

# THE NEW-BRUNSWICK PERINATAL HEALTH PROGRAM

# Coding Manual

**3M Perinatal Chapter** 

\*Revised – July 2025

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#### **General Information**

The Perinatal Chapter in 3M must be abstracted for any Main Patient Service (MPS) of **51** - **OBS Delivered**, **54** - **Newborn** and/or **97** - **Neonatology**. Some exceptions may apply in MPS of **20** - **Pediatrics**, **53** - **OBS Aborted** and **89** - **Stillborn**. Please see below for further information.

You only need to capture the **Neonate Chapter** for the baby's birth. If the baby was transferred from another facility, you do not need to capture the perinatal information. If the baby is born, then readmitted into 97 - neonatology, you do not need to capture the perinatal information, as it should have been captured at birth.

#### Reproductive Chapter in 3M

3 of the perinatal fields must be answered for all deliveries and therapeutic abortions (TA). This includes all patients who are admitted as an **inpatient** or as a **day surgery patient**.

The following fields "Pregnancy outcome, termination of pregnancy and number of babies at birth/termination" must be captured for all 'Main Patient Service (MPS) of **51** - **OBS delivered**, **53** - **OBS aborted and therapeutic abortions in NACRS** 

#### **STILLBORN CASES**

A patient with a MPS of **89 - stillborn**, must capture the field 'stillborn' located in the Neonate Chapter in 3M.

#### <u>Please see below a list of which Perinatal Chapters to complete with each Main Patient Service:</u>

Main Patient Service	51 OBS Delivered	*54 Newborn	*97 Neonatology
Perinatal Chapter	8 fields-Reproductive	Neonate	Neonate
	Mother's Information		* only capture the
	Prev. OBS History		neonate information
	Labour + Delivery		during the <u>birth</u> admission. If transferred from another facility, you do not need to
			capture the perinatal information of the baby.

Main Patient Service	*20 Pediatrics / 97 Neonatology WITH Admit Category of NEWBORN	
Perinatal Chapter	Neonate	

<sup>\*</sup> This is new for DAD FY 2016-2017, Newborns born outside of the reporting hospital, but their first admission is within 24 hours of life

<b>Main Patient Service</b>	53 OBS aborted and NACRS Therapeutic abortion	89 Stillborn
Perinatal Chapter	* <b>3</b> fields-Reproductive	<b>1</b> field in Neonate

pregnancy outcome

- stillborn field

- termination of pregnancy
- # of babies at birth/termination

<sup>\*</sup>only available in therapeutic abortions (TA) with diagnosis of O04^^ and intervention code of 5.CA.88 or 5.CA.89 1

### Institutions of New Brunswick

Hospital No.	<u>Hospital Name</u>
001*	Dr. Everett Chalmers Regional Hospital
005	Campbellton Regional Hospital
0 0 9*	<b>Edmundston Regional Hospital</b>
011	Restigouche Hospital Center
012	REHAB Stan Cassidy Center (Fredericton)
015	Centracare
016	Grand Manan Hospital
018	Lamèque Hospital and Community Health Centre
0 2 0*	The Moncton Hospital
0 2 2*	Miramichi Regional Hospital
0 2 3*	Hotel Dieu of St-Joseph
0 2 6	Sackville Memorial Hospital
0 2 9*	Saint John Regional Hospital
0 3 1	St-Joseph's Hospital
0 3 2	Hôtel Dieu Saint-Joseph de Saint-Quentin
0 3 3	Charlotte County Hospital
0 3 4	Sussex Health Center
0 3 5	Tracadie-Sheila Hospital
0 3 9*	Chaleur Regional Hospital
0 4 1	Enfant-Jesus RHSJ Hospital
0 4 2	Grand Falls General Hospital
0 4 5	Stella-Maris-de-Kent Hospital
0 4 6	Oromocto Public Hospital
0 4 8*	Dr. Georges-L. Dumont University Hospital Centre
0 4 9*	Upper River Valley Hospital

#### Institution No.

7601\* Dr. Everett Chalmers Regional Hospital- Midwives (home births)

<sup>\*</sup> Institutions highlighted in bold offer Maternal/Neonatal services

### **Reproductive Chapter**

<u>For all OBS cases with a Main Patient Service (MPS) of **51 - OBS delivered** the following 5 fields are mandatory for data collection.</u>

<u>Gravida</u> Found on the Antenatal Record/ Labour and Delivery Record

Format - number (00-99)

\*The total number of times the patient has been pregnant, <u>including this pregnancy</u>. Pregnancies consisting of multiples,

are counted as one.

If unknown, code 99.

Parity Found on the Antenatal Record/ Labour and Delivery Record

Format - number (00-20, 99)

\*The total number of pregnancies, **excluding** the current pregnancy, with one or more babies of more than 20 weeks gestation (regardless of whether the baby was born alive, stillborn, or resulted in neonatal death). Multiple fetuses count as a single pregnancy.

Ex: Patient is admitted for a delivery - she already has a set of twins number of previous live births = 02

Refer to the DAD manual, Group 18 - field 05 If unknown, code 99.

Previous Stillbirths Found on the Antenatal Record / Labour and Delivery Record

Format - number (00- 20, 99)

\* A fetus > 20 weeks gestation in which there is no breathing, beating

of the heart, pulsation of the umbilical cord or no signs of life.

If unknown, code 99.

Previous Neonatal Deaths Found on the Antenatal Record / History and Physical

**Format** - number (00-20, 99)

\*Death which occurs during the first 28 completed days of life.

Enter the number of previous neonatal deaths.

If unknown, code 99.

Previous Caesarean Sections Found on the Antenatal Record / Labour and Delivery Record /

History and Physical

**Format** - number (00-20, 99) \*Number of previous C-sections.

If unknown, code 99.

#### TOLAC/VBAC Eligibility

Found on the Antenatal Record

\*Refers to if patient is eligible for a VBAC (vaginal birth after caesarean)/TOLAC (Trial of Labour after Caesarean)

Dictionary Provided

Y, 1	Yes
N, 2	No
U, 3	Unknown

For all OBS cases with a Main Patient Service (MPS) of **51** - **OBS delivered**, **53** - **OBS aborted that falls under a therapeutic abortion (TA)**, and **NACRS therapeutic abortions** the following 3 fields are mandatory for data collection.

#### Pregnancy outcome

Found on the Labour and Delivery Record

Dictionary provided

1	Live birth	
2	Fetal death >= 20 weeks gestation (stillbirth)	
3	Fetal death < 20 weeks gestation (miscarriage, abortion)	
4	Unknown/missing value	

For multiple births, enter a code for each baby/fetus up to a maximum of 6 entries.

### <u>Termination of Pregnancy</u> with congenital anomaly

Found on the Operative Report/ Discharge Summary \*Refers to an termination of pregnancy (at any gestational age) after prenatal <u>diagnosis of a **congenital anomaly**</u>. This includes all genetic, congenital and deformations in the congenital period.

Dictionary provided

Y, 1	Yes
N, 2	No
U, 3	Unknown

If the woman had a termination of pregnancy because of a fetal demise, unwanted pregnancy, mental health issues or any other reason other than a congenital anomaly, please indicate 'No' in this field.

#### Example:

\* Mom was admitted to MPS 53 or NACRS for a termination of pregnancy for an unwanted pregnancy.

#### Termination of Pregnancy field: NO

\* Mom was admitted to MPS 53 or NACRS for a termination of pregnancy due to a congenital anomaly of trisomy 21.

#### **Termination of Pregnancy field: YES**

To determine the congenital anomaly, please see the consult from the Maternal Fetal Medicine Unit, or from the available ultrasound that describes the anomalies. If you cannot determine the diagnosis with the documentation available, bring this back to the physician for clarification. It is critical that a code from ICD10 be assigned to these cases. If possible, please determine and assign the appropriate code from Chapter XVII (Q00-Q99).

Number of babies at birth or termination (plurality)

Found on the Operative Report/ Labour and Delivery Record \*Refers to the number of babies the mother was carrying at birth or termination.

1	Singleton	
2	Twins	
3	Triplets	
4	Quadruplets	
5	Quintuplets	
6	Sextuplets or higher	
7	Unknown	

### **Pregnant Individuals Information Chapter**

#### Work Status

Found on the Antenatal Record/ Registration form

#### Dictionary Provided

1	No
2	Part time
3	Full time
5	Employed, not indicated whether full time or part time
4	Unknown

**No** = Clearly states at home, student, social assistance or volunteer/unemployed

Part time = less than or equal to 28h per week.

**Full time** = greater than 28h week.

#### **Mother's Education**

Found on the Antenatal Record

\*Refers to the highest level of education the mother completed, i.e. If the patient has some post secondary (not currently enrolled), then select 'High School with Diploma'

Without High School Diploma	
High School with Diploma	
Current post-secondary (includes working on	
college or university completion)	
College or Trade Certification	
University with a degree	
Unknown	

#### Mother's Ethnicity

Found on the Antenatal Record

\*Refers to mother's ethnicity and/or racial background.

Please note you can enter up to 2 different choices in the abstract.

#### Dictionary provided

7	Jewish
9	Middle Eastern
11	Other
12	Unknown
14	Acadian
15	Black
16	East Asian
17	Filipino
18	Latin America
19	Southeast Asian
20	South Asian
21	White
22	Prefer not to say
23	Indigenous

<sup>\*</sup> Source for updated Race/Ethnicity collection Standards Census of Population Statistics Canada

#### Marital Status

Found on the Antenatal Record/ Registration form

#### Dictionary provided

1	Single
2	Married
3	Widowed
4	Divorced
5	Separated
6	Common law
9	Unknown

#### Partner's Work Status

Found on the Antenatal Record/Registration form

1	No
2	Part time
3	Full time
5	Employed, not indicated whether full or part time
4	Unknown

<sup>\*</sup>Refers to the mother's marital status

**No** = Clearly states at home, student, social assistance or volunteer/unemployed

**Part time** = less than or equal to 28h per week.

Full time = greater than 28h week.

If the pregnancy is the result of an artificial insemination (donor), enter **98**.

#### **Smoked Before Pregnancy**

Found on the Antenatal Record/History and Physical/ Nursing Assessment

\*Refers to smoking prior to pregnancy.

Unknown should only be coded if the physician has not marked 'yes' or 'no' on the lifestyle section of the Antenatal Record, and no other documentation clearly states smoking before pregnancy. If 'yes' is mentioned in one place, and 'no' on another, please choose 'yes'.

#### Dictionary provided

Y, 1	Yes
N, 2	No
U, 3	Unknown

#### Smoking during pregnancy

Found on the Antenatal Record/Nursing assessment/ History and Physical

#### Dictionary provided

Y, 1	Yes
N, 2	No
U, 3	Unknown

Unknown should only be coded if the care provider has not marked 'Y' or 'N' in the lifestyle section of the Antenatal Record or the Nursing Assessment does not clarify smoking during pregnancy. If yes is coded in one location only, choose 'Yes'.

<sup>\*</sup>Refers to the patient smoking at any time during pregnancy. \*Does not include vaping or e-cigarettes.

#### Exposure to 2nd Hand smoke

Found on the Antenatal Record

\*Refers to exposure to second-hand smoke during pregnancy. This includes if the mother is living with a smoker who smokes inside the house, or in a vehicle. This excludes smoking inside the garage, whether attached or detached, or smoking outside.

#### **Dictionary Provided**

Y, 1	Yes
N, 2	No
U, 3	Unknown

#### Alcohol Use Prior to **Pregnancy Knowledge**

Found on the Antenatal Record/ Nursing assessment/ History and Physical

\*Refers to use of alcohol before pregnancy or before knowing she is pregnant.

#### Dictionary provided

Y, 1	Yes
N, 2	No
U, 3	Unknown

Alcohol Use During Pregnancy Found on the Antenatal Record/ Nursing assessment/ History and Physical

> \*Refers to use of alcohol during pregnancy. After the patient knew she is pregnant, did she consume any alcohol?

#### Dictionary provided

Y, 1	Yes
N, 2	No
U, 3	Unknown

#### Pre-pregnancy Marijuana Use

Found on the Antenatal Record

\*Refers to marijuana use prior to pregnancy

Y, 1	Yes
N, 2	No
U, 3	Unknown

#### Pregnancy Marijuana Use

Found on the Antenatal Record

\*Refers to marijuana use during pregnancy

#### Dictionary provided

Y, 1	Yes
N, 2	No
U, 3	Unknown

Assign the code <u>**035.501**</u>, mandatory, if the woman has any marijuana use during pregnancy.

#### Marijuana Type

Found on the Antenatal Record

\*Refers to the type of marijuana used during pregnancy. Choose both THC and CBD if both are documented. If only Cannabis/Marijuana is indicated and not a specific type select 'Unknown'.

#### Dictionary provided

1	THC
2	CBD
3	Unknown

#### Vaping Before Pregnancy

Found on the Antenatal Record/History and Physical/ Nursing Assessment

Unknown should only be coded if the physician has not marked 'yes' or 'no' on the lifestyle section of the Antenatal Record, and no other documentation clearly states vaping before pregnancy. If 'yes' is mentioned in one place, and 'no' on another, please choose 'yes'.

Y, 1	Yes
N, 2	No
U, 3	Unknown

<sup>\*</sup>Refers to vaping prior to pregnancy.

#### Vaping During pregnancy

Found on the Antenatal Record/Nursing assessment/ History and Physical

\*Refers to vaping at any time during the prenatal period. The variable will indicate vaping at any time during pregnancy.

#### Dictionary provided

Y, 1	Yes
N, 2	No
U, 3	Unknown

Unknown should only be coded if the care provider has not marked 'Y' or 'N' in the lifestyle section of the Antenatal Record or the Nursing Assessment does not clarify vaping during pregnancy.

If yes is coded in one location only, choose 'Yes'.

#### Substance use

Found on the Antenatal Record

\*Refers to any substance use during pregnancy. Please note you can enter up to 6 different substances into the abstract. Duplicate entry is not allowed within the 6 fields. Methadone/Suboxone can now be found on the first page of the antenatal record under Medications/Herbals/OTC.

#### Dictionary Provided

4	Methadone/Suboxone
5	Solvents (Benzene, toluene, xylene, acetone, naptha,
	hexane)
6	Other
7	Unknown
8	None
9	Opioids (Heroin, OxyContin, hydromorphone, morphine,
	codeine, oxymorphone)
11	Stimulants (Cocaine, Methamphetamines)

If there is no information on the chart about substance use, please choose 'None'.

If patient is using marijuana, please choose 'None' it will be captured under the marijuana field.

If patient is using e-cigarettes or indicates vaping, please choose 'None' it will be captured under the vaping field.

If the physician writes substance use, but does not indicate what kind, please choose 'Unknown'.

\*Opiates include heroin, OxyContin, hydromorphone, morphine, codeine, and oxymorphone.

\*Stimulants include cocaine, and methamphetamines

\*Solvents include inhalants such as benzene, toluene, xylene, acetone, naptha, hexane

Assign the code <u>**O35.501**</u>, mandatory, if the woman has any substance use.

#### Folic Acid

Found on the antenatal record/ Medication Reconciliation

\*Indicates the consumption of preconceptual <u>folic acid (mg)</u> the patient has taken. This does not include regular maternal multivitamins, unless taken prior to pregnancy.

#### Dictionary provided

Y, 1	Yes
N, 2	No
U, 3	Unknown

<sup>\*</sup>If field is blank, please choose "Unknown".

#### Pregnancy on Contraceptive

Found on the Antenatal Record

#### **Dictionary Provided**

Y, 1	Yes
N, 2	No
U, 3	Unknown

#### **Method of Conception**

Found on the antenatal record

1	Spontaneous
2	OI
3	IUI
4	IVF
5	ICSI
6	Unknown

<sup>\*</sup>Refers to if patient became pregnant while taking a contraceptive

<sup>\*</sup>Refers to how the pregnancy was achieved Physician may select Spontaneous or ART, but will specify method of ART

#### Intention to Breastfeed

Found on the Birth Plan/Nursing Assessment/Labour and Delivery Record

\*Refers to if the woman intends to breastfeed <u>on admission and/or before delivery.</u>

Y, 1	Yes
N, 2	No
U, 3	Unknown

### **Previous OBS History Chapter**

#### **Antenatal Provider**

Found on the Antenatal Record only. Please select all providers that participated in antenatal care. Select based on the signatures available on the antenatal form. If the signatures are illegible or missing, please check with the office that faxed the form. If there are multiple forms, please collect all care providers if from different offices.

#### Dictionary Provided

10	Family practice physician/ General
	Practitioner
2	Obstetrician
4	Midwife
11	Nurse Practitioner
6	RN/LPN/Other Nurse
5	Other MD (Includes Residents/interns)
8	No Antenatal care
9	Unknown

Please note, in 3M you will also see the choice 12 – No caregiver at delivery, however, you will not be able to select this. A hard edit message will appear. 3M is not able to remove this choice from the dictionary.

<u>First Antenatal visit</u> Found on the Antenatal Record

Format - YYYY/MM/DD

\*Refers to the first prenatal visit with a healthcare provider. If the specific field that refers to first visit on the form is blank, use the date of the first visit recorded under the subsequent assessments.

If there is no antenatal record completed, leave this field blank.

<u>First Ultrasound date</u> Found on the Antenatal Record / Imaging (x-ray) reports

Format - YYYY/MM/DD

\*Enter the first ultrasound date available in woman's chart

If no antenatal care provided, leave this field blank.

#### **Details of First Trimester Ultrasound**

EDD According to LMP

Found on the Antenatal Record

(Estimated delivery date)

Format - YYYY/MM/DD

\*Refers to estimated delivery date according to last menstrual period

(LMP).

Either EDD according to LMP or EDD according to ultrasound must be

filled. If both dates are available, then enter both.

If the expected delivery date is not available, leave the field blank.

**EDD According to Ultrasound** 

Found on the Antenatal Record / X-ray Report

(Estimated delivery date)

Format - YYYY/MM/DD

\*Refers to estimated delivery date according to ultrasound.

If the pregnancy was from artificial insemination, please use EDD according to ultrasound, and not EDD from LMP.

Either EDD according to LMP or EDD according to ultrasound must be filled. If both dates are available, then enter both.

#### **Amniocentesis**

Found on the Antenatal Record/Maternal Fetal medicine consult

Dictionary provided

Y, 1	Yes
N, 2	No
U, 3	Unknown

If there is no information in the chart about an amniocentesis being performed, please choose No.

An amnio is a very invasive procedure that must be indicated in the chart, if nothing is there it means the procedure was not performed.

The only time you would choose 'Unknown' in this case, is if the patient's chart had absolutely no prenatal record or information indicated on what procedures the woman received (especially in out of province patients)

CVS

Found on the Antenatal Record/ Maternal Fetal medicine consult \*Refers to if the woman had a chorionic villus sampling.

#### Dictionary provided

Y, 1	Yes
N, 2	No
U, 3	Unknown

If there is no information in the chart about a CVS being performed, please choose No. A CVS is a very invasive procedure that must be indicated in the chart, if nothing is there it means the procedure was not performed.

The only time you would choose 'Unknown' in this case, is if the patient's chart had absolutely no prenatal record or information indicated on what procedures the woman received (especially in out of province patients)

#### **Genetic Screening Method**

Found on the Antenatal Record, Laboratory tests, North York or IWK screening forms

\*Refers the method of genetic screening. If multiple screenings are completed, choose all that apply.

#### Dictionary provided

1	Counselled and declined
2	First prenatal visit > 20+6 weeks
3	eFTS
4	STS
5	NIPS
9	Unknown

# Genetic Screening Result for eFTS and STS

Found on the Antenatal Record, Laboratory tests, North York or IWK screening forms

1	Positive
2	Negative
9	Unknown

<sup>\*</sup>Refers to the genetic screening results of eFTS and STS.

# Genetic Screening Result for NIPS

Found on the Antenatal Record, Laboratory tests, North York or IWK screening forms

\*Refers to if the patient had a positive NIPS genetic screening result.

#### Dictionary provided

1	Yes
2	No
9	Unknown

#### **Medical Risk Factors**

#### **Diabetes Treatment**

Found on the Nursing Assessment/History and Physical/Medication Record/ Nursing Medications

Field will autofill to "no diabetes present." Diabetes treatment field needs to be completed when diabetes O24^^ is coded

#### Dictionary provided

1	No Diabetes Present	
2	Diet Controlled	
3	Metformin	
4	Insulin	
6	GLP1 agonists (ex: Ozempic)	
9	Unknown	

#### **Urinary Tract Infection**

Found on the Antenatal Record/ Nursing Assessment/History and Physical

#### Dictionary provided

Y, 1	Yes
N, 2	No
U, 3	Unknown

Assign a code, mandatory, from the category O23^^^ if the condition is present at the time of delivery.

<sup>\*</sup>Refers to a UTI that was or is present during the current pregnancy.

#### Mental Health Diagnosis

Found on the Antenatal Record

\*Refers to any mental health diagnosis provided in the medical history on the first page in the third box of the antenatal record. Please select all that apply.

#### Dictionary Provided

1	Anxiety
2	Depression
3	Previous PPD
4	Bipolar
5	Eating Disorder
6	Schizophrenia
7	Addiction
9	Unknown
10	Other
0	None

If there is no information documented on the chart about mental health, please choose "Unknown"

If the physician documents a diagnosis not listed above please choose "Other"

#### **Group B Strep Results**

Found on the Antenatal Record/Labour and Delivery Record/Nursing Notes

\*Refers to if the patient is Strep B positive, negative, or if they declined testing

#### **Dictionary Provided**

1	Positive
2	Negative
3	Declined
9	Unknown

#### Early Pregnancy Syphilis

Found on the Antenatal Record under Initial Lab Investigations \*Refers to the testing for Syphilis during early pregnancy. If only one

test is done, complete early test field and put unknown for late test field.

1	Reactive
2	Non-reactive
3	Unknown

<sup>\*</sup>If you see no results, code as Declined.

#### Late Pregnancy Syphilis

Found on the Antenatal Record under 24-28 Week Lab Investigations \*Refers to the testing for Syphilis during late pregnancy. If only one test is done, complete early test field and put unknown for late test field.

#### Dictionary provided

1	Reactive
2	Non-reactive
3	Unknown

#### **HIV Screening**

Found on the Antenatal Record under Initial Lab Investigations

#### Dictionary provided

1	Reactive
2	Non-reactive
3	Unknown

HbsAG (Hep B Antigen Screening) Found on the Antenatal Record under Initial Lab Investigations \*Refers to the screening for Hepatitis B Antigens during pregnancy.

#### Dictionary provided

1	Reactive
2	Non-reactive
3	Unknown

Early Pregnancy GC/Chlamydia Found on the Antenatal Record under Initial Lab Investigations \*Refers to the testing for Gonorrhea/Chlamydia during early pregnancy. If only one test is done, complete early test field and put unknown for late test field.

1	Positive
2	Negative
9	Unknown

<sup>\*</sup>Refers to the screening for HIV during pregnancy.

<u>Late Pregnancy GC/Chlamydia</u> Found on the Antenatal Record under 24-28 Week Lab Investigations

\*Refers to the testing for Gonorrhea/Chlamydia during late pregnancy. If only one test is done, complete early test field and put unknown for late test field.

#### Dictionary provided

1	Positive
2	Negative
9	Unknown

#### **Vaccinations in Pregnancy**

Found on the Antenatal Record

\*Refers to vaccinations the patient received during pregnancy. Verify date received is within the duration of pregnancy. If the patient received multiple vaccinations, select all that apply.

Unknown should only be selected if the patient did not receive any antenatal care or if there is no antenatal form. If none of the vaccination fields are completed on the form, choose "None".

1	Influenza
2	TDAP
3	COVID-19
4	RSV
5	None
9	Unknown

### Labour and Delivery Chapter

#### Height in cm

Found on the Antenatal Record/ Nursing Assessment

Format - number

\*Refers to the mother's height in centimetres.

When centimeters are entered, the equivalent in inches is automatically calculated in the next field

Code 999 for an unknown value.

Round up to the nearest whole number.

Please refer to the table below for proper conversion of height.

HEIGHT (feet/inches)	HEIGHT (inches)	HEIGHT (cm)
<u>4'8"</u>	56	142
4'9"	57	145
<u>4'10"</u>	58	147
4'11"	59	150
<u>5'0"</u>	60	152
<u>5'1"</u>	61	155
5'2"	62	157
<u>5'3"</u>	63	160
<u>5'4"</u>	64	162
<u>5'5"</u>	65	165
<u>5'6"</u>	66	168
<u>5'7"</u>	67	170
<u>5'8"</u>	68	173
<u>5'9"</u>	69	175
<u>5'10"</u>	70	178
<u>5'11"</u>	71	180
<u>6'0"</u>	72	183
<u>6'1"</u>	73	185
<u>6'2"</u>	74	188

#### First Visit Weight (kg)

Found on the Antenatal Record/ Nursing Assessment/WatchChild (TMH, MRH)

Format - number (3 characters)

\*Refers to the mother's weight in kgs at her first prenatal visit.

When kilograms are entered, the equivalent in pounds is automatically calculated in the next field.

Code 999 for an unknown value.

Enter up to one decimal place, when available.

If weight is recorded in a range, code the highest weight.

If a pre-pregnancy weight is documented, that value can be entered into this field.

#### Pre-Delivery Weight (kg)

Found on the Antenatal Record/ Nursing Assessment

Format - number (3 Characters)

\*Refers to mother's weight just before delivery in kilograms.

If the pre-delivery weight is not available on the Nursing assessment, the patient's last weight on the Antenatal Record can be used (if it was documented within 2 weeks of delivery).

Please note that when kilograms are entered the corresponding number of pounds will be automatically calculated in the next field.

If pre-delivery weight is unknown, add pre-pregnancy weight and weight gain.

Code 999 for an unknown value.

Enter up to one decimal place, when available.

If weight is recorded in a range, code the highest weight.

#### Type of Labour

Found on the Labour and Delivery Record

#### Dictionary Provided

1	Spontaneous
2	Induced
3	No Labour

If the woman goes into labour less than 24 hours after the last administration of medication (prostaglandin/oxytocin) for the purpose of inducing labour, the labour should be coded as induced.

If the woman goes into labour <u>more than 24 hours</u> after the last administration of medication (prostaglandin/oxytocin) for the purpose of inducing labour, the labour should be coded as spontaneous. If the woman is booked for an elective caesarean section and labour did not occur, code 'No Labour'. Unknown cannot be selected.

#### Indications for Induction

Found on the Labour and Delivery Record

\*Refers to the reason why the woman was induced. Please choose options 1, 18, 29, 21, 22, or 25 if they are documented instead of coding the other options in the list. This list will appear slightly different in the grey area in 3M when coding.

#### **Dictionary Provided**

1	Post dates
18	Eclampsia / Preeclampsia
29	PROM with positive Group B Strep or Chorioamnionitis
21	Fetal Anomaly/Congenital Anomaly
22	Low planning Score/ Fetal Distress
25	Vaginal Bleeding/ Abruption
3	Decreased Amniotic Fluid/Oligohydramnios
4	Hypertension - PIH (Pregnancy induced hypertension)
5	IDDM/ GDM (Diabetes)
6	IUGR / No growth/Small Gestational Age
7	Twin/ Multiples
8	PUPP/ Cholestatic Jaundice
9	Thrombocytopenia
31	Previous stillbirth/ poor OBS History/previous fetal death/history
	of precipitate labour
30	PROM
13	Macrosomia/ Large Gestational Age
20	Intrauterine Death
24	Advanced Maternal Age
26	Polyhydramnios
28	Isoimmunisation
32	High BMI/Obesity (BMI GE 40)
15	Social/Geographic/ Maternal Choice
16	Other
17	No indications given

#### Oxytocin (to induce)

Found on the Labour and Delivery Record

#### Dictionary provided

Y, 1	Yes
N, 2	No
U, 3	Unknown

Assign a code, mandatory, from category 5.AC.30.HA-I2

<sup>\*</sup>Refers to if the woman was given IV oxytocin to induce labour.

<sup>\*</sup>Oxytocin can only be given through IV (intravenous).

#### Prostaglandin (to induce)

Found on the Labour and Delivery Record

\*Refers to if the woman was given intra-vaginal/intra-cervical/oral prostaglandin to induce labour.

#### Dictionary provided

Y, 1	Yes
N, 2	No
U, 3	Unknown

Assign a code, mandatory, from category 5.AC.30.CK^^, 5.AC.30.CA^^

Membrane Rupture Date/Time Found on the Labour and Delivery Record

Format - YYYY/MM/DD HH/MM

\*If there is more than one rupture of membranes, record the earliest time.

If the woman has an elective C-section and there is no history of prior rupture of membranes, use the time of birth as the rupture of membranes since the membranes would have been ruptured at the time of delivery.

If unknown, leave blank.

#### **Tocolytics Administered**

Found on the Labour and Delivery Record/Medication Record/Nursing Assessment

\*Refers to medication used to suppress premature labour. The woman will receive this if the delivery would result in premature birth. Ex: calcium channel blockers (nifedipine) and NSAIDs (indomethacin)

Y, 1	Yes
N, 2	No
U, 3	Unknown

<sup>\*</sup>Prostaglandin can only be given intra-vaginal, intra-cervical or oral

<sup>\*\*</sup> If the patient comes in for an elective c-section, there is no membrane rupture (or it is included in the procedure), therefore we assign the date/time of the delivery instead of the membrane rupture.

#### **Antenatal Steroids**

Found on the Medications Record/ Nursing assessment

\*Refers to any prenatal steroids given to women at risk of a premature birth.

#### Dictionary Provided

1	One complete course
2	One incomplete course
3	None

COMPLETE - is defined as <u>two doses</u> of 12 mg of corticosteroids (Betamethasone, beta, celestone, dexamethasone, cortisone) given 24 hours apart or 6mgsof dexamethasone, given 12 hours apart any time before delivery.

INCOMPLETE - is defined as <u>one dose</u> given at any time prior to delivery. If the chart does not mention steroid administration, assume none.

If no dates of administration are given, but the chart refers to 'complete' or 'partial' doses, code as such.

If no dates of administration are given and the chart does not refer to completeness but indicates that steroids were administered, score as 'One incomplete course'. If the chart specifies two or more doses were administered score as 'One complete course'.

#### Fetal Heart Monitor

Found on the Labour Partogram/ Labour and Delivery Record \*Refers to the method of fetal surveillance used during monitoring of the labour.

#### Dictionary provided

4	Intermittent Auscultation (IA)
5	Continuous External Monitoring
6	Continuous Internal Monitoring

IA is recommended for healthy women without risk factors for adverse outcomes

**External Monitoring** is the use of EFM (Electronic Fetal Monitoring). **Internal Monitoring** is the use of internally placing EFM patches on the baby's head for fetal surveillance.

If no Labor partogram is in the chart or it is an elective C-section, please choose IA. Some Fetal Monitoring will always be done.

If two different methods were used for monitoring, please use the most "invasive" method. Internal Monitoring is considered the most invasive.

#### Mode of Delivery

Found on the Labour and Delivery Record/Operative Report/Birth Record

\*Refers to the mode of delivery used to deliver the babie(s).

#### Dictionary Provided

1, ABD	Abdominal (laparotomy)
2, CSC	C-section combined transverse and vertical incision-inverted T / J incisions (this refers to uterine incision, not skin incision)
3, CSH	C-section / hysterectomy
4, CST	C-section, low segment transverse incision
5, CSV	C-section, classical incision (vertical incision in the body of the uterus)
6, CSU	C-section, type unknown
7, LVS	C-section, vertical incision
8, VAG	Vaginal
9, VAG-	Vaginal with Instrumentation
INST	
10, CWI	C-section with instrumentation

For cases with multiple births, please choose the mode of delivery for <u>each</u> baby. You can choose up to 4 different modes of delivery.

If a c-section, transverse incision (or any type) and instrumentation was used during delivery, please choose *C-section with instrumentation*.

If a patient has a trial of forceps that fails, then proceeds to a c-section without any further instrumentation, please select 'C-section with instrumentation.'

### Indication for Caesarean

Found on labour and delivery record

\*Refers to the reason why the patient received a caesarean

1	Advanced Maternal Age
2	Abruptio placenta
3	Breech
4	Transverse lie
5	Diabetes
6	Dystocia (includes Cephalopelvic disproportion, cervical stenosis)
7	Failed Induction
8	Failure to progress
9	Fetal Distress
10	Fetal Growth restriction
11	HIV
12	Maternal herpes simplex infection
13	Hypertensive disorders
14	Isoimmunization
15	Macrosomia suspected
16	Maternal choice (excludes due to previous c-section)
17	Maternal Exhaustion
18	Malpresentation (excluded breech and transverse lie)
19	Multiple pregnancy
20	Other Obstetrical conditions
21	Other Fetal conditions
22	Previous c-section
23	Prolapse cord
24	Placenta Previa
25	Previous traumatic delivery (3rd + 4th degree tear)
26	Prolonged ruptured of membranes >18hr
27	Prolonged ruptured of membranes >24hr
28	Fetal anomaly
29	Suspected/imminent uterine rupture
30	Diseases of the cervix
31	Uterine surgery
32	Post-mortem c-section
33	Concern for fetal well-being
99	Unknown

#### Pain Management Method

Found on the Labour and Delivery Record/ Operative Report

- \*Refers to any anesthesia given to the woman for pain management during the total phase of labour and delivery.
- \*Please note you can enter up to a maximum of 4 different pain management methods into the abstract. Duplicate entry is not allowed within the 4 fields.

#### **Dictionary Provided**

1	None
2	Local
3	Pudendal (nerve block)
4	Entonox
5	Epidural
6	Spinal
7	General
8	Narcotics (Includes fentanyl/versed)
9	Other

The pain management method includes any anesthesia/analgesia that the woman received during her first stage labour up until delivery (including any retained products of conception).

#### **Neonate Chapter**

#### **Presentation of Fetus**

Found on the Labour and Delivery Record/ Operative Report

\*Refers to the presentation of the fetus

#### Dictionary provided

1	Breech
3	Compound presentation
7	Persistent occiput posterior (ROP, LOP, OP)
8	Shoulder presentation
9	Vertex (Cephalic, LOA, ROA, OT, ROT, LOT, OA)
10	Transverse Lie (i.e. sideways)
99	Unknown

#### Place of birth

Found on the Admission/Discharge notes/ Neonatal Transfer Form / Nursing notes

#### Dictionary provided

1	Clinic/Doctors office
2	Free Standing Birth Center
3	Hospital
4	In transport
5	Other
6	Residence

#### **Gestational Age**

Found on the Labour and Delivery Record/ Admission and Discharge notes

Format - Number (2 digits), Number (1 digit)

Ex: 39 weeks and 6 days

Validation Rule - a number greater than 44 is not valid for the number of weeks. A number greater than 6 is not valid for days.

If the days are not available, code '0' for days.

If gestational age is not available enter 99 for the weeks and 9 for the days for unknown.

#### Birth Length (cm)

Found on the Newborn Admission and Discharge Report/ Baby Record

Format - Number Maximum value is '99' If unknown, code '99'

<sup>\*</sup>Refers to where the baby was born.

Head Circumference (cm) Found on the Newborn Admission and Discharge Report/ Baby Record

Format - number

\*This refers to the **birth** head circumference.

Maximum value is '99'.

If the value is unknown, code '99'.

Apgar Score 1 minute Found on the Labour and Delivery Record/ Newborn Admission and

Discharge Report/ Baby Record

Format - number (0-10)

If the value is unknown, code 99.

<u>Apgar Score 5 minute</u> Found on the Labour and Delivery Record/ Newborn Admission and

Discharge Report/ Baby Record

Format - number (0-10)

If the value is unknown, code 99.

<u>Ventilation: Bag and Mask</u> Found on the Labour and Delivery Record/ Neonatal Respiratory

Care form

\*This includes ventilation with bag and mask, CPAP, or any non-invasive PPV (Positive Pressure Ventilation).

#### Dictionary provided

Y, 1	Yes
N, 2	No
U, 3	Unknown

#### <u>Delayed/Deferred Cord</u> <u>Clamping</u>

Found on the Newborn Admission and Discharge Report/ Nursing Notes \*Refers to a delay in cord clamping (over 30 seconds) to allow blood from cord to flow to baby

#### Dictionary provided

Y, 1	Yes
N, 2	No
U, 3	Unknown

If you choose No, Unknown, 3M will bypass the next field.

#### <u>Time of Delayed Cord</u> <u>Clamping</u>

Found on the Newborn Admission and Discharge Report/ Nursing Notes

\*Refers to how long the delay of cord clamping lasted

#### Dictionary provided

1	30-59 seconds
2	60-120 seconds
3	Over 120 seconds
9	Unknown

#### Abnormal Conditions of the Newborn

#### **Admission to SCU**

Found on the labour and delivery record/ nursing notes

\*Refers to if the patient was admitted to the special care unit

#### Dictionary provided

Y, 1	Yes
N, 2	No
U, 3	Unknown

#### Stillborn Cases

For all cases with a Main Patient Service (MPS) of **89 - Stillborn**, the following field must be filled in the abstract

#### <u>Stillborn</u>

Found on the Labour/Delivery Record

Dictionary provided

1	Death before Labour onset
2	Death during Delivery/Labour

When MPS '54' is selected, this field will automatically bypass.
When MPS '89' is selected, only this field will be available for entry in this chapter.

<sup>\*</sup>Only effective in Miramichi

### Project 400- Infant Feeding Form

#### 1.1 Skin-to-skin Immediate

#### Found on infant feeding form

1	Yes
2	No
3	Not applicable
4	Infant not born in this facility

#### 1.2 Skin-to-skin Uninterrupted

#### Found on infant feeding form

1	Yes
2	No
3	Not applicable
4	Infant was not fed in this facility

<sup>\*</sup>If 4 is selected do not answer the following questions 2.1-2.4

#### 2.1 Breastfed prior to hospital discharge

#### Found on infant feeding form

1	Yes
2	No
3	Infant was not fed in this facility

<sup>\*</sup>If 3 is selected do not answer the following questions 2.2-2.4

#### 2.2 Breastfed within 1 hour

#### Found on infant feeding form

1	Yes
2	No
3	Not applicable
4	Infant was not breastfed

#### 2.3 Feeding Birth to discharge/transfer

#### Found on infant feeding form

1	Breastmilk only
2	Breastmilk and other liquid(s)
3	Infant formula only

#### 2.4 Medical conditions affecting the newborn or mother Found on infant feeding form

1	Yes
2	No
3	Not applicable (infant only received breastmilk)

### Midwifery Care Record-Maternal

For all maternal midwifery care records

Date of first prenatal visit

Found on the midwifery care record-Maternal

Date in YYYY/MM/DD

Gestational age

(with a midwife)

Found on midwifery care record-Maternal

(at first prenatal visit)

Format in weeks

Intended place of birth during

prenatal period

Found on the midwifery care record-Maternal

Dictionary provided

1	Hospital
2	Home

Intended place of birth at onset of active labour

Found on the midwifery care record-Maternal

Dictionary provided

1	Hospital
2	Home

Actual place of birth

Found on the midwifery care record-Maternal

Dictionary provided

1	Hospital
2	Home
3	Other

<u>Labour</u>

Found on the midwifery care record-Maternal

\*Refers to if Emergency Medical Services (EMS) Was called to the home at any time during labour.

Y, 1	Yes
N, 2	No

Birth

Found on the midwifery care record-Maternal

\*Refers to if Emergency Medical Services (EMS) Was called to the home at any time during birth.

Dictionary provided

Y, 1	Yes
N, 2	No

#### Immediate Postpartum

Found on the midwifery care record-Maternal

\*Refers to if Emergency Medical Services (EMS) Was called to the home at any time during Immediate postpartum.

Dictionary provided

Y, 1	Yes
N, 2	No

# Was there a transfer to hospital using EMS during a planned hospital birth?

Found on the midwifery care record-Maternal

Dictionary provided

Y, 1	Yes
N, 2	No

# Was there a transfer to hospital using EMS during a planned home birth?

Found on the midwifery care record-Maternal

Dictionary provided

Y, 1	Yes
N, 2	No

If 'No' is selected 3M will bypass the next field

If yes, was the transfer by:

Found on the midwifery care record-Maternal

Dictionary provided

1	Car
2	EMS(non-urgent)
3	EMS (urgent)

<u>Second attendant during a home birth</u> Found on the midwifery care record-Maternal

Dictionary provided

1	Registered Midwife
2	EMS
3	Second Attendant

Was there a Transfer of Care to another care provider during, pregnancy labour or postpartum Found on the midwifery care record-Maternal

Dictionary provided

Y, 1	Yes
N, 2	No

If yes, was the transfer temporary or permanent

Found on the midwifery care record-Maternal

Dictionary provided

1	Temporary
2	Permanent

Was there a consultation with another care provider

Found on the midwifery care record-Maternal

1	Antepartum
2	Intrapartum
3	Postpartum
3	No

<sup>\*</sup>Multiple Occurrence field

#### <u>Did the client leave midwifery care</u> <u>during pregnancy?</u>

Found on the midwifery care record-Maternal

Dictionary provided

Y, 1	Yes
N, 2	No

If 'No' is selected 3M will bypass the next field

If yes, why?

Found on the midwifery care record-Maternal

Dictionary provided

1	Pregnancy Loss
2	Pregnancy Termination
3	Other Medical Reasons
4	Relocation
5	Client choice
6	Midwife choice
7	Other

<u>Does the client fall into any of the</u> <u>following population categories</u> Found on the midwifery care record-Maternal

1	Poverty
2	Food Insecurity
3	Inadequate housing
4	Social Isolation due to language barrier
5	Social Isolation due to cultural barrier
6	Social Isolation due to rural distances
7	Social Isolation due to immigration/refugee status
8	Social Isolation due to extended absence of partner for employment
9	Social Isolation due to incarceration
10	Identifies as LGBTQ
11	Single parent
12	Receiving Social Assistance
13	Less than 21 years old at time of delivery
14	Student
15	Military or partner in Military
16	Minority by race, religion, or ethnicity
17	First nations, Metis, or Inuit
18	Has not completed high school education

19	Cognitive, physical, or behavioural disabilities
20	Current/previous domestic or sexual abuse
21	Addictions or mental health concerns
22	Significant previous trauma related to pregnancy or childbirth
23	History of involvement with child protection
24	Requesting vaginal birth after caesarean
25	Requesting home birth
26	Other
27	None

Date of discharge from Midwifery care

Found on the midwifery care record-Maternal

Date in YYYY/MM/DD

### Midwifery Care Record-Infant

For all home and hospital births

If baby was born in hospital, start on question 5 (Feeding from birth to discharge from Midwifery services)

Skin to Skin

Found on the midwifery care record-Maternal

Dictionary provided

Y, 1	Yes
N, 2	No

First feeding after birth

Found on the midwifery care record-Infant

Dictionary Provided

1	Breast milk
2	Infant formula
3	Infant not fed in this facility

\*If newborn not fed in home (transferred to hospital or neonatal death do not answer questions 3 and 4)

<u>Did the infant experience any of the following medical conditions?</u>

Found on the midwifery care record-Infant

Dictionary provided

Y, 1	Yes
N, 2	No

<sup>\*</sup>In 3M only "Yes" or "No" option

<u>Did the mother experience any of the following medical conditions?</u>

Found on the midwifery care record-Infant

Y, 1	Yes
N, 2	No

<sup>\*</sup>In 3M only "Yes" or "No" option

#### <u>Feeding from birth to discharge</u> <u>from Midwifery services</u>

Found on the midwifery care record-Infant

Dictionary Provided

1	Breast milk
2	Infant formula
3	Infant not fed in this facility

#### <u>Indication for Supplementation</u>

Found on the midwifery care record-Infant

Dictionary Provided

1	Birth weight less than 1500g
2	Gestational age less than 32 weeks
3	Hypoglycemia due to impaired metabolic
	adaptation or increased glucose demand
4	Significant weight loss in presence of clinical
	indications
5	Clinical indication of insufficient milk intake
6	Metabolic disorder
7	Maternal severe illness
8	Herpes simplex virus 1-lesions on the breast
9	Maternal medications
10	Breast surgery
11	Maternal choice
12	Other

#### <u>Transfer of Care to another</u> <u>primary provider</u>

Found on the midwifery care record-Infant

Dictionary provided

Y, 1	Yes
N, 2	No

# Consultation with another care provider

Found on the midwifery care record-Infant

Dictionary provided

Y, 1	Yes
N, 2	No

Discharge date from Midwifery care

Found on the midwifery care record-Infant

Date in YYYY/MM/DD

### Maternal and Newborn Diagnostic and Intervention Codes

For further coding and abstracting instructions and mandatory data collection, please refer to the Canadian Coding Standards, the Discharge Abstract Database manual (DAD) as well as any coding/abstracting instructions given by Department of Health. Please refer to the ICD-10-CA/CCI Folio Program for a complete list of approved diagnostic and interventions codes for maternal, newborn and congenital anomaly coding.

#### **ICD-10-CA Chapters**

Chapter XV - Pregnancy, childbirth, and the puerperium (O00-O99)

Chapter XVI - Certain conditions originating in the perinatal period (P00-P96)

Chapter XVII - Congenital malformations, deformations, and chromosomal abnormalities (Q00-Q99)

#### **CCI Sections**

Section 5 - Obstetrical and Fetal Interventions

#### **Contact Information**

For any feedback, comments, or questions regarding any section of the NB Perinatal Health Program coding manual, please contact:

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### Appendix A - List of field changes and modifications

#### **Reproductive Chapter**

TOLAC/VBAC Eligibility – title changed

#### Pregnant Individuals Information Chapter

Mother's Ethnicity- Dictionary updated

Amount fields removed for smoking, marijuana and alcohol use

Alcohol Use Prior to Pregnancy Knowledge-title changed

Vaping Before Pregnancy – added

Vaping During pregnancy - added

Covid-19 Diagnosis in Pregnancy - removed

Covid-19 Vaccination – removed

Marijuana Type – added

Substance use – dictionary update

#### **Previous OBS History Chapter**

Maternal Serum Testing – removed

Genetic Screening Method – added

Genetic Screening Result – added

Genetic Screening Result for NIPS - added

Vaccinations in Pregnancy—added

HIV Screening - added

Early Pregnancy Syphilis – added

Late Pregnancy Syphilis- added

HbsAG (Hep B Antigen Screening) - added

Mental Health Diagnosis – added

Early Pregnancy GC/Chlamydia – added

Late Pregnancy GC/Chlamydia— added

#### **Labour and Delivery Chapter**

First Visit Weight (kg) – title changed

#### **Neonate Chapter**

No changes