

# 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

<b>Metadata item type:</b>	Data Element
<b>Short name:</b>	Main indication for caesarean section
<b>METEOR identifier:</b>	733449
<b>Registration status:</b>	<a href="#">HealthI</a> , Standard 03/12/2020
<b>Definition:</b>	The main indication for a caesarean section being performed during a birth event, as represented by a code.
<b>Data Element Concept:</b>	<a href="#">Birth event—main indication for caesarean section</a>
<b>Value Domain:</b>	<a href="#">Indication for caesarean section code N[N]</a>

## Value domain attributes

## Representational attributes

<b>Representation class:</b>	Code
<b>Data type:</b>	Number
<b>Format:</b>	N[N]
<b>Maximum character length:</b>	2

	<b>Value</b>	<b>Meaning</b>
<b>Permissible values:</b>	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**

Includes suspected or actual fetal compromise and intra uterine growth restriction.

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

Lack of progress includes slow or no progress.

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. Recorded when the caesarean section is planned or in the case of an emergency caesarean section 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. Should only be recorded 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 perineal tears and other perineal damage or injury where a female is symptomatic and the clinician determines the caesarean section is justified.

**CODE 29 Other obstetric, medical, surgical, psychological indications**

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

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

Includes psychosocial indications.

Not to be recorded in conjunction with additional indications.

**Comments:** The following codes have been omitted as they are no longer in use: Code 4 (Lack of progress; less than or equal to 3 cm cervical dilatation), Code 5 (Lack of progress in the first stage; 4 cm to less than 10 cm cervical dilatation), Code 6 (Lack of progress in the second stage), Code 7 (Placenta praevia), Code 8 (Placental abruption) and Code 9 (Vasa praevia). For information about their meaning in previous data elements, see superseded versions. For information on how to record these codes in the current value domain, refer to the Guide for use.

## Source and reference attributes

**Submitting organisation:** National Perinatal Data Development Committee

## Data element attributes

### Collection and usage attributes

**Guide for use:** Only one code may be recorded.

Up to 2 additional indications may be recorded using the [Birth event—additional indication for caesarean section, code N\[N\]](#) once main indication is completed.

Jurisdictions that record perinatal data using the ICD-10-AM may have more than one unique ICD-10-AM code that maps to a single permissible value for the Birth event—main indication for caesarean section, code N[N] and [Birth event—additional indication for caesarean section, code N\[N\]](#) data elements. In these cases, the relevant permissible value should only be recorded once.

**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.

## 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 03/12/2020

See also [Birth event—additional indication for caesarean section, code N\[N\] Health!](#), Standard 03/12/2020

See also [Birth event—birth method, code N Health!](#), Superseded 17/12/2021

See also [Birth event—birth method, code N Health!](#), Standard 17/12/2021

**Implementation in Data Set Specifications:**

[Perinatal NBEDS 2021–22](#)

[Health!](#), Superseded 17/12/2021

**Implementation start date:** 01/07/2021

**Implementation end date:** 30/06/2022

**Conditional obligation:**

This data element is only to be recorded if the response to the [Birth event—birth method, code N](#) data element is Code 4 (Caesarean section).

**DSS specific information:**

This data element is recorded for the mother only.

[Perinatal NBEDS 2022–23](#)

[Health!](#), Standard 17/12/2021

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