

Job Description

JOB TITLE: Trauma Registrar Abstractor	JOB CODE:
DEPT NAME: Trauma Services-Admin	FLSA STATUS: <input checked="" type="checkbox"/> EXEMPT <input type="checkbox"/> NON-EXEMPT
DATE CREATED/REVISED: XX/XXXX	

POSITION SUMMARY (General statement reflecting the overall purpose of the position.)								
Responsible for maintaining the database for the trauma patient population in order to maintain, retrieve, and analyze Trauma Registry data related to the trauma patient's history, diagnoses, operations and procedures, complications and outcomes. May be required to abstract additional patient data for quality and regulatory processes such as medical peer review, public reporting measures, and other internal data needs. Completes established competencies for the position within designated introductory period. Other related duties as assigned.								
POSITION QUALIFICATIONS								
MINIMUM EDUCATION: Certification or degree in medical related field or five years experience in clinical healthcare or quality management								
PREFERRED EDUCATION: Successful completion of a clinical healthcare-related program such as Emergency Medical Technician, Paramedic, or Licensed Vocational Nurse.								
MINIMUM EXPERIENCE: 2 years in the healthcare field with a working knowledge of trauma, medical terminology and anatomy is required. Experience with MS Excel, MS Word, and/or MS Access								
PREFERRED EXPERIENCE: Previous experience with trauma registry/database systems, familiarity with ICD-9 coding, AIS/ISS scoring, and/or TRISS								
REQUIRED CERTIFICATIONS/LICENSURE: License/certification required if person hired is Emergency Medical Technician, Paramedic, or Licensed Vocational Nurse								
PREFERRED CERTIFICATIONS/LICENSURE								
REQUIRED COURSES/ COMPLETIONS (e.g., CPR): NA								
PATIENT POPULATION/AGES SERVED: (√) Check all that apply								
Category	Age	√	Category	Age	√	Category	Age	√
Infant	0-12 mons		Adolescent	13-18 yrs		Geriatric	70 + yrs	
Pediatric	1-12 yrs		Adult	19-69 yrs				
No responsibility to treat or care for patients: <input checked="" type="checkbox"/>								
SUPERVISORY RESPONSIBILITIES: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO								
ESSENTIAL / PRIMARY DUTIES (The essential job functions or primary responsibilities that must be performed unaided or with the assistance of an accommodation – all job functions should begin with an action verb)							% OF TIME PERFORMING DUTY	
General Functions: <ul style="list-style-type: none"> Inputs data into computer using prescribed format Participates in the ongoing collection of indicator data Participates in other data collection activities as deemed necessary Produces recurring reports based upon the data entered Ensures data integrity in any project/process assigned Codes injury severity for all traumatic injuries using doctor/nurses notes, pre-hospital information, radiology reports, operative reports, and consultations. 							100%	

<ul style="list-style-type: none">• Prepares and submits data summaries to the Texas Department of State Health Services as requested. Participates in department related PI meetings• Assists with trauma designation activities, as needed• Demonstrates effective verbal skills with internal and external customers• Demonstrates skill in the use of all office equipment and general office software applications required for department functions• Performs record keeping and reporting functions in support of department.• Performs assignments with minimal supervision and demonstrates initiative to complete work and prioritize assignments.• Utilizes resources efficiently and effectively• Maintains safe environment• Participates in Performance Improvement activities	
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DESCRIPTION OF PHYSICAL DEMANDS AND WORKING CONDITIONS

Essential job tasks or primary responsibilities that must be performed unaided or with the assistance of an accommodation. Check appropriate box for each of the following items to best describe the extent of the specific activity performed by the staff members in this position.

Technical/Motor Skills		Mental Abilities		Working Conditions	
Data Input / Typing	<input checked="" type="checkbox"/>	Calculations	<input checked="" type="checkbox"/>	Inside	<input checked="" type="checkbox"/>
Copying	<input checked="" type="checkbox"/>	Interpreting Numbers / Data	<input checked="" type="checkbox"/>	Outside	<input type="checkbox"/>
Speaking Clearly	<input checked="" type="checkbox"/>	Analyzing	<input checked="" type="checkbox"/>	Extreme Cold (non-weather)	<input type="checkbox"/>
Answering Telephones	<input checked="" type="checkbox"/>	Forecasting	<input type="checkbox"/>	Extreme Heat (non-weather)	<input type="checkbox"/>
Precise Manipulation	<input type="checkbox"/>	Assessing / Evaluating	<input checked="" type="checkbox"/>	Temperature Changes	<input type="checkbox"/>
Calibrating Equipment	<input type="checkbox"/>	Explaining / Teaching	<input type="checkbox"/>	Humidity	<input type="checkbox"/>
Reading	<input checked="" type="checkbox"/>	Synthesizing	<input checked="" type="checkbox"/>	Noise Level:	
		Attention to Detail	<input checked="" type="checkbox"/>	<i>Loud Noise</i>	<input type="checkbox"/>
		Memory	<input checked="" type="checkbox"/>	<i>Very Loud Noise</i>	<input type="checkbox"/>
Physical Requirements		Problem Solving / Reasoning	<input checked="" type="checkbox"/>	<i>Quiet</i>	<input type="checkbox"/>
Eye / Hand / Foot Coordination	<input checked="" type="checkbox"/>	Spatial / Form Perception	<input type="checkbox"/>	<i>Very Quiet</i>	<input type="checkbox"/>
Fingering / Fine Dexterity	<input checked="" type="checkbox"/>			<i>Moderate Noise</i>	<input checked="" type="checkbox"/>
Handling / Gripping/Squeezing	<input checked="" type="checkbox"/>	Sensory Requirements		Exposure / Use of sharps	<input type="checkbox"/>
Transferring-Vertical/Horizontal	<input checked="" type="checkbox"/>	Ability to see:	<input checked="" type="checkbox"/>	Blood / Body Fluid/ Tissue	<input type="checkbox"/>
Lifting / Carrying	<input checked="" type="checkbox"/>	<i>No Special Requirements</i>	<input type="checkbox"/>	Fumes / Odors	<input type="checkbox"/>
<i>Sedentary</i>	<input type="checkbox"/>	<i>Close Vision</i>	<input checked="" type="checkbox"/>	Toxic / Caustic Materials	<input type="checkbox"/>
<i>Light: 1-20 lbs.</i>	<input checked="" type="checkbox"/>	(clear vision at <20 inches)		Dust / Airborne Particles	<input checked="" type="checkbox"/>
<i>Medium: 21-35 lbs.</i>	<input type="checkbox"/>	<i>Distance Vision</i>	<input checked="" type="checkbox"/>	Poor Ventilation	<input type="checkbox"/>
<i>Heavy >35 lbs. with assistance</i>	<input type="checkbox"/>	(clear vision at >20 feet)		Radiation	<input type="checkbox"/>
Push / Pull	<input checked="" type="checkbox"/>	<i>Color Vision</i>	<input checked="" type="checkbox"/>	Explosive Materials	<input type="checkbox"/>
Climbing	<input type="checkbox"/>	(identify and distinguish colors)		Dangerous Equipment	<input type="checkbox"/>
Balancing	<input type="checkbox"/>	<i>Peripheral Vision</i>	<input checked="" type="checkbox"/>	Moving Mechanical Parts	<input type="checkbox"/>
Stooping/Bending	<input checked="" type="checkbox"/>	(ability to observe an area that can be seen up and down or to the left and right while eyes are Fixed on a given point)		Risk of Electrical Shock	<input checked="" type="checkbox"/>
Kneeling	<input checked="" type="checkbox"/>			Exposure to Vibration	<input type="checkbox"/>
Walking	<input checked="" type="checkbox"/>				
Sitting	<input checked="" type="checkbox"/>			Travel	
Crouching / Squatting	<input checked="" type="checkbox"/>	<i>Depth Perception</i>	<input checked="" type="checkbox"/>	Local	<input checked="" type="checkbox"/>
Crawling	<input checked="" type="checkbox"/>	(three-dimensional vision: judge distances and spatial relationships)		Out of Town	<input type="checkbox"/>
Standing	<input checked="" type="checkbox"/>				
Holding	<input checked="" type="checkbox"/>				

Physical Requirements		Sensory Requirements		OSHA Task Category	
Flexing / Positioning/ Twisting	<input type="checkbox"/>	Ability to Adjust Focus (adjust eye to bring an object into sharp focus)	<input checked="" type="checkbox"/>	At risk for exposure to blood borne pathogens (Category I)	<input type="checkbox"/>
Restraining	<input type="checkbox"/>			May have exposure to blood borne pathogens (Category II)	<input type="checkbox"/>
Repetitive Activity	<input checked="" type="checkbox"/>				
Reaching	<input checked="" type="checkbox"/>	Ability to hear	<input checked="" type="checkbox"/>	No intentional exposure to blood borne pathogens (Category III)	<input checked="" type="checkbox"/>
Speed Movement / Velocity	<input type="checkbox"/>	Ability to feel	<input type="checkbox"/>		
		Ability to taste / smell	<input type="checkbox"/>		
				List other:	

The above job description is not intended to be an exhaustive list of all responsibilities, duties, and skills required of the job. Management retains the right to add or to change the duties of the positions at any time with or without notice.

I hereby acknowledge that I have read and understand the position qualifications, primary duties, physical requirements and working conditions and I agree to abide by this job description for as long as I am employed by XXX or until it has been revised or my job title changes. I further acknowledge that I have reviewed this job description with my supervisor and that I have been provided a copy of this document.

Employee Printed Name

Employee Number

Employee Signature

Date

Manager Signature

Date