EMERGENCY MEDICAL SERVICES AND TRAUMA REGISTRIES

NEW REGISTRY USER QUICK GUIDE

TEXAS
Health and Human Services

Texas Department of State Health Services

Contents

Overview

Texas Department of State Health Services (DSHS) Emergency Medical Services and Trauma Registries (EMSTR) is a statewide surveillance system collecting reportable event data from EMS providers, hospitals, justices of the peace, medical examiners, and rehabilitation facilities.

EMSTR monitors and analyzes Texas EMS and trauma care system data by integrating National EMS Information System (NEMSIS) Version 3.5, National Trauma Data Bank (NTDB), International Trauma Data Exchange (ITDX) 2020 and 2023 hospital data standards, and Texas-specific questions.

EMSTR uses data from 22 Texas trauma services areas / regional advisory councils (RACs) to benchmark and compare Texas with other states and conduct epidemiological investigations to identify public health issues. By identifying public health issues, stakeholders can use data to support injury prevention initiatives, enhancing the efficiency and quality of care for patients in Texas.

As stated in **Texas Administrative Code Title 25, Part 1, Chapter 103, Rule 103.4**, the following responsible entities are required to report to EMSTR. This section outlines reporting requirements, deadlines, and options for each type of agency or facility.

Emergency Medical Services

Reporting Requirements

All licensed Emergency Medical Services (EMS) provider agencies must report all runs. A run is a resulting action from an assistance call where an EMS provider is dispatched to, responds to, provides care to, or transports a person. Reported runs include all dispositions for medical and traumatic emergencies and non-emergencies as well as transport and non-transport runs (including cancellations, standbys, intercepts, etc.)

EMS providers should include all required data elements listed in **NEMSIS Data Dictionary** version 3.5 using the file format described within.

Agencies who <u>only</u> operate as a licensed First Responder Organization (FRO) are not required to report to EMSTR. Licensed <u>EMS</u> providers should report all runs to EMSTR.

When there is no data for a month, the EMS agency should submit a No Reportable Data (NRD) entry.

EMS provider data submitted to EMSTR may affect the Office of EMS and Trauma Systems financial allocations to Regional Advisory Councils (RACs) and ultimately local EMS agencies.

Submission Deadlines

EMS providers must submit data within 90 calendar days from the call for assistance date. EMSTR recommends EMS providers, third-party billers, or vendors submit data monthly.

Reporting Options

EMS providers can use DSHS **EMSTR online application** for data submission.

Alternatively, EMS providers can use vendor software or a third-party vendor to submit data on their behalf. However, the EMS provider is ultimately responsible for complete, accurate, and timely data reporting to EMSTR.

Each provider must have a signed, approved, and dated Business Associate Agreement (BAA) with a third-party vendor on file with EMSTR before using third-party vendor data submitting services.

Additional Resources

- **EMS Reporting Requirements and Resources**

Hospitals

Reporting Requirements

Hospitals should report all traumatic brain injuries (TBIs), spinal cord injuries (SCIs), acute traumatic injuries, and submersions to DSHS **EMSTR online application**. In addition, EMSTR follows the inclusion criteria below along with additional standards as defined by the National Trauma Data Bank (NTDB) and International Trauma Data Exchange (ITDX):

- Hospital admission as defined by National Trauma Data Standards (NTDS) and ITDX trauma inclusion criteria;
- Patient transfer via EMS transport (including air ambulance) from one hospital to another hospital;
- Death resulting from the traumatic injury (independent of hospital admission or hospital transfer status); or
- Submersion (drowning) injuries and fatalities that present in the prehospital and hospital setting.

Hospitals should only report burn cases meeting NTDS criteria. For cases submitted under the 2023 standard, hospitals report only burns accompanied by another (included) traumatic injury. Hospitals can record the burn as a secondary, tertiary, or quaternary (fourth) injury. Do not report isolated burn cases to EMSTR.

Refer to definitions in the links below for more details on case inclusion as well as the 2020 or 2023 NTDB and ITDX inclusion criteria. For TBIs, SCIs, and submersions; hospitals must include all requested data dictionary fields in the Traumatic Brain Injury (TBI) / Spinal Cord Injury (SCI) and Submersion data dictionaries using links below.

Note: Hospital submitters of **all** designation levels – including non-designated hospital sites – must follow the **full** state Sample File and include a response for all NTDS Trauma Quality Improvement Process (TQIP) data elements. Null values (Not known / Not Recorded) are permissible.

Submission Deadlines

Hospitals must submit data within 90 calendar days from the date of discharge. EMSTR encourages hospitals and business associates to submit data monthly. When there is no data for a particular month, the hospital submits a No Reportable Data (NRD) form using the online system.

Reporting Options

Hospitals should electronically input case information into the EMSTR system for TBIs, SCIs, acute traumatic injuries, and submersions. Establish an account within EMSTR and use the online system for submitting data.

Hospitals may use their own software for file uploads to report larger volumes of acute injury cases.

Additional Resources

- **Hospital Reporting Requirements and Resources**
- **2025 Traumatic Brain Injury (TBI) / Spinal Cord Injury (SCI) Data Dictionary**
- **2025 Submersion Data Dictionary**

Long-Term Acute Care Facilities

Reporting Requirements

Long-Term Care Acute Care (LTAC) facilities must electronically report all TBIs and SCIs with any relevant data to DSHS **EMSTR online application**.

LTAC facilities should use International Classification of Diseases, 10th Revision, Clinical Modification (ICD-10-CM) diagnostic codes to identify TBI and SCI. LTACs should include all requested data entry fields in the TBI / SCI data dictionary link below.

When there is no data for a month, the facility must submit a No Reportable Data (NRD) entry.

Submission Deadlines

LTAC facilities must submit data within 90 calendar days from discharge date. EMSTR recommends LTACs or authorized business associates (i.e., vendor or registrar billing company) manually submit data monthly.

Reporting Options

LTAC facilities should use DSHS **EMSTR online application** to submit data.

Additional Resources

- **LTAC and Rehab Reporting Requirements**
- **2025 Traumatic Brain Injury (TBI) / Spinal Cord Injury (SCI) Data Dictionary**

Rehabilitation Facilities

Reporting Requirements

Rehabilitation (Rehab) facilities must electronically report all TBIs and SCIs with any relevant data to DSHS **EMSTR online application**.

Rehabs should use ICD-10-CM diagnostic codes to identify TBI and SCI. Rehabs should include all requested data dictionary fields in the TBI / SCI data dictionary link below.

When there is no data for a month, Rehabs must submit a No Reportable Data (NRD) entry.

Submission Deadlines

Rehabs must submit data within 90 calendar days from discharge date. EMSTR recommends Rehabs or authorized business associates (i.e., vendor or registrar billing company) manually submit data monthly.

Reporting Options

Rehabs should use DSHS **EMSTR online application** to submit data.

Additional Resources

- **LTAC and Rehab Reporting Requirements**
- **2025 Traumatic Brain Injury (TBI) / Spinal Cord Injury (SCI) Data Dictionary**

Justices of the Peace

Reporting Requirements

Justices of the Peace (JPs) must electronically report any TBI, SCI, and submersion occurrences as defined by the appropriate data dictionaries **not already reported** by a medical examiner (ME) to DSHS **EMSTR online application**.

Submersion is defined as the process of experiencing respiratory impairment from submersion or immersion in liquid. Refer to corresponding TBI / SCI or submersion data dictionaries for more details on case inclusion.

For specific instructions on accessing EMSTR and the data submission process, please refer to the **JP Reporting User Guide**.

Note: JPs are **not required** to report any data to the online reporting system if the ME in their region is responsible for all inquests. If a JP conducts an inquest where a reportable case is suspected, the JP must report the case to the EMSTR system.

Submission Deadlines

JPs must submit data **not already reported** by a ME within 90 calendar days from identification of a required reportable event. EMSTR recommends JPs or authorized business associates submit data monthly or as close to the reportable event as possible.

Reporting Options

JPs should use DSHS **EMSTR online application** to create a record and submit data. JPs are ultimately responsible for complete, accurate, and timely data reporting.

Additional Resources

- **Justice of the Peace Reporting Requirements and Resources**
- **Justice of the Peace Reporting Requirements Flyer**
- **2025 Traumatic Brain Injury (TBI) / Spinal Cord Injury (SCI) Data Dictionary**
- **2025 Submersion Data Dictionary**

Medical Examiners

Reporting Requirements

Medical Examiners (MEs) must electronically report any TBI, SCI, and submersion occurrences to DSHS **EMSTR online application.**

If available, MEs should use ICD-10-CM diagnostic codes to identify traumatic TBI, SCI, or submersion cases. Submersion is defined as the process of experiencing respiratory impairment from submersion or immersion in liquid. Refer to the corresponding TBI / SCI or submersion data dictionaries for more details on case inclusion.

Submission Deadlines

MEs must submit data within 90 calendar days from identification of a required reportable event. EMSTR recommends MEs or authorized business associates submit data monthly or as close to the reportable event as possible. Data should be submitted electronically, using DSHS **EMSTR online application**.

If the listed professionals or entities choose to notify a local or regional health authority to respond on their behalf, the local or regional health authority must report to EMSTR within ten business days of receiving the notification from the professional or entity.

Reporting Options

MEs should use DSHS **EMSTR online application** to submit their data. MEs are ultimately responsible for complete, accurate, and timely data reporting.

Additional Resources

- **Medical Examiner Reporting Requirements and Resources**
- **2025 Traumatic Brain Injury (TBI) / Spinal Cord Injury (SCI) Data Dictionary**
- **2025 Submersion Data Dictionary**

Physicians

Reporting Requirements

Physicians must electronically report all TBI, SCI, and submersion injuries **not already reported** by a hospital or rehabilitation facility to DSHS **EMSTR online application**.

Physicians should use the ICD-10-CM diagnostic codes to identify TBI, SCI, or submersion cases. Submersion is defined as the process of experiencing respiratory impairment from submersion or immersion in liquid. Refer to the corresponding TBI / SCI or submersion data dictionaries for more details on case inclusion. The physician is ultimately responsible for complete, accurate, and timely data reporting.

Note: A physician is exempt from reporting if a hospital or acute / post-acute rehabilitation facility admitted the patient and fulfilled reporting requirements as stated in Texas Administrative Code, **rule 103.7** (related to hospital reporting requirements) or **rule 103.8** (related to acute or post-acute rehabilitation facility reporting requirements).

Submission Deadlines

Physicians should submit data within 90 calendar days of the date of examination. EMSTR recommends physicians submit data monthly.

Reporting Options

Physicians should use DSHS **EMSTR online application** to submit data.

Additional Resources

- **2025 Traumatic Brain Injury (TBI) / Spinal Cord Injury (SCI) Data Dictionary**
- **2025 Submersion Data Dictionary**
- **Texas Administrative Code, Title 25, Part 1, Chapter 103, Rule 103.1-103.8**

Getting Set Up in EMSTR

Looking to register for EMSTR for the first time?

Through **Identity and Access Management (IAM) Online application**, a user can create a new account and request access to EMSTR. The EMSTR team must approve the request prior to the user receiving an account administrator activation link.

Entities new to the EMSTR system will need the following information to set up their account:
- Agency/facility name;
- Account administrator contact information (email address and phone); and
- Tax ID number (TIN).

For detailed instructions, see the **How to Register a New Facility with EMSTR Job Aid**.

Once an account is created, the DSHS **EMSTR online application** will assign the entity a DSHS ID number to link all patient care records to the entity. The DSHS ID number may or may not match the license number received from DSHS EMS/Trauma Systems Licensing Unit. For questions regarding licensing, visit the DSHS **Consumer Protection Division Online Licensing Help Center** webpage.

Is your organization already registered with EMSTR?

If you don't know if your organization is registered in EMSTR…

Contact EMSTR at **injury.web@dshs.texas.gov** and staff can assist you in getting access to your account.

If your organization is registered and your account administrator is still active in your organization:

Register with **IAMOnline** and request access to EMSTR as an additional user for your facility. See the **How to Request an EMSTR Account as an Additional User Job Aid** for detailed instructions.

If your account administrator no longer works at your organization:

If your organization has an email address that may have been used to register for EMSTR, you can use the "Forgot Password?" page on **IAMOnline** to attempt to reset your password. If there is an IAMOnline account associated with that email address, you will receive an email with your username and a link to reset your password.

If your organization does not have a shared email address or you cannot recover your username/password via "Forgot Password?", contact EMSTR support at **injury.web@dshs.texas.gov** to gain access to your account.

If you know your username and password, but haven't logged in for 90+ days:

If your organization/user account has been inactive for 90+ days, the account will need to be reactivated in **IAMOnline** and you will need to re-sign your account's Acceptable Use Agreement (AUA). Contact EMSTR to **injury.web@dshs.texas.gov** to gain access to your account.

If you have forgotten your password and have logged in within the last 90 days:

Use the "Forgot Password?" link to reset your password.

Planning to use a software vendor to submit for your agency?

EMS providers can use vendor software systems to submit data to EMSTR. To configure successfully, you will need to:

- Activate user account in DSHS IAMOnline and sign the AUA. You will need to sign an AUA annually.
- Activate the web services account and sign the AUA with the following:
  - First Name: WebServiceAccount
  - Last Name: EMSTRWS
- Use the DSHS ID for your organization in the vendor software.

For additional instructions, please see the **EMSTR Quick Guide for Software Users**.

Planning to use a third-party vendor to submit on your behalf? (EMS Only)

EMS providers can submit data through a third-party vendor. Each provider must have a signed, DSHS-approved BAA with the third-party vendor on file with EMSTR before using third-party vendor data submitting services. Work with your vendor directly to complete your BAA and submit it to **injury.web@dshs.texas.gov**.

For detailed instructions, see the **EMSTR Technical Guide for Webservices**.

Currently, hospitals are unable to use third-party vendors for data submission. However, a facility can designate an agency, billing company, or RAC to submit on their behalf. IAM and EMSTR may still require a BAA to set up this service. Contact EMSTR at **injury.web@dshs.texas.gov** for more information.

Additional EMSTR Resources

For additional information, please visit **EMSTR's New Platform Resources Page**. Contact **injury.web@dshs.texas.gov** if you have questions.

Emergency Medical Services and Trauma Registries

***dshs.texas.gov/injury-
prevention/ems-trauma-registries***