Female—postpartum perineal status, code N[N]

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# Female—postpartum perineal status, code N[N]

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| Identifying and definitional attributes |
| Metadata item type: | Data Element |
| Short name: | Postpartum perineal status |
| METEOR identifier: | 749942 |
| Registration status: | [Health!](https://meteor-uat.aihw.gov.au/RegistrationAuthority/14), Standard 17/12/2021 |
| Definition: | The state of a female's perineum following birth, as represented by a code. |
| Context: | Perinatal |
| Data Element Concept: | [Female—postpartum perineal status](https://meteor-uat.aihw.gov.au/content/696128) |
| Value Domain: | [Perineal status code N[N]](https://meteor-uat.aihw.gov.au/content/749944) |

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| Value domain attributes |
| Representational attributes |
| Representation class: | Code |
| Data type: | Number |
| Format: | N[N] |
| Maximum character length: | 2 |
|   | **Value** | **Meaning** |
| Permissible values: | 1 | Intact |
|   | 2 | 1st degree laceration/vaginal graze |
|   | 3 | 2nd degree laceration |
|   | 4 | 3rd degree laceration |
|   | 5 | Episiotomy |
|   | 7 | 4th degree laceration |
|   | 88 | Other perineal laceration, rupture or tear |
| Supplementary values: | 99  | Not stated/inadequately described  |

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| Collection and usage attributes |
| Guide for use: | CODE 1   IntactShould not be recorded in conjunction with any other code.CODE 2   1st degree laceration/vaginal grazeGraze, laceration, rupture or tear of the perineal skin during birth that may be considered to be slight or that involves one or more of the following structures:* fourchette
* labia
* periurethral tissue (excluding involvement of urethra)
* vagina, low
* skin
* vulva.

Should not be recorded in conjunction with any other code except for Code 5 (Episiotomy).CODE 3   2nd degree lacerationPerineal laceration, rupture or tear as in Code 2 occurring during birth, also involving:* pelvic floor
* perineal muscles
* vaginal muscles.

Excludes laceration involving the anal sphincter. Should not be recorded in conjunction with any other code except for Code 5 (Episiotomy).CODE 4   3rd degree lacerationPerineal laceration, rupture or tear as in Code 3 occurring during birth, also involving:* anal sphincter (excluding involvement of anal or rectal mucosa)
* rectovaginal septum
* sphincter not otherwise specified (NOS).

Excludes laceration involving the anal or rectal mucosa. Should not be recorded in conjunction with any other code except for Code 5 (Episiotomy).CODE 5 EpisiotomySurgical incision into the perineum and vagina to assist birth.CODE 7   4th degree lacerationPerineal laceration, rupture or tear as in Code 4 occurring during birth, also involving:* anal mucosa
* rectal mucosa.

Should not be recorded in conjunction with any other code except for Code 5 (Episiotomy).CODE 88   Other perineal laceration, rupture or tearMay include haematoma or unspecified perineal tear. Should not be recorded in conjunction with any other code except for Code 5 (Episiotomy). |
| Collection methods: | Jurisdictions that record perinatal data using the ICD-10-AM should apply the following codes in relation to degree of laceration:‘Code 2 1st degree laceration/vaginal graze' is equivalent to O70.0 in the ICD-10-AM.'Code 3 2nd degree laceration ' is equivalent to O70.1 in the ICD-10-AM.'Code 4 3rd degree laceration' is equivalent to O70.2 in the ICD-10-AM.'Code 7 4th degree laceration' is equivalent to O70.3 in the ICD-10-AM.'Code 88 Other perineal laceration, rupture or tear' is equivalent to O70.9 in the ICD-10-AM. |
| Comments: | Where multiple perinatal lacerations, ruptures or tears of different degrees are documented, assign the code for the highest (most severe) degree only.If a laceration occurred during birth and an episiotomy was performed, both the degree of laceration and the episiotomy should be recorded. If an episiotomy is performed, the perineum cannot be intact.While 4th degree laceration is more severe than an episiotomy, this category has not been placed in order of clinical significance within the value domain.Code 6 (Combined laceration and episiotomy) has been omitted as it is no longer in use. For information about its meaning in previous data elements, see superseded versions. |

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| Source and reference attributes |
| Submitting organisation: | Australian Institute of Health and Welfare |
| Origin: | ACCD (Australian Consortium for Classification Development) 2019. The International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification (ICD-10-AM), 11th edn. Tabular list and Alphabetic index. Darlinghurst, NSW: Independent Hospital Pricing Authority. |

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| Data element attributes  |
| Collection and usage attributes |
| Guide for use: | More than one permissible value may be recorded. |
| Comments: | Perineal laceration (tear) may cause significant maternal morbidity in the postnatal period. Episiotomy is an indicator of management during labour and, to some extent, of obstetric intervention. |
| Relational attributes |
| Related metadata references: | Supersedes [Female—postpartum perineal status, code N[N]](https://meteor-uat.aihw.gov.au/content/732864)[Health!](https://meteor-uat.aihw.gov.au/RegistrationAuthority/14), Superseded 17/12/2021 |
| Implementation in Data Set Specifications: | [Perinatal NMDS 2022–23](https://meteor-uat.aihw.gov.au/content/742052)[Health!](https://meteor-uat.aihw.gov.au/RegistrationAuthority/14), Standard 17/12/2021***Implementation start date:*** 01/07/2022***Implementation end date:*** 30/06/2023***DSS specific information:*** This is a multiple response data element and is therefore operationalised for data collection across 7 individual data items (one data item per permissible value, excluding Code 99 (Not stated/inadequately described)).This data element is recorded for the mother only. |