

<p style="text-align: center;">West Midlands Maternity Dataset</p> <p style="text-align: center;">Phase 1a (antenatal) – July 2003</p>
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A. MOTHERS DETAILS

Personal

- Mothers NHS number
- Mothers Hospital number
- Mothers Surname
- Mothers Forename
- Mothers Date of birth
- Mothers Address
- Mother Postcode
- Ethnic Origin (pick list)

GP

- GP Surname – *from national database*
- GP Practice name – *from national database*
- GP Practice code – *from national database*
- GP Practice address – *from national database*
- Postcode – *from national database*
- GP telephone number – *from national database*
- GP code – *from national database*

Other

- Date of booking
- Place booked for delivery

B. MATERNAL BLOOD TESTS

Blood Group

- Offer of test Not offered / Offer declined (+ text) / Offer accepted
- Test date
- Group + Rhesus (pick list)

Antibodies

- Test result No antibodies detected / Antibodies (+ text)
- Action Repeat sample / Consultant review / None required

Haemoglobin

- Offer of test Not offered / Offer declined (+ text) / Offer accepted
- Booking HB + date
- Action Dietary advice / oral iron / IM iron / Consultant review / Blood transfusion / Other (+ text)
- Pre-delivery Hb + date
- Action Dietary advice / oral iron / IM iron / Consultant review / Blood transfusion / Other (+ text)

Haemoglobinopathies

- Offer of test Not offered / Offer declined (+ text) / Offer accepted
- Test date
- Test result Normal haemoglobins / Abnormal haemoglobins (+ text)
- Action Repeat sample / Partner testing recommended / Specialist review / None required

Hepatitis B

- Offer of test Not offered / Offer declined (+ text) / Offer accepted
- Test date
- Test result Positive / Negative
- Action Repeat sample / Consultant review / None required
- Positive result confirmed

Syphilis

- Offer of test Not offered / Offer declined (+ text) / Offer accepted
- Test date
- Test result Positive / Negative
- Action Repeat sample / Consultant review / None required
- Positive result confirmed

HIV

- Offer of test Not offered / Offer declined (no reason) / Offer declined (not Perceived at risk) / Offer declined (specialist review) / Offer accepted
- Test date
- Test result Positive / Negative
- Action Repeat sample / Consultant review / None required
- Positive result confirmed

Rubella

- Offer of test Not offered / Offer declined (+ text) / Offer accepted
- Test date
- Test result Immune / Non immune

B. MATERNAL SCREENING TESTS

Anti-D prophylaxis

- Offer of program Not offered / Offer declined (+ text) / Offer accepted
- 28wk antibody test Yes (+ date) / No
- Result No antibodies detected / Repeat sample / Consultant review
- 28wk vaccination Yes (+ date) / No
- Batch number
- 34wk vaccination Yes (+ date) / No
- Batch number

Down's Syndrome & fetal anomaly screen

- Down's screen Not offered-late booker / Offer declined (+ text) / Offer accepted / Not offered
- Screening information leaflet given Yes / No
- Date of test
- Type of test 1st Trimester serum / Nuchal Translucency / 2nd Trimester serum
- Test result risk [1 in " "]
- Test result Low risk / High risk
- AFP test offer Not offered / Offer declined (+ text) / Offer accepted
- Test date
- Test result Low risk / High risk

C. FETAL SCREENING TESTS

Diagnostic tests

- Offer of test Not offered-late booker / Offer declined (+ text) / Offer accepted / Not offered-policy
- Type of test Test not done (+text) / CVS / Amniocentesis / FBS
- Why offered Screen positive / Maternal age / Family history / USS indication / Other (+text)
- Test performed by Consultant (Obs & Gynae) / Consultant (FM) / Reg / MW / Other
- Miscarriage Yes / No
- Lab techniques Full Karyotype / PCR / FISH
- Test date
- Test result Within normal range / Positive Downs / Other (+ text)

Booking scan

- Date
- Gestation - *calculated*
- Baby label A / B / C / D
- Fetal heart Present / Not present
- CRL (mm)
- BPD (mm)
- HC (mm)
- FL (mm)
- Nuchal translucency (mm)
- Neural tube defect None seen / Anencephaly / Spina bifida / Encephalocele
- Abdominal wall defect Yes / No
- Other structural anomaly

Anomaly Scan

- Baby label caption
- Date
- Gestation at scan - *calculated*
- Where scanned Hospital / Community / Other (+ text)
- Head - skull & brain Not seen / Normal / Abnormal (+ pick list)
- BPD (mm)
- HC (mm)
- Spine Not seen / Normal / Abnormal (+ pick list)
- Neck Not seen / Normal / Abnormal (+ pick list)
- Face Not seen / Normal / Abnormal (+ pick list)
- Chest Not seen / Normal / Abnormal (+ pick list)
- Abdomen Not seen / Normal / Abnormal (+ pick list)
- AC (mm)
- Arms Not seen / Normal / Abnormal (free text box)
- Legs Not seen / Normal / Abnormal
- FL (mm)
- Global problem Not seen / Normal / Abnormal (+ pick list)
- Liquor volume Not seen / Normal / Abnormal (+ pick list)
- Markers for trisomy Not seen / Seen (+ pick list)
- Final comments (free text)
- Referral Yes / No
- Where (free text)