



Approved April 2023

## *External Cause of Morbidity Codes and Injury Surveillance Data Systems*

Revised April 2023, June 2017 with current title, June 2010 titled “E-codes and Injury Surveillance Data Systems”

Reaffirmed September 2003, October 1998

Originally approved September 1990 as Council Resolution CR016 titled “E-Codes”

The American College of Emergency Physicians (ACEP) supports the development of adequate injury data and surveillance systems, including external causes of morbidity codes, Crash Outcomes Data Evaluation System (CODES), and National Violent Death Reporting System (NVDRS) in all 50 states. These injury surveillance data systems are crucial for identifying, monitoring, and evaluating injury prevention strategies locally, regionally, and nationally.

The External Cause of Morbidity (V00-Y99) codes provide vital information for understanding the burden of injuries in the United States. Improving standardized collection of data in centralized morbidity data systems allows for improved data on injury epidemiology and more opportunities for data linkage with systems such as CODES and NVDRS. This information is invaluable for setting priorities and developing, implementing, and evaluating injury prevention and policy efforts.

Injury data and surveillance systems should not produce undue documentation burden on the emergency physician. When feasible, ACEP supports the use of electronic health record (EHR) data extraction via manual or validated automated or artificial intelligence based solutions to generate External Cause of Morbidity codes using existing clinical documentation.

Additionally, ACEP supports:

- Centers for Disease Control and Prevention (CDC) efforts to incorporate data element standards for fully integrated collection and extraction of data from electronic health records.
- Collaboration with other organizations and federal agencies in the development and implementation of guidelines and standards relating to emergency department (ED) External Cause of Morbidity codes completeness, accuracy, and specificity.
- The use of External Cause of Morbidity codes in the development and assessment of evidence-based injury prevention programs and policies. Efforts to develop: a) a central repository to share this data; b) linkages of appropriate additional data sets, including hospital EMR and any system with patient outcome information; and c) a user-friendly query system for ED and hospital discharge data.