Female—type of diabetes mellitus during pregnancy, code N

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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:	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 attributes

Identifying and definitional attributes

Data element concept:	Female—type of diabetes mellitus during pregnancy
METEOR identifier:	516705
Registration status:	Health, Standard 07/03/2014
Definition:	The type of diabetes mellitus a female has during pregnancy, based on a current or previous diagnosis.
Object class:	Female
Property:	Type of diabetes mellitus during pregnancy

Value domain attributes

Identifying and definitional attributes

Value domain:	Type of diabetes mellitus during pregnancy code N
METEOR identifier:	733491
Registration status:	Health, Standard 03/12/2020
Definition:	A code set representing the type of diabetes mellitus during pregnancy.

Representational attributes

Representation class:	Code	
Data type:	Number	
Format:	Ν	
Maximum character length:	1	
	Value	Meaning
Permissible values:	1	Pre-existing Type 1 diabetes
	2	Pre-existing Type 2 diabetes
	3	Gestational diabetes mellitus (GDM)
	8	Other type of diabetes mellitus
Supplementary values:	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 1Pre-existing Type 1 diabetesBeta-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

CODE 2 Pre-existing Type 2 diabetes

earlier clinical stages than 'diabetes mellitus'.

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.

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

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 <u>Female—type of diabetes mellitus therapy during</u> 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 <u>Female—type of diabetes mellitus during pregnancy, code N</u> <u>Health</u> , 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 SetPerinatal NBEDS 2022–23Specifications:Health, Superseded 09

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

Perinatal NBEDS 2023–24

<u>Health</u>, 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 <u>Female-diabetes</u> mellitus during pregnancy indicator, yes/no/not stated/inadequately described code <u>N</u> data element is Code 1 (Yes).

Perinatal NBEDS 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 <u>Female—diabetes</u> <u>mellitus during pregnancy indicator</u>, <u>yes/no/not stated/inadequately described code</u> <u>N</u> data element is Code 1 (Yes).