

## New York State Guidelines

**NUMBER OF LIVE BIRTHS (If Multiple Births)** This is used to check the values entered in plurality and birth order fields.

**NUMBER OF FETAL DEATHS (If Multiple Births)** This is used to check the values entered in plurality and birth order fields.

**BIRTHWEIGHT** Enter the birthweight of the infant as it is recorded on the hospital record. Enter the birthweight in either grams **OR** pounds and ounces, depending on the scales used. Do not convert from one measure to the other. The SPDS will display the weight in both grams and pounds and ounces.

### **ABNORMAL CONDITIONS OF THE NEWBORN**

- **Assisted ventilation required immediately after delivery:** Infant given manual breaths with bag and mask or bag and endotracheal tube within the first several minutes from birth for any duration. Excludes oxygen only and laryngoscopy for aspiration of meconium.
- **Assisted ventilation required for more than 6 hours:** Infant given mechanical ventilation (breathing assistance) by any method for more than 6 hours. Includes conventional, high frequency and/or continuous positive airway pressure (CPAP).
- **Neonatal Intensive Care Unit (NICU):** Admission into a unit staffed and equipped to provide continuous mechanical ventilatory support for the newborn. This includes special nurseries and newborns transferred to a hospital with a NICU for the purpose of providing that infant with intensive care (e.g. surgery or ventilatory support).
- **Newborn given surfactant replacement therapy:** Endotracheal instillation of a surface-active suspension for the treatment of surfactant deficiency due to either preterm birth or pulmonary injury resulting in decreased lung compliance (respiratory distress). Includes both artificial and extracted natural surfactant.
- **Antibiotics received by the newborn for suspected neonatal sepsis:** Any antibacterial drug given systemically (intravenous or intramuscular.) (e.g. penicillin, ampicillin, gentamicin, cefotaxime, etc.) to treat neonatal sepsis, a blood-borne bacterial infection of the newborn.
- **Seizure or serious neurologic dysfunction:** Seizure defined as any involuntary repetitive, convulsive movement or behavior. Serious neurologic dysfunction defined as severe alteration of alertness such as obtundation, stupor, or coma, i.e. hypoxicischemic encephalopathy. Excludes lethargy or hypotonia in the absence of other neurologic findings. Excludes symptoms associated with Central Nervous System (CNS) congenital anomalies.
- **Significant birth injury:** (e.g., skeletal fracture(s), peripheral nerve injury and/or soft tissue/solid organ hemorrhage that requires intervention) Defined as present immediately following delivery or manifesting following delivery. Includes any bony fracture or weakness, but excludes fractured clavicles and transient facial nerve palsy. Soft tissue hemorrhage requiring evaluation and/or treatment includes sub-galeal (progressive extravasation within the scalp) hemorrhage, giant cephalohematoma, extensive truncal, facial and/ or extremity ecchymosis accompanied by evidence of anemia and/or hypovolemia, and/ or hypotension. Solid organ hemorrhage includes subcapsular hematoma of the liver, fractures of the spleen, or adrenal hematoma. All require confirmation by diagnostic imaging or exploratory laparotomy. Note: DO NOT include Intraventricular hemorrhage (IVH) in this item. See below for listing of significant birth injuries:
  - o Adrenal hemorrhage/hematoma
  - o Brachial plexus injury (Also reported as Erb's Palsy, Ducjenne-Erb Paralysis, Klumpke's Palsy, Klumpke-Déjérine Syndrome)
  - o Cranial fracture (exclude cephalohematoma, hemorrhagic caput succedaneum)
  - o Facial palsy – non transient
  - o Femur fracture
  - o Humerus fracture
  - o Intracranial hemorrhage, including subdural or subarachnoid hemorrhage, but excluding intraventricular hemorrhage (IVH)
  - o Peripheral nerve injury

## Guidelines: January 09

- o Phrenic nerve injury
- o Recurrent laryngeal nerve injury
- o Ruptured liver and/or spleen
- o Skeletal fractures – Exclude clavicle fractures
- o Skull/cranial fracture also reported by skull bone: parietal, frontal or occipital fracture
- o Soft tissue or solid organ hemorrhage
- o Subgaleal hemorrhage
- o Subcapsular hemorrhage of liver
- o None: Select this item if none of the items listed are selected, even if other abnormal conditions of the newborn exist.
- o Unknown: Select this item if it is not currently known if any of the listed conditions of the newborn exist.

### • FETAL PRESENTATION

- o **Cephalic** – Synonyms include vertex. Presenting part of the fetus listed as occiput anterior (OA), occiput posterior (OP).
- o **Breech** – Presenting part of the fetus listed as breech, complete breech, frank breech, footling breech.
- o **Other** – Any other presentation or presenting part not listed above.
- o **Unknown**

### • ROUTE & METHOD

Indicate how delivery was finally accomplished, regardless of whether other procedures were attempted prior to successful delivery.

### • CESAREAN SECTION HISTORY

- . **Previous C-Section** Select 'Yes' if mom has had a previous operative delivery in which the fetus was extracted through an incision in the maternal abdominal and uterine walls
- . **Number** Indicate the number of previous c-section deliveries.

### • TRIAL OF LABOR

If infant was delivered by cesarean, indicate whether mother had a trial of labor before the cesarean.

### INDICATIONS FOR C-SECTION

- . **Failure to progress** Select this item if a cesarean was performed because the labor progressed more slowly than normal or because labor stopped before full dilation of the cervix; synonym: dystocia and arrest of descent.
- . **Fetus at Risk/ NFS** Select this item if a cesarean was performed because of concerns about the fetus's wellbeing and ability to tolerate labor.
  - o Evidence from a biophysical profile of disturbance in utero
  - o Positive contraction stress test, the presence of late decelerations, during oxytocin stimulation with half or more of the contractions
  - o Breech or a malpresentation such as transverse lie, shoulder presentation
  - o Frank prolapse of the cord
  - o Fetal structural anomaly, such as fetal hydrocephalus
  - o Persistent late decelerations during most contractions
  - o Persistent variable decelerations during most contractions, often 60 to 80 bpm
  - o Prolonged bradycardia below 120 to 100 bpm 10 minutes or longer
  - o Prolonged tachycardia above 160 to 180 bpm persisting longer than 10 minutes
  - o Fetal scalp pH of less than 7.2. Include acidosis.
- **Malpresentation** Select this item if the presenting part of the fetal body within the birth canal, or nearest to it was NOT the vertex or the occipital fontanel. Synonyms include face presentation, brow presentation, frank breech, complete breech, footling breech, transverse lie, shoulder presentation and oblique lie.
- **Maternal Condition - Pregnancy Related** Select this item if the mother had an obstetric condition that led to cesarean delivery, e.g. abruptio placenta, placenta previa.

- **Maternal Condition – Not Pregnancy Related** Select this item if the mother had a non-obstetric medical condition that led to cesarean delivery, e.g. active genital herpes, HIV infection.
- **Elective** Select this item if the cesarean delivery was planned and scheduled prior to the onset of labor. In addition to selecting “Elective”, you must also select a specific indication for the cesarean, unless it was done for a non-medical indication.
- **Other** Select this item if the indication for cesarean does not fall into any of the other categories.
- **Refused VBAC** Select this item if the mother was eligible for a trial of labor, but refused, opting for repeat cesarean delivery instead. Synonym: refused voluntary trial of labor.
- **Previous C-Section** Select this item if the mother had a previous cesarean delivery and was not eligible for trial of labor, e.g. due to classical uterine scar.
- **Unknown**

**ANALGESIA** Select “yes” for analgesia if during labor and/or delivery the mother received an analgesic medication, that is, one that decreases the sensation of pain (relief of pain). It may include any narcotic or non-narcotic painkiller. A sedative, that is, a substance that calms activity or excitement, does not qualify as analgesia when administered alone. Intrathecal (spinal) analgesia (narcotic +/- a small amount of local anesthetic), also called “intrathecal Duramorph,” should be reported here AND as “Anesthesia, Spinal,” since it carries risks and side effects of both. Exclude analgesics administered during other procedures performed after delivery such as episiotomy or laceration repair.

**ANESTHESIA USED FOR DELIVERY** Indicate all types of anesthesia used during this labor and/or delivery. Anesthesia is a medication or other agent used to cause a loss of feeling (loss of sensation of pain). Report only the type of anesthesia used during labor and delivery, not the anesthetic agent.

- **Epidural:** Select this item if the denervation of the vaginal region and lower abdomen was obtained by the introduction of an anesthetic agent into the epidural or peridural space.
- **Local:** Select this item if the denervation of the vaginal area was obtained by the introduction of an anesthetic agent into the perineum for the provision of an episiotomy or repair of a laceration or episiotomy wound.
- **Spinal:** Select this item if the denervation of the vaginal region was obtained by the introduction of an anesthetic agent into the subarachnoid space. Synonyms include saddle block. Intrathecal (spinal) analgesia (narcotic +/- a small amount of local anesthetic), also called “intrathecal Duramorph,” should be reported here AND as “Analgesia,” since it carries risks and side effects of both.
- **General Inhalation:** Select this item if there was the reduction of pain over the entire body induced by respiration of a gaseous anesthetic agent.
- **Paracervical:** Select this item if the denervation of the vaginal region was obtained by the introduction of an anesthetic agent to the tissues surrounding the cervix of the uterus.
- **General Intravenous:** Select this item if there was the reduction of pain over the entire body induced by the introduction of an anesthetic agent into a vein.
- **Pudendal:** Select this item if the denervation of the pudendal nerve was obtained by an injection of an anesthetic agent.
- **None** Select this item if none of the items listed are selected.
- **Unknown at this time**

#### **OTHER PROCEDURES PERFORMED AT DELIVERY**

Record the procedures performed at the time of delivery or during the birth hospitalization.

- **Episiotomy & Repair** Select this procedure if an incision was made to enlarge the vaginal opening and then repaired.
- **Sterilization** Select this procedure if at any time during the birth hospitalization the mother received any procedure that permanently prevented future pregnancies. Synonyms include bilateral tubal ligation (BTL), hysterectomy, laparoscopic tubal ligation, oophorectomy, pomey, salpingectomy, tubal ligation.
- **None** Select this item if none of the items listed are selected.
- **Unknown at this time**