

Female—type of diabetes mellitus during pregnancy, code N

Identifying and definitional attributes

Metadata item type:	Data Element
Short name:	Diabetes mellitus type during pregnancy
METEOR identifier:	759641
Registration status:	<ul style="list-style-type: none">• Health, Standard 09/09/2022
Definition:	The type of diabetes mellitus a female has during pregnancy, based on a current or previous diagnosis, as represented by a code.
Data Element Concept:	Female—type of diabetes mellitus during pregnancy

Value domain attributes

Representational attributes

Representation class:	Code										
Data type:	Number										
Format:	N										
Maximum character length:	1										
Permissible values:	<table><thead><tr><th>Value</th><th>Meaning</th></tr></thead><tbody><tr><td>1</td><td>Pre-existing Type 1 diabetes</td></tr><tr><td>2</td><td>Pre-existing Type 2 diabetes</td></tr><tr><td>3</td><td>Gestational diabetes mellitus (GDM)</td></tr><tr><td>8</td><td>Other type of diabetes mellitus</td></tr></tbody></table>	Value	Meaning	1	Pre-existing Type 1 diabetes	2	Pre-existing Type 2 diabetes	3	Gestational diabetes mellitus (GDM)	8	Other type of diabetes mellitus
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Supplementary values:	<table><thead><tr><th>Value</th><th>Meaning</th></tr></thead><tbody><tr><td>9</td><td>Not stated/inadequately described</td></tr></tbody></table>	Value	Meaning	9	Not stated/inadequately described						
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9	Not stated/inadequately described										

Collection and usage attributes

Guide for use:

Note that where there is a Gestational diabetes mellitus (GDM) and a current history of Pre-existing Type 2 diabetes then record Code 2 Pre-existing Type 2 diabetes.

While most women will know what type of diabetes they have, where their type of diabetes is unknown the clinician should leave the collection form/system blank. This will be coded as a '9' by the data custodian.

CODE 1 Pre-existing Type 1 diabetes

Beta-cell destruction, usually leading to absolute insulin deficiency. Includes those cases attributed to an autoimmune process, as well as those with beta-cell destruction and who are prone to ketoacidosis for which neither an aetiology nor pathogenesis is known (idiopathic). It does not include those forms of beta-cell destruction or failure to which specific causes can be assigned (e.g. cystic fibrosis, mitochondrial defects). Some subjects with Type 1 diabetes can be identified at earlier clinical stages than 'diabetes mellitus'.

CODE 2 Pre-existing Type 2 diabetes

Type 2 includes the common major form of diabetes, which results from defect(s) in insulin secretion, almost always with a major contribution from insulin resistance.

CODE 3 Gestational diabetes mellitus (GDM)

GDM is a carbohydrate intolerance resulting in hyperglycaemia of variable severity with onset or first recognition during pregnancy. The definition applies irrespective of whether or not insulin is used for treatment or if the condition persists after pregnancy.

Diagnosis is to be based on the Australasian Diabetes in Pregnancy Society (ADIPS) Guidelines (Nankervis et al. 2014). If the clinician does not have information as to whether these guidelines have been used, available information about diagnosis of GDM is still to be reported.

CODE 8 Other type of diabetes mellitus

This categorisation include less common causes of diabetes mellitus, but are those in which the underlying defect or disease process can be identified in a relatively specific manner. They include, for example, genetic defects of beta-cell function, genetic defects in insulin action, diseases of the exocrine pancreas, endocrinopathies, drug or chemical-induced, infections, uncommon forms of immune-mediated diabetes, other genetic syndromes sometimes associated with diabetes. Impaired glucose regulation is not to be included here.

CODE 9 Not stated/inadequately described

To be recorded by data entry personnel (state/territory health authority) if the data field is left blank or is inadequately completed in the perinatal data collection form or extract. Clinicians should not record Code 9.

Source and reference attributes

Reference documents:

Nankervis A, McIntyre HD, Moses R, Ross GP, Callaway L, Porter C et al. 2014. Australasian Diabetes In Pregnancy Society (ADIPS) Consensus Guidelines for the Testing and Diagnosis of Hyperglycaemia in pregnancy in Australia and New Zealand. Sydney: ADIPS. Viewed 18 September 2020, http://www.adips.org/downloads/2014ADIPSGDMGuidelinesV18.11.2014_000.pdf

Data element attributes

Collection and usage attributes

Collection methods:

The diagnosis is preferably derived from, and substantiated by, clinical documentation which should be reviewed at the time of delivery. However, this information may not be available, in which case the patient may self-report to the clinician that they have been diagnosed with a particular type of diabetes mellitus.

Jurisdictions that record perinatal data using the ICD-10-AM should apply the following codes:

'Code 1 Pre-existing Type 1 diabetes' is equivalent to O24.0 in the ICD-10-AM.

'Code 2 Pre-existing Type 2 diabetes' is equivalent to O24.12-O24.19 in the ICD-10-AM.

'Code 3 Gestational diabetes mellitus (GDM)' is equivalent to O24.42-O24.49 in the ICD-10-AM.

'Code 8 Other type of diabetes mellitus' is equivalent to O24.22-O24.29 in the ICD-10-AM. O24.32-O24.39 in the ICD-10-AM may also be coded to 8 in the absence of any further information on type of diabetes.

Note that there is no equivalent permissible value for O24.92-O24.99 in the ICD-10-AM. In the absence of any further information on type of diabetes, these should be coded as 'Code 9 Not stated/inadequately described'.

See also related data element [Female—type of diabetes mellitus therapy during pregnancy, code N](#) where the following ICD-10-AM fifth character subdivisions are for use with categories O24.1–O24.9 to record therapy type:

- 2 Insulin treated
- 3 Oral hypoglycaemic therapy
- 4 Other: diet, exercise, lifestyle management
- 9 Unspecified.

Source and reference attributes

Submitting organisation: Australian Institute of Health and Welfare

Reference documents: Independent Hospital Pricing Authority 2022. The International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification (ICD-10-AM), Twelfth Edition. Tabular List and Alphabetic Index. Darlinghurst, NSW.

Relational attributes

Related metadata references:

Supersedes [Female—type of diabetes mellitus during pregnancy, code N](#)

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

See also [Female—diabetes mellitus during pregnancy indicator, yes/no/not stated/inadequately described code N](#)

- [Health](#), Standard 09/09/2022

See also [Female—type of diabetes mellitus therapy during pregnancy, code N](#)

- [Health](#), Standard 09/09/2022

Implementation in Data Set Specifications:

[Perinatal NBEDS 2022–23 Health](#), Standard 17/12/2021

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 [Female—diabetes mellitus during pregnancy indicator, yes/no/not stated/inadequately described code N](#) data element is Code 1 (Yes).

[Perinatal NBEDS 2023–24 Health](#), Qualified 02/09/2022

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 [Female—diabetes mellitus during pregnancy indicator, yes/no/not stated/inadequately described code N](#) data element is Code 1 (Yes).

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