

NEW MEXICO DEPARTMENT OF HEALTH  
EMERGENCY MEDICAL SYSTEMS BUREAU  
TRAUMA PROGRAM

## TRAUMA REGISTRY DATA RELEASE POLICY

The New Mexico Department of Health/Emergency Medical Systems Bureau/Trauma Program/ Trauma Registry (NMDOH/TR) Data Release Policy is created to assist other agencies and organizations in the performance of health planning and policymaking functions, including identifying personnel, facility, education and other resource needs and allocating financial, personnel, and other resources where appropriate.  
(24-14A-3 NMSA and 7.27.7NMAC)

It is the intent of the NMDOH/TR that:

- 1.) Confidentiality of patients, facilities, physicians and/or services be protected;
- 2.) Legitimate and responsible use of trauma registry data for the purposes of promoting research, education, injury prevention, and peer review be insured and,
- 3.) Trauma registry data is represented accurately and without prejudice to an individual or institution.

Dissemination of aggregate data

- 1.) The NMDOH/TR will disseminate aggregate data. Aggregate data is obtained by combining like data in a manner that precludes specific identification of a single client or provider.
- 2.) A report in printed format that provides information of use to the general public shall be produced annually and be made available upon request.  
(24-14A-7a NMSA) (7.27.7.10C1aNMAC)

Dissemination of identifiable data

- 1.) A data provider may obtain data it has submitted to NMDOH/TR, as well as aggregate data, but it may not access data submitted by another provider, which is limited only to that provider. In no event may a data provider obtain data regarding an individual patient except in instances where the requesting provider originally submitted that data. (24-14A-6b NMSA)
- 2.) The NM DOH/TR may approve requests for data and other information from an approved regional process improvement program or a scientific research professional associated with a scientific research organization for special studies and analyses, consistent with requirements for confidentiality of patient records. (7.27.7.10D3 NMAC)

## Confidentiality

- 1.) Health information collected and disseminated is strictly confidential and shall not be a matter of public record or accessible to the public except as a statistical study or research report which in no way identifies individual patients directly or indirectly nor in any way violates the privileged or confidential nature of the relationship and communications between practitioner and patient. (14-6-1 NMSA)
- 2.) Data elements related to the identification of an individual patient, provider, and/or hospital/healthcare facility and/or any outcomes shall be confidential. (7.27.7.10D1 NMAC) Persons with access to information collected under these regulations shall use the information for only those purposes stipulated on the Data Request Form. (7.27.7.10D2 NMAC)
- 3.) Confidential data will be destroyed or returned to the NM DOH/TR upon completion of the research project.

## General provisions

- 1.) Any release of results or conclusions from any report or research project derived from NMDOH/TR data is to be submitted to the NMDOH/EMSB/Trauma Program for review prior to release.
- 2.) All data provided are the property of the NM DOH/TR. Appropriate written acknowledgement of NM DOH/TR shall be made in any publications or presentations in which NM DOH/TR data are used.

## Data Request Review Committee (DRRC)

- 1.) The NMDOH/TR shall establish an advisory committee to assist it in reviewing data requests and determining report formats.
- 2.) Members of the DRRC shall be from NMDOH/Epidemiology and response Division.
- 3.) Members shall meet quarterly or as needed.

## Procedure to request data

- 1.) Data request forms may be obtained from the New Mexico Emergency Medical Systems Bureau Web Site <http://www.nmems.org/>, or from the NMDOH/TR.
- 2.) Submit written or electronic requests for data to the NMDOH/TR.
- 3.) The NM DOH/TR staff and/or the NMDOH/TR Data Request Review Committee will review data requests.
- 4.) NM DOH/TR will notify the requestor of the determination of the request within 3 weeks of receipt of the request. If a determination cannot be made within the 3 week time frame, the NM DOH/TR will notify the requestor of the delay.
- 5.) If a request is denied, the NMDOH/TR will offer support and expertise to enable the requestor to reformat/resubmit the request.

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TRAUMA PROGRAM PROCEDURE FOR  
RELEASING DATA

The New Mexico Department of Health/Emergency Medical Systems Bureau/Trauma Program/Trauma Registry (NM DOH/TR) Internal Guidelines: Data Release is created to assist other agencies and organizations in the performance of health planning and policymaking functions, including identifying personnel, facility, education and other resource needs and allocating financial, personnel, and other resources where appropriate. (24-14A-3 NMSA)

Procedure

- 1) The NM DOH/TR will respond to written or e-mailed requests for data within 3 weeks of the receipt of the request.
- 2) The Trauma Program Manager (TPM) or designee shall receive all written or e-mail requests for data dissemination.
- 3) The TPM or designee will present the request to the Trauma Program staff for review.
- 4) If the NM DOH/TR cannot address the data request within 3 weeks of receipt, the TRM or designee shall notify the requestor in writing, stating the reason for the delay, and offering an alternative time line for response.
- 5) If the Trauma Program staff cannot ascertain the appropriateness of the request, the Trauma Program Manager will present the request to the Data Request Review Committee (DRRC) for approval or disapproval.

- 6) If the DRRC approves the request, the TPM or designee shall notify the requestor of the status of the request and include a time frame for the dissemination of the data,
- 7) If the request is disapproved, the TPM or designee will offer support to the requestor for the redesign/resubmission of the request.
- 8) The TPM or designee shall maintain a file, log, or database of all requests for data (identifiable and public). The file, log or database will include:
  - a. Requestor's name, position, organization, and contact information;
  - b. Copies or originals of the data request form and signed confidentiality form;
  - c. Date of initial request and a copy of the request;
  - d. Person assigned to review the request and notes;
  - e. Date request was submitted to Data Request Review Committee, if applicable;
  - f. Date request was approved or disapproved and reasons for disapproval;
  - g. If approved, description of data, date data was delivered, delivery method and/or,

Date data requestor was contacted to resubmit request, if applicable.

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**DATA USE AND CONFIDENTIALITY AGREEMENT**

I hereby agree to abide by the following clauses as they relate to the use of New Mexico Department of Health Trauma Registry (NM DOH/TR) data:

1. Data must remain solely with the original project entity. In the event of a proposed change of the lead entity for the project or a proposed change of the principal investigator, the NM DOH/TR must receive a newly signed Data Use and Confidentiality Agreement within 30 days.
2. I will include, in the original Request for Data Form, a full disclosure of the safeguards used for the storage of data while that data is in my possession.
3. I will destroy confidential data or return confidential data to the NM DOH/TR upon completion of the research project.
4. I will not use and I will not permit others to use the data for purposes other than the research purpose or other purpose specified in this request.
5. I will not release, furnish, disclose, publish, or otherwise disseminate and I will not permit others to release, furnish, disclose, publish or otherwise disseminate these data in any manner other than that specified and approved by the provisions of the Data Request Form.
6. I will not use these data and I will not permit others to use these data to learn the identity of any patient, health care professional or health care facility.
7. I will not link and I will not permit others to link these data with personally identifiable records from any other data source.
8. I will hold the NM DOH/TR harmless from damages resulting from the use/misuse of these data.
9. I will make no statements and I will not permit others to make statements indicating or suggesting that interpretations made from these data are those of the data sources and/or the NM DOH/TR.
10. I acknowledge that approval by the NM DOH/TR for the release of data is not equivalent to the endorsement of the research undertaken.

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Name (print) & title of principal investigator

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Signature of principal investigator

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Date

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Organization of principal investigator

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Address

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City

State

Zip Code

**EPIDEMIOLOGY AND RESPONSE DIVISION  
EMS BUREAU/TRAUMA PROGRAM**

<http://www.health.state.nm.us/>



**STATE TRAUMA REGISTRY  
DATA REQUEST**

**January 2009**

# EMS BUREAU – TRAUMA PROGRAM DATA SHARING POLICY

## INTRODUCTION

The New Mexico Department of Health (NMDOH) –Trauma Registry is committed to improving the health of New Mexicans by sharing trauma registry data and contributing to the policy setting, program planning and performance measures of the Department of Health and other trauma program partners. We believe trauma registry data plays a crucial role in injury surveillance and reporting of public health status and conditions related to trauma. Our role also includes sharing trauma data with health program managers, epidemiologists, and researchers for the purpose of improving the health of New Mexicans.

The mission of the NMDOH - TRAUMA REGISTRY regarding quality, usefulness, and use of Trauma Registry data is in alignment with the guiding principles related to data sharing within the Department.

The NMDOH - TRAUMA PROGRAM Trauma Registry Data Sharing Policy is in alignment with the Department of Health.

A simple data request form will be required to obtain data.

Please cite the State Trauma Registry as the source of this data on all presentations or publications.

### ***Trauma Registry Reports***

The State Trauma Registrar will develop data files with defined data elements for the purposes of analysis and reporting in collaboration with NMDOH Epidemiologists. The list of these data elements will be included with the data files on each such database creation.

Note to requestors: New Mexico trauma data are confidential.

## **TRAUMA REGISTRY**

### **Data Request Requirements**

1. Please provide a thorough description of your research study or public health surveillance project. The study or project description must include:
  - a. Title and purpose.
  - b. Research study – a description of the research design, hypothesis, and statistical method.
  - c. List how, where, and if possible, when the data will be reported or presented.
  - d. Please cite the source of this data as follows:  
*" Trauma Data obtained from the NMDOH - TRAUMA REGISTRY.*



- e. Trauma Registry data may be complex, and if you are unsure what items are available from the state trauma registry, we encourage you to consult with State Trauma Registry staff.
  - f. Estimated date of completion of project/study. For public health surveillance projects, please note if the project will be ongoing.
2. Linkages of trauma data files to other data files will be performed by, or at, the NMDOH –Trauma Registry.

## TRAUMA REGISTRY DATA REQUEST FORM

**Please complete the following items:**

(Do not leave anything blank, if it does not apply please put "N/A")

<b>CONTACT INFORMATION</b>	
<b>Contact person:</b>	
<b>Title:</b>	
<b>Affiliation:</b>	
<b>Mailing address:</b>	
<b>Phone number:</b>	
<b>E-mail address:</b>	
<b>DATA REQUEST INFORMATION</b>	
<b>Date of request:</b>	
<b>Date needed:</b>	
<b>Data time frame : years/months</b>	
<b>Data Request Requirements:</b>	
Title and purpose	
Research Study <i>(A description of the research design, hypotheses, and statistical method)</i>	
How Data is to be used	
Where data is to be reported or presented	
When data will be reported or presented	
<b>Additional Comments:</b>	
<b>Signature of Requestor:</b>	
<b>Date of Request:</b>	

If you are unsure what items are available from the trauma registry files, you may request documentation from the State Trauma Registrar - NMDOH - TRAUMA REGISTRY. Trauma data may be complex and we urge you to consult with the State Trauma Registrar concerning the appropriate use of the data.

*After completion, please save this form and attach it in an E-mail to:*

***Trauma Registrar or Trauma System Manager***

*You may also send it to "Trauma Registry Data Requests" at fax number:  
505-476-8201, or the mailing address below:*

**NMDOH - TRAUMA REGISTRY**  
New Mexico Department of Health  
1301 Siler Road, Building F  
Santa Fe, NM 87507

Staff of the NMDOH - TRAUMA REGISTRY will respond to your request within two weeks of receipt. Further communication with the trauma registry may be required for approval/disapproval.