

Injury Surveillance Workgroup (ISW) Reports

ISW 1: Consensus Recommendations for Injury Surveillance in State Health Departments (1999)

This report, known to some as the “Green Book” due to its green cover, makes recommendations about which injuries, injury risk factors and core data sets should be included in “core” surveillance by all states, and also outlines basic principles of injury surveillance. Please note that these recommendations were updated by ISW5 in 2007 (see below).

ISW 2: (2000)

This summary reports activities undertaken by the workgroup such as preparing an initial proposal to BRFSS, creating a template for state injury indicators, discussing data collection options, and creating a list of injury surveillance priorities.

ISW 3: Consensus Recommendations for Using Hospital Discharge Data for Injury Surveillance (2003)

This report includes recommended standard processes for analyzing and reporting hospital discharge data by state injury prevention programs and others.

ISW 4: Consensus Recommendations for Surveillance of Falls and Fall-Related Injuries (2006)

This report includes standard definitions, and recommended data sources for surveillance of falls and fall-related injuries by state health departments and other users of fall injury data.

ISW 5: Consensus Recommendations for Injury Surveillance in State Health Departments (2007)

This report summarizes previous efforts to enhance state-based injury surveillance, describes injury surveillance principles, updates the recommendations from the ISW1 report (see above), makes recommendations regarding issues that have not yet been addressed, and acknowledges some future challenges in injury surveillance.

ISW 6: Assessing an Expanded Definition for Injuries in Hospital Discharge Data Systems (2008)

In 2007 the National Center for Health Statistics recommended a new definition for an initial injury visit to be used when analyzing the National Hospital Ambulatory Medical Care Survey -- Emergency Department (NHAMCS-ED). This report describes the impact of expanding the definition recommended by ISW3 (see above) for use when analyzing hospital discharge databases to match the NHAMCS-ED definition

ISW 7 is currently meeting to discuss surveillance of poisonings