ACKNOWLEDGEMENT AND AUTHORSHIP

GUIDELINES FOR PROVISION OF DATA FROM THE VICTORIAN STATE TRAUMA REGISTRY

- The Victorian State Trauma Registry (VSTORM) is a valuable source of data about major trauma patients in Victoria. Access to the data, and requests for data from the VSTORM database are subject to strict access guidelines (see Guidelines for Access to Data Collected by the Victorian Major Trauma Registry).

- Any data provided to you is on the condition that VSTORM is acknowledged as the source of the data. The suggested citation is: The data from the Victorian State Trauma registry was provided by VSTORM, a DHS sponsored project.

- Where the interpretation of VSTORM data is central to the data request, it is expected that at least one member of the VSTORM team is named as a co-author on any publication arising from use of data from this project. The actual VSTORM contributor/s to be named would depend on the actual input to the particular data exercise.

- The VSTORM data capture rate applicable to the period/s of VSTORM data provided to you must be quoted with any published data. This information will be provided to you with your completed data request.

- VSTORM would appreciate it if you could provide us (to address below) with a copy of any document or presentation in which you quote these figures. VSTORM maintains a record of all requests for VSTORM data and its subsequent use as a means of monitoring its use by those interested in trauma data.

- Please sign and email this form to (mimi.morgan@med.monash.edu.au) or post to: Mimi Morgan, Project Coordinator, VSTORM, Department of Epidemiology and Preventive Medicine, Monash University, Central and Eastern Clinical School, Alfred Hospital, Commercial Road, Melbourne, VIC 3004 or fax to: 9903 0576.

I agree to acknowledge the Victorian State Trauma Registry (VSTORM), Transport Accident Commission (TAC) and the Department of Human Services (Victoria) for the provision of data for reports, presentations, publications and documents as appropriate.

Signed: ___________________________ Date: __________________

PRINT: ________________________________

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______________________________ MOBILE NUMBER: ___________________________ E-mail: ___________________________