

Appendix A: Perinatal National Minimum Data Set items

Data element name	METeOR identifier
Current data elements	
Birth – birth order code N	269992
Birth – birth status code N	269949
Birth – birth weight total grams NNNN	269938
Birth event – birth plurality code N	269994
Birth event – delivery method code N	270035
Birth event – labour onset type code N	269942
Birth event – setting (actual) code N	269937
Birth event – state/territory of birth Australian code (ASGC 2001) N	270151
Episode of admitted patient care – separation date DDMMYYYY	270025
Establishment – organisation identifier (Australian) NNX[X]NNNNN	269973
Female (pregnant) – estimated gestational age total weeks NN	269965
Person – country of birth code (SACC 1998) NNNN	270277
Person – date of birth DDMMYYYY	287007
Person – Indigenous status code N	291036
Person – person identifier (within establishment/agency) XXXXXX[X(14)]	290046
Person – sex code N	287316
Endorsed new data elements	
Birth – Apgar score (at 5 minutes) code NN	269989

Appendix B: State and territory perinatal reports

Individual state and territory health authorities publish reports based on their state or territory perinatal collection either annually or periodically. For the 2003 data, the following state and territory reports have been published:

New South Wales

NSW Department of Health 2004. New South Wales mothers and babies 2003. NSW Public Health Bulletin Supplement, 15 (S-5).

Victoria

The Consultative Council on Obstetric and Paediatric Mortality and Morbidity 2004. Annual report for the year 2003, incorporating the 42nd survey of perinatal deaths in Victoria. Melbourne.

Queensland

Queensland Health 2005. Perinatal statistics Queensland 2003. Brisbane: Queensland Health.

Western Australia

Gee V & Green TJ 2004. Perinatal statistics in Western Australia, 2003. Perth: Department of Health, Western Australia.

South Australia

Chan A, Scott J, Nguyen A & Sage L 2005. Pregnancy outcome in South Australia 2003. Adelaide: Department of Health.

Maternal, Perinatal and Infant Mortality Committee 2005. Maternal, perinatal and infant mortality in South Australia 2003, including the South Australian protocol for investigation of stillbirths. Adelaide: Department of Health.

Tasmania

DHHS (Department of Health and Human Services) 2005. Council of Obstetric and Paediatric Mortality and Morbidity, Tasmania: annual report for 2003. Hobart: Department of Health and Human Services.

Appendix C: Data collection contacts

State and territory perinatal data

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Abbreviations

ABS	Australian Bureau of Statistics
ACT	Australian Capital Territory
AIHW	Australian Institute of Health and Welfare
ALSWH	Australian Longitudinal Study on Women's Health
ANZNN	Australian and New Zealand Neonatal Network
ASCCSS	Australian Standard Classification of Countries for Social Statistics
g	gram
HDSC	Health Data Standards Committee
LMP	First day of the last menstrual period
METeOR	Metadata online registry
NHDD	National Health Data Dictionary
NHIG	National Health Information Group
NICU	Neonatal intensive care unit
NMDS	National Minimum Data Set
NPDC	National Perinatal Data Collection
NPDDC	National Perinatal Data Development Committee
NPSU	AIHW National Perinatal Statistics Unit
NSW	New South Wales
NT	Northern Territory
PSANZ-PDC	Perinatal Society of Australia and New Zealand Perinatal Death Classification
PSANZ-NDC	Perinatal Society of Australia and New Zealand Neonatal Death Classification
Qld	Queensland
SA	South Australia
SACC	Standard Australian Classification of Countries
SIMC	Statistical Information Management Committee
Tas	Tasmania
UNSW	University of New South Wales
Vic	Victoria
WA	Western Australia
WHO	World Health Organization
n.a.	Not available
n.p.	Not published

Glossary

Antepartum fetal death: fetal death occurring before the onset of labour.

Apgar score: numerical score used to indicate the baby's condition at 1 minute and 5 minutes after birth.

Assisted vaginal/instrumental delivery: vaginal delivery using forceps or vacuum extraction.

Augmentation of labour: intervention after the onset of labour to assist the progress of labour.

Baby's length of stay: number of days between date of birth and date of separation from the hospital of birth (calculated by subtracting the date of birth from the date of separation).

Birth status: status of the baby immediately after birth.

Birthweight: the first weight of the baby (stillborn or liveborn) obtained after birth (usually measured to the nearest 5 grams and obtained within one hour of birth).

Caesarean section: operative birth through an abdominal incision.

Early neonatal death: death of a liveborn baby within seven days of birth.

Epidural: injection of anaesthetic agent into the epidural space of the spinal cord.

Episiotomy: an incision of the perineum and vagina to enlarge the vulval orifice.

Extremely low birthweight: birthweight of less than 1,000 grams.

Fetal death (stillbirth): death prior to the complete expulsion or extraction from its mother of a product of conception of 20 or more completed weeks of gestation or of 400 grams or more birthweight. The death is indicated by the fact that after such separation the fetus does not breathe or show any other evidence of life, such as beating of the heart, pulsation of the umbilical cord, or definite movement of voluntary muscles.

Forceps: assisted birth using a metallic obstetric instrument.

Gestational age: the duration of pregnancy in completed weeks calculated from the date of the first day of a woman's last menstrual period and her baby's date of birth, or via ultrasound, or derived from clinical assessment during pregnancy or from examination of the baby after birth.

Grand multipara: pregnant woman who has had four or more previous pregnancies resulting in a live birth or stillbirth.

Induction of labour: intervention to stimulate the onset of labour.

Intrapartum fetal death: fetal death occurring during labour.

Late neonatal death: death of a liveborn baby after seven completed days and before 28 completed days.

Live birth: the complete expulsion or extraction from its mother of a product of conception, irrespective of the duration of the pregnancy, which, after such separation, breathes or shows any other evidence of life, such as beating of the heart, pulsation of the umbilical cord, or definite movement of voluntary muscles, whether or not the umbilical cord has been cut or the placenta is attached; each product of such a birth is considered liveborn (WHO definition).

Low birthweight: birthweight of less than 2,500 grams.

Maternal age: mother's age at the birth of her baby.

Mode of separation: status at separation of patient (discharge/transfer/death) and place to which patient is released (where applicable).

Mother's length of stay: number of days between admission date (during the admission resulting in a birth) and separation date (from the hospital where birth occurred). The interval is calculated by subtracting the date of admission from the date of separation.

Multipara: pregnant woman who has had at least one previous pregnancy resulting in a live birth or stillbirth.

Neonatal care levels: Level I care is for normal healthy term babies, some of whom may need short-term observation during the first few hours of life.

Level II refers to a nursery that generally has babies born at 32–36 weeks gestation weighing around 1,500 to 2,500 grams at birth. It includes care for babies who require intravenous therapy or antibiotics, and/or those who are convalescing after intensive care, and/or those who need their heart rate or breathing monitored, and/or those who need short-term oxygen therapy.

Level III or intensive care refers to the care of newborn infants who require more specialised care and treatment. It includes most babies born at less than 32 weeks gestation or less than 1,500 grams birthweight, and others who may require such interventions as intravenous feeding, and/or surgery, and/or cardiorespiratory monitoring for management of apnoea or seizures, and/or require assisted ventilation, and/or supplemental oxygen over 40% or long-term oxygen (Donoghue 2004).

Neonatal death: death of a liveborn baby within 28 days of birth.

Neonatal morbidity: any condition or disease of the baby diagnosed after birth and before separation from care.

Parity: number of previous pregnancies resulting in live births or stillbirths.

Perinatal death: a fetal or neonatal death of at least 20 weeks gestation or at least 400 grams birthweight.

Perineal status: status of the perineum after the birth. May involve surgical suturing of perineal laceration or episiotomy incision.

Plurality: the number of births resulting from a pregnancy.

Postneonatal death: death of a liveborn baby after 28 days and within one year of birth.

Post-term birth: birth at 42 or more completed weeks of gestation.

Presentation at birth: presenting part of the fetus at birth.

Preterm birth: birth before 37 completed weeks of gestation.

Primipara: pregnant woman who has had no previous pregnancy resulting in a live birth or stillbirth.

Resuscitation of baby: active measures taken shortly after birth to assist the baby's ventilation and heartbeat, or to treat depressed respiratory effort and to correct metabolic disturbances.

Spontaneous vaginal: birth without intervention in which the baby's head is the presenting part.

Stillbirth: see Fetal death.

Teenage mother: mother aged less than 20 years at the birth of her baby.

Vacuum extraction: assisted birth using a suction cap applied to the baby's head.

Vaginal breech: vaginal birth in which the baby's buttocks or lower limbs are the presenting parts.

Very low birthweight: birthweight of less than 1,500 grams.

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