

CHAPTER 136
TRAUMA REGISTRY

Chapter rescission date pursuant to Iowa Code section 17A.7: 6/1/30

641—136.1(147A) Definitions. For the purposes of these rules, the following definitions apply:

“Health care providers” for the purpose of this chapter includes licensed physicians, advanced registered nurse practitioners, physician assistants, and registered nurses.

“Inclusion criteria” means criteria determined by the department and adopted by reference to determine which trauma patients are to be included in the trauma registry.

“Reportable patient data” means data and definitions determined by the department to be reported to the trauma registry on trauma patients meeting the inclusion criteria.

“Trauma care facility” means the same as defined in Iowa Code section 147A.21.

“Trauma patient” means a victim of an external cause of injury that results in major or minor tissue damage or destruction caused by intentional or unintentional exposure to thermal, mechanical, electrical or chemical energy, or by the absence of heat or oxygen.

“Trauma registry” means the data repository approved by the department to collect and analyze reportable patient data on the incidence, severity, and causes of trauma, and that serves as the central registry for brain and spinal cord injuries described in rule 641—21.1(135) and farm-related injuries.

“Trauma survey team” means a group of health care providers contracted by the department to assist in verifying trauma care facilities’ compliance with trauma criteria adopted by reference in 641—subrule 134.2(3).

[ARC 9077C, IAB 4/2/25, effective 6/1/25]

641—136.2(147A) Trauma registry.

136.2(1) Trauma care facilities shall submit reportable patient data electronically to the department. Data shall be submitted in the trauma registry format approved by the department. The department may require those requesting the data to pay any or all of the reasonable costs associated with furnishing the reportable patient data.

136.2(2) Quality assurance of reported data.

a. For the purpose of ensuring the completeness and quality of reportable patient data, the department or its designated trauma survey team may examine medical records to validate the accuracy of data submitted by a trauma care facility.

b. Review of medical records by the department or its designated trauma survey team may be scheduled in advance with the trauma care facility.

[ARC 9077C, IAB 4/2/25, effective 6/1/25]

641—136.3(147A) Offenses and penalties. All complaints, offenses and penalties will be addressed pursuant to rule 641—134.3(147A).

[ARC 9077C, IAB 4/2/25, effective 6/1/25]

These rules are intended to implement Iowa Code section 147A.26.

[Filed 11/14/96, Notice 10/9/96—published 12/4/96, effective 1/8/97]

[Filed 1/13/05, Notice 11/24/04—published 2/2/05, effective 3/9/05]

[Filed 9/13/07, Notice 8/1/07—published 10/10/07, effective 11/14/07]

[Filed ARC 9444B (Notice ARC 9343B, IAB 1/26/11), IAB 4/6/11, effective 5/11/11]

[Filed ARC 3106C (Notice ARC 2902C, IAB 1/18/17), IAB 6/7/17, effective 7/12/17]

[Filed ARC 3834C (Notice ARC 3706C, IAB 3/28/18), IAB 6/6/18, effective 7/11/18]

[Filed ARC 5528C (Notice ARC 5271C, IAB 11/18/20), IAB 3/24/21, effective 4/28/21]

[Filed ARC 9077C (Notice ARC 8523C, IAB 12/11/24), IAB 4/2/25, effective 6/1/25]