

Delivery data for one month

Health care facility:

ABC HOSPITAL

PIIP 3 Data Sheet

Data period:

AUGUST 2012

Deliveries during this month			
Total births	Stillborn	Neonatal deaths Early Late	Alive on discharge
500 - 999:	3	1 1 1	0
1,000 - 1,499:	9	4 1	4
1,500 - 1,999:	19	1	18
2,000 - 2,499:	52	1	51
2,500g+:	116		116
Total:	199	6 3 1	189

Delivery methods	
Normal vaginal:	154
Ventouse:	2
Forceps:	
Vaginal breech:	11
Caesarean section:	32
Other (Destructive etc.):	

Maternal age	
Younger than 18yr:	10
18 - 19yr:	24
35yr and older:	9

HIV serology	
Positive:	6
Negative:	58
Not done:	

Partly	
Primiparae:	10
Multiparae:	25
Grand multiparae:	4

Anti-retroviral therapy	
<u>HIV positive mothers:</u>	
Prophylactic ART:	3
Long-term ART:	3
Intrapartum ART only:	2
ART type unknown:	
Received no ART:	
<u>Neonates of HIV positive mothers</u>	
Received drugs:	2

Syphilis serology	
Positive:	11
Negative:	35
Not done:	

Identification	
Data sheet completed by:	

Multiple pregnancies	
Pregnancies:	4
Neonates:	9

Morbidity markers	
Antepartum haemorrhage:	3
Postpartum haemorrhage:	1
Severe pre-eclampsia:	1
Eclampsia:	2
Induction of labour:	10
Prolonged rupture of membranes:	2
Ruptured uterus:	1
Sepsis:	1
Obstructed / prolonged labour:	3
Retained placenta:	1
Manual removal of placenta:	1
Bag / mask neonatal resuscitation:	2

Antenatal care	
Local clinic:	10
Elsewhere:	26
None:	17

Born Before Arrival	
Total:	2

Delivery data for one month

Health care facility:

ABC HOSPITAL

PP1P 3 Data Sheet

Data period:

SEPTEMBER 2012

Deliveries during this month

	Total births	Stillborn	Neonatal deaths Early	Late	Alive on discharge
500 - 999g:	5	1	1	1	2
1,000 - 1,499g:	8	4			4
1,500 - 1,999g:	9	1	1		7
2,000 - 2,499g:	20	2			18
2,500g+:	150				150
Total:	192	8	2	1	181

Multiple pregnancies

Pregnancies: 10
Neonates: 5

Morbidity markers

Antepartum haemorrhage: 1
Postpartum haemorrhage: 1
Severe pre-eclampsia: 2

Antenatal care

Local clinic: 15
Elsewhere: 10
None: 6

Born Before Arrival

Total: 4

Delivery methods

Normal vaginal: 145
Ventouse: 1
Forceps: 8
Vaginal breech: 8
Caesarean section: 38
Other (Destructive etc.):

Maternal age

Younger than 18yr: 10
18 - 19yr: 23
35yr and older: 6

HIV serology

Positive: 2
Negative: 53
Not done:

Parity

Primiparae: 12
Multiparae: 24
Grand multiparae: 10

Anti-retroviral therapy

HIV positive mothers:
Prophylactic ART: 2
Long-term ART: 2
Intrapartum ART only:

Syphilis serology

Positive: 6
Negative: 30
Not done:

ART type unknown:

Received no ART:

Neonates of HIV positive mothers

Received drugs: 2

Identification

Data sheet completed by:

Perinatal death detail

PIP 3 Data Sheet

Health care facility: ABC HOSPITAL

Data sheet completed by: D.J.

Identification: 9341

Date of delivery: 11/05/2012 Date of death: 11/09/2012 Birth weight: 1536 g

Delivered:

☒ At this facility
☐ At another facility
☐ In transit
☐ Unknown

Maternal age: 28 yrs

or

Parity: 2

or

Antenatal care:

☒ Yes
☒ No
☐ Unknown

Please circle one

Gestational age

completed weeks or

Unknown

Accuracy if GA known:

☒ Certain
☐ Uncertain

Based on:

☐ Dates
☐ Ultrasound
☐ Clinical exam
Select one or more

Please circle one

Condition at birth

☒ Born alive
☒ Stillborn, alive on admission
☐ Fresh stillborn, dead on admission
☐ Stillborn, admission status unknown
☐ Macerated stillborn

Please circle one

☒ Single pregnancy

☐ Multiple pregnancy

Please circle one

Syphilis serology

☒ Positive
☒ Negative
☐ Not done
☐ Result not available

Please circle one

HIV serology

☒ Positive
☒ Negative
☐ Not done
☐ Result not available

Please circle one

Anti-retroviral drugs

☒ Prophylactic
☒ Long-term
☒ No ART
☐ Intrapartum
☐ Unknown

Please circle one ONLY IF (+) HIV serology

Primary obstetric cause of death

Code: 603

'Other' description:

Final cause of neonatal death

Code: 408

'Other' description:

Maternal obstetric condition

Code: 0101

'Other' description:

Code:

'Other' description:

Avoidable factors

Code: 318

Possible ☒ Probable

'Other' description:

Code: Possible Probable

'Other' description:

Code: Possible Probable

'Other' description:

Code: Possible Probable

'Other' description:

Code: Possible Probable

'Other' description:

Perinatal death detail

Health care facility: ABC HOSPITAL

PIP 3 Data Sheet

Data sheet completed by: MR JJM

Identification: <u>2345</u>		Date of delivery: <u>2012/8/11</u>		Date of death: <u>2012/8/11</u>		Birth weight: <u>760</u> g	
Delivered: ☒ At this facility ☐ In transit ☐ Unknown		At home ☐ At another facility		Maternal age: <u>35</u> yrs or ☐ Unknown		Parity: <u>1</u> or ☐ Unknown	
Antenatal care: ☒ Yes ☐ No ☐ Unknown		Please circle one					
Gestational age Accuracy <u>32</u> completed weeks or ☐ Unknown Based on: if GA known: ☒ Certain ☐ Uncertain Based on: ☒ Dates ☐ Ultrasound ☐ Clinical exam Please circle one							
Syphilis serology ☒ Positive ☒ Negative Not done Result not available Please circle one							
HIV serology ☐ Positive ☒ Negative Not done Result not available Please circle one							
Maternal obstetric condition Code: <u>0201</u> Other description: _____ Code: _____ Other description: _____							
Condition at birth ☐ Born alive ☐ Stillborn, alive on admission ☐ Fresh stillborn, dead on admission ☒ Stillborn, admission status unknown ☐ Macerated stillborn Please circle one							
Anti-retroviral drugs Prophylactic Long-term Intrapartum Type unknown No ART Unknown Please circle one ONLY IF (+) HIV serology							
Primary obstetric cause of death Code: <u>1101/0701</u> Other description: _____							
Final cause of neonatal death Code: <u>900</u> Other description: _____							
Avoidable factors Code: _____ Possible Probable Other description: _____ Code: _____ Possible Probable Other description: _____ Code: _____ Possible Probable Other description: _____ Code: _____ Possible Probable Other description: _____							
Single pregnancy ☒ Multiple pregnancy ☐ Please circle one							

Perinatal death detail

Health care facility: ABC HOSPITAL

PIP 3 Data Sheet

Data sheet completed by: SR ASD

Identification: <u>9012</u>		Date of delivery: <u>19/08/2012</u>		Date of death: <u>22/08/2012</u>		Birth weight: <u>1225</u> <u>g</u>	
Delivered: At this facility ☒ <u>At home</u> In transit ☐ At another facility ☐ Unknown ☐		Maternal age: _____ yrs		Parity: _____		Antenatal care: ☒ <u>Yes</u> ☐ No ☐ Unknown	
Please circle one		Unknown ☐		Unknown ☐		Please circle one	
Gestational age _____ completed weeks or _____ <u>36</u>		Syphilis serology Positive ☐ ☒ <u>Negative</u> Not done ☐ Result not available ☐		HIV serology Positive ☐ ☒ <u>Negative</u> Not done ☐ Result not available ☐		Maternal obstetric condition Code: <u>6101</u> Other description: _____ Code: _____ Other description: _____	
Accuracy if GA known: Certain ☐ ☒ <u>Uncertain</u> Please circle one		Based on: ☐ Dates ☐ Ultrasound ☐ Clinical exam Select one or more		Please circle one		Avoidable factors Code: <u>0306</u> Possible ☒ <u>Probable</u> Other description: _____	
Condition at birth ☒ <u>Born alive</u> Stillborn, alive on admission Fresh stillborn, dead on admission Stillborn, admission status unknown Macerated stillborn Please circle one		Anti-retroviral drugs Prophylactic Long-term Intrapartum Type unknown No ART Unknown Please circle one ONLY IF (+) HIV serology		Primary obstetric cause of death Code: <u>502</u> Other description: _____		Final cause of neonatal death Code: <u>101</u> Other description: _____	
Single pregnancy ☒ <u>Multiple pregnancy</u> ☐ Please circle one		Code: _____		Possible Probable		Possible Probable	

Perinatal death detail

Health care facility: ABC HOSPITAL

PP1P 3 Data Sheet

Data sheet completed by: DLT

Identification: <u>3456</u>		Date of delivery: <u>07/10/2012</u>		Date of death: <u>07/10/2012</u>		Birth weight: <u>1400</u> g	
Delivered: <u>At this facility</u> <u>At home</u> <u>In transit</u> <u>At another facility</u> <u>Unknown</u>		Maternal age: <u>26</u> yrs or <u>Unknown</u>		Parity: <u>2</u> or <u>Unknown</u>		Antenatal care: <u>Yes</u> <u>No</u> <u>Unknown</u>	
Please circle one		Please circle one		Please circle one		Please circle one	
Gestational age <u>31</u> completed weeks or <u>Unknown</u>		Syphilis serology <u>Positive</u> <u>Negative</u> <u>Not done</u> Result not available Please circle one		HIV serology <u>Positive</u> <u>Negative</u> <u>Not done</u> Result not available Please circle one		Maternal obstetric condition Code: <u>0101</u> Other description: Code: _____ Other description:	
Accuracy if GA known: <u>Certain</u> <u>Uncertain</u> Please circle one		Based on: <u>Dates</u> <u>Ultrasound</u> <u>Clinical exam</u> Select one or more		Please circle one		Avoidable factors Code: <u>106</u> <u>Possible</u> <u>Probable</u> Other description: Code: _____ Possible Probable Other description:	
Condition at birth <u>Born alive</u> <u>Stillborn, alive on admission</u> <u>Fresh stillborn, dead on admission</u> <u>Stillborn, admission status unknown</u> <u>Macerated stillborn</u> Please circle one		Anti-retroviral drugs <u>Prophylactic</u> <u>Long-term</u> <u>Intrapartum</u> <u>Type unknown</u> <u>No ART</u> <u>Unknown</u> Please circle one ONLY IF (+) HIV serology		Primary obstetric cause of death Code: <u>1102</u> Other description:		Code: _____ Possible Probable Other description:	
Single pregnancy <u>Multiple pregnancy</u> Please circle one		Final cause of neonatal death Code: <u>900</u> Other description:		Code: _____ Possible Probable Other description:		Code: _____ Possible Probable Other description:	

Perinatal death detail

Health care facility: ABC HOSPITAL

PP1P 3 Data Sheet

Data sheet completed by: SR AJD

Identification: <u>8901</u>		Date of delivery: <u>2012/1/7</u>	Date of death: <u>2012/1/7</u>	Birth weight: <u>1550</u> g
Delivered: <u>At this facility</u> At home In transit At another facility Unknown		Maternal age: <u>26</u> yrs or Unknown	Parity: <u> </u> or Unknown	Antenatal care: <u>No</u> Yes Unknown
Please circle one				
Gestational age <u>30</u> completed weeks or Unknown		Syphilis serology		
Accuracy if GA known: <u>Certain</u> Based on: <u>Uncertain</u> Please circle one		HIV serology		
Dates ☐ Ultrasound ☐ Clinical exam ☐		Positive ☐ Negative ☒ Not done ☐ Result not available ☐ Please circle one		
Condition at birth		Anti-retroviral drugs		
Born alive Stillborn, alive on admission Fresh stillborn, dead on admission Stillborn, admission status unknown <u>Macerated stillborn</u> Please circle one		Propylactic Long-term Intrapartum Type unknown No ART Unknown Please circle one ONLY IF (+) HIV serology		
Single pregnancy <u>Multiple pregnancy</u> Please circle one		Primary obstetric cause of death		
Final cause of neonatal death		Code: <u>1102</u> Other description: <u> </u>		
Code: <u>900</u> Other description: <u> </u>		Maternal obstetric condition		
Code: <u> </u> Other description: <u> </u>		Code: <u>G101</u> Other description: <u> </u>		
Code: <u> </u> Other description: <u> </u>		Avoidable factors		
Code: <u>106</u> <u>Possible</u> Probable Other description: <u> </u>		Code: <u> </u> Possible Probable Other description: <u> </u>		
Code: <u> </u> Possible Probable Other description: <u> </u>		Code: <u> </u> Possible Probable Other description: <u> </u>		
Code: <u> </u> Possible Probable Other description: <u> </u>		Code: <u> </u> Possible Probable Other description: <u> </u>		

Perinatal death detail

Health care facility: ABC HOSPITAL

PPDP 3 Data Sheet

Data sheet completed by: MR JTM.

Identification: <u>4567</u>		Date of delivery: <u>11/08/2012</u>		Date of death: <u>11/08/2012</u>		Birth weight: <u>3000</u> g	
Delivered: At this facility ☒ In transit ☐ At another facility ☐ Unknown ☐		Maternal age: _____ yrs		Party: _____ or _____		Antenatal care: Yes ☒ No ☐ Unknown ☐	
Please circle one		Unknown ☐		Unknown ☐		Please circle one	
Gestational age completed weeks or Based on: Accuracy if GA known: Certain ☐ Dates ☐ Ultrasound ☐ Uncertain ☐ Clinical exam ☐ Please circle one		Syphilis serology Positive ☒ Negative ☐ Not done ☐ Result not available ☐ Please circle one		HIV serology Positive ☒ Negative ☐ Not done ☐ Result not available ☐ Please circle one		Maternal obstetric condition Code: <u>0401</u> Other description: _____ Code: _____ Other description: _____	
Condition at birth Born alive ☒ Stillborn, alive on admission ☐ Fresh stillborn, dead on admission ☐ Stillborn, admission status unknown ☐ Macerated stillborn ☐ Please circle one		Anti-retroviral drugs Prophylactic ☐ Long-term ☒ No ART ☐ Intrapartum ☐ Unknown ☐ Please circle one ONLY IF (+) HIV serology		Primary obstetric cause of death Code: <u>1101</u> Other description: _____		Maternal obstetric condition Code: <u>0101</u> Possible ☐ Probable ☒ Other description: _____ Code: <u>0105</u> Possible ☐ Probable ☐ Other description: _____ Code: _____ Possible ☐ Probable ☐ Other description: _____ Code: _____ Possible ☐ Probable ☐ Other description: _____ Code: _____ Possible ☐ Probable ☐ Other description: _____	
Single pregnancy ☒ Multiple pregnancy ☐ Please circle one		Final cause of neonatal death Code: <u>0900</u> Other description: _____		Final cause of neonatal death Code: _____ Possible ☐ Probable ☐ Other description: _____		Final cause of neonatal death Code: _____ Possible ☐ Probable ☐ Other description: _____	