

# Research design & study execution workshop series

## Session 6

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SEPTEMBER 16, 2015

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# Quick review of Sessions 1-5

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- How to identify a “good” research question
- Common study designs: Pros & cons
- Selecting appropriate study subjects
- Understanding variables types and their measurement

**Case study:** Football-related injuries

# **Nuts and bolts of good data management: Part I**

## **Data collection & data entry**

# If you have...

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1. Identified a research question
2. Conducted a literature review
3. Picked an appropriate study design
4. Defined inclusion/exclusion criteria for subjects
5. Considered predictor and outcome variables

**Next step: Work on creating a  
“smart” data collection system**

# Data management process

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All of the steps required to create a clean data set ready to be analyzed

# Three keys to success

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1. Clarity
2. Consistency
3. Documentation

# Concrete products

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1. Dummy tables and figures for publication
2. Data collection instruments
3. Data entry forms (Excel files, etc.)
4. Data codebook/coding manuals
5. Study manual



# Overview of the process

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1. Collect the data
2. Enter the data
3. Combine and clean data files
4. Recode, transform and derive new variables
5. Document and archive raw data sets

# Step 1. Data collection

## Methods

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- Download existing data and use as is
- Extract information from existing medical records
- Conduct a survey (online, phone, mail, in person)
- Collect raw data from direct observations, etc.

**Each has pros & cons**



# Step 1. Data collection Format

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- Paper/pen
- Mobile devices (phones, tablets, etc.)
- Stationary computers

Each has pros & cons

# Best practices

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- Collect as little as possible
- Collect raw data
- Automate as much as possible
- Document the process

# Step 2. Data entry

## Goals

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1. Convert the information to electronic format
2. Maintain accuracy & integrity of the information
3. Prevent as many errors as possible up-front

# Step 2. Data entry

## Methods & tools

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1. Excel spreadsheet vs. data entry programs
2. Single vs. double data entry, one person or more?
3. Include logic checks & range checks
4. Define missing values, etc.

Best practices & “how-to” demo in Excel coming

# Published example: NEISS

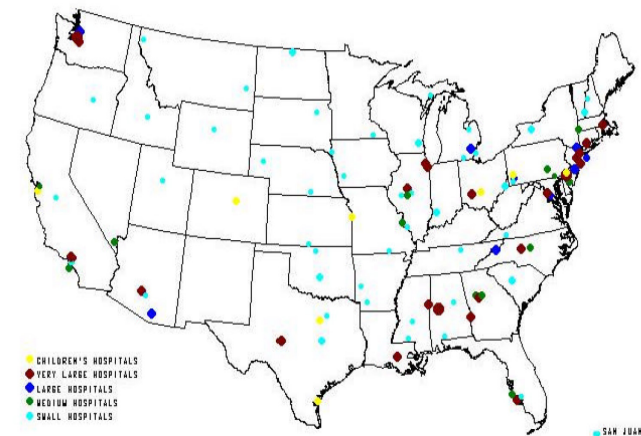
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## National Electronic Injury Surveillance System (NEISS)

CPSC's National Electronic Injury Surveillance System (NEISS) is a national probability sample of hospitals in the U.S. and its territories. Patient information is collected from each NEISS hospital for every emergency visit involving an injury associated with consumer products. From this sample, the total number of product-related injuries treated in hospital emergency rooms nationwide can be estimated. This web access to NEISS allows certain estimates to be retrieved on-line. These estimates can be focused by setting some or all of the following variables (and an example of each):

- Date (one year maximum range; e.g., how many injuries were treated in 1996)
- Product (e.g., how many bicycle injuries occurred)
- Sex (e.g., how many injuries occurred to women)
- Age (e.g., how many injuries occurred to people aged 35-55)
- Diagnosis (e.g., how many lacerations occurred)
- Disposition (e.g., how many people were admitted to the hospital)
- Locale (e.g., how many injuries occurred at a school)
- Body part (e.g., how many injuries involved the knee)

U.S. Consumer Product Safety Commission NEISS Hospitals



# NEISS Coding Manual



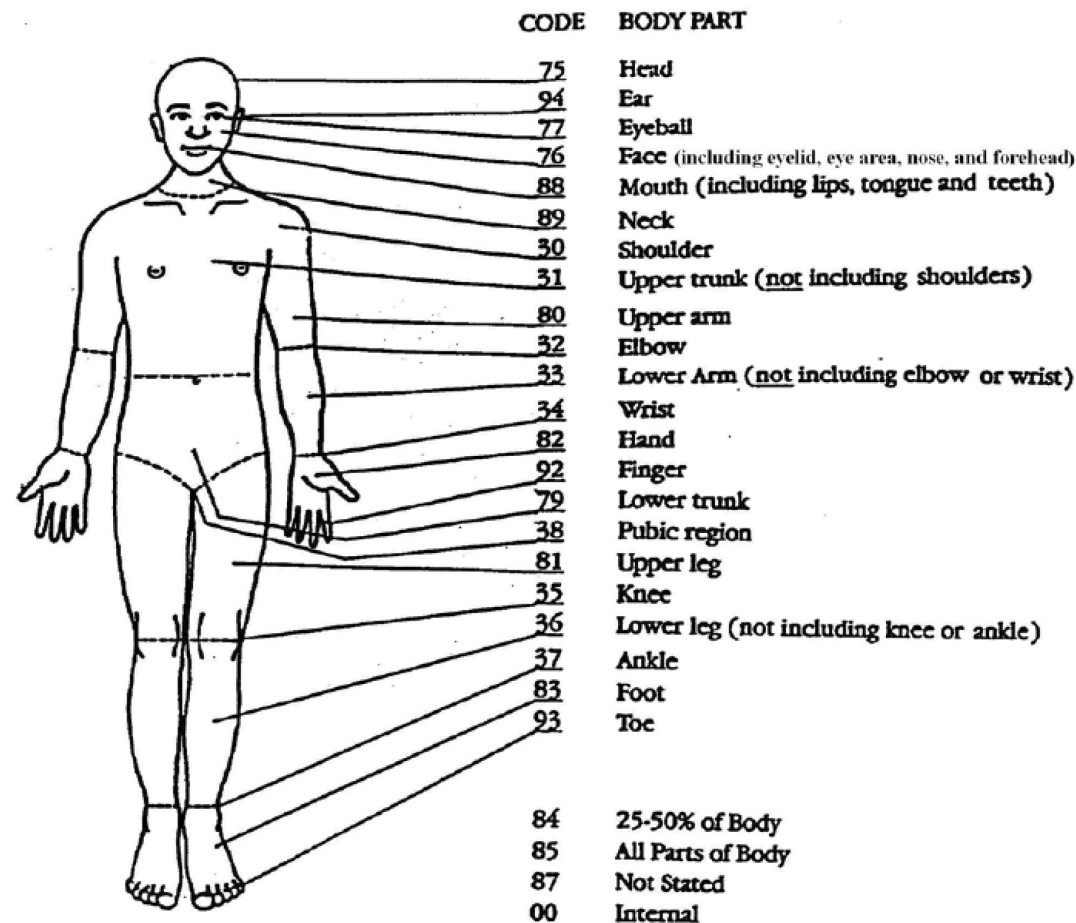
**January 2015**

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## Appendix D: NEISS Body Part Diagram



## Appendix E: Summary of Other Codes

**Age**

Code in months (preceded by the number 2) if patient is less than 2 years old. Code in years if patient is 2 years old or more.

201 = less than 8 weeks  
 206 = 6 months  
 218 = 18 months  
 002 = 2 years  
 022 = 22 years  
 045 = 45 years  
 078 = 78 years  
 102 = 102 years  
 000 = not recorded

Greater than 115 years, see guidance in introduction section of coding manual.

**Gender**

1 = Male  
 2 = Female  
 0 = Not recorded

**Injury Diagnosis**

See Appendices B and D

**Body Part Affected**

See Appendices C and D

**Disposition**

1 = Treated and released or examined and released without treatment  
 2 = Treated and transferred to another hospital  
 4 = Treated and admitted for hospitalization (within same facility)  
 5 = Held for observation  
 6 = Left without being seen/Left against medical advice (AMA)  
 8 = Fatality, including DOA, died in the ED, brain dead  
 9 = Not recorded

**Product Codes**

See alphabetic product code list.

**Injury Intent**

1 = Assault / intentional injury inflicted by one person on another person  
 2 = Self-inflicted injury (confirmed or suspected)  
 3 = Injury related to legal intervention / law enforcement activities  
 0 = Unintentional (accidental) injury or injury intent not determined / not recorded

**Locale of Accident**

1 = Home  
 2 = Farm/ranch  
 4 = Street or highway  
 5 = Other public property  
 6 = Mobile/Manufactured home  
 7 = Industrial  
 8 = School/Daycare  
 9 = Place of recreation or sports  
 0 = Not recorded

**Fire Involvement**

1 = Fire involvement and/or smoke inhalation - Fire Dept. attended  
 2 = Fire involvement and/or smoke inhalation - Fire Dept. did not attend  
 3 = Fire involvement and/or smoke inhalation - Fire Dept. attendance is not recorded  
 0 = No fire involvement or fire involvement not recorded

**Occupational or Work-related**

1 = Work-related; occurred on the job (excluding active military duty)  
 2 = Not work-related; did not occur on the job  
 3 = Work-related; active military duty  
 0 = Not recorded

**Race**

1 = White  
 2 = Black/African American  
 4 = Asian  
 5 = American Indian/Alaska Native  
 6 = Native Hawaiian/Pacific Islander  
 3 = Other  
 0 = Not stated in ER record



FILE HOME INSERT PAGE LAYOUT FORMULAS DATA REVIEW VIEW ACROBAT



	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q
1	CPSC Case #	trmt_date	age	sex	race	diag	body_part	disposition	location	prod1	narrative						
132	140926233	9/8/2014		6 Male	None listed	53	81	1	9	1211	6 YOM- CONTUS LT THIGH- PAT PLAYED FOOTBALL ; FELL ONTO KNEE A						
133	141243741	9/19/2014		6 Male	None listed	53	79	1	9	1211	6YOM PLAYING *** FOOTBALL AND TACKLED SUSTAINED A CONTUSION						
134	141016874	9/18/2014		6 Male	White	53	33	1	0	1211	6 YOM INJURY TO ARM PLAYING FOOTBALL. DX FOREARM CONTUSION						
135	141040233	10/14/2014		6 Male	Black/African American	52	75	1	9	1211	6 YOM TACKLED AT FOOTBALL PRACTICE. DX: CONCUSSION.						
136	140225928	2/8/2014		6 Male	White	55	92	1	0	1211	6YOM BENT THUMB BACK S/P FALL WHILE PLAYING FOOTBALL; DISLOC						
137	140640195	2/6/2014		6 Male	Other / Mixed Race	62	75	4	0	1211	6 YOM PASSED OUT WHILE PLAYING FOOTBALL HIT HEAD ON THE FLOC						
138	141225269	12/8/2014		6 Male	Black/African American	64	37	1	1	1211	SPRAINED ANKLE 6 YO M FELL PLAYING FOOTBALL AT HOME						
139	150201631	11/25/2014		6 Male	Black/African American	59	76	1	1	1211	6YOM PLAYING FOOTBALL AT HOME WITH BROTHERS & FRIENDS WAS						
140	141203485	11/29/2014		6 Male	White	53	33	1	1	1211	6YOM PLAYING FOOTBALL WITH DOG @ GRANDMOTHER'S HOUSE, DO						
141	140746090	7/15/2014		6 Male	Black/African American	57	30	1	0	1211	6 YOM FELL WHILE PLAYING FOOTBALL. DX: FRACTURE CLAVICLE.						
142	141148630	10/11/2014		6 Male	Other / Mixed Race	53	79	1	8	1211	6YOM PLAYING FOOTBALL AT SCHOOL AND HIT HARD IN THE LOWER A						
143	140904383	8/27/2014		6 Male	Black/African American	71	85	4	9	1211	6YOM STARTED FOOTBALL YESTERDAY, HAS INCREASED WORK OF BRE						
144	140143451	1/14/2014		6 Male	Black/African American	62	75	1	8	1211	A 6YOM SLIPPED & FELL WHILE PLAYING FOOTBALL IN GYM CLASS AT S						
145	140937706	9/6/2014		6 Female	White	57	32	1	1	1211	6YOF WAS PLAYING FOOTBALL W SIBLINGS AND FELL AND INJURED ELB						
146	141030674	9/30/2014		6 Male	White	64	37	1	8	1211	6 YOM PLAYING FOOTBALL AT SCHOOL FELL TWISTED ANKLE. DX ANKLE						
147	141103517	10/13/2014		6 Male	White	57	30	1	0	1211	6YOM PLAYING FOOTBALL; DX FX CLAVICLE						
148	140408929	3/29/2014		6 Female	Black/African American	64	35	1	0	1211	6 YOF WAS PLAYING FOOTBALL WITH BROTHER AND FRIEND SHE FELL A						
149	140557633	2/8/2014		6 Male	Black/African American	53	92	1	1	1211	6 YOM CONTUSION TO FINGER WHEN PLAYING FOOTBALL						
150	141028287	10/7/2014		6 Male	White	59	76	1	9	1211	6 YOM PLAYING FOOTBALL HIT IN THE EYE/FACE BY ANOTHER PLAYERS						
151	140968169	9/17/2014		6 Male	None listed	64	37	1	0	1211	6 YO M WAS PLAYING FOOTBALL WHEN SOMEONE JUMPED ON HIS AN						
152	141213522	11/29/2014		6 Male	White	59	75	1	9	1211	6 YOM PLAYING FOOTBALL INDOORS WHEN HE TRIPPED AND FELL HITT						
153	140936713	8/30/2014		6 Male	White	53	92	1	9	1211	6 YOM INJURY TO FINGER AT FOOTBALL GAME. DX FINGER CONTUSION						
154	141046574	10/15/2014		6 Female	Other / Mixed Race	57	33	1	9	1211	6 YO FEMALE PLAYING FOOTBALL. DX RADIUS FX						
155	141005282	9/28/2014		6 Male	Black/African American	59	76	1	9	1211	6YOM HIT HELMET TO HELMET WHILE PLAYING FOOTBALL, NOW CUT C						
156	140544020	5/7/2014		6 Male	Other / Mixed Race	57	30	1	9	1211	6 YOM WAS PLAYING IN A FOOTBALL GAME WITH BIGGER KIDS & WAS						

raw 1211 neiss (2) raw 1211 neiss

# **Working example: Montage**

Football-related injuries requiring radiologic imaging among 6- to 17-year olds treated in the emergency department of a children's hospital: 2013-2014

**Unsettled issue:** Conflicting claims about the frequency of severe football-related injuries among very young football players (6-11 years old)

**Research question:** Is age associated with the type or severity of football-related injuries among 6-17 year old males who visited the emergency room?

**Null hypothesis:** There is no association between age and the type or severity of football-related injuries

# Subject selection

<b>Inclusion criteria</b>	<b>N</b>
All exams completed Jan 1, 2000 through Dec 31, 2014 that had “football” mentioned anywhere in the report text	<b>4766</b>
<b>Exclusion criteria</b>	4159
Exams done outside Children’s DC location	120
All females	158
Patients outside the 6-17 year old age range	153
Patient status not clearly classified (all years prior to 2013)	3516
Inpatients and outpatients	212
<b>Final sample size (# of exams in emergency patients)</b>	<b>607</b>

# Dummy tables and figures

# Characteristics of study population

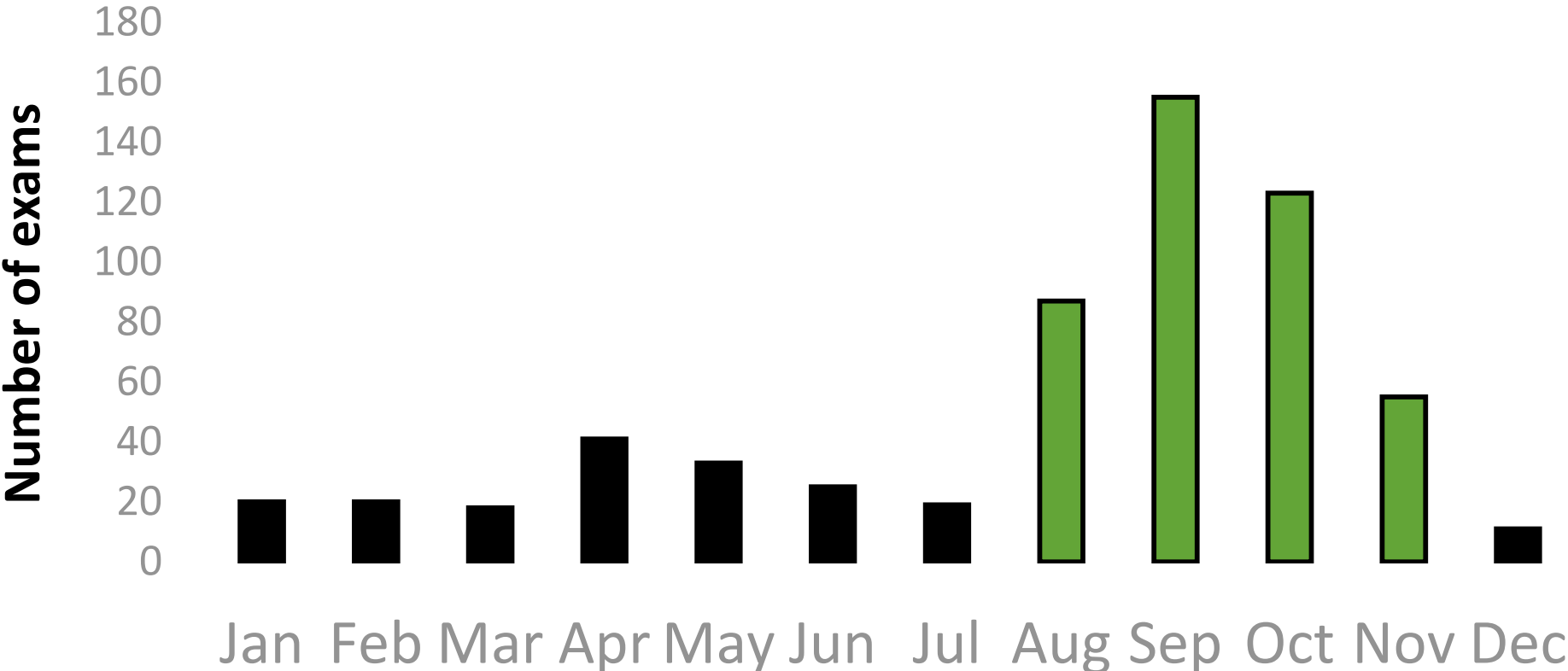
Characteristic	N	%
Total number of exams	607	
Year of exam		
2013	269	44%
2014	338	56%
Total number of unique patients	463	
Age of patients (all exams)		
6-11 years	185	30%
12-17 years	422	70%



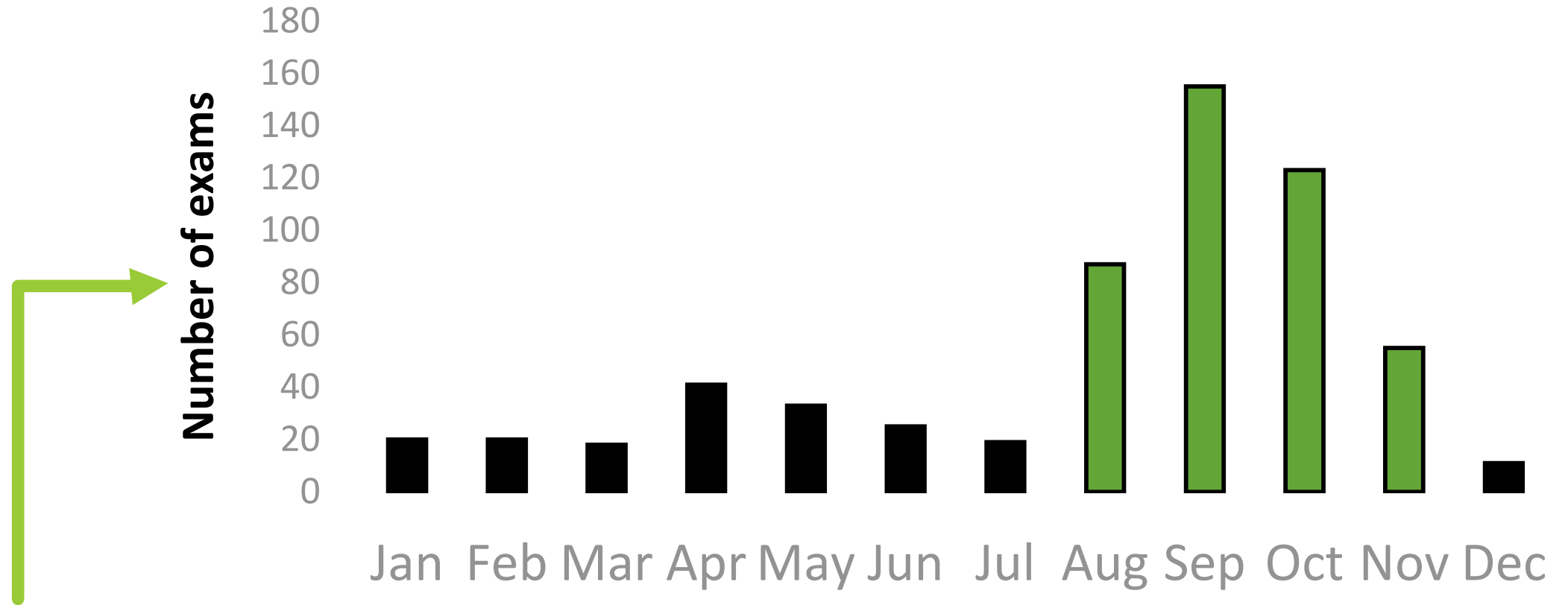
## Characteristics of study population, cont.

Characteristic	N	%
Region of body part injured		
Lower extremity	305	50%
Upper extremity	200	33%
Trunk	62	10%
Head, neck & face	39	6%
Severity of injury		
Mild		
Severe		

# Number of exams by month



# Number of exams by month



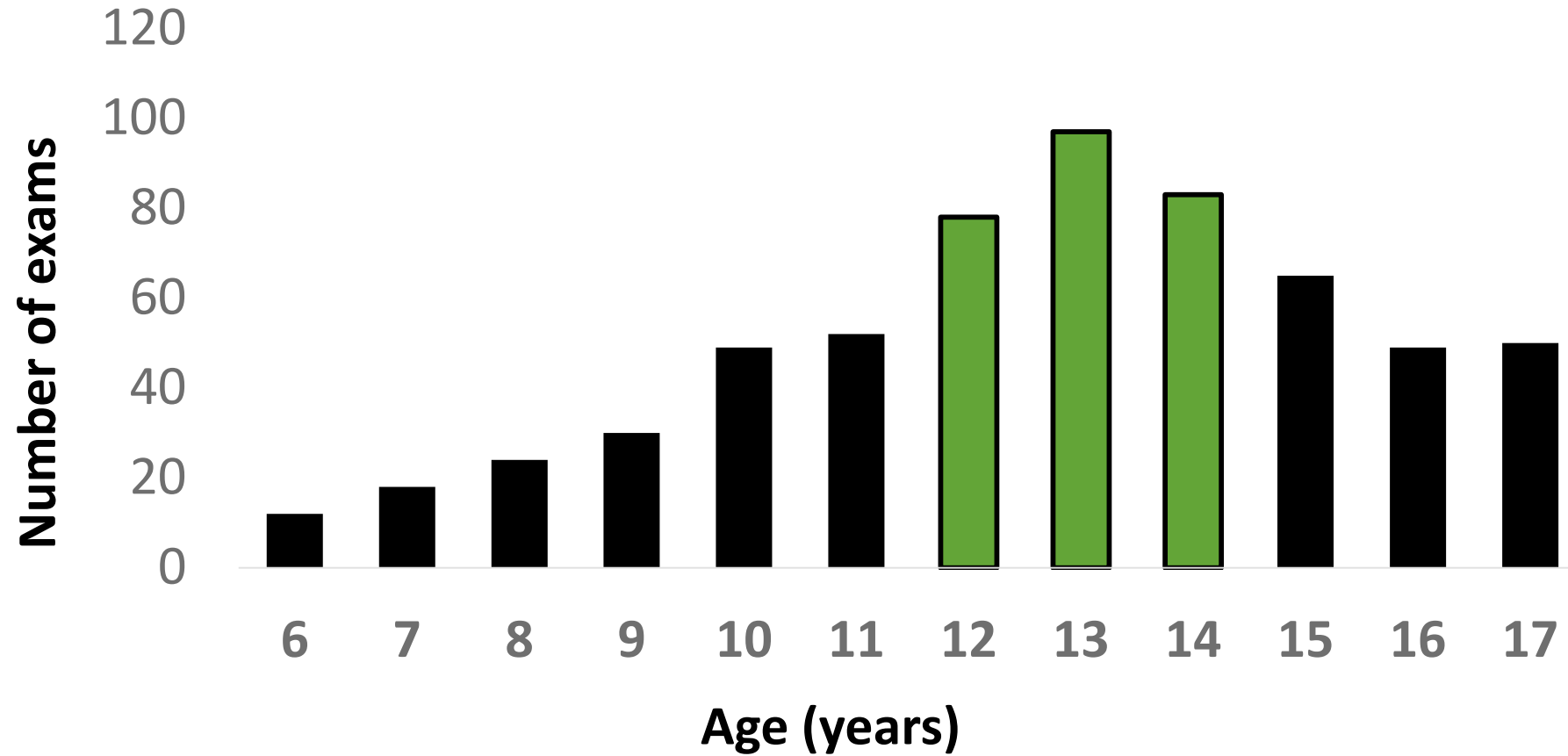
**Numerical**

Discrete (Limited number of quantifiable intervals)

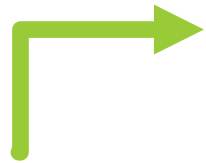
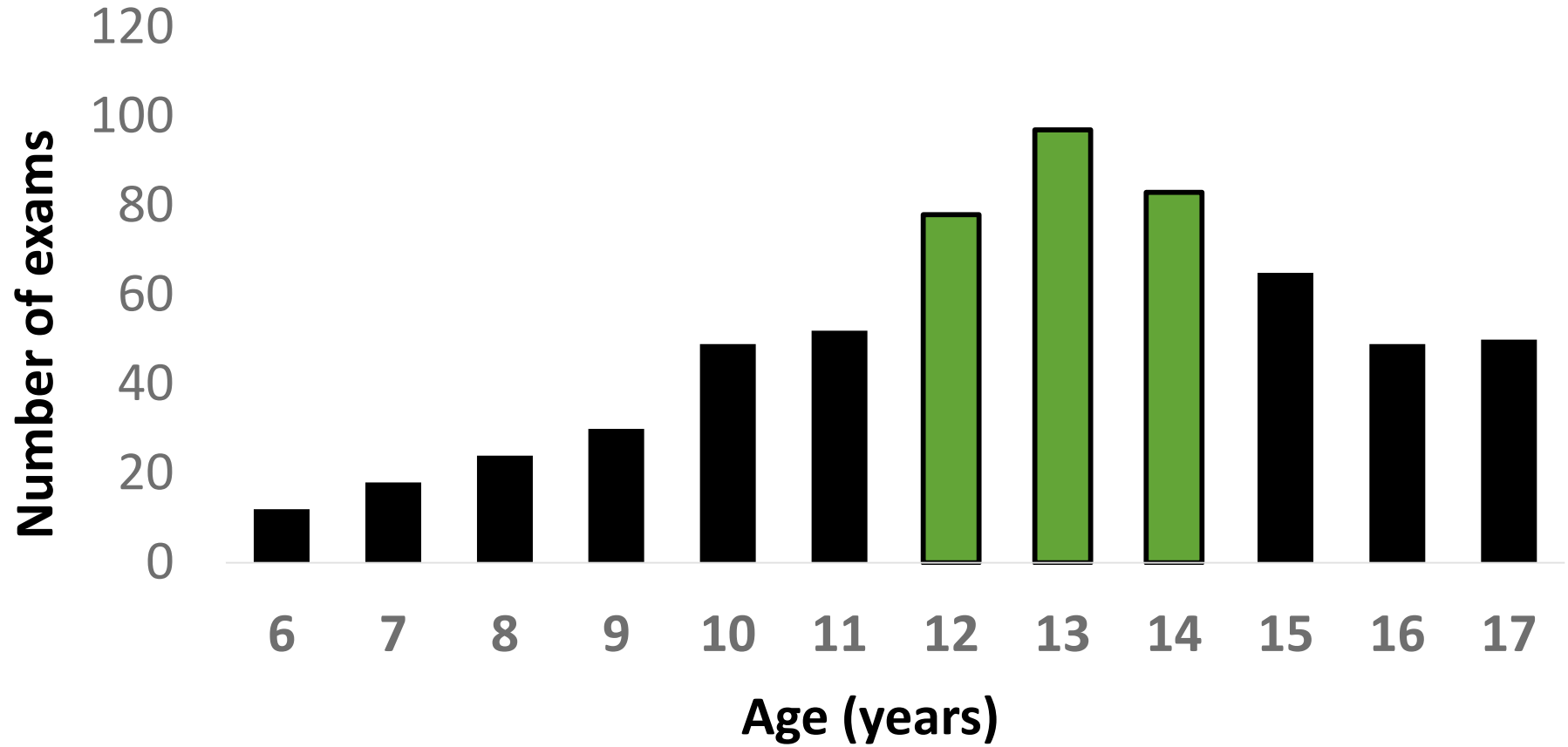
**Categorical**

Ordinal (Ordered categories)

# Number of exams by age



# Number of exams by age

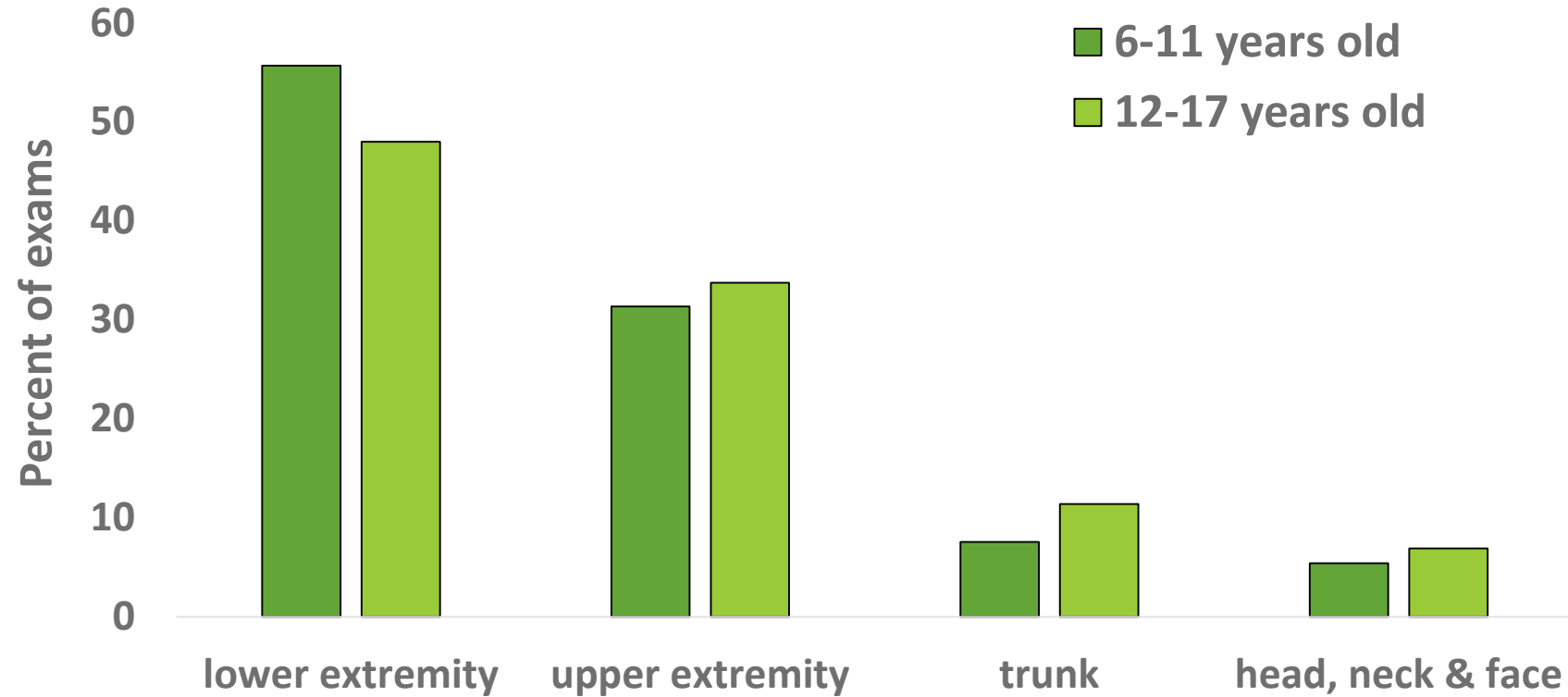


**Numerical**  
Discrete (Limited number of quantifiable intervals)

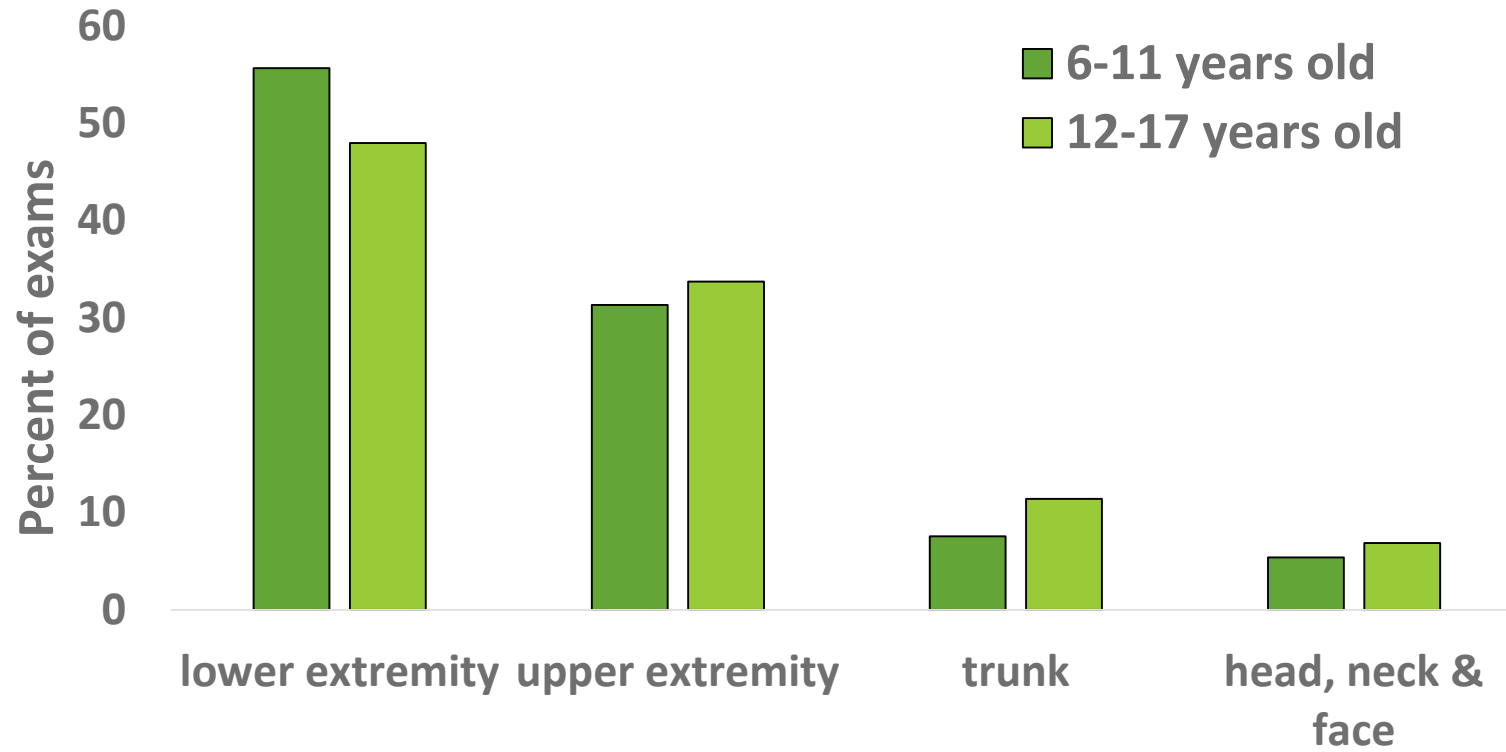
**Categorical**  
Ordinal (ordered categories)



# Region of body injured by age category



**Categorical**  
Dichotomous (Two categories)



**Categorical**  
Nominal (Unordered categories)







# Next steps: Classification of body parts

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1. Body part classification system created & applied
2. Confirm decisions (2<sup>nd</sup> radiologist)
3. Apply to all exams (need more information than exam codes?)

# Next steps: Injury classification

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1. Create injury classification system
2. Document & pretest the system
3. Apply the system (2 radiologists?)

# Data management defined

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All of the steps required to create a clean data set ready to be analyzed

# Five parts of the process

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1. Collect the data
2. Enter the data
3. Combine and clean data files
4. Recode, transform and derive new variables
5. Document and archive raw data sets

# Three keys to success

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1. Clarity
2. Consistency
3. Documentation

Next week

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**Nuts and bolts of good data management:  
Part II**

**(Data cleaning, recoding, archiving)**