

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

Exported from METEOR (AIHW's Metadata Online Registry)

© 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 AIHW 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](mailto: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](mailto: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:	717735
Registration status:	<a href="#">Health</a> , Standard 20/11/2019 <a href="#">Tasmanian Health</a> , Standard 03/07/2020
Definition:	The total number of <a href="#">antenatal care visits</a> attended by a pregnant female.
Context:	Perinatal
Data Element Concept:	<a href="#">Female—number of antenatal care visits</a>
Value Domain:	<a href="#">Total number N[N]</a>

## 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 [registered nurses](#) 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 non-pregnancy 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 eight times is recommended by the World Health Organization (WHO) to reduce perinatal mortality and improve women's experience of care (WHO 2016).

## 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.

Mercy Hospital for Women, Southern Health and Women's & Children's Health 2006. 3 Centres consensus guidelines on antenatal care. Melbourne: 3 Centres Collaboration.

WHO (World Health Organization) 2016. WHO recommendations on antenatal care for a positive pregnancy experience. Geneva: WHO. Viewed 9 July 2019, [https://www.who.int/reproductivehealth/publications/maternal\\_perinatal\\_health/anc-positive-pregnancy-experience/en/](https://www.who.int/reproductivehealth/publications/maternal_perinatal_health/anc-positive-pregnancy-experience/en/).

## Relational attributes

**Related metadata references:** Supersedes [Female—number of antenatal care visits, total N\[N\] Health](#), Superseded 20/11/2019

**Implementation in Data Set Specifications:**

[Perinatal NMDS 2020–21](#)

[Health](#), Superseded 03/12/2020

**Implementation start date:** 01/07/2020

**Implementation end date:** 30/06/2021

[Perinatal NMDS 2021–22](#)

[Health](#), Superseded 17/12/2021

**Implementation start date:** 01/07/2021

**Implementation end date:** 30/06/2022

**DSS specific information:**

This data element is recorded for the mother only.

[Perinatal NMDS 2022–23](#)

[Health](#), Superseded 09/12/2022

**Implementation start date:** 01/07/2022

**Implementation end date:** 30/06/2023

**DSS specific information:**

This data element is recorded for the mother only.

[Perinatal NMDS 2023–24](#)

[Health](#), Superseded 06/12/2023

**Implementation start date:** 01/07/2023

**Implementation end date:** 30/06/2024

**DSS specific information:**

This data element is recorded for the mother only.

[Perinatal NMDS 2024–25](#)

[Health](#), Standard 06/12/2023

**Implementation start date:** 01/07/2024

**Implementation end date:** 30/06/2025

**DSS specific information:**

This data element is recorded for the mother only.

[Tasmanian Perinatal Data Set - 2020](#)

[Tasmanian Health](#), Superseded 23/11/2023

**Implementation start date:** 01/07/2020

**Implementation end date:** 30/06/2021

[Tasmanian Perinatal Data Set - 2021](#)

[Tasmanian Health](#), Superseded 23/11/2023

**Implementation start date:** 01/07/2021

**Implementation end date:** 30/06/2022

[Tasmanian Perinatal Data Set - 2022](#)

[Tasmanian Health](#), Superseded 23/11/2023

**Implementation start date:** 01/07/2022

**Implementation end date:** 30/06/2023

[Tasmanian Perinatal Data Set - 2023](#)

[Tasmanian Health](#), Standard 23/11/2023

**Implementation start date:** 01/07/2023

**Implementation end date:** 30/06/2024