

BRANZ Data Collection Timeline

This document provides a summary of the availability of certain data items that have changed or been introduced since the inception of the BRANZ in July 2009. Specific times are listed where changes were made.

Key

Note if data item is not listed then available from July 2009	
	Collection Commenced
	Changes occurred
M	Mapped for Prior Cases

Item #	Database Name	Database Description	04/2010	07/2010	11/2010	07/2016
1.6	COB	Country of Birth				
1.9.1	NTRegion	Residential Postcode Sub-category				
2.2	PresentationType	Presentation Type			M	
2.4	AdmType	Admission Type				
2.5	AdmSource	Referral Source				
2.5.2	OtherHospID	Other Hospital				M
2.6	ReferralHospDt	Initial Presentation Referral Centre				
2.7	Outpatients	Admitted via Outpatients				
2.8	BurnsAdmit	Burns Consult				
2.9	Unit	Predominant Care				
2.12	ReAdmYN	Readmitted within 28 days discharge				
2.13	ReadmissionResult	Readmission due to a Complication?				
2.14	ReadmComplicationType	Identify complication which caused readmission				M
2.14.7	ReAdmReason	Reason for readmission not in drop down options				
3.1.1-3.1.10	CauseSub1	The primary sub-cause of burn injury				
3.2.1-3.2.10	CauseSub2	The secondary cause sub-category of burn injury				
3.3	Accel	Accelerant Involvement	M			
3.3.1	AccelType	Accelerant Type	M			
3.3.1.9	AccelOther	Other Type of Accelerant type	M			
3.4	Clothing	Clothing/bedding/curtains caught alight	M			
3.5	Explosion	Explosion/Flash occurred	M			
3.6	HouseFire	House, building or vehicle fire	M			
3.8.2.0	PlaceSchool	School (Place sub-category)-School				
3.11.1	EventNTRegion	Injury Event Postcode Sub-category (NT)				

Item #	Database Name	Database Description	04/2010	07/2010	11/2010	07/2016
4.1	FirstAidYN	Was any First Aid Applied?				
4.2	CoolWaterYN	Was the first aid applied 20 minutes of cool running water within 3 hours of injury				
4.3	AddInfo	Additional information regarding first aid				
5.5	AssessedBy	Who completed the assessment?				
5.6	DiagramUsedYN	To determine if accepted tools to determine %TBSA				
5.8	DepthSuperYN	Identifies if there were documented Superficial Dermal (SD) burns		M		
5.9	DepthMidYN	Identifies if there were documented Mid Dermal (MD) burns		M		
5.10	DepthDeepYN	Identifies if there were documented Deep Dermal (DD) burns		M		
5.11	DepthFullYN	Identifies if there were documented Full Thickness (FT) burns		M		
6.1-6.9, 6.12, 6.15, 6.16	Body Region of Burn	Most body regions except those listed below				
6.10	HandDorsal	Hand-Dorsal				
6.11	HandPalmer	Hand-Palmar				
6.13	FootDorsum	Foot-Dorsum				
6.14	FootSole	Foot-Sole				
7.1	Eschar	Did the patient have an Escharotomy?				
7.2	EscharDt	Escharotomy - Date & Time				
7.3	EscharPerformed	Escharotomy – Where was it Performed?				
7.3.99	EscharPerformedOther	Escharotomy – Where was it Performed? - Other				
7.4	BurnMgtYN	Did the Patient go to Theatre for Burn Wound Management?				
7.5, 7.8, 7.11, 7.14, 7.17, 7.20, 7.23	DebriYN, DebrSkinYN, DebriDermalYN, DebriCellYN, DebriGraftYN, DebriAllograftYN, PrimaryClosureYN	First Theatre for: Debridement Only, Temporary Skin Closure Product, Dermal Reconstructive Product, Skin Cell Product, Skin Grafting, Allograft, Primary Closure				
7.6, 7.9, 7.12, 7.15, 7.18, 7.21, 7.24	DebriType, DebriSkinType, DebrDermalType, DebriCellType, DebriGraftType, DebriAllograftType, DebriClosureType	Type of Debridement for: Debridement Only, Temporary Skin Closure Product, Dermal Reconstructive Product, Skin Cell Product, Skin Grafting, Allograft, Primary Closure				
7.7, 7.10, 7.13, 7.16, 7.19, 7.22, 7.25	DebriDt, DebriSkinDt, DebrDermalDt, DebriCellDt, DebriGraftDt, DebriAllograftDt, DebriClosureDt	Date & Time of: Debridement Only, Temporary Skin Closure Product, Dermal Reconstructive Product, Skin Cell Product, Skin Grafting, Allograft, Primary Closure				
7.26	TheatreProcedureYN	Other Burn Procedures conducted in First Theatre				

Item #	Database Name	Database Description	04/2010	07/2010	11/2010	07/2016
7.26.99	TheatreProcOther	First Theatre - Other				
7.27	TheatreProcDt	First Theatre - Date & Time				
7.28	DebriExcisionYN	Deep Burns Excision Completed?				
7.29	DebriExcisionDt	Deep Burns Excision Completed - Date & Time				
8.1	PhyAssess	Physiotherapy Assessment				
8.2	NutriScreeningYN	Nutritional Screening				
8.3	NutriAssessYN	Nutritional Assessment				
8.4	FeedingYN	Enteral or Parenteral Feeding				
8.5	Feeding	Feeding commenced within 24 hours based on TBSA				
8.6	FormulaUsedYN	Formula used for fluid resuscitation based on TBSA				
8.7	PsychScreeningYN	Psychosocial Screening				
8.8	PsychScreeningDt	Psychosocial Screening - Date & Time				
8.9	PsychReferYN	Referred to Psychosocial service < 24 hours of positive screen				
8.10	PsychAssessDt	Psychosocial Assessment Date				
8.11	PainAssessYN	Did the Patient have a Pain Assessment completed within 24 hours				
9.4	VentHourCalc	Was Patient Mechanically Ventilated in ICU?				
9.6	VentStartDt	Mechanical Ventilation Start Date & Time				
9.7	VentStopDt	Mechanical Ventilation Stop Date & Time				
9.11	ReAdmPlanned	Was the Readmission Planned or Unplanned				
9.11.2	ReAdmPlannedOther	Reason for Unplanned Readmission				
9.12	VentStartDtRe	Mechanical Ventilation Start Date & Time				
9.13	VentStopDtRe	Mechanical Ventilation Stop Date & Time				
10.1.1-10.1.4		eGFR & SCr				
10.2.1-10.2.3	MRSASite, MRSASiteDt, MRSALisolatedYN	First Positive MRSA (location, Date, Isolated)				
10.3.1-10.3.3	VRESite, VRESiteDt, VREIsolatedYN	First Positive VRE (location, Date, Isolated)				
10.4	SwapMRP	Positive Carbapenem Resistant Pseudomonas				
10.4.1-10.4.3	PseudomonasSite, PseudomonasSiteDt, PseudomonasIsolatedYN	First Positive Carbapenem Resistant Pseudomonas (location, Date, Isolated)				
10.5	Enterobacter	Positive Carbapenem Resistant Enterobacter				
10.5.1-10.5.3	EnterobacterSite, EnterobacterDt, MREnterobacterAdmisolatedYN	First Positive Carbapenem Resistant Enterobacter (location, Date, Isolated)				

Item #	Database Name	Database Description	04/2010	07/2010	11/2010	07/2016
10.6	Blood	Blood Cultures taken during admission				
10.6.1	BloodPositiveDt	Date and Time of First Positive Result				
10.6.2	Microorganism	Microorganism identified in first positive blood culture result				M
10.7	Antibiotics	At time of 1st positive result, was patient on appropriate antibiotics?				
10.7.1	AntibioticsDt	Time they were put on antibiotics				
10.7.2	Antibiotics	Antibiotics they were on at time of result				
10.7.2.99	AntibioticsOther	Antibiotic patient placed on which is not listed in drop down list				
10.8	AnicoagulationYN	Did the patient receive anticoagulation prophylaxis?				
11.1	Discharge	Was patient discharged from burns care prior to hospital discharge				
11.2	DischargeDate	Date & Time patient transferred from Burns to different Unit				
12.3	Decision	Treatment Decision				