

Birth Certificate Initiative: Data Checklist

EXAMPLE FORM

Variable	Total	Chart 1	Chart 2	Chart 3	Chart 4	Chart 5	Chart 6	Chart 7	Chart 8	Chart 9	Chart 10
Is the infant <34 weeks gestation? (not counted in overall accuracy)	0	Yes									
Check the appropriate box if the birth certificate and hospital record data items DISAGREE											
Weight of infant at birth (± 1oz or 30g)	0										
Date of first prenatal visit (± 2 days)	0										
Total number of prenatal visits	0										
Mother's pre-pregnancy weight (± 1 pound)	0										
Mother's weight at time of delivery (± 1 pound)	0										
Mother diagnosed pre-pregnancy with diabetes	0										
Mother diagnosed with gestational diabetes	0										
Mother diagnosed with pre-pregnancy or chronic hypertension	0										
Mother diagnosed with gestational hypertension	0										
Mother diagnosed with eclampsia	0										
Mother has history of a previous live preterm birth	0										
Induction of labor	0										
Augmentation of labor	0										
Mother received antenatal corticosteroids	0										
Mother received antibiotics during delivery	0										
Fetal presentation at birth	0										
Cesarean delivery	0										
Obstetric estimate of infant's gestational age	0										
Breastfeeding at discharge	0										
APGAR at 5 minutes	0										
Infant received assisted ventilation after delivery	0										
Infant received assisted ventilation < 6 hours after delivery	0										
Infant received assisted ventilation 6+	0										