# Birth event—main indication for caesarean section, code N[N]



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## Birth event—main indication for caesarean section, code N[N]

## Identifying and definitional attributes

Metadata item type: Data Element

Short name: Main indication for caesarean section

**METEOR** identifier: 668868

Registration status: Health!, Superseded 12/12/2018

**Definition:** The main indication for a caesarean section being performed during a birth event,

as represented by a code.

**Data Element Concept:** Birth event—main indication for caesarean section

Value Domain: Indication for caesarean section code N[N]

### Value domain attributes

## Representational attributes

Representation class: Code Data type: Number

Data type.	Number	
Format:	N[N]	
Maximum character length:	2	
	Value	Meaning
Permissible values:	1	Fetal compromise
	2	Suspected fetal macrosomia
	3	Malpresentation
	10	Lack of progress; less than or equal to 3 cm cervical dilatation
	11	Lack of progress in the first stage; greater than 3 cm to less than 10 cm cervical dilatation
	12	Lack of progress in the second stage
	13	Placenta praevia
	14	Placental abruption
	15	Vasa praevia
	16	Antepartum/intrapartum haemorrhage
	17	Multiple pregnancy
	18	Unsuccessful attempt at assisted delivery
	19	Cord prolapse
	20	Previous adverse perinatal outcome
	21	Previous caesarean section
	22	Previous severe perineal trauma
	23	Previous shoulder dystocia
	29	Other obstetric, medical, surgical, psychological indications
	30	Maternal choice in the absence of any obstetric,

medical, surgical, psychological indications

## Collection and usage attributes

Guide for use:

CODE 1 Fetal compromise

This includes suspected or actual fetal compromise and intra uterine growth restriction (IUGR).

CODE 10 Lack of progress; less than or equal to 3 cm cervical dilatation

Lack of progress includes slow or no progress.

This code may be appropriate for cases of unsuccessful induction.

CODE 11 Lack of progress in the first stage; greater than 3 cm to less than 10 cm cervical dilatation

Lack of progress includes slow or no progress.

CODE 12 Lack of progress in the second stage

Lack of progress includes slow or no progress.

CODE 13 Placenta praevia

Record placenta praevia as the indication for caesarean section if there is ultrasound or clinical evidence that the edge of the placenta covers the internal cervical os, or encroaches into the lower segment less than 2 cm away from the internal cervical os.

CODE 14 Placental abruption

Record placental abruption as the indication for caesarean section if there is ultrasound or clinical evidence antenatally of abruption of the placenta prior to onset or during labour.

CODE 15 Vasa praevia

Record vasa praevia as the indication for caesarean section if there is ultrasound or visual evidence of exposed fetal blood vessels running across the fetal membrane below or at the level of the fetal presenting part in the lower segment of the uterus. This code is to be used when the caesarean section is planned or in the case of an emergency when the vessels may have ruptured.

CODE 16 Antepartum/intrapartum haemorrhage

Record antepartum/intrapartum haemorrhage as the indication for caesarean section if there has been any antenatal or intrapartum vaginal bleeding that leads to the immediate delivery of the baby by caesarean section. This code should only be used as a main indication if a more specific cause of the antepartum/intrapartum haemorrhage is not known.

Where there is a vasa praevia and an antepartum/intrapartum haemorrhage, Code 15 is to be recorded as the main indication and Code 16 as an additional indication.

CODE 22 Previous severe perineal trauma

Includes previous 4th degree tears and other perineal damage or injury where a woman is symptomatic and the clinician determines the caesarean section is justified.

CODE 29 Other obstetric, medical, surgical, psychological indications

Where a woman has a psychopathological indication for caesarean section, e.g. extreme fear of natural childbirth, this code should be used. It is not to be used for psychosocial indications which should be coded under Code 30.

CODE 30 Maternal choice in the absence of any obstetric, medical, surgical, psychological indications

This includes psychosocial indications.

Note that Code 30 is not to be used in conjunction with additional indications.

#### Source and reference attributes

Submitting organisation: National Perinatal Data Development Committee

#### Data element attributes

### Collection and usage attributes

Guide for use: This data element records the main indication for performing a caesarean section.

Only one code may be selected.

**Collection methods:** The main indication should be the indication that the clinician attending the

> birth determines to be the main reason for the caesarean section being performed. It should be determined at the time of delivery and not revised later or selected based on information that becomes available after delivery such as results of tests

or procedures.

Comments: Codes 4 to 9 have been omitted as they 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

#### Relational attributes

Related metadata references:

Supersedes Birth event—main indication for caesarean section, code N[N]

Health!, Superseded 02/08/2017

Has been superseded by Birth event—main indication for caesarean section, code

N[N]

Health!, Superseded 03/12/2020

See also Birth event—additional indication for caesarean section, code N[N]

Health!, Superseded 12/12/2018

See also Birth event—birth method, code N Health!, Superseded 12/12/2018

Implementation in Data Set Perinatal NBEDS 2018-19

**Specifications:** 

Health!, Superseded 12/12/2018 Implementation start date: 01/07/2018

Implementation end date: 30/06/2019

Conditional obligation:

This data element is to be recorded if the response to Birth event—birth method,

code N is Code 4, Caesarean section.