**An 11-year longitudinal analysis of refracture rates and public hospital service utilisation in Australia’s most populous state**

**SUPPLEMENTARY DATA: Data sources and definitions**

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| **Data source** | **Date** |
| NSW Admitted Patient Data Collection (APDC), census of public and private hospital separations  | 1 July 2007 to 30 June 2018 |
| NSW Emergency department Data Department Data Collection (EDDC)  | 1 July 2007 to 30 June 2018 |
| NSW Hospital Performance Dataset (HOPED)  | 1 July 2007 to 30 June 2018 |
| NSW Non-admitted Patient Data Collection (e.g. relevant Leading Better Value Care clinics including fracture clinic, rehabilitation (sub-acute and non-acute patient) data)  | 1 July 2015 to 30 June 2018 |
| NSW Registry of Births, Deaths and Marriages  | 1 July 2007 to 30 June 2018 |
| Register of Outcomes, Value and Experiences (ROVE)  | 1 July 2007 to 30 June 2018 |
| Activity Based Funding – national weighted activity units (NWAU) across all care settings  | 1 July 2008 to 30 June 2019 |
| **Definitions** |
| Major fractures | Single, or multiple fractures of the spine, hip, pelvis, leg and shoulder regions |
| Minor fractures | All fractures not meeting the definition of a major fracture |
| Minimal trauma fractures | Fractures resulting from an event that would not be expected to fracture a healthy bone; based on ICD-10-AM trauma cause codes or EDDC 4 (non-urgent) and 5 (semi-urgent) |
| Fractures resulting from major trauma | Based on ICD-10-AM trauma cause codes or EDDC categories 1–3 |