

West Midlands Neonatal Dataset

Phase 2 – June 2003

A. Personal, Birth and Admission data

1. **Baby NHS number**
2. **Postcode** of mother at time of delivery
3. **Ethnicity** pick list
4. **Place of birth**
 - This hospital – booked here
 - This hospital - booked elsewhere in region (name of booking hospital)
 - This hospital – booked elsewhere NOT in region (record name)
 - This hospital – not booked
 - Other hospital – this region (record name)
 - Other hospital – not this region (record name)
 - Home – booked at home
 - Born before arrival
4. **Month and year of birth**
5. **Mode of delivery**
 - Vaginal Cephalic
 - Vaginal Breech
 - Instrumental
 - Caesarean Section
 - Not known
6. **Plurality**
 - Singleton 1:1
 - First of twins 1:2
 - Second of twins 2:2
 - First of triplets 1:3
 - Etc
7. **Gestation in completed weeks and days** by dating scan or menstrual date
8. **Birthweight** in grams
9. **Gender**
 - Male
 - Female
 - Not specified
 - Not known
10. **Admission date and time**
11. **Source of admission**
 - Delivery suite
 - Theatre
 - Other ward e.g. Postnatal ward
 - Home
 - Another hospital, transferred from another hospital after birth by their staff
 - Retrieved by this hospital after birth from another hospital
 - Other (free text)
12. **Temperature on admission**

13. **Vitamin K**

- Given IV
- Given IM
- Given orally - no further doses needed
- Given orally - further doses needed
- Not given

14. **Antenatal steroids (Betamethasone)**

- None
- Incomplete course
- Complete course (2 doses, > 24hrs and < 7 days before delivery)
- Complete course > 7 days before delivery
- Multiple courses

B. Resuscitation data

- | | | |
|---|---|-------------------------|
| 1. Apgar score @ 0 minutes | } | In Apgar table format |
| 2. Apgar score @ 1 minute | | |
| 3. Apgar score @ 5 minutes | | |
| 4. Apgar score @ 10mins | | |
| 5. Time to first gasp (to nearest minute) | | |
| 6. Time to onset of regular/sustained breathing (to nearest minute) | | |
| 7. Type of resuscitation | | None / Basic / Advanced |
| 8. IPPV | | Face mask / ETT / Both |
| 9. ECM | | No / Yes |
| 10. Drugs | | Pick list (+ text) |
| 11. Intubated | | No / Yes |
| 12. Age at intubation (to nearest minute) | | |
| 13. Other information | | Free text |

C. Respiratory data

1. **Ventilated** Yes / No
2. **Date and time intubated** (if not intubated at delivery)
3. **Surfactant**
 - None
 - Survanta
 - Curosurf
 - Other
4. **Date and time of 1st dose Surfactant**
5. **Date and time of 2nd dose Surfactant**
6. **More than 2 doses?** Yes / No (If yes, state how many)
7. **Pneumothorax** Yes / No
8. **Chest drain** Yes / No (If yes, state how many)
9. **Needled** Yes / No

10. **Mode of Ventilation**

- IPPV only
- IPPV and HFOV
- HFOV only

11. **Respiratory Support**

- Days of Ventilation via an endotracheal tube
- Days of CPAP via any route

12. **RDS** Yes / No

13. **Other Respiratory Support**

- Nitric oxide Yes / No
- ECMO Yes / No

14. **Postnatal systemic steroids for CLD**

- None
- Steroids given (any)

15. **Oxygen therapy at 28 days of age** Yes / No

16. **Oxygen therapy at 36 weeks corrected gestation** Yes / No

17. **Was the oxygen therapy required as a result of an acute episode** Yes / No
To be answered if answer to questions 15 or 16 is "Yes"

18. **Sent home on oxygen** Yes / No

D. Neurological data

1. **Encephalopathy** (ref. Sarnat 1976)

- No encephalopathy
- Mild / Grade 1
- Moderate / Grade 2
- Severe / Grade 3

2. **Cranial Ultrasound findings** (worst scan)

- Not examined
- Normal
- Localised intraventricular haemorrhage (GLH, SEH, grade 1 or 2)
- IVH with ventricular dilatation
- Other (free text)

3. **Ventricular size** (Levene 1981)

- Normal
- Transient ventriculomegaly
- Persistent ventriculomegaly
- Ventriculomegaly shunted

4. **Parenchymal lesions**

- None
- Transient intraparenchymal echodensity (IPE) < 14 days
- Persistent intraparenchymal echodensity (IPE) > 14 days
- Single large cyst (porencephalic)
- Multiple cysts (cPVL)
- Other (free text)

E. CVS data

1. **PDA** Yes / No
 - Diagnosed by Clinical criteria / Echo criteria / Both
 - Indomethacin: Yes / No Treatment / Prophylaxis
 - Surgical ligation Yes / No
2. **Hypotension** Yes / No
 - Treatment given Volume / Inotropes / Steroids

F. Infection data

1. **Necrotising Enterocolitis** (ref. Bell 1978)
 - None
 - Stage 1 / suspect
 - Stage 2 / confirmed
 - Stage 3 / Advanced
2. **Treatment**
 - Conservative [medical / peritoneal drain]
 - Surgery [bowel resection / ileostomy]
3. **Early Sepsis** (on or before day 3) Yes / No
 - Bacterial pathogen Yes / No
 - Coagulase Negative Staph Yes / No
 - Culture negative sepsis Yes / No
 - Other information (free text)
4. **Early Meningitis** (on or before day 3) Yes / No
 - Bacterial pathogen Yes / No
 - Other Yes / No
 - Other information (free text)
5. **Late Sepsis** (after day 3) Yes / No
 - Bacterial pathogen Yes / No
 - Coagulase Negative Staph Yes / No
 - Fungal Yes / No
 - Culture negative sepsis Yes / No
 - Other information (free text)
6. **Late Meningitis** (after day 3) Yes / No
 - Bacterial pathogen Yes / No
 - Other Yes / No
 - Other information (free text)

G. Screening data

1. **Retinopathy of Prematurity Screening**
 - Not screened (did not meet criteria)
 - Screened (met criteria)
 - Discharged before screen (met criteria – to be arranged)
2. **Retinopathy of Prematurity Staging** (record worst stage)
 - No ROP
 - Stage I
 - Stage II
 - Stage III
 - Stage IV
 - Stage V

3. **Retinopathy of Prematurity Therapy**

- No therapy
- Yes, therapy given

4. **Audiology Screening**

- Not screened
- Screened
- Discharged before screen
- Screened elsewhere

5. **Audiology screening test**

- Automated ABER
- ABER
- OAE

6. **Congenital anomaly**

- Anomaly None / Suspected / Known / Other (+ text)
- Date of notification
- Anomaly group Pick list (+ free text)
- Details of anomaly/report Free text

7. **Date of heel prick**

H. Discharge data

1. **Discharge date**

2. **Reason for Discharge**

- Ready for discharge
- Died – date and time
- Other (free text)

3. **Discharge destination**

- Discharged home
- Discharged other ward this hospital
- Other (free text)

4. **Problems during admission/stay**

- Birthweight below weight criteria for PNW / Transitional Care Ward
- TTN
- Congenital pneumonia
- Cyanotic/dusky episodes
- Jaundice
- Feeding problem
- Hypoglycaemia
- Infant of a diabetic mother
- Meconium Aspiration Syndrome
- Convulsions
- Neonatal Abstinence Syndrome
- Other (free text)

The following will be obtained from data input:

Extreme prematurity / Prematurity / RDS / ENE / NEC / Infection / Low Apgar score @ birth / Hypothermia

5. **Discharge weight**

6. **Head Circumference**

7. **Consultant** In charge of care

8. **Method of feeding**

- Breast
- Bottle
- Breast and bottle
- Other (free text)

9. **Drugs on discharge**

- None
- Multivitamins
- Iron
- Folic Acid
- Other (free text)

10. **Follow up required** Yes / No (state time in weeks)

11. **Immunisations**

- BCG
- Dip/tet/Pert
- HiB
- Hep B
- Men C
- Polio
- Pneumococcal
- Synagis

12. **Other information** (free text)

If outcome died:

1. **Date and time of Death**

2. **Post mortem examination**

- Consent requested but declined
- Consent not requested
- Consent given
- Other (free text)

3. **Cause of Death** (as per Death Certificate)

4. **Other information** (free text)

I. Transfer data

1. **Transfer date**

2. **Reason for Transfer**

- Transferred for special care
- Transferred for neonatal intensive care
- Transferred for ECMO
- Transferred for Nitric Oxide
- Transferred for HFOV
- Transferred for surgery (including CVL/PICC insertion)
- Transferred for Scan (e.g. cardiac)

3. **Destination**

- Select from list of Units in Region or other [specify]