

# Minnesota Trauma Registry Inclusion Criteria

Does the patient have at least one ICD10-CM diagnosis code or does the clinical condition support an ICD10-CM code of:  
 S01 – S99 with 7<sup>th</sup> character of A, B or C  
 T07, T14  
 T20 – T28 with 7<sup>th</sup> character of A  
 T30 – T32 (burns, frostbite)  
 T33 – T34 with 7<sup>th</sup> character of A (burns, frostbite)  
 T59.81 with 7<sup>th</sup> character of A (smoke inhalation)  
 T71 with 7<sup>th</sup> character of A (asphyxiation)  
 T74.4 with 7<sup>th</sup> character of A (shaken infant syndrome)  
 T75.0 with 7<sup>th</sup> character of A (lightning)  
 T75.1 with 7<sup>th</sup> character of A (drowning)  
 T75.4 with 7<sup>th</sup> character of A (electrocution) or  
 T79.A1 – T79.A9 with 7<sup>th</sup> character of A (traumatic compartment syndrome)?

No

Yes

Was the patient injured while admitted to the hospital?

Yes

No

Are the only ICD10-CM diagnosis codes one or more of the following:  
 S00, S10, S20, S30, S40, S50, S60, S70, S80, S90 (superficial injuries and contusions); Or S72.00-S72.26 (hip/femoral neck fracture) and coded with...  
 W00 (due to ice and snow)  
 W01 (slip, trip, stumble)  
 W03 (collision w/ other person)  
 W05. (from non-moving wheelchair or scooter)  
 W06 (from bed)  
 W07 (from chair)  
 W08 (from other furniture)  
 W18.11 – W18.12 (from toilet)  
 W18.3 (other same level fall) or  
 W18.4 (slip, trip, stumble w/out fall)?

Yes

No

Was the hospital's trauma team activation criteria met?

Yes

No

Did the patient die as a result of the traumatic injury, in the emergency department or after admission? (Includes patients that arrive with CPR in progress.)

Yes

No

Was the patient transferred by ambulance (air or ground) for trauma care\* to or from another hospital? (Include patients who are transferred for evaluation but not admitted to the receiving facility.)

Yes

No

Was the patient admitted for care of the traumatic injury?\* (Includes patients admitted for observation.)

Yes

No

Required

Not Required

\*Admitted or transferred for trauma care excludes patients who are admitted or transferred:

- For the care of a medical or mental health condition
- For comfort care
- For pain control (not acute, traumatic fractures)
- For in-patient physical or occupational therapy
- While awaiting evaluation and placement for a living situation

Minnesota Department of Health  
 Statewide Trauma System  
 85 East 7th Place, Suite 220  
 PO Box 64882  
 St. Paul, MN 55164-0882  
 651-201-4147  
 health.trauma@state.mn.us

# Minnesota Trauma Registry Inclusion Criteria

## FLOWCHART DESCRIPTION

**Does the patient have at least one ICD10-CM diagnosis code or does the clinical condition support an ICD10-CM code of:**

- S01 – S99 with 7<sup>th</sup> character of A, B or C
- T07, T14
- T20 – T28 with 7<sup>th</sup> character of A
- T30 – T32 (burns, frostbite)
- T33 – T34 with 7<sup>th</sup> character of A (burns, frostbite)
- T59.81 with 7<sup>th</sup> character of A (smoke inhalation)
- T71 with 7<sup>th</sup> character of A (asphyxiation)
- T74.4 with 7<sup>th</sup> 7<sup>th</sup> character of A (shaken infant syndrome)
- T75.0 with 7<sup>th</sup> character of A (lightning)
- T75.1 with 7<sup>th</sup> character of A (drowning)
- T75.4 with 7<sup>th</sup> character of A (electrocution) or
- T79.A1 – T79.A9 with 7<sup>th</sup> character of A (traumatic compartment syndrome)?
  - If no, inclusion not required.
  - If yes, move to next question.

**Was the patient injured while admitted to the hospital?**

- If yes, inclusion not required.
- If no, move to next question.

**Are the only ICD10-CM diagnosis codes one or more of the following: S00, S10, S20, S30, S40, S50, S60, S70, S80, S90 (superficial injuries and contusions); or S72.00-S72.26 (hip/femoral neck fracture) and coded with:**

- W00 (due to ice and snow)
- W01 (slip, trip, stumble)
- W03 (collision with other person)
- W05 (from moving wheelchair or scooter)

- W06 (from bed)
- W07 (from chair)
- W08 (from other furniture)
- W18.11 – W18.12 (from toilet)
- W18.3 (other same level fall) or
- W18.4 (slip, trip, stumble without fall)?
  - If yes, inclusion not required.
  - If no, move on to next question.

### **Was the hospital's trauma team activation criteria met?**

- If yes, inclusion required.
- If no, move on to next question.

### **Did the patient die as a result of the traumatic injury, in the emergency department or after admission? (Includes patients that arrive with CPR in progress).**

- If yes, inclusion required.
- If no, move on to next question.

### **Was the patient transferred by ambulance (air or ground) for trauma care to or from another hospital? (Include patients who are transferred for evaluation but not admitted to the receiving facility).**

- If yes, inclusion required.
- If no, move on to next question.

### **Was the patient admitted for care of the traumatic injury? (Includes patients admitted for observation).**

- If yes, inclusion required.
- If no, inclusion not required.'

For the purposes of this document, admitted or transferred for trauma care excludes patients who are admitted or transferred:

- For the care of a medical or mental health condition
- For comfort care

## MINNESOTA TRAUMA REGISTRY INCLUSION CRITERIA

- For pain control (not acute, traumatic fractures)
- For in-patient physical or occupational therapy
- While awaiting evaluation and placement for a living situation

Minnesota Department of Health  
Statewide Trauma System  
625 Robert St. N  
PO Box 64975  
St. Paul, MN 55164-0882  
651-201-4147  
[health.trauma@state.mn.us](mailto:health.trauma@state.mn.us)  
[www.health.state.mn.us](http://www.health.state.mn.us)

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*To obtain this information in a different format, call: 651-201-4147.*