

PERINATAL QUALITY COLLABORATIVE OF NORTH CAROLINA

Reducing Primary Cesarean Section Patient Data Collection



- 1) Chart #: _____
- 2) Date of Delivery _____ and Date of Discharge _____
- 3) What was the mode of delivery for the NTSV patient? SVD or Primary CS
- 4) Was infant's 5 minute Apgar 6 or less? Yes/No
- 5) Was infant admitted to the SCN/NICU? Yes/No _____
- 5a) If yes, choose **primary** reason for admission to SCN/NICU:
 - Respiratory distress
 - Infection
 - Hypoglycemia
 - NAS
 - Suspected/confirmed congenital anomaly
 - Other (free text)
- 6) Ethnicity
 - White
 - Asian American
 - Black or African American
 - Hispanic or Latino
 - Native Hawaiian and Other Pacific Islander
 - American Indian or Alaska Native
 - Multiracial
 - Refused
- 7) Payor
 - Medicaid
 - BCBS/State
 - Uninsured
 - Other