

RESOURCE GUIDE

Direct Data Submission & Validation Summary Report

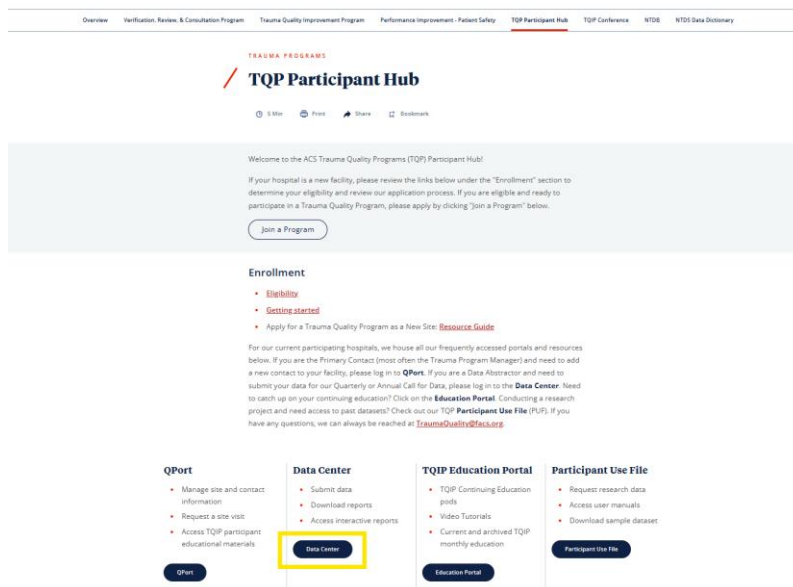
Purpose

This document outlines the process for directly uploading your trauma data to the TQP Data Center from your vendor's registry product. Once you've submitted your data through your registry product, the remainder of the submission process will remain the same as the legacy data upload process.

This document also outlines how to review a data submission for policy validation issues or invalid flags using the Validation Summary Report. This report will indicate whether the submission passed the validator, and if it did not, detail specific reasons for failure on a record level.

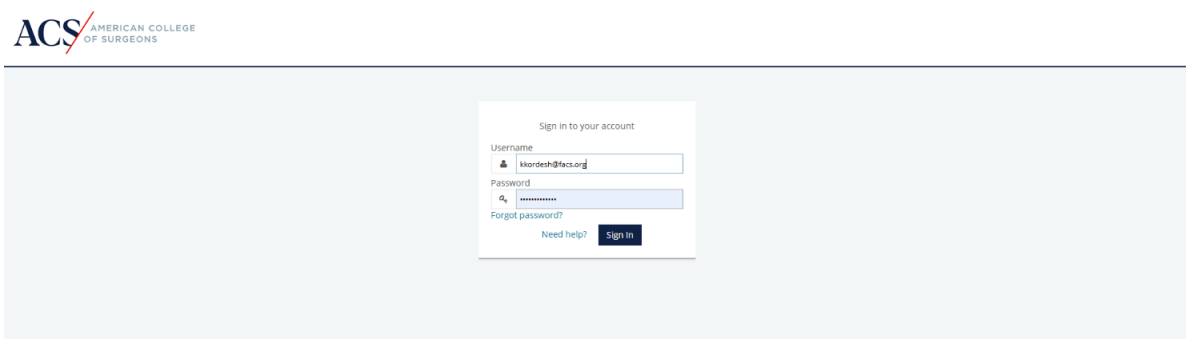
Logging In & Reviewing the Data Summary Dashboard

- 1) From the [Trauma Quality Programs Participant Hub](#), click **Data Center**

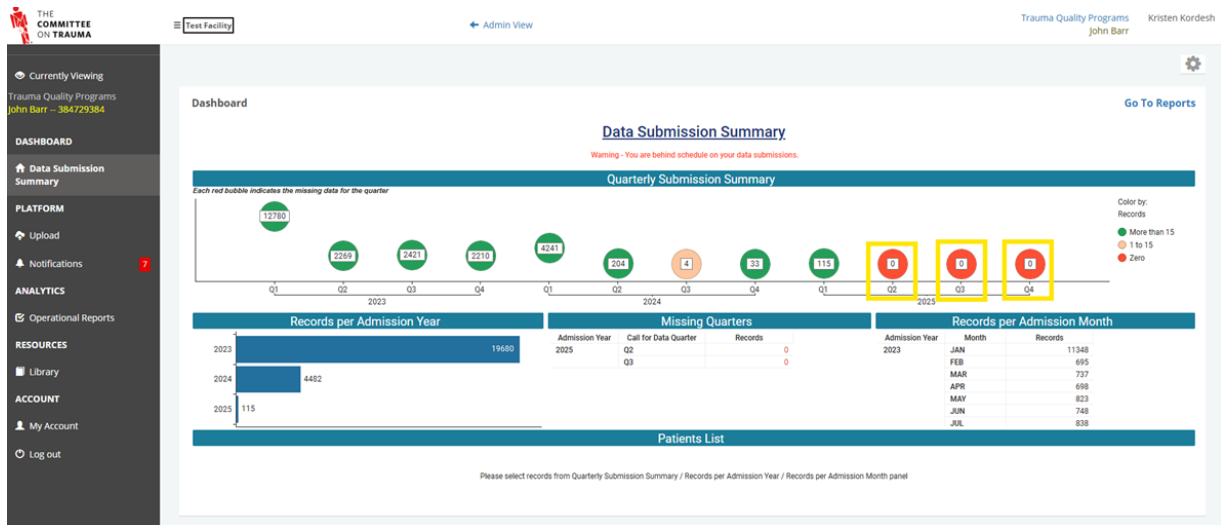


The screenshot shows the TQP Participant Hub website. At the top, there is a navigation bar with links: Overview, Verification, Review, & Consultation Program, Trauma Quality Improvement Program, Performance Improvement - Patient Safety, TQP Participant Hub (highlighted), TQP Conferences, NTDB, and NTDB Data Dictionary. Below the navigation bar is the TQP Participant Hub logo and a "Join a Program" button. The main content area is titled "Enrollment" and includes a list of links: Eligibility, Getting started, and Apply for a Trauma Quality Program as a New Site: Resource Guide. Below this, there is a section for "For our current participating hospitals..." with a list of links: QPort, Data Center (highlighted with a yellow box), TQP Education Portal, and Participant Use File. The Data Center link is highlighted with a yellow box.

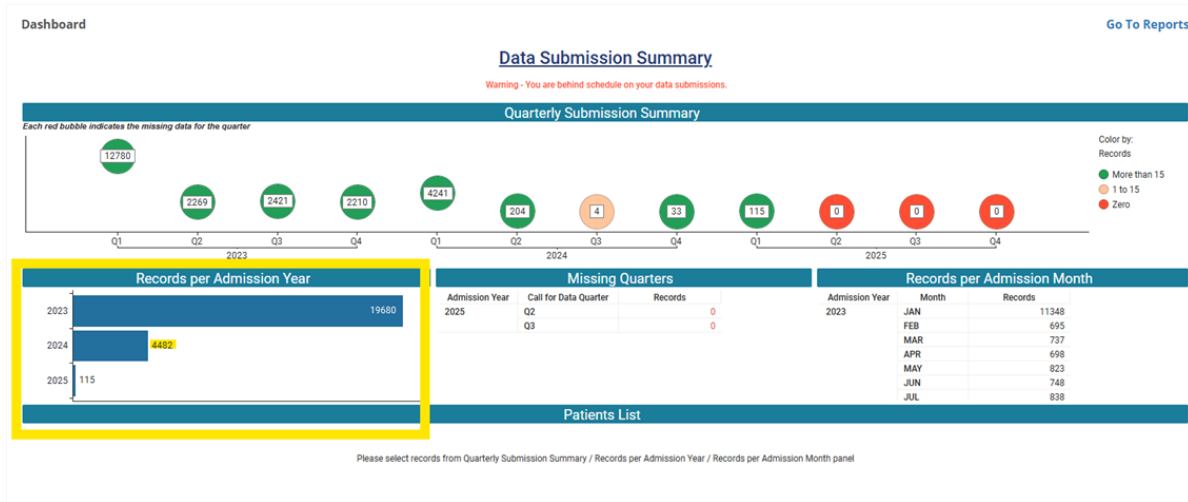
- 2) Log into the Data Center with the username and password provided to you by IQVIA (ACSTechSupport@IQVIA.com). If you are a user who submits data for multiple facilities, you will be able to select the facility you are uploading data for after logging in.



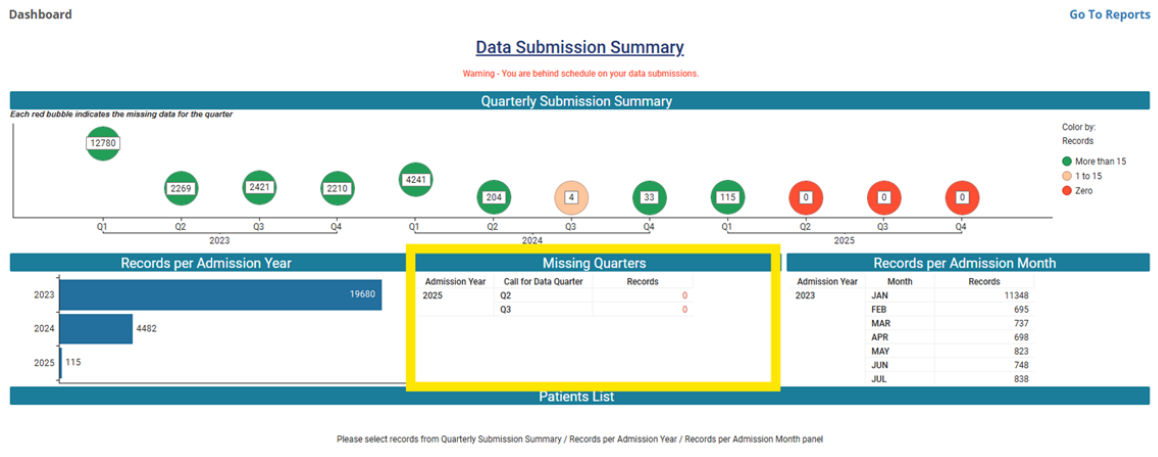
- 3) Review your **Data Submission Summary Dashboard** for any missing quarters. Missing data will reflect as:
 - a. **RED**: No data received
 - b. **TAN**: Low count of data received
 - c. **Green**: Data received



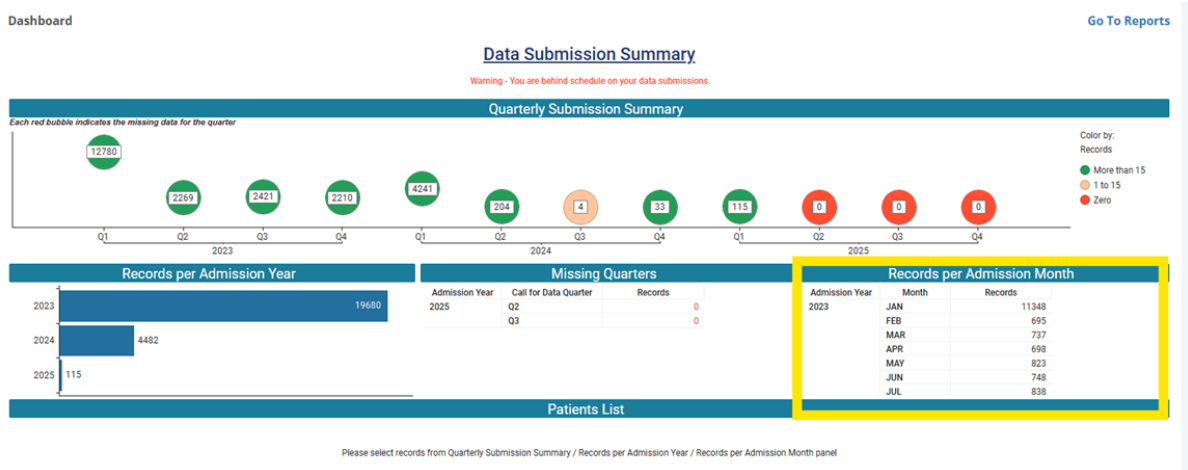
- 4) In the lower-left of the dashboard, you can review a breakdown of your **records per admission year**. This is helpful for identifying lower-than-normal admission counts for a given year.



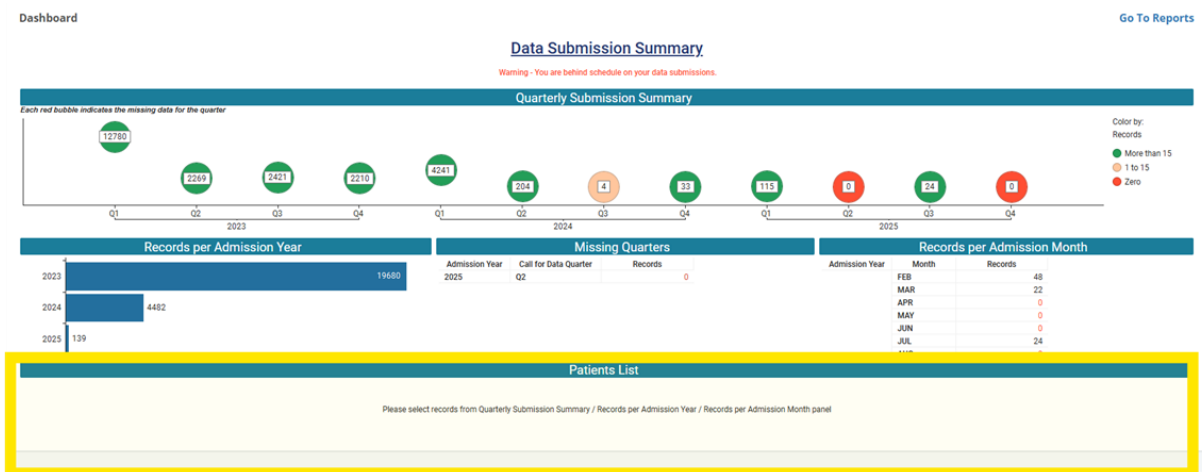
- 5) Drilling down further, in the middle-right of the dashboard, you can review a breakdown of your Missing Quarters. This will pinpoint the specific missed quarter(s) of data.



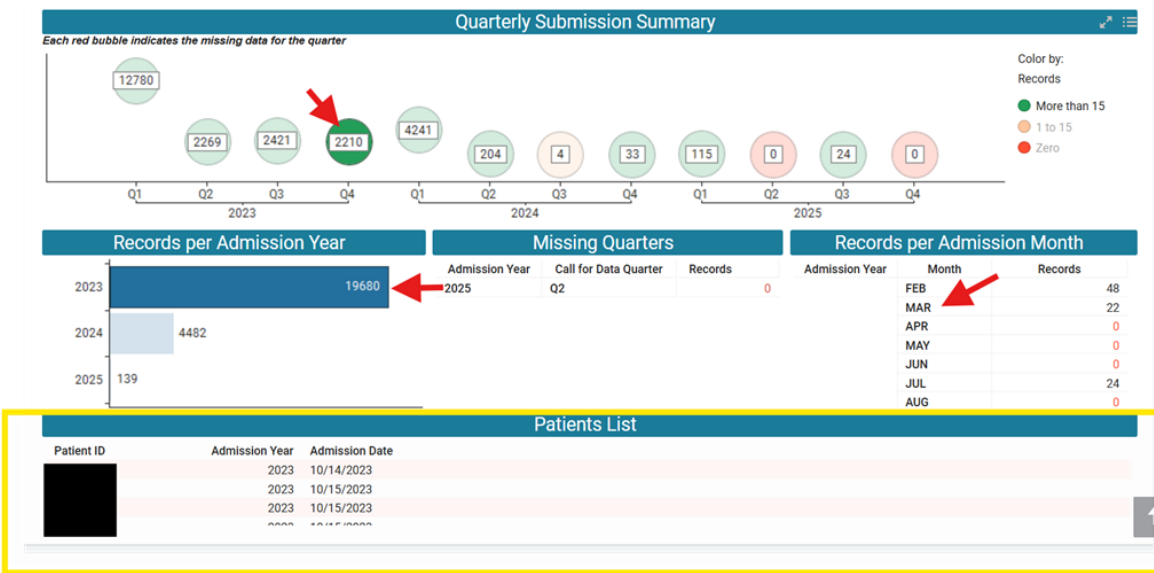
- 6) In the lower-right of the dashboard, you can review a breakdown of your records per admission month. This is helpful for identifying missing months of data or lower-than-normal admission counts for a given month.



- 7) At the bottom of the dashboard is the Patients List section. This tool allows you to view a list of patients submitted successfully in a specified period of time.



- a. To populate the Patients List, click on any data point in the Quarterly Submission Summary, Records per Admission Year, or Records per Admission Month, depending on the time period you would like to view. The corresponding patients will then appear in the Patients List.
 - i) Each record will display the Patient ID, Admission Year, and Admission Date



- b. **Pro Tip:** Pull up a maximalized Patient List by selecting the arrows in the top right corner of the Patients List table

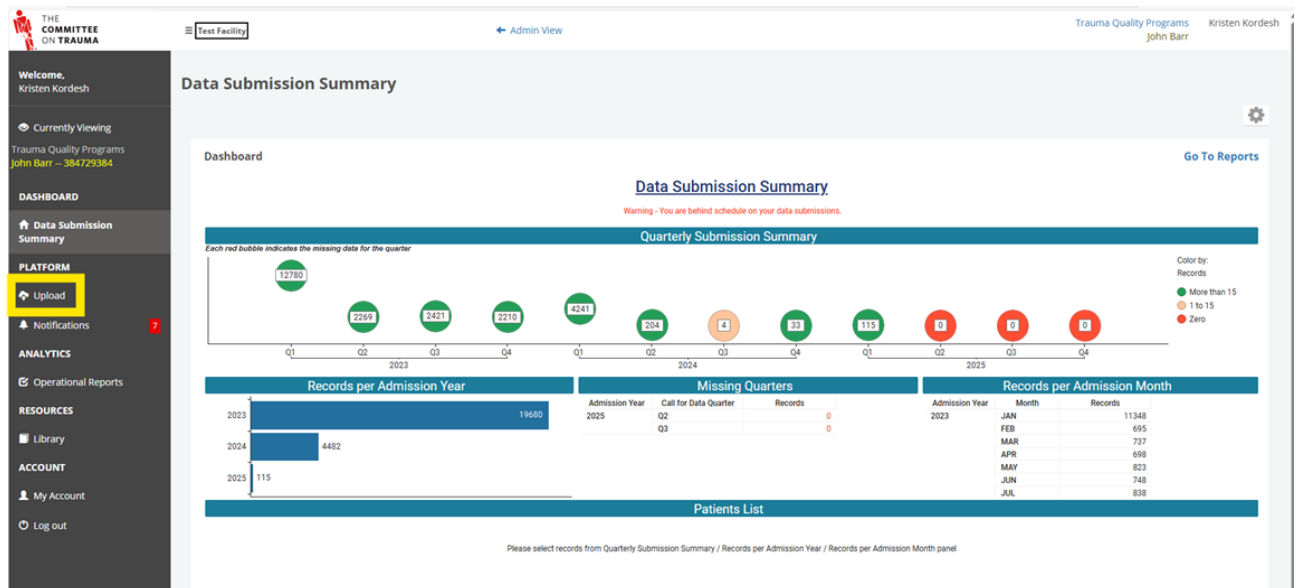


- i) The maximalized Patient List will appear like this:

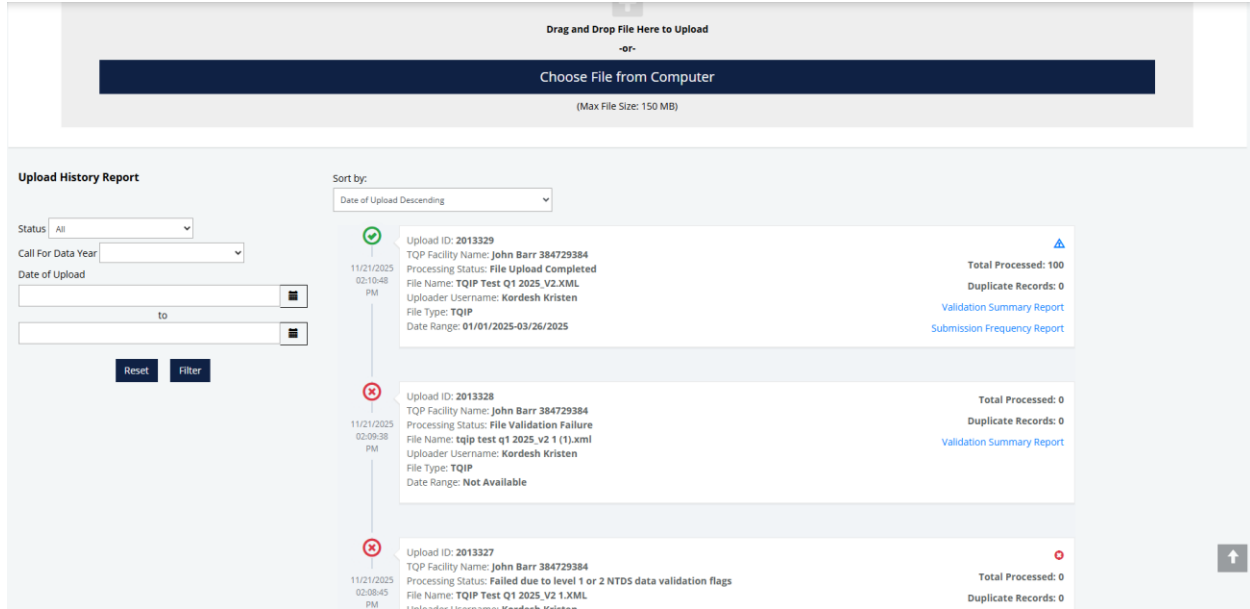
Patient ID	Admission Year	Admission Date
[Redacted]	2023	10/14/2023
[Redacted]	2023	10/16/2023
[Redacted]	2023	10/16/2023
[Redacted]	2023	10/16/2023
[Redacted]	2023	10/24/2023
[Redacted]	2023	10/24/2023
[Redacted]	2023	10/24/2023
[Redacted]	2023	10/28/2023
[Redacted]	2023	10/26/2023
[Redacted]	2023	10/26/2023
[Redacted]	2023	10/27/2023
[Redacted]	2023	10/7/2023
[Redacted]	2023	10/11/2023
[Redacted]	2023	10/29/2023
[Redacted]	2023	10/29/2023
[Redacted]	2023	10/2/2023
[Redacted]	2023	10/31/2023
[Redacted]	2023	10/2/2023
[Redacted]	2023	10/9/2023
[Redacted]	2023	10/13/2023
[Redacted]	2023	10/13/2023
[Redacted]	2023	10/3/2023
[Redacted]	2023	10/10/2023
[Redacted]	2023	10/5/2023
[Redacted]	2023	10/23/2023
[Redacted]	2023	10/25/2023
[Redacted]	2023	10/25/2023
[Redacted]	2023	10/23/2023
[Redacted]	2023	10/24/2023
[Redacted]	2023	10/17/2023
[Redacted]	2023	10/11/2023

Submission Process

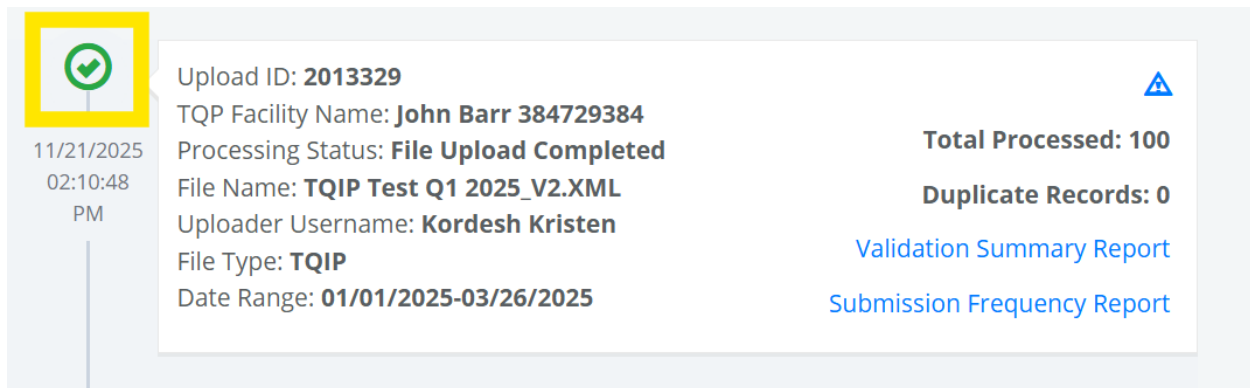
- 1) Submit your data through your vendor’s registry product. For detailed instructions on how to submit data using this new method, please reach out to your registry vendor, as they will provide instructions specific to their platform.
 - a. Your registry vendor will also provide you with messaging received from our system confirming a successful or failed submission, as well as any validation flags that require your review.
- 2) Navigate to the Upload Page by selecting “Upload” on the left-hand navigation bar



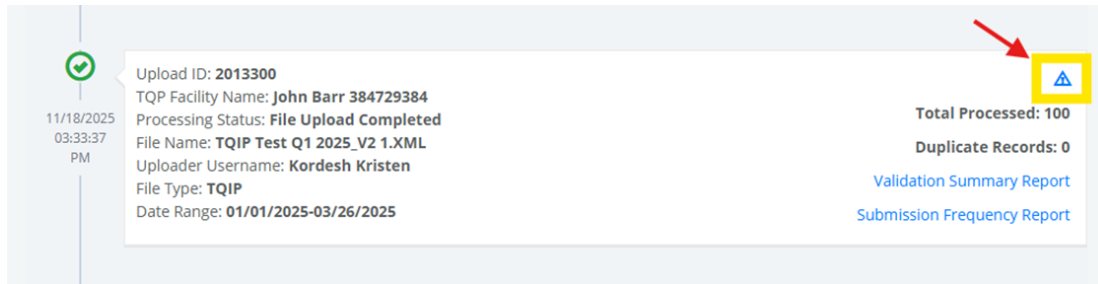
- 3) Once you have navigated to the Upload Page, you will see that the option to submit manually remains at the top of the screen, even if you submitted data directly from your registry product. You can ignore this portion of the page and scroll down to the Upload History Report section of the platform.



- 4) In the Upload History Report Section, you will see a submission history card for each attempted submission of data from your registry product.
- A successful submission that has passed the validator will have a green check mark.



- i) Please note that if you see this triangular symbol, it is not a cause for concern and it is intended to alert to you that you have resubmitted record(s) in this file.



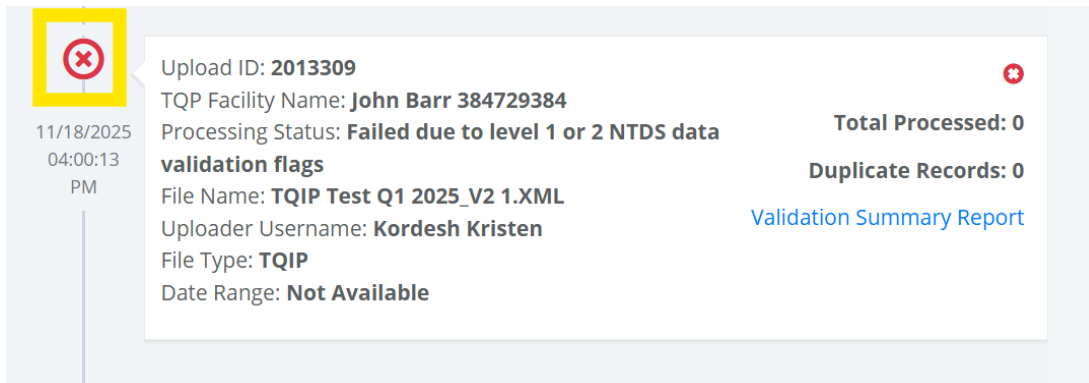
11/18/2025
03:33:37
PM

Upload ID: **2013300**
TQP Facility Name: **John Barr 384729384**
Processing Status: **File Upload Completed**
File Name: **TQIP Test Q1 2025_V2 1.XML**
Uploader Username: **Kordesh Kristen**
File Type: **TQIP**
Date Range: **01/01/2025-03/26/2025**

Total Processed: **100**
Duplicate Records: **0**
[Validation Summary Report](#)
[Submission Frequency Report](#)

A red arrow points to a yellow square containing a blue triangle with a white exclamation mark, indicating a warning or resubmission.

- 5) An unsuccessful submission that did not pass the validator will have a red X. This file will not upload to the Data Center.



11/18/2025
04:00:13
PM

Upload ID: **2013309**
TQP Facility Name: **John Barr 384729384**
Processing Status: **Failed due to level 1 or 2 NTDS data validation flags**
File Name: **TQIP Test Q1 2025_V2 1.XML**
Uploader Username: **Kordesh Kristen**
File Type: **TQIP**
Date Range: **Not Available**

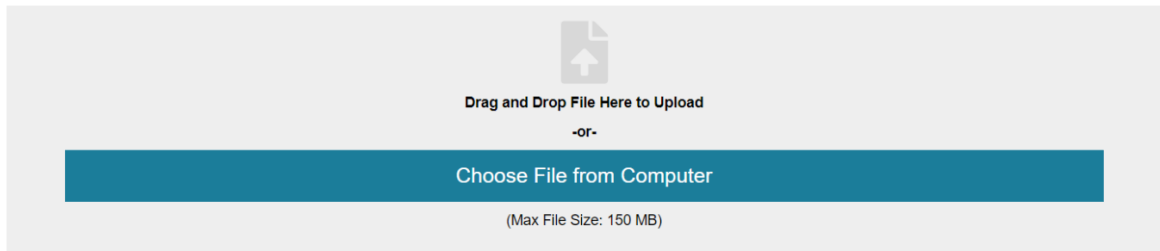
Total Processed: **0**
Duplicate Records: **0**
[Validation Summary Report](#)

A yellow square highlights a red circle with a white 'X' inside, indicating a failed submission.

- 6) The next section of this guide will demonstrate how to review validation errors using the Validation Summary Report

Validation Summary Report

- 1) A Validation Summary Report is created for each submission to the data uploader and can be accessed from the submission history card, located in the highlighted box below:



Upload History Report

Status: All

Call For Data Year: []

Date of Upload: [] to []

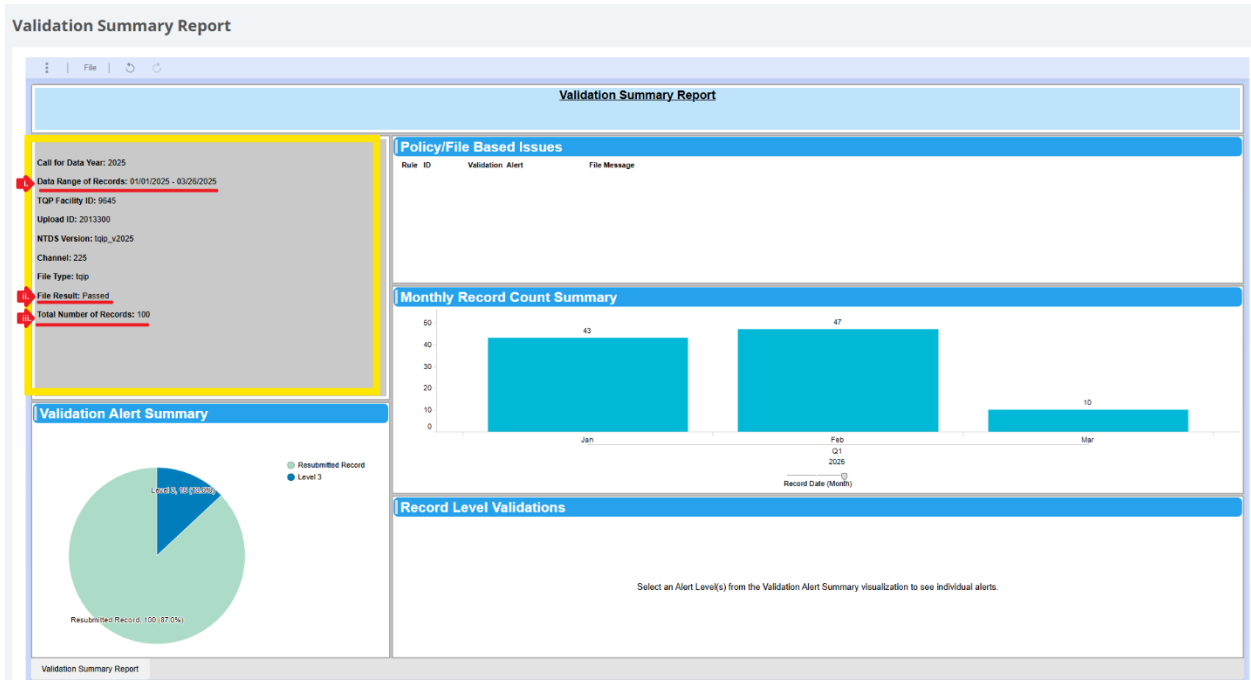
Sort by: Date of Upload Descending

12/16/2022 12:35:34 AM

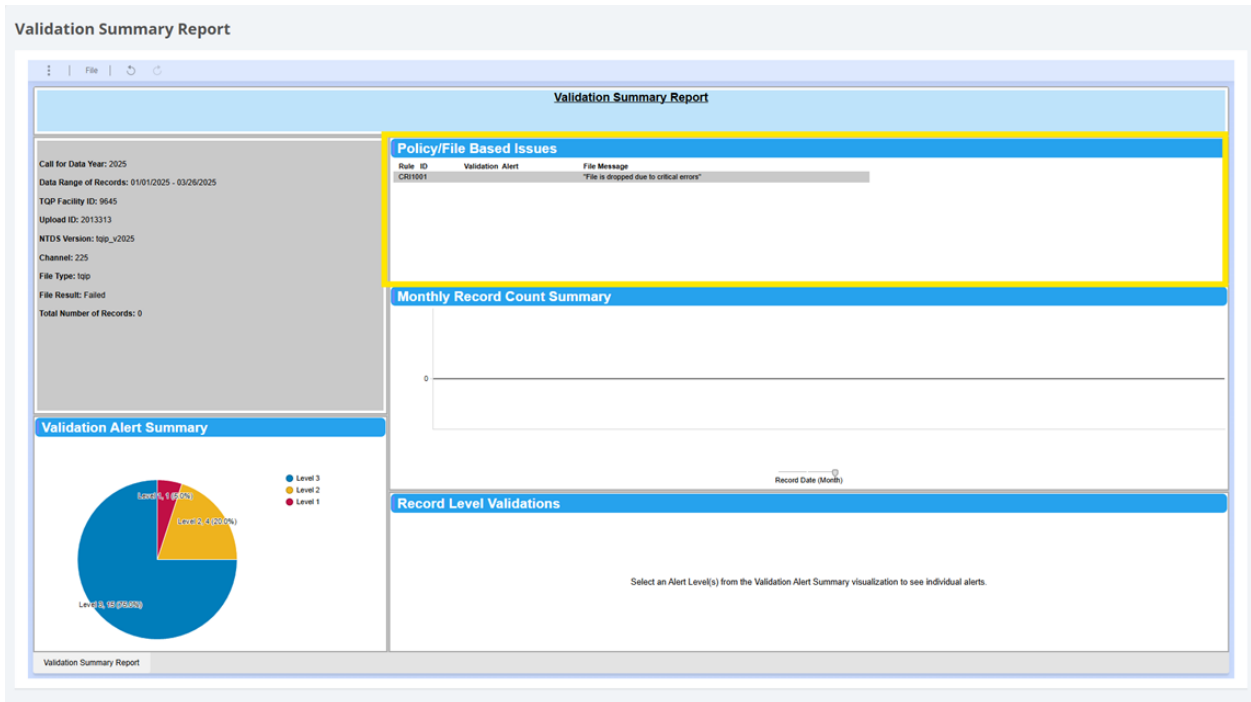
Upload ID: 1242023
TOP Facility Name: TRAUMATESTFACILITY
Processing Status: File Upload Completed
File Name: NTDS_EXAMPLE_122_202309_2.xml
Uploader Username: b Sachin
File Type: NTDB
Date Range: 01/08/2022-01/08/2022

Total Processed: 1
Duplicate Records: 0
[Validation Summary Report](#)
[Submission Frequency Report](#)

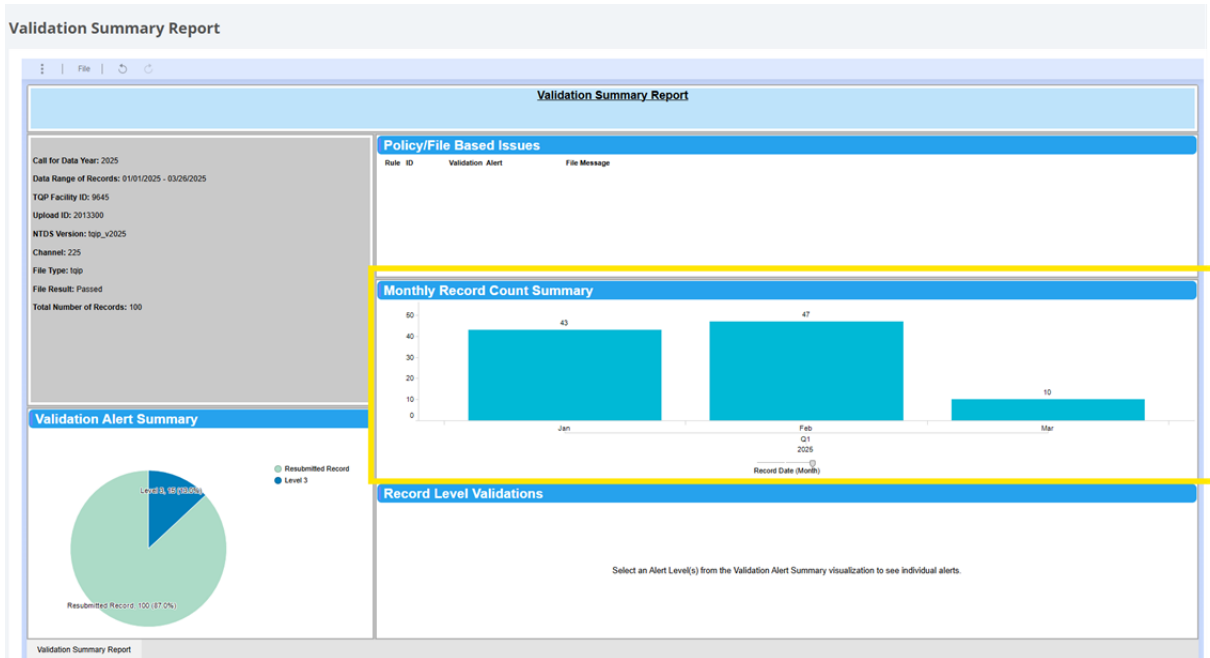
- 2) The content found in this report will be sent back to your registry product with each direct data submission so that you can make corrections to any validation flags.
 - a. Information on the submitted file will appear in the upper left-hand corner of the page. Information includes:
 - i) Date Range of Records
 - ii) File Pass or Fail result
 - iii) Number of Records submitted



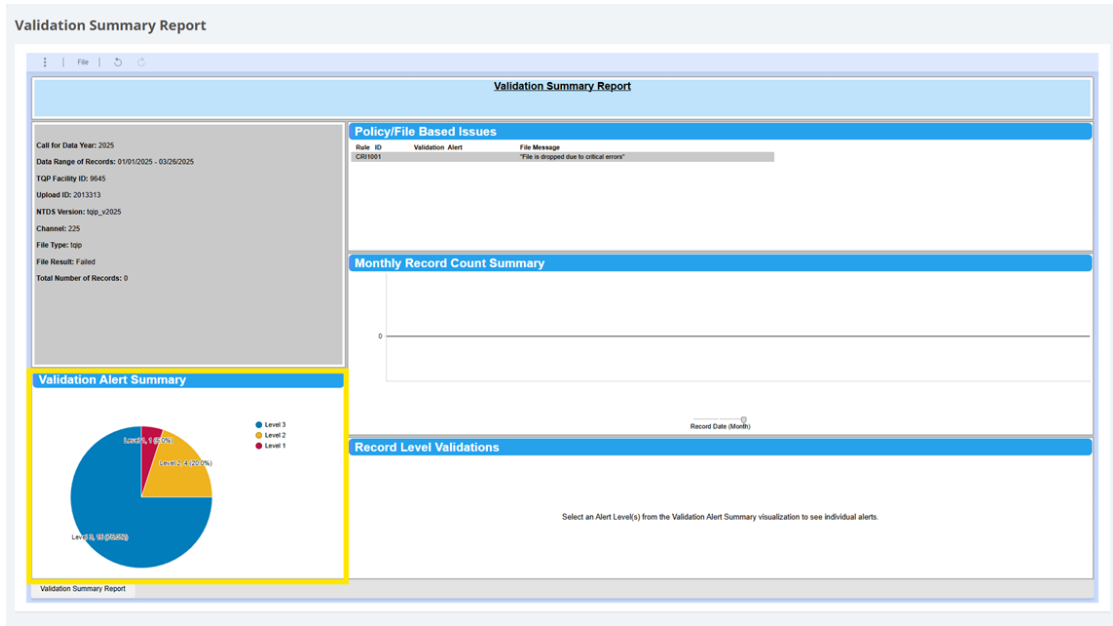
- b. Any policy validation issues will appear at the top of the page. A policy validation issue will cause your file to automatically fail the validator. Some examples of policy validation issues include:
 - i) A single file submitted with patient records from different admission years
 - ii) Submitting a file with admission dates outside of the call for data range



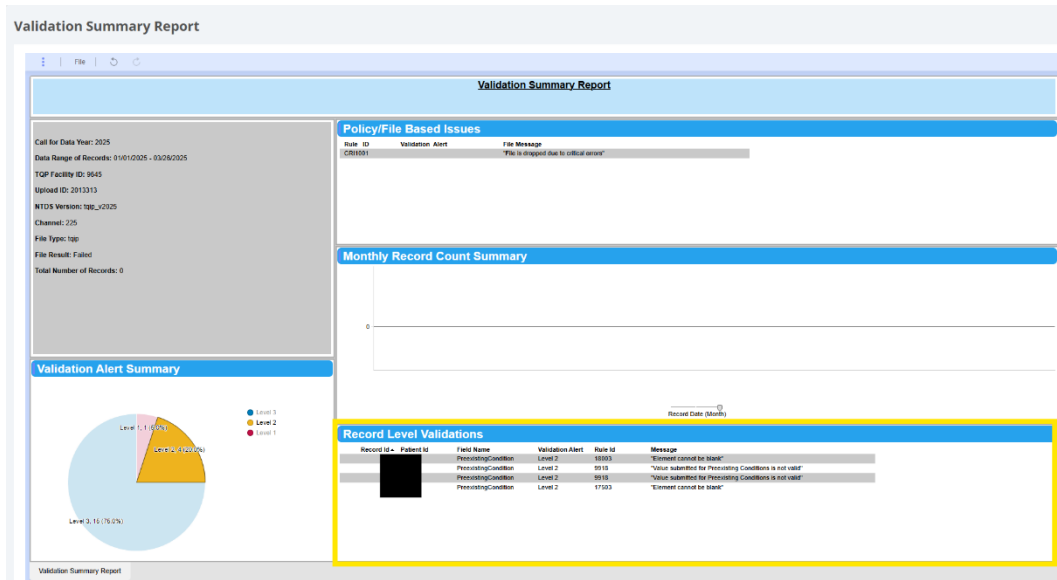
- c. A breakdown of monthly record count for submitted records can be found in the middle of the Validation Summary Report. The records are sorted by admission date.



- d. Validation flags will be displayed in a pie chart in the bottom left portion of the Validation Summary Report.
- i) **Pro Tip:** This chart is interactive and when selecting a flag level from the pie chart, the table at the bottom right will automatically populate with the flag information.



- e. The Record Level Validations table will auto-populate based on selected item(s) in the pie chart. All flag levels can be reviewed with the information listed in this table.



- 3) The Record Level Validations will allow you to identify specific patient records that are failing the validator and the associated error.
- a. **Pro Tip:** These error messages are also sent directly to your registry product, so if your product is compatible, you may be able to view these error messages directly in your registry instead

Record Level Validations					
Record Id	Patient Id	Field Name	Validation Alert	Rule Id	Message
		TbiCerebralMonitor	Level 2	10305	"Element must not be "Not Applicable" as the AIS codes provided meet the reporting criteria"
		Angiography	Level 2	11704	"Element must be and can only be "Not Applicable" when Packed Red Blood Cells and Whole Blood are 0"
		HemorrhageControlSur...	Level 2	12104	"Element must be and can only be "Not Applicable" when Packed Red Blood Cells and Whole Blood are 0"
		HospitalDischargeTime	Level 2	7803	"Element cannot be blank"
		TbiGcsQualifier	Level 2	10204	"Element must not be "Not Applicable" as the AIS codes provided meet the reporting criteria, unless the patients ED Discharge Date or Ho..."
		HemorrhageControlSur...	Level 2	12102	"Element cannot be blank"
		TbiHighestTotalGcs	Level 2	10003	"Highest GCS Total is less than GCS Motor Component of Highest GCS Total"

- b. The first two columns identify the Record Id and Patient Id

Record Level Validations					
Record Id	Patient Id	Field Name	Validation Alert	Rule Id	Message
		TbiCerebralMonitor	Level 2	10305	"Element must not be "Not Applicable" as the AIS codes provided meet the reporting criteria"
		Angiography	Level 2	11704	"Element must be and can only be "Not Applicable" when Packed Red Blood Cells and Whole Blood are 0"
		HemorrhageControlSur...	Level 2	12104	"Element must be and can only be "Not Applicable" when Packed Red Blood Cells and Whole Blood are 0"
		HospitalDischargeTime	Level 2	7803	"Element cannot be blank"
		TbiGcsQualifier	Level 2	10204	"Element must not be "Not Applicable" as the AIS codes provided meet the reporting criteria, unless the patients ED Discharge Date or Ho..."
		HemorrhageControlSur...	Level 2	12102	"Element cannot be blank"
		TbiHighestTotalGcs	Level 2	10003	"Highest GCS Total is less than GCS Motor Component of Highest GCS Total"

- c. The second column identifies the specific field that is causing the record to fail validation

Record Level Validations					
Record Id	Patient Id	Field Name	Validation Alert	Rule Id	Message
		TbiCerebralMonitor	Level 2	10305	"Element must not be "Not Applicable" as the AIS codes provided meet the reporting criteria"
		Angiography	Level 2	11704	"Element must be and can only be "Not Applicable" when Packed Red Blood Cells and Whole Blood are 0"
		HemorrhageControlSur...	Level 2	12104	"Element must be and can only be "Not Applicable" when Packed Red Blood Cells and Whole Blood are 0"
		HospitalDischargeTime	Level 2	7803	"Element cannot be blank"
		TbiGcsQualifier	Level 2	10204	"Element must not be "Not Applicable" as the AIS codes provided meet the reporting criteria, unless the patients ED Discharge Date or Ho..."
		HemorrhageControlSur...	Level 2	12102	"Element cannot be blank"
		TbiHighestTotalGcs	Level 2	10003	"Highest GCS Total is less than GCS Motor Component of Highest GCS Total"

- d. The third column displays what level of validation flag the error is.
- i) Level 1 and 2 flags are critical errors and will cause the whole file to fail the validator.
 - ii) Level 3 flags are noncritical. The file will still pass the validator with level 3 flags, but will alert you to some logic checks for your consideration.

Record Level Validations					
Record Id	Patient Id	Field Name	Validation Alert	Rule Id	Message
		TbiCerebralMonitor	Level 2	10305	"Element must not be "Not Applicable" as the AIS codes provided meet the reporting criteria"
		Angiography	Level 2	11704	"Element must be and can only be "Not Applicable" when Packed Red Blood Cells and Whole Blood are 0"
		HemorrhageControlSur...	Level 2	12104	"Element must be and can only be "Not Applicable" when Packed Red Blood Cells and Whole Blood are 0"
		HospitalDischargeTime	Level 2	7803	"Element cannot be blank"
		TbiGcsQualifier	Level 2	10204	"Element must not be "Not Applicable" as the AIS codes provided meet the reporting criteria, unless the patients ED Discharge Date or Ho..."
		HemorrhageControlSur...	Level 2	12102	"Element cannot be blank"
		TbiHighestTotalGcs	Level 2	10003	"Highest GCS Total is less than GCS Motor Component of Highest GCS Total"

- e. The fourth column identifies the specific Rule Id found in the NTDS that is causing the validation flag.

Record Level Validations					
Record Id	Patient Id	Field Name	Validation Alert	Rule Id	Message
		TbiCerebralMonitor	Level 2	10305	"Element must not be "Not Applicable" as the AIS codes provided meet the reporting criteria"
		Angiography	Level 2	11704	"Element must be and can only be "Not Applicable" when Packed Red Blood Cells and Whole Blood are 0"
		HemorrhageControlSur...	Level 2	12104	"Element must be and can only be "Not Applicable" when Packed Red Blood Cells and Whole Blood are 0"
		HospitalDischargeTime	Level 2	7803	"Element cannot be blank"
		TbiGcsQualifier	Level 2	10204	"Element must not be "Not Applicable" as the AIS codes provided meet the reporting criteria, unless the patients ED Discharge Date or Ho..."
		HemorrhageControlSur...	Level 2	12102	"Element cannot be blank"
		TbiHighestTotalGcs	Level 2	10003	"Highest GCS Total is less than GCS Motor Component of Highest GCS Total"

- f. The fifth column displays the error message associated with the Rule Id.

Record Level Validations					
Record Id	Patient Id	Field Name	Validation Alert	Rule Id	Message
		TbiCerebralMonitor	Level 2	10305	"Element must not be "Not Applicable" as the AIS codes provided meet the reporting criteria"
		Angiography	Level 2	11704	"Element must be and can only be "Not Applicable" when Packed Red Blood Cells and Whole Blood are 0"
		HemorrhageControlSur...	Level 2	12104	"Element must be and can only be "Not Applicable" when Packed Red Blood Cells and Whole Blood are 0"
		HospitalDischargeTime	Level 2	7803	"Element cannot be blank"
		TbiGcsQualifier	Level 2	10204	"Element must not be "Not Applicable" as the AIS codes provided meet the reporting criteria, unless the patients ED Discharge Date or Ho..."
		HemorrhageControlSur...	Level 2	12102	"Element cannot be blank"
		TbiHighestTotalGcs	Level 2	10003	"Highest GCS Total is less than GCS Motor Component of Highest GCS Total"