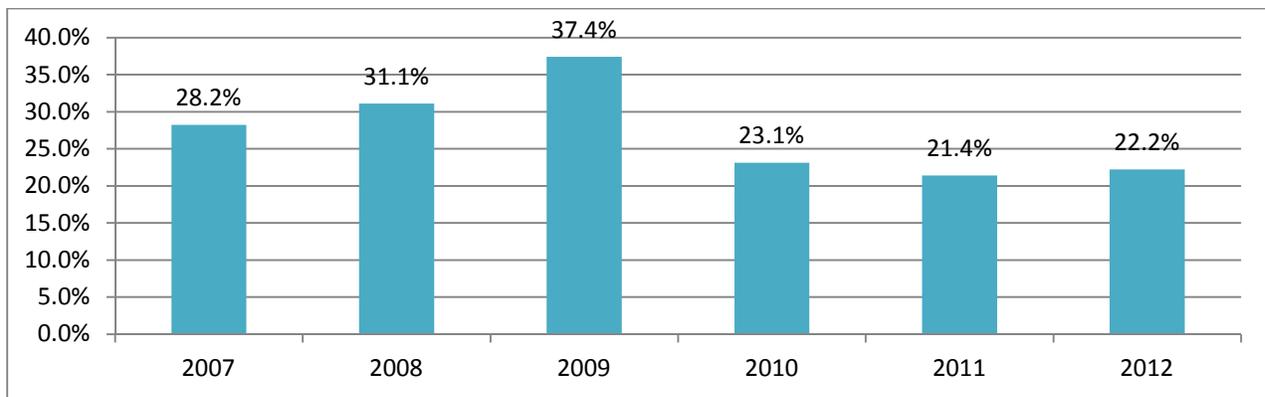


Figure 9

Transfers to UNM from Level III Trauma Centers 2007 through 2012 N=675

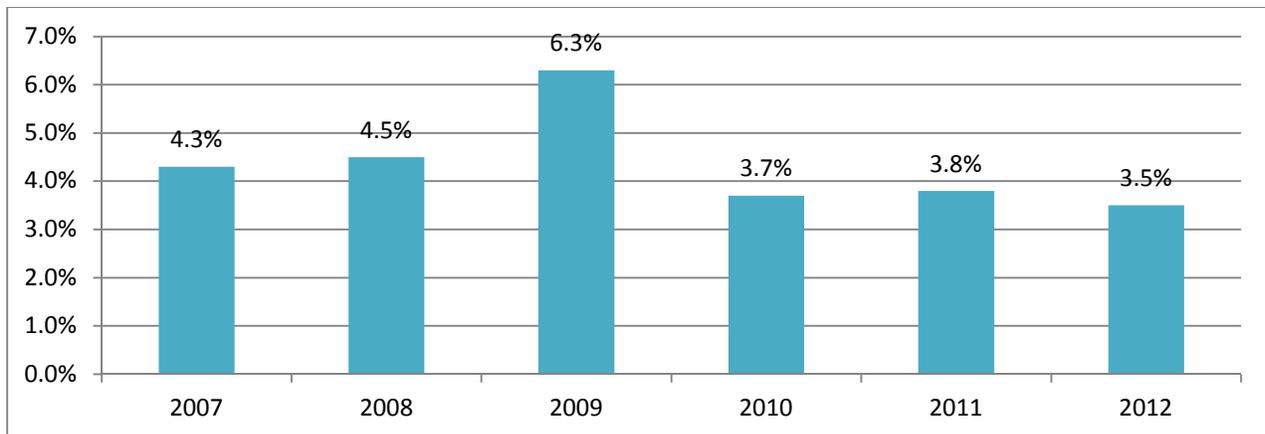


Figure 10

**Transfers to UNM from Level IV Trauma Centers
2007 through 2012
N=276**

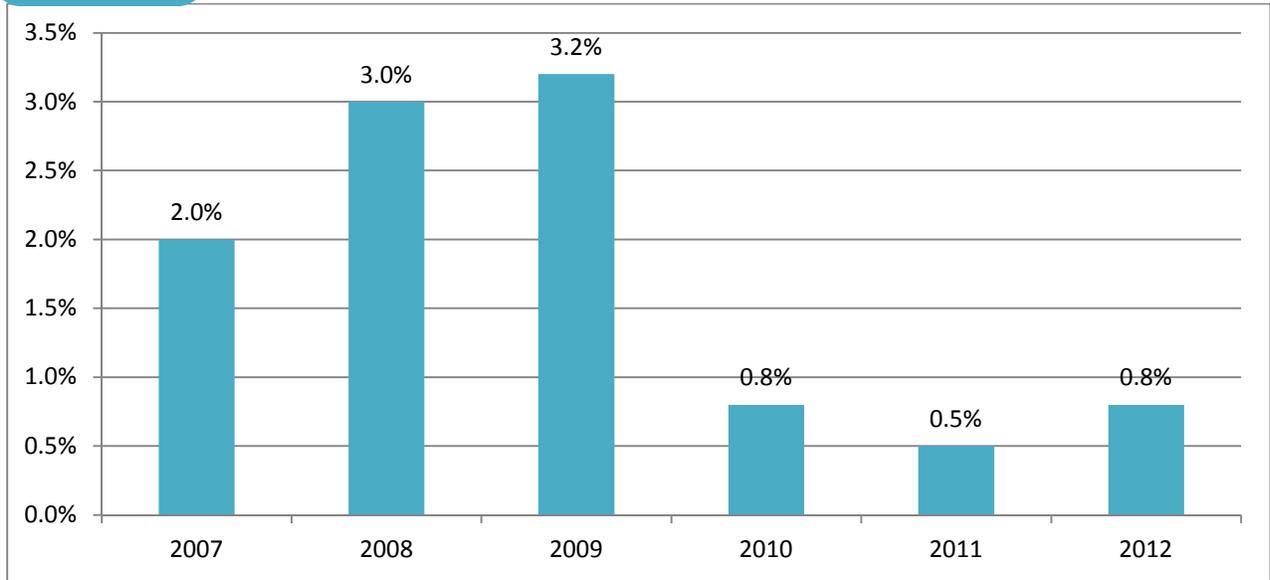


Figure 11

**Transfers to UNM from Non-Trauma Centers
2007 through 2012
N=3354**

