

**FETAL DEATH  
STANDARD LPHA DATA SET  
DATA ELEMENTS BEGINNING JANUARY 1, 2011**

The following is a standardized list of data items developed by the Missouri Department of Health and Senior Services for LPHA public health assessment and program activities. These data elements are obtained from the Report of Fetal Death for all fetal deaths occurring on or after January 1, 2011.

State of Delivery	Mother Height ( <i>Feet &amp; Inches</i> )
Date of Delivery ( <i>Month/Year</i> )	Mother Prepregnancy Weight
Sex of Fetus	Mother Weight at Delivery
City/Town of Delivery	# Previous Live Births Now Living
County Where Delivery Occurred	# Previous Live Births Now Dead
Place Where Delivery Occurred ( <i>Type</i> )	Date of Last Live Birth ( <i>Month/Year</i> )
Mother Birthplace Country	# Previous Other Pregnancy Outcomes
Mother Birthplace State	Date of Last Other Pregnancy Outcome ( <i>Month/Year</i> )
Mother Residence County	# of Cigarettes Smoked in 3 months prior to Pregnancy
Mother Residence City/Town	# of Cigarettes Smoked in 1st 3 months
Mother Residence Zip Code	# of Cigarettes Smoked in 2nd 3 months
Mother Residence Inside City Limits ( <i>Yes/No</i> )	# of Cigarettes Smoked in third trimester
Father Birthplace Country	Date Last Normal Menses ( <i>Month, Day, Year</i> )
Father Birthplace State	Obstetric Estimate of Gestation ( <i>Weeks</i> )
Attendant Title/Type	Weight of Fetus ( <i>Grams</i> )
Reporter Title/Type	Plurality
Initiating Cause/Condition –	<i>If not a single birth, Order Born</i>
Maternal Conditions/Diseases	# of Fetal Deaths this Delivery
Complications of Placenta, Cord or Membranes	Estimated Time of Fetal Death
Other Obstetrical or Pregnancy Complications	Characteristics of Labor & Delivery –
Fetal Anomaly	Induction of Labor
Fetal Injury	Risk Factors –
Fetal Infection	Prepregnancy Diabetes
Other Fetal Conditions/Disorders	Gestational Diabetes
Mother Married at Conception, at Birth, or any Time in Between	Insulin Dependent Diabetes
Mother Education	Prepregnancy Hypertension
Mother Hispanic Origin ( <i>Mexican, Puerto Rican, Cuban, Other</i> )*	Gestational Hypertension
Mother Race ( <i>White, Black/African American, American</i>	Eclampsia Hypertension
<i>Indian/Alaska Native, Asian Indian, Chinese, Filipino, Japanese,</i>	Previous Preterm Birth
<i>Korean, Vietnamese, Other Asian, Native Hawaiian,</i>	Poor Pregnancy Outcomes
<i>Guamanian/Chamorro, Samoan, Other Pacific Islander, Other</i> )*	Infertility Treatment
Date of First Prenatal Care Visit ( <i>Month, Day, Year</i> )	Infertility: Fertility Enhancing Drugs
Date of Last Prenatal Care Visit ( <i>Month, Day, Year</i> )	Infertility: Asst. Rep. Technology
Total # of Prenatal Care Visits	# of Previous Cesarean Deliveries

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<p>Method of Delivery –</p> <ul style="list-style-type: none"> <li>Attempted Forceps</li> <li>Attempted Vacuum</li> <li>Fetal Presentation (<i>Cephalic, Breech, Other</i>)</li> <li>Route and Method of Delivery (<i>Vaginal/Spontaneous, Vaginal/Forceps, Vaginal/Vacuum, Cesarean</i>)</li> <li>Trial of Labor Attempted</li> <li>Hysterotomy/Hysterectomy</li> </ul> <p>Infections Present and/or Treated During Pregnancy –</p> <ul style="list-style-type: none"> <li>Gonorrhea</li> <li>Syphilis</li> <li>Chlamydia</li> <li>Hepatitis C</li> <li>Hepatitis B</li> </ul> <p>Maternal Morbidity –</p> <ul style="list-style-type: none"> <li>Maternal Transfusion</li> <li>Perineal Laceration</li> <li>Ruptured Uterus</li> <li>Unplanned Hysterectomy</li> <li>Admit to Intensive Care</li> <li>Unplanned Operation</li> </ul>	<p>Congenital Anomalies of the Newborn –</p> <ul style="list-style-type: none"> <li>Anencephaly</li> <li>Meningomyelocele/Spina Bifida</li> <li>Cyanotic congenital heart disease</li> <li>Congenital diaphragmatic hernia</li> <li>Omphalocele</li> <li>Gastroschisis</li> <li>Limb Reduction Defect</li> <li>Cleft Lip with or without Cleft Palate</li> <li>Cleft Palate Alone</li> <li>Down Syndrome</li> <li>Suspected Chromosomal disorder</li> <li>Hypospadias</li> </ul>
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[Fetal Deaths through December 31, 2010](#)

The following is a list of additional data elements **created** by the Missouri Department of Health and Senior Services that are also included in the standard data set.

<ul style="list-style-type: none"> <li>Residence Latitude (<i>Mother</i>)</li> <li>Residence Longitude (<i>Mother</i>)</li> <li>Residence Census Tract (<i>Mother</i>)</li> <li>Public Services Participation Flag (<i>Yes/No</i>)</li> <li>Delivery Paid by Private Insurance (<i>Yes/No</i>)</li> <li>Inadequate Prenatal Care (<i>MO Index</i>)</li> <li>Month of Pregnancy Prenatal Care Began</li> </ul>	<ul style="list-style-type: none"> <li>Length of Pregnancy (<i>Weeks</i>)</li> <li>Calculated Gestational Age (<i>Weeks</i>)</li> <li>Mother Age (<i>Calculated</i>)</li> <li>Father Age (<i>Calculated</i>)</li> <li>Mother Race (<i>NCHS Bridged Race</i>)</li> <li>Fetus Race</li> </ul>
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