# Female—number of antenatal care visits, total N[N]



#### © Australian Institute of Health and Welfare 2024

This product, excluding the AIHW logo, Commonwealth Coat of Arms and any material owned by a third party or protected by a trademark, has been released under a Creative Commons BY 4.0 (CC BY 4.0) licence. Excluded material owned by third parties may include, for example, design and layout, images obtained under licence from third parties and signatures. We have made all reasonable efforts to identify and label material owned by third parties.

You may distribute, remix and build on this website's material but must attribute the AlHW as the copyright holder, in line with our attribution policy. The full terms and conditions of this licence are available at https://creativecommons.org/licenses/by/4.0/.

Enquiries relating to copyright should be addressed to info@aihw.gov.au.

Enquiries or comments on the METEOR metadata or download should be directed to the METEOR team at meteor@aihw.gov.au.

## Female—number of antenatal care visits, total N[N]

### Identifying and definitional attributes

Metadata item type: Data Element

**Short name:** Antenatal care visits

**Synonymous names:** Number of antenatal care visits

METEOR identifier: 695227

**Registration status:** Health, Superseded 20/11/2019

**Definition:** The total number of <u>antenatal care visits</u> attended by a pregnant female.

Context: Perinatal

Data Element Concept: Female—number of antenatal care visits

Value Domain: <u>Total number N[N]</u>

#### Value domain attributes

#### Representational attributes

Representation class: Total

Data type: Number

Format: N[N]

Maximum character length: 2

Value Meaning

**Supplementary values:** 99 Not stated/inadequately described

#### Data element attributes

## Collection and usage attributes

Guide for use: Antenatal care visits are attributed to the pregnant female.

In rural and remote locations where a clinician or midwife is not employed, registered Aboriginal health workers and <u>registered nurses</u> may perform this role within the scope of their training and skill licence.

Include all pregnancy-related visits with medical officers where the medical officer has entered documentation related to that visit on the antenatal record of pregnancy and/or birth.

An antenatal care visit does not include:

- a visit where the sole purpose of contact is to confirm the pregnancy
- contacts that occurred during the pregnancy that related solely to nonpregnancy related issues
- a visit where the sole purpose of contact is to perform image screening, diagnostic testing or the collection of blood or tissue for pathology testing. An exception to this rule is made when the health professional performing the procedure or test is a clinician or midwife and the visit directly relates to this pregnancy and the health and wellbeing of the fetus.

Collection methods: Collect the total number of antenatal care visits for which there is documentation

included in the antenatal record. To be collected once, after the onset of labour.

Include all medical specialist appointments or medical specialist clinic

appointments where the provider of the service event has documented the visit on

the antenatal record.

Multiple visits on the same day should be recorded as one visit.

Comments: The scope and definition of antenatal care visits was developed through

consultation with stakeholders from midwifery, obstetrics, perinatal data managers

and other interested parties in 2010.

Antenatal care visits for females with an uncomplicated pregnancy should include advice, education, reassurance, support and treatment for minor problems of pregnancy, as well as effective screening throughout the pregnancy, to identify problems as they arise, with referral as appropriate (Breeze & Kean 2009).

The number of antenatal care visits is an indicator of access and use of health care during pregnancy. The antenatal period presents opportunities for reaching pregnant females with interventions that may be vital to their health and wellbeing and that of their infants. Receiving antenatal care at least four times, as recommended by the World Health Organization (WHO), increases the likelihood of receiving effective maternal health interventions during antenatal visits (WHO 2015).

#### Source and reference attributes

**Submitting organisation:** Australian Institute of Health and Welfare

Reference documents: Breeze A & Kean L 2009. Routine antenatal management at the booking clinic.

Obstetrics and Gynaecology and Reproductive Medicine 20(1):1–6.

Clinical Practice Improvement Unit 2006. 3Centre consensus guidelines on

antenatal care. Melbourne: 3Centres Collaboration.

WHO (World Health Organization) 2015. World health statistics 2015: indicator

compendium. Geneva: WHO. Viewed 12 May 2017, http://www.who.int/gho/publications/world\_health\_statistics/

WHS2015 IndicatorCompendium.pdf?ua=1.

#### Relational attributes

Related metadata references:

Supersedes Female—number of antenatal care visits, total N[N]

Health, Superseded 12/12/2018

Has been superseded by Female—number of antenatal care visits, total N[N]

Health, Standard 20/11/2019

Tasmanian Health, Standard 03/07/2020

**Specifications:** 

Implementation in Data Set Perinatal NMDS 2019–20

Health, Superseded 03/12/2020

Implementation start date: 01/07/2019 Implementation end date: 30/06/2020