


The Role of the Autopsy Report in Trauma Registry

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❖ I have no disclosures




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BACKGROUND

- ❖ Trauma Center
 - State Designated
 - American College of Surgeons Committee on Trauma (ACS-CoT) Accredited



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Questions from Consultants Hierarchical Coding

❖ Q: CT scan abdomen/pelvis – spleen normal; kidneys and adrenal glands normal; liver laceration grade IV injury – multiple deep lacerations. The patient is taken to OR where the operative note states liver laceration grade V injury. What would you code?

541828.5 Parenchymal disruption of >75% of a lobe or >3 Couinaud's segments in one lobe.

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AIS 2005	Injury Description	=> AIS98	=< AIS98
541899.2	Liver NIS	541899.2	541899.2
	Read coding rule for "Duct Involvement" (page 90).		
541810.2	contusion; hematoma NIS	541810.2	541810.2
541812.2	subcapsular, <50% surface area, or nonexpanding; intraparenchymal <10cm in diameter; minor; superficial [CIS I-III]	541812.2	541812.2
541814.3	subcapsular, >50% surface area or expanding; ruptured subcapsular or parenchymal; intraparenchymal >10cm or expanding; major [CIS III]	541814.3	541814.3
541820.2	laceration NIS	541820.2	541820.2
541822.2	simple capsular lacer; <3cm parenchymal depth; <10cm long; minor; superficial [CIS II]	541822.2	541822.2
541824.3	>3cm parenchymal depth; major duct involvement; moderate [CIS III]	541824.3	541824.3
541826.4	parenchymal disruption >75% hepatic lobe; multiple lacerations >3cm deep; "burst" injury; major [CIS III]	541826.4	541826.4
541828.5	parenchymal disruption of >75% of hepatic lobe or >3 Couinaud's segments within a single lobe; or involving retrohepatic vena caval, central hepatic veins; massive; complex [CIS IV]	541828.5	541828.5
541830.6	hepatic avulsion (total separation of all vascular attachments) [CIS V]	541830.6	541830.6
541840.4	rupture	541840.4	541840.4
	Use "rupture" only when a more detailed descriptor is not available.		
542099.2	Accessory NIS	542099.2	542099.2
542010.2	contusion; hematoma	542010.2	542010.2
542020.2	laceration NIS	542020.2	542020.2
542032.2	minor; superficial	542032.2	542032.2
542034.3	major	542034.3	542034.3
542026.4	massive; avulsion; complex; tissue loss	542026.4	542026.4

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Questions from Consultants (Continued)

❖ My trauma surgeon notes indicate the patient had a flail chest, but the autopsy report does not indicate this, only 6 unilateral (right) rib fractures.

Which should I score?

I would score as 6 unilateral rib fractures (450203.3) not > 5 flail ribs (450213.4)

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??? Questions from Consultants (Continued)

- ❖ A patient was rushed to the OR and they found certain injuries after opening a chest or abdomen. Some injuries are found and listed in the OP note but not listed in the autopsy report.
- ❖ How do I code?

Based upon the autopsy report

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Questions from Consultants (Continued)

- ❖ The Electronic Medical Record (EMR) contains a CT of the Abdomen/Pelvis that notes a grade IV liver laceration. The autopsy report states "There is a 1.2 cm parenchymal laceration of the liver". This is consistent with a grade III laceration.

The radiology report would give me a higher ISS score, why wouldn't I use that?

The autopsy report is considered more accurate than the CT

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Questions from Consultants (Continued)

- ❖ Why can't the ME grade injuries rather than using vague terms?

It is not required that the ME grade injuries, but only that they accurately and completely document them in the report.

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Questions from Consultants

- ❖ My facility does not get autopsy reports. What can I do?

Open a dialog between the Trauma Program and the ME/C office. There is no federal prohibition (e.g. HIPAA) to such information sharing and state/local statutes should encourage this public health information sharing.

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Questions from Consultants (Continued)

- ❖ This patient died in our hospital, but there was no autopsy performed. How do I get updated injury information?

You can't. But had an autopsy been performed, the information for the trauma system could have been more accurate.

This is the public health contribution of the ME/C and the Performance Improvement goal of the trauma program

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