Birth event—main indication for caesarean section, code NN

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Birth event—main indication for caesarean section, code NN

Identifying and definitional attributes

Metadata item type: Data Element

Short name: Main indication for caesarean section

Synonymous names: Reasons for caesarean section

METEOR identifier: 516640

Registration status: Health, Superseded 13/11/2014

Definition: The primary indication for why a caesarean section is performed during a birth

event, as represented by a code.

Data Element Concept: Birth event—main indication for caesarean section

Value Domain: Indications for caesarean section code NN

Value domain attributes

Representational attributes

Representation class: Code

Data type: String

Format: NN

Maximum character length: 2

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Format:	NN		
Maximum character length:	2		
	Value	Meaning	
Permissible values:	01	Fetal compromise	
	02	Suspected fetal macrosomia	
	03	Malpresentation	
	04	Lack of progress; less than or equal to 3 cm cervical dilatation	
	05	Lack of progress in the first stage; 4 cm to less than 10 cm cervical dilatation	
	06	Lack of progress in the second stage	
	07	Placenta praevia	
	08	Placental abruption	
	09	Vasa praevia	
	10	Antepartum/intrapartum haemorrhage	
	11	Multiple pregnancy	
	12	Unsuccessful attempt at assisted delivery	
	13	Unsuccessful induction	
	14	Cord prolapse	
	15	Previous caesarean section	
	16	Previous shoulder dystocia	
	17	Previous perineal trauma/4th degree tear	
	18	Previous adverse fetal/neonatal outcome	
	19	Other obstetric, medical, surgical, psychological	

indications

Maternal choice in the absence of any obstetric, medical, surgical, psychological indications 20

Supplementary values: 99 Not stated/inadequately described

Collection and usage attributes

Guide for use:

CODE 01 Fetal compromise

This includes suspected or actual fetal compromise and intra uterine growth restriction (IUGR).

CODE 04 Lack of progress; less than or equal to 3 cm cervical dilatation

Lack of progress includes slow or no progress.

If there has been an attempted induction of labour and then a lack of progress leading to a caesarean section use Code 13 as the main indication and Code 04 as an additional indication.

CODE 05 Lack of progress in the first stage; 4 cm to less than 10 cm cervical dilatation

Lack of progress includes slow or no progress.

If there has been an attempted induction of labour and then a lack of progress leading to a caesarean section use Code 13 as the main indication and Code 05 as an additional indication.

CODE 06 Lack of progress in the second stage

Lack of progress includes slow or no progress.

CODE 07 Placenta praevia

Record placenta praevia as the indication for caesarean section if there is ultrasound or clinical evidence that the edge of the placenta covers the internal cervical os, or encroaches into the lower segment less than 2 cm away from the internal cervical os.

CODE 08 Placental abruption

Record placental abruption as the indication for caesarean section if there is ultrasound or clinical evidence antenatally of abruption of the placenta prior to onset or during labour.

CODE 09 Vasa praevia

Record vasa praevia as the indication for caesarean section if there is ultrasound or visual evidence of exposed fetal blood vessels running across the fetal membrane below or at the level of the fetal presenting part in the lower segment of the uterus. This code is to be used when the caesarean section is planned or in the case of an emergency when the vessels may have ruptured.

CODE 10 Antepartum/intrapartum haemorrhage

Record antepartum/intrapartum haemorrhage as the indication for caesarean section if there has been any antenatal or intrapartum vaginal bleeding that leads to the immediate delivery of the baby by caesarean section. This code should only be used as a main indication if a more specific cause of the antepartum/intrapartum haemorrhage is not known.

Where there is a vasa praevia and an antepartum/intrapartum haemorrhage, Code 09 is to be recorded as the main indication and Code 10 as an additional indication.

CODE 19 Other obstetric, medical, surgical, psychological indications

Where a woman has a psychopathological indication for caesarean section, e.g. extreme fear of natural childbirth, this code should be used. It is not to be used for psychosocial indications which should be coded under Code 20.

CODE 20 Maternal choice in the absence of any obstetric, medical, surgical, psychological indications

This includes psychosocial indications.

Source and reference attributes

Submitting organisation: National Perinatal Data Development Committee

Data element attributes

Collection and usage attributes

Guide for use: This data element records the main indication for performing a caesarean section.

Only one code may be selected.

Collection methods: The main indication should be the indication that the clinician attending the birth

> believes to be the primary reason for the caesarean section being performed. It should be determined at the time of delivery and not revised later or selected based on information that becomes available after delivery such as results of tests

or procedures.

Source and reference attributes

Submitting organisation: National Perinatal Data Development Committee

Relational attributes

Related metadata references:

Has been superseded by Birth event—main indication for caesarean section, code

Health, Superseded 02/08/2017

See also Birth event—additional indications for caesarean section, code NN

Health, Superseded 13/11/2014

See also <u>Birth event—birth method, code N</u> Health, Superseded 02/08/2017

Implementation in Data Set Perinatal DSS 2014-15

Specifications:

Health, Superseded 13/11/2014

Implementation start date: 01/07/2014 Implementation end date: 30/06/2015

Conditional obligation:

Conditional on birth method being coded as a caesarean section.