

**LIVE BIRTH
STANDARD LPHA DATA SET
DATA ELEMENTS BEGINNING JANUARY 1, 2010**

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 2003 revision of the Certificate of Live Birth form for all **births occurring on or after January 1, 2010.**

<p>State of Birth</p> <p>Date of Birth (<i>Month/Year</i>)</p> <p>Sex</p> <p>City/Town of Birth</p> <p>County Where Birth Occurred</p> <p>Place Where Birth Occurred (<i>Type</i>)</p> <p>Mother Birthplace State/Province</p> <p>Mother Birthplace Country</p> <p>Mother Residence County</p> <p>Mother Residence City/Town</p> <p>Mother Residence Zip Code</p> <p>Mother Residence Inside City Limits (<i>Yes/No</i>)</p> <p>Father Birthplace State/Province</p> <p>Father Birthplace Country</p> <p>Certifier Title/Type</p> <p>Attendant Title/Type</p> <p>Mother Married at Conception, at Birth, or any Time in Between</p> <p>Mother Education</p> <p>Mother Race (<i>White, Black/African American, American Indian/Alaska Native, Asian Indian, Chinese, Filipino, Japanese, Korean, Vietnamese, Other Asian, Native Hawaiian, Guamanian/Chamorro, Samoan, Other Pacific Islander, Other</i>)*</p> <p>Mother Hispanic Origin (<i>Mexican, Puerto Rican, Cuban, Other</i>)*</p> <p>Father Education</p> <p>Father Race (<i>White, Black/African American, American Indian/Alaska Native, Asian Indian, Chinese, Filipino, Japanese, Korean, Vietnamese, Other Asian, Native Hawaiian, Guamanian/Chamorro, Samoan, Other Pacific Islander, Other</i>)*</p> <p>Father Hispanic Origin (<i>Mexican, Puerto Rican, Cuban, Other</i>)*</p> <p>Date of First Prenatal Care Visit (<i>Month, Day, Year</i>)</p> <p>Date of Last Prenatal Care Visit (<i>Month, Day, Year</i>)</p> <p>Total # of Prenatal Care Visits</p> <p>Mother Height (<i>Feet & Inches</i>)</p> <p>Mother Prepregnancy Weight</p>	<p>Mother Weight at Delivery</p> <p># Previous Live Births Now Living</p> <p># Previous Live Births Now Dead</p> <p>Date of Last Live Birth (<i>Month/Year</i>)</p> <p># Previous Other Pregnancy Outcomes</p> <p>Date of Last Other Pregnancy Outcome (<i>Month/Year</i>)</p> <p># of Cigarettes Smoked in 3 months prior to Pregnancy</p> <p># of Cigarettes Smoked in 1st 3 months</p> <p># of Cigarettes Smoked in 2nd 3 months</p> <p># of Cigarettes Smoked in third trimester</p> <p>Date Last Normal Menses (<i>Month, Day, Year</i>)</p> <p>Risk Factors –</p> <p style="padding-left: 20px;">Prepregnancy Diabetes</p> <p style="padding-left: 20px;">Gestational Diabetes</p> <p style="padding-left: 20px;">Insulin Dependent (Diabetes)</p> <p style="padding-left: 20px;">Hypertension Prepregnancy</p> <p style="padding-left: 20px;">Hypertension Gestational</p> <p style="padding-left: 20px;">Hypertension Eclampsia</p> <p style="padding-left: 20px;">Previous Preterm Births</p> <p style="padding-left: 20px;">Poor Pregnancy Outcomes</p> <p style="padding-left: 20px;">Infertility Treatment</p> <p style="padding-left: 40px;">Infertility: Fertility Enhancing Drugs</p> <p style="padding-left: 40px;">Infertility: Asst. Rep. Technology</p> <p style="padding-left: 20px;">Previous Cesarean</p> <p style="padding-left: 40px;"># Previous Cesareans</p> <p>Obstetric Procedures –</p> <p style="padding-left: 20px;">Cervical Cerclage</p> <p style="padding-left: 20px;">Tocolysis</p> <p style="padding-left: 20px;">Successful External Cephalic Version</p> <p style="padding-left: 20px;">Failed External Cephalic Version</p> <p>Onset of Labor –</p> <p style="padding-left: 20px;">Premature Rupture of Membranes</p> <p style="padding-left: 20px;">Precipitous Labor</p> <p style="padding-left: 20px;">Prolonged Labor</p>
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<p>Characteristics of Labor & Delivery –</p> <ul style="list-style-type: none"> Induction of Labor Augmentation of Labor Non-vertex Presentation Steroids Antibiotics Chorioamnionitis Meconium Staining Fetal Intolerance Anesthesia <p>Method of Delivery –</p> <ul style="list-style-type: none"> Attempted Forceps Attempted Vacuum Fetal Presentation (<i>Cephalic, Breech, Other</i>) Route and Method of Delivery (<i>Vaginal/Spontaneous, Vaginal/Forceps, Vaginal/Vacuum, Cesarean</i>) Trial of Labor Attempted <p>Infections Present and/or Treated During Pregnancy –</p> <ul style="list-style-type: none"> Gonorrhea Syphilis Chlamydia Hepatitis B Hepatitis C <p>Maternal Morbidity –</p> <ul style="list-style-type: none"> Maternal Transfusion Perineal Laceration Ruptured Uterus Unplanned Hysterectomy Admit to Intensive Care Unplanned Operation 	<ul style="list-style-type: none"> Birth weight (<i>Grams</i>) Obstetric Estimation of Gestation (<i>Weeks</i>) APGAR Score at 5 Minutes APGAR Score at 10 Minutes Plurality <ul style="list-style-type: none"> <i>If not a single birth , Order Born</i> # of Live Born Abnormal Conditions of the Newborn – <ul style="list-style-type: none"> Assisted Ventilation Assisted Ventilation > 6 hours Admission to NICU Surfactant Antibiotics Seizures Birth Injury Congenital Anomalies of the Newborn – <ul style="list-style-type: none"> Anencephaly Meningomyelocele/Spina Bifida Cyanotic congenital heart disease Congenital diaphragmatic hernia Omphalocele Gastroschisis Limb Reduction Defect Cleft Lip with or without Cleft Palate Cleft Palate Alone Down Syndrome Suspected Chromosomal disorder Hypospadias Is Infant Being Breastfed at discharge? (<i>Yes/No</i>) Newborn Received Hepatitis B Shot (<i>Yes/No</i>)
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* Multiple ethnic or race categories may be selected.

[Live births through December 31, 2009](#)

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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.

Residence Latitude (<i>Mother</i>)	Length of Pregnancy (<i>Weeks</i>)
Residence Longitude (<i>Mother</i>)	Calculated Gestational Age (<i>Weeks</i>)
Residence Census Tract (<i>Mother</i>)	Mother Age (<i>Calculated</i>)
Public Services Participation Flag (<i>Yes/No</i>)	Father Age (<i>Calculated</i>)
Delivery Paid by Private Insurance (<i>Yes/No</i>)	Mother Race (<i>NCHS Bridged Race</i>)
Inadequate Prenatal Care (<i>MO Index</i>)	Father Race (<i>NCHS Bridged Race</i>)
Month of Pregnancy Prenatal Care Began	Child Race