

APPENDIX TWO CODES USED FOR FILLING OUT YOUR DATA SHEET

Please read these codes and definitions carefully and use them when filling out the A3 datasheets. The use of these codes in the review tool will assist Review committee members to interpret them correctly. The codes are consistent with those used in the midwifery database.

In order to ensure that all births booked by midwives are covered in the statistics, please enter a # at the bottom of the page for the births that were booked by you but for some reason another midwife carried out part of the care. Please enter all the statistics for that woman's antenatal, labour and postnatal period unless you transferred the care to someone else.

Ethnic Group codes

P	Pakeha
M	Maori
PI	Pacific Islander
A	Asian
O	for other

or use another code for specific races

Prescriptions

Please enter the total number of prescriptions prescribed by you for the woman antenatally, during labour and postnatally.

Complementary Practices

Please tick only if any complementary practices were used during the antenatal, labour or postnatal period.

ANTENATAL

Consultation

Please fill in this box only if you consulted but did not hand over care. The codes are:

T	Hospital team consultation
Ob	Private Obstetrician
M	Midwife
P	Paediatrician

Transfer of Care

Please use the same codes as for consultation. Only fill in this box if the care was actually transferred to another practitioner.

Ultrasound

In this box we want recorded the total number of scans the women had and the number ordered by you. Please put the total number of scans in the top left-hand side of the box and the number of scans ordered by you in the bottom right hand side of the box.

Amnio/CVS

Please enter A or C depending on which test the women had.

Polydose/GTT

Please enter P or G depending on what test the women had.

Infection codes

U	Urinary
S	STD
O	Other

Pre-existing conditions at booking

Please tick if eg essential hypertension, diabetic, epileptic, heart disease, poorly controlled asthma etc

Smoking

Please enter the number of cigarettes per day.

LABOUR AND BIRTH

Consultation/Transfer

Please fill in this box only if you consulted but did not hand over care. The codes are:

T	Hospital team consultation
Ob	Private Obstetrician
M	Midwife
P	Paediatrician

Induction of labour

Tick if labour has been induced by PG₂, ARM or syntocinon

Meconium

Tick if present during labour or birth (excluding breech births)

ARM in labour (cms)

Please indicate how many centimetres dilated the woman was when her membranes were ruptured.

Pain Relief codes

T	Tens
G	Entonox
P	Pethidine
E	Epidural
S	Spinal
W	Water

Baby Caught By codes

M	Midwife ie you as LMC
B	Backup midwife
O	Other

Elective Caesarean codes

G	General Anaesthetic
E	Epidural
S	Spinal

Emergency Caesarean codes are as above**Laceration/Epis sutured by codes**

M	Midwife ie you as LMC
B	Backup midwife
O	Other

Birth Position codes

K	Kneeling
Sq	Squatting
L	Lithotomy
R	Reclining on back
S	Sitting
St	Standing

Ecobolic codes

A	Active management
T	Treatment

POSTNATAL - WOMEN**Consultation codes**

T	Team consultation
Ob	Private Obstetrician
M	Midwife
L	Lactation Consultant

Transfer of Care

Please use the same codes as for consultation. Only fill in this box if the care was transferred to another practitioner

Infection codes

Br	Breast
U	Uterine
W	Wound
P	Perineal
O	Other

Code Prescriptions given by you the same as previously**BABY SECTION****Consultation codes**

C	Consultant paediatrician
T	Team at HHS
O	Other

Transfer codes

N	Neonatal unit
M	Midwife

Infection codes

E	Eyes
S	Skin
U	Urinary
C	Chest
O	Other

Prescriptions (given by you)

Please enter total number of prescriptions prescribed by you for the baby

Weight

Only record weights of less than 2500gm or greater than 4500gm

Vitamin K codes

Nil	
IM	Intramuscular
O	Oral

Breastfeeding codes

E	Exclusive
F	Fully
P	Partial
A	Artificial

See attached MOH Breastfeeding Definition

Baby Transfer to Well Child Provider codes

G	General practitioner
P	Plunket
O	Other