

Birth event—birth plurality, code N

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Birth event—birth plurality, code N

Identifying and definitional attributes

Metadata item type:	Data Element
Short name:	Birth plurality
Synonymous names:	Multiple birth
METEOR identifier:	269994
Registration status:	Health , Superseded 07/03/2014
Definition:	The number of babies resulting from a single pregnancy, as represented by a code.
Data Element Concept:	Birth event—birth plurality
Value Domain:	Birth plurality code N

Value domain attributes

Representational attributes

Representation class:	Code	
Data type:	Number	
Format:	N	
Maximum character length:	1	
	Value	Meaning
Permissible values:	1	Singleton
	2	Twins
	3	Triplets
	4	Quadruplets
	5	Quintuplets
	6	Sextuplets
	8	Other
Supplementary values:	9	Not stated

Data element attributes

Collection and usage attributes

Guide for use:	Plurality of a pregnancy is determined by the number of live births or by the number of fetuses that remain in utero at 20 weeks gestation and that are subsequently born separately. In multiple pregnancies, or if gestational age is unknown, only live births of any birthweight or gestational age, or fetuses weighing 400 g or more, are taken into account in determining plurality. Fetuses aborted before 20 completed weeks or fetuses compressed in the placenta at 20 or more weeks are excluded.
Collection methods:	This data should be collected routinely for persons aged 28 days or less.

Source and reference attributes

Submitting organisation:	National Perinatal Data Development Committee
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Relational attributes

Related metadata references:

Has been superseded by [Birth event—birth plurality, code N Health](#), Superseded 02/08/2017
[Indigenous](#), Superseded 22/10/2018

Has been superseded by [Female \(pregnant\)—pregnancy plurality, code N Health](#), Recorded 19/09/2007

Is re-engineered from  [Birth plurality, version 1, DE, NHDD, NHMG, Superseded 01/03/2005.pdf](#) (15.6 KB)
No registration status

Implementation in Data Set Specifications:

[Health care client identification Health](#), Superseded 04/05/2005

[Health care client identification DSS Health](#), Superseded 03/12/2008

[Health care client identification DSS Health](#), Retired 20/03/2013

DSS specific information:

While this piece of information is normally recorded for multiple births against the mother's record, if the health care client volunteers the information, it should be recorded.

[Perinatal NMDS](#)

[Health](#), Superseded 07/12/2005

Implementation start date: 01/07/2005

Implementation end date: 30/06/2006

[Perinatal NMDS](#)

[Health](#), Superseded 06/09/2006

Implementation start date: 01/07/2006

Implementation end date: 30/06/2007

[Perinatal NMDS 2007-2008](#)

[Health](#), Superseded 05/02/2008

Implementation start date: 01/07/2007

Implementation end date: 30/06/2008

[Perinatal NMDS 2008-2010](#)

[Health](#), Superseded 02/12/2009

Implementation start date: 01/07/2008

Implementation end date: 30/06/2010

[Perinatal NMDS 2010-2011](#)

[Health](#), Superseded 21/12/2010

Implementation start date: 01/07/2010

Implementation end date: 30/06/2011

DSS specific information:

National Minimum Data Set (NMDS) Perinatal:

Multiple pregnancy increases the risk of complications during pregnancy, labour and delivery and is associated with higher risk of perinatal morbidity and mortality.

Plurality of pregnancy is determined by the number of babies that are in scope for the Perinatal NMDS (i.e. births of at least 20 weeks gestation or at least 400g birth weight). In the case of multiple pregnancies, if one or more fetuses were removed from the uterus before 20 weeks gestation, for example, by abortion (spontaneous, induced or fetal reduction) they are not considered in determining the birth plurality. For example, in a twin pregnancy, where one twin is aborted before 20 weeks gestation and the remaining twin is born and is in scope for the Perinatal NMDS, plurality is coded as '1 Singleton'. If both twins are born at 20 weeks gestation or more, plurality is coded as '2 Twins'.

This item is collected for the mother only.

[Perinatal NMDS 2011-12](#)

[Health](#), Superseded 07/03/2012

Implementation start date: 01/07/2011

Implementation end date: 30/06/2012

DSS specific information:

National Minimum Data Set (NMDS) Perinatal:

Multiple pregnancy increases the risk of complications during pregnancy, labour and delivery and is associated with higher risk of perinatal morbidity and mortality.

Plurality of pregnancy is determined by the number of babies that are in scope for the Perinatal NMDS (i.e. births of at least 20 weeks gestation or at least 400g birth weight). In the case of multiple pregnancies, if one or more fetuses were removed from the uterus before 20 weeks gestation, for example, by abortion (spontaneous, induced or fetal reduction) they are not considered in determining the birth plurality. For example, in a twin pregnancy, where one twin is aborted before 20 weeks gestation and the remaining twin is born and is in scope for the Perinatal NMDS, plurality is coded as '1 Singleton'. If both twins are born at 20 weeks gestation or more, plurality is coded as '2 Twins'.

This item is collected for the mother only.

[Perinatal NMDS 2012-13](#)

[Health](#), Superseded 07/02/2013

Implementation start date: 01/07/2012

Implementation end date: 30/06/2013

DSS specific information:

National Minimum Data Set (NMDS) Perinatal:

Multiple pregnancy increases the risk of complications during pregnancy, labour and delivery and is associated with higher risk of perinatal morbidity and mortality.

Plurality of pregnancy is determined by the number of babies that are in scope for the Perinatal NMDS (i.e. births of at least 20 weeks gestation or at least 400g birth weight). In the case of multiple pregnancies, if one or more fetuses were removed from the uterus before 20 weeks gestation, for example, by abortion (spontaneous, induced or fetal reduction) they are not considered in determining the birth plurality. For example, in a twin pregnancy, where one twin is aborted before 20 weeks gestation and the remaining twin is born and is in scope for the Perinatal NMDS, plurality is coded as '1 Singleton'. If both twins are born at 20 weeks gestation or more, plurality is coded as '2 Twins'.

This item is collected for the mother only.

[Perinatal NMDS 2013-14](#)

[Health](#), Superseded 07/03/2014

Implementation start date: 01/07/2013

Implementation end date: 30/06/2014

DSS specific information:

National Minimum Data Set (NMDS) Perinatal:

Multiple pregnancy increases the risk of complications during pregnancy, labour and delivery and is associated with higher risk of perinatal morbidity and mortality.

Plurality of pregnancy is determined by the number of babies that are in scope for the Perinatal NMDS (i.e. births of at least 20 weeks gestation or at least 400g birth weight). In the case of multiple pregnancies, if one or more fetuses were removed from the uterus before 20 weeks gestation, for example, by abortion (spontaneous, induced or fetal reduction) they are not considered in determining the birth plurality. For example, in a twin pregnancy, where one twin is aborted before 20 weeks gestation and the remaining twin is born and is in scope for the Perinatal NMDS, plurality is coded as '1 Singleton'. If both twins are born at 20 weeks gestation or more, plurality is coded as '2 Twins'.

This item is collected for the mother only.

Indicators:

[Indigenous primary health care: PI02a-Number of Indigenous babies born within the previous 12 months whose birth weight results were low, normal or high, 2013](#)

[Health](#), Superseded 21/11/2013

[Indigenous](#), Superseded 21/11/2013

[Indigenous primary health care: PI02a-Number of Indigenous babies born within the previous 12 months whose birth weight results were low, normal or high, 2014](#)

[Health](#), Superseded 13/03/2015

[Indigenous](#), Superseded 13/03/2015

[Indigenous primary health care: PI02b-Proportion of Indigenous babies born within the previous 12 months whose birth weight results were low, normal or high, 2013](#)

[Health](#), Superseded 21/11/2013

[Indigenous](#), Superseded 21/11/2013

[Indigenous primary health care: PI02b-Proportion of Indigenous babies born within the previous 12 months whose birth weight results were low, normal or high, 2014](#)

[Health](#), Superseded 13/03/2015

[Indigenous](#), Superseded 13/03/2015

[National Core Maternity Indicators: PI 05-Induction of labour for selected women giving birth for the first time \(2013\)](#)

[Health](#), Superseded 02/02/2016

[National Core Maternity Indicators: PI 06-Caesarean section for selected women giving birth for the first time \(2013\)](#)

[Health](#), Superseded 02/02/2016

[National Core Maternity Indicators: PI 07-Normal \(non-instrumental\) vaginal birth for selected women giving birth for the first time \(2013\)](#)

[Health](#), Superseded 02/02/2016

[National Core Maternity Indicators: PI 08-Instrumental vaginal birth for selected women giving birth for the first time \(2013\)](#)

[Health](#), Superseded 02/02/2016

[National Health Performance Authority Healthy Communities: Percentage of live singleton births that were of low birthweight, 2007–2011](#)

[National Health Performance Authority \(retired\)](#), Retired 01/07/2016

[National Healthcare Agreement: P01-Proportion of babies born with low birth weight, 2010](#)

[Health](#), Superseded 08/06/2011

[National Healthcare Agreement: PI 01-Proportion of babies born of low birth weight, 2011](#)

[Health](#), Superseded 30/10/2011

[National Healthcare Agreement: PI 01-Proportion of babies born of low birth weight, 2012](#)

[Health](#), Superseded 25/06/2013

[National Healthcare Agreement: PI 01-Proportion of babies born of low birth weight, 2013](#)

[Health](#), Superseded 30/04/2014

[National Healthcare Agreement: PI 01-Proportion of babies born of low birth weight, 2014](#)

[Health](#), Superseded 14/01/2015

[National Healthcare Agreement: PI 01-Proportion of babies born of low birth weight, 2015](#)

[Health](#), Superseded 08/07/2016

[National Healthcare Agreement: PI 01–Proportion of babies born of low birth weight, 2016](#)

[Health](#), Superseded 31/01/2017

[National Healthcare Agreement: PI 01–Proportion of babies born of low birth weight, 2017](#)

[Health](#), Superseded 30/01/2018

[National Indigenous Reform Agreement: P12-Proportion of babies born of low birth weight, 2010](#)

[Community Services \(retired\)](#), Superseded 04/04/2011

[National Indigenous Reform Agreement: PI 07-Proportion of babies born of low](#)

[birth weight, 2013](#)

[Indigenous](#), Superseded 13/12/2013

[National Indigenous Reform Agreement: PI 07-Proportion of babies born of low birth weight, 2014](#)

[Indigenous](#), Superseded 24/11/2014

[National Indigenous Reform Agreement: PI 07-Proportion of babies born of low birth weight, 2015](#)

[Indigenous](#), Superseded 18/11/2015

[National Indigenous Reform Agreement: PI 07—Proportion of babies born of low birthweight, 2016](#)

[Indigenous](#), Superseded 01/07/2016

[National Indigenous Reform Agreement: PI 07—Proportion of babies born of low birthweight, 2017](#)

[Indigenous](#), Superseded 06/06/2017

[National Indigenous Reform Agreement: PI 07-Proportion of babies born of low birthweight, 2018](#)

[Indigenous](#), Superseded 31/07/2018

[National Indigenous Reform Agreement: PI 07-Proportion of babies born of low birthweight, 2019](#)

[Indigenous](#), Superseded 23/08/2019

[National Indigenous Reform Agreement: PI 07-Proportion of babies born of low birthweight, 2020](#)

[Indigenous](#), Standard 23/08/2019

[National Indigenous Reform Agreement: PI 12-Proportion of babies born of low birth weight, 2011](#)

[Indigenous](#), Superseded 01/07/2012

[National Indigenous Reform Agreement: PI 12-Proportion of babies born of low birth weight, 2012](#)

[Indigenous](#), Superseded 13/06/2013

Used as Denominator

[Indigenous primary health care: PI02b-Proportion of Indigenous babies born within the previous 12 months whose birth weight results were low, normal or high, 2013](#)

[Health](#), Superseded 21/11/2013

[Indigenous](#), Superseded 21/11/2013

[Indigenous primary health care: PI02b-Proportion of Indigenous babies born within the previous 12 months whose birth weight results were low, normal or high, 2014](#)

[Health](#), Superseded 13/03/2015

[Indigenous](#), Superseded 13/03/2015

[National Core Maternity Indicators: PI 05-Induction of labour for selected women giving birth for the first time \(2013\)](#)

[Health](#), Superseded 02/02/2016

[National Core Maternity Indicators: PI 06-Caesarean section for selected women giving birth for the first time \(2013\)](#)

[Health](#), Superseded 02/02/2016

[National Core Maternity Indicators: PI 07-Normal \(non-instrumental\) vaginal birth for selected women giving birth for the first time \(2013\)](#)

[Health](#), Superseded 02/02/2016

[National Core Maternity Indicators: PI 08-Instrumental vaginal birth for selected women giving birth for the first time \(2013\)](#)

[Health](#), Superseded 02/02/2016

[National Health Performance Authority Healthy Communities: Percentage of live singleton births that were of low birthweight, 2007–2011](#)

[National Health Performance Authority \(retired\)](#), Retired 01/07/2016

[National Healthcare Agreement: P01-Proportion of babies born with low birth weight, 2010](#)

[Health](#), Superseded 08/06/2011

[National Healthcare Agreement: PI 01-Proportion of babies born of low birth weight, 2011](#)

[Health](#), Superseded 30/10/2011

[National Healthcare Agreement: PI 01-Proportion of babies born of low birth weight, 2012](#)

[Health](#), Superseded 25/06/2013

[National Healthcare Agreement: PI 01-Proportion of babies born of low birth weight, 2013](#)

[Health](#), Superseded 30/04/2014

[National Healthcare Agreement: PI 01-Proportion of babies born of low birth weight, 2014](#)

[Health](#), Superseded 14/01/2015

[National Healthcare Agreement: PI 01-Proportion of babies born of low birth weight, 2015](#)

[Health](#), Superseded 08/07/2016

[National Healthcare Agreement: PI 01—Proportion of babies born of low birth weight, 2016](#)

[Health](#), Superseded 31/01/2017

[National Healthcare Agreement: PI 01—Proportion of babies born of low birth weight, 2017](#)

[Health](#), Superseded 30/01/2018

[National Indigenous Reform Agreement: P12-Proportion of babies born of low birth weight, 2010](#)

[Community Services \(retired\)](#), Superseded 04/04/2011

[National Indigenous Reform Agreement: PI 07-Proportion of babies born of low birth weight, 2013](#)

[Indigenous](#), Superseded 13/12/2013

[National Indigenous Reform Agreement: PI 07-Proportion of babies born of low birth weight, 2014](#)

[Indigenous](#), Superseded 24/11/2014

[National Indigenous Reform Agreement: PI 07-Proportion of babies born of low birth weight, 2015](#)

[Indigenous](#), Superseded 18/11/2015

[National Indigenous Reform Agreement: PI 07—Proportion of babies born of low birthweight, 2016](#)

[Indigenous](#), Superseded 01/07/2016

[National Indigenous Reform Agreement: PI 07—Proportion of babies born of low birthweight, 2017](#)

[Indigenous](#), Superseded 06/06/2017

[National Indigenous Reform Agreement: PI 07-Proportion of babies born of low birthweight, 2018](#)

[Indigenous](#), Superseded 31/07/2018

[National Indigenous Reform Agreement: PI 07-Proportion of babies born of low birthweight, 2019](#)

[Indigenous](#), Superseded 23/08/2019

[National Indigenous Reform Agreement: PI 07-Proportion of babies born of low birthweight, 2020](#)

[Indigenous](#), Standard 23/08/2019

[National Indigenous Reform Agreement: PI 12-Proportion of babies born of low birth weight, 2011](#)

[Indigenous](#), Superseded 01/07/2012

[National Indigenous Reform Agreement: PI 12-Proportion of babies born of low birth weight, 2012](#)

[Indigenous](#), Superseded 13/06/2013