The Role of the Autopsy Report in Trauma Registry

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Background
- I have no disclosures
- Trauma Center
  - State Designated
  - American College of Surgeons Committee on Trauma (ACS-CoT)
  - Accredited
The Role of HIPAA in Obtaining Autopsy Reports

"According to your HIPAA release form, I can't share anything with you."

ABBREVIATED INJURY SCORE (AIS)
- Abbreviated Injury Score (AIS)
  - Scale of 1-6
  - Body Regions
    - Head/Neck
    - Face
    - Thorax
    - Abdomen
    - Extremities
    - External

Injury Source Hierarchy

- Warning of Most Reliable Sources of Injury Information
- In-Depth Autopsy Reports
- Crematory Reports
- Toxicology Reports
- Radiology
- Pathology
- Records
- Death Certificate

Level of General Availability
- Complete Set
- Complete Set
- Complete Set
- Complete Set
- Complete Set
- Complete Set
- Complete Set
- Complete Set
Other Information Available from the ME/C

- Demographics
- Injury Description
- Scene Information (such as address)
- Mechanism of Injury
  - Position in vehicle
  - Restraints, airbags, crash helmets
- Pre-existing conditions

Injury Severity Score (ISS)

- Possible Values
  - 1-75
  - AIS of 6 automatically generates an ISS of 75
  - Major Trauma – ISS > 15

New Injury Severity Score (NISS)

- Three most severe injuries overall
**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 Couinard’s segments in one lobe.

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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)
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

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

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.
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.

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.