Birth event—type of analgesia administered, code N[N]

Exported from METEOR (AIHW's Metadata Online Registry)

Birth event—type of analgesia administered, code N[N]

Identifying and definitional attributes

Metadata item type:	Data Element
Short name:	Type of analgesia administered during a birth event
METEOR identifier:	749937
Registration status:	Health, Standard 17/12/2021 Tasmanian Health, Standard 08/11/2023
Definition:	The type of **analgesia** administered to a female during a birth event with labour, as represented by a code.
Data Element Concept:	Birth event—type of analgesia administered
Value Domain:	Type of labour analgesia administered code N[N]

Value domain attributes

Representational attributes

Representation class:	Code	
Data type:	Number	
Format:	N[N]	
Maximum character length:	2	
	Value	**Meaning**
Permissible values:	2	Nitrous oxide
	4	Epidural or caudal block
	5	Spinal block
	6	Systemic opioids
	7	Combined spinal-epidural block
	88	Other analgesia
Supplementary values:	99	Not stated/inadequately described

Collection and usage attributes

Guide for use:

CODE 2 Nitrous oxide

Nitrous oxide was administered to a female for pain relief during the labour and/or birth. Nitrous oxide is a gas providing light anaesthesia delivered in various concentrations with oxygen.

CODE 4 Epidural or caudal block

An epidural or caudal block was administered to a female for pain relief during the labour and/or birth.

An epidural block is an injection of a local anaesthetic into the epidural space of the spinal column.

A caudal block is an injection of a local anaesthetic agent into the caudal portion of the spinal canal through the sacrum.

CODE 5 Spinal block

A spinal block was administered to a female for pain relief during the labour and/or birth. A spinal block is an injection of an analgesic drug or anaesthetic drug into the subarachnoid space of the spinal cord, also called the Subarachnoid Block Anaesthesia.

CODE 6 Systemic opioids

Systemic opioids were administered to a female for pain relief during the labour and/or birth. This includes intramuscular and intravenous opioids.

CODE 7 Combined spinal-epidural block

A combined spinal-epidural block was administered to a female for pain relief during the labour and/or birth. A combined spinal-epidural block is a needle-through-needle injection of an analgesic drug or anaesthetic drug into both the epidural space and the subarachnoid space of the spinal column. The spinal-epidural block combines the benefits of rapid action of a spinal block and the flexibility of an epidural block. An epidural catheter inserted during the technique enables the provision of long-lasting analgesia with the ability to titrate the dose for the desired effect.

CODE 88 Other analgesia

Other analgesia (not indicated above) was administered to a female for pain relief during the labour and/or birth. This includes all non-narcotic oral analgesia and non-pharmacological methods such as hypnosis, acupuncture, massage, relaxation techniques, temperature regulation and aromatherapy.

Comments:

Code 1 (None) and Code 3 (Intra-muscular narcotics) have been omitted as these codes are no longer in use. For information about their meaning in previous data elements, see superseded versions.

Source and reference attributes

Submitting organisation: National Perinatal Data Development Committee

Data element attributes

Collection and usage attributes

Guide for use:

More than one permissible value may be recorded.

CODE 7 Combined spinal-epidural block

Combined spinal-epidural block should not be recorded if both Code 4 and Code 5 are also recorded.

Comments: Analgesia use may influence the duration of labour, may affect the health status of the baby at birth and is an indicator of obstetric intervention. Analgesia may also influence a female's satisfaction with her birth experience and is an indicator of access to anaesthesia services, i.e. epidural analgesia is not available for females in birth events where there are no anaesthetic services.

Source and reference attributes

Submitting organisation: National Perinatal Data Development Committee

Relational attributes

Related metadata references:

Supersedes Birth event—type of analgesia administered, code N[N]
Health, Superseded 17/12/2021

See also Birth event—analgesia administered indicator, yes/no/not stated/inadequately described code N
Health, Standard 09/12/2022

See also Birth event—analgesia administered indicator, yes/no/not stated/inadequately described code N
Health, Superseded 09/12/2022

See also Birth event—birth method, code N
Health, Superseded 09/12/2022

See also Birth event—labour onset type, code N
Health, Standard 09/12/2022
Tasmanian Health, Standard 28/03/2023

See also Birth event—labour onset type, code N
Health, Superseded 09/12/2022

Implementation in Data Set Specifications:

Mother delivery related data elements (TDLU) cluster
Tasmanian Health, Standard 17/11/2023
Implementation start date: 01/07/2023
Implementation end date: 30/06/2025

Perinatal NMDS 2022–23
Health, Superseded 09/12/2022
Implementation start date: 01/07/2022
Implementation end date: 30/06/2023
Conditional obligation:

This data element is only to be recorded if the response to the Birth event—labour onset type, code N data element is Code 1 (Spontaneous) or Code 2 (Induced) and the Birth event—analgesia administered indicator, yes/no/not stated/inadequately described code N data element is Code 1 (Yes).

DSS specific information:

This data element is to be recorded for first and second stage labour, but not for third stage labour, e.g. removal of placenta.

This is a multiple response data element and is therefore operationalised for data collection across 6 individual data items (one data item per permissible value, excluding Code 99 (Not stated/inadequately described)).

Perinatal NMDS 2023–24
Health, Superseded 06/12/2023
Implementation start date: 01/07/2023
Implementation end date: 30/06/2024
Conditional obligation:

This data element is only to be recorded if the response to the Birth event—labour onset type, code N data element is Code 1 (Spontaneous) or Code 2 (Induced) and the Birth event—analgesia administered indicator, yes/no/not stated/inadequately described code N data element is Code 1 (Yes).

DSS specific information:

This data element is to be recorded for first and second stage labour, but not for

third stage labour, e.g. removal of placenta.

This is a multiple response data element and is therefore operationalised for data collection across 6 individual data items (one data item per permissible value, excluding Code 99 (Not stated/inadequately described)).

Perinatal NMDS 2024–25
Health, Standard 06/12/2023
Implementation start date: 01/07/2024
Implementation end date: 30/06/2025
Conditional obligation:

This data element is only to be recorded if the response to the Birth event—labour onset type, code N data element is Code 1 (Spontaneous) or Code 2 (Induced) and the Birth event—analgesia administered indicator, yes/no/not stated/inadequately described code N data element is Code 1 (Yes).

DSS specific information:

This data element is to be recorded for first and second stage labour, but not for third stage labour, e.g. removal of placenta.

This is a multiple response data element and is therefore operationalised for data collection across 6 individual data items (one data item per permissible value, excluding Code 99 (Not stated/inadequately described)).

Tasmanian Perinatal Data Set - 2023
Tasmanian Health, Standard 23/11/2023
Implementation start date: 01/07/2023
Implementation end date: 30/06/2024