



OB-34 Obstetrician's Summary of Labor and Delivery

Form OB-34 was used to record observations made by the obstetrician during labor and delivery. It was intended to augment observations made on form OB-33 by the labor room and delivery room observer. First implemented in January of 1959, OB-34 was replaced in April 1962 by forms OB-55 and OB-56. Page 1 of OB-34 (narrative summary) was replaced by OB-56; pages 2, 3, and 4 of OB-34 (specific itemized details of delivery) were replaced by form OB-55, pages 1 through 5. OB-34 data was recorded on three cards 1334, 2334 and 3334. Those cases terminated in an unusual manner not codeable on these three cards such as abortions, ectopic pregnancies, delivered outside study facility, etc., were recorded on card 9334. Records generated by OB-34 are available on the master file (Table OB-34.1).

TABLE OB-34.1 Cards and Data Records by Revision for Form OB-34

Card Name	Card Number	Rev. No.	Number Records
OB-34: Onset and Duration of Labor and Vertex and Breech Delivery	1334	2	21,316
OB-34: Cord, Placenta, Special Procedures During Labor, Other Labor Complications	2334	2	21,307
OB-34: Cesarean Section	3334	2	1,073
OB-34: Type of Termination, Number, Type of Eventual Delivery	9334	2	748
total for form			44,444

DATA ITEMS REFERENCING FORM OB-34, OBSTETRICIAN'S SUMMARY OF LABOR AND DELIVERY

DATA
ITEM
ID

ITEM
34
FROM

CARD
NUM

FROM 30

DATA ITEM NAME

045.....	1	1334	5 CARD NUMBER (SEQUENCE, FOR TYPE, FOR NUMBER, REVISION NUMBER)
046.....	6	1334	14 MTHB CASE NUMBER
047..OB-34	15	1334	15 DATA NOT CODED BECAUSE
048..OB-34	16	1334	16 EXIT CODE
049..OB-34	17	1334	17 FETUS NUMBER
050..OB-34	18	1334	18 DELIVERY TYPE
051..OB-34	19	1334	19 DELIVERY ATTEMPT UNSUCCESSFUL
052..OB-34	20	1334	20 LABOR
053..OB-34	21	1334	21 LABOR ONSET DATE (HR)
054..OB-34	22	1334	22 LABOR ONSET DATE (HR)
055..OB-34	23	1334	23 LABOR ONSET DATE (HR)
056..OB-34	24	1334	24 LABOR ONSET DATE (HR)
057..OB-34	25	1334	25 LABOR ONSET TIME (HRS, MIN, 24 HR CLOCK)
058..OB-34	26	1334	26 LABOR DURATION, FIRST STAGE (HRS, MIN)
059..OB-34	27	1334	27 LABOR DURATION, SECOND STAGE (HRS, MIN)
060..OB-34	28	1334	28 LABOR DURATION, THIRD STAGE (HRS, MIN)
061..OB-34	29	1334	29 LABOR DURATION, FIRST AND SECOND STAGES COMBINED (HRS, MIN)
062..OB-34	30	1334	30 VERTEX, BROW OR FACE DELIVERY POSITION DURING FIRST STAGE
063..OB-34	31	1334	31 VERTEX, BROW OR FACE DELIVERY POSITION IN DELIVERY ROOM
064..OB-34	32	1334	32 VERTEX, BROW OR FACE DELIVERY POSITION CONVERTED
065..OB-34	33	1334	33 VERTEX, BROW OR FACE DELIVERY HEAD ROTATION, TYPE
066..OB-34	34	1334	34 VERTEX, BROW OR FACE DELIVERY HEAD ROTATION, FROM
067..OB-34	35	1334	35 VERTEX, BROW OR FACE DELIVERY HEAD ROTATION, TO
068..OB-34	36	1334	36 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
069..OB-34	37	1334	37 VERTEX, BROW OR FACE DELIVERY FORCEPS, DEGREE OF DIFFICULTY
070..OB-34	38	1334	38 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
071..OB-34	39	1334	39 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
072..OB-34	40	1334	40 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
073..OB-34	41	1334	41 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
074..OB-34	42	1334	42 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
075.....	43	1334	43 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
076.....	44	1334	44 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
077.....	45	1334	45 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
078..OB-34	46	1334	46 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
079..OB-34	47	1334	47 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
080..OB-34	48	1334	48 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
081..OB-34	49	1334	49 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
082..OB-34	50	1334	50 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
083..OB-34	51	1334	51 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
084..OB-34	52	1334	52 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
085..OB-34	53	1334	53 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
086..OB-34	54	1334	54 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
087.....	55	1334	55 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
088.....	56	1334	56 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
089.....	57	1334	57 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
090.....	58	1334	58 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
091.....	59	1334	59 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
092.....	60	1334	60 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
093.....	61	1334	61 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
094.....	62	1334	62 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
095.....	63	1334	63 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
096.....	64	1334	64 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
097.....	65	1334	65 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
098.....	66	1334	66 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
099.....	67	1334	67 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
100.....	68	1334	68 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
101.....	69	1334	69 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
102.....	70	1334	70 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
103.....	71	1334	71 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
104.....	72	1334	72 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
105.....	73	1334	73 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
106.....	74	1334	74 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
107.....	75	1334	75 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
108.....	76	1334	76 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
109.....	77	1334	77 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
110.....	78	1334	78 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
111.....	79	1334	79 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
112.....	80	1334	80 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
113.....	81	1334	81 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
114.....	82	1334	82 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
115.....	83	1334	83 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
116.....	84	1334	84 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
117.....	85	1334	85 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
118.....	86	1334	86 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
119.....	87	1334	87 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
120.....	88	1334	88 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
121.....	89	1334	89 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
122.....	90	1334	90 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
123.....	91	1334	91 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
124.....	92	1334	92 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
125.....	93	1334	93 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
126.....	94	1334	94 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
127.....	95	1334	95 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
128.....	96	1334	96 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
129.....	97	1334	97 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
130.....	98	1334	98 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
131.....	99	1334	99 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE
132.....	100	1334	100 VERTEX, BROW OR FACE DELIVERY FORCEPS, TYPE

Data Base Referencing Form OB-34, Obstetrician's Summary of Labor and Delivery

DATA ITEM ID	ITEM NO	CAUSE NUM	FROM TO	DATA ITEM NAME
007..OB-34	16	2334	24	24 Cord complications; true knot
008..OB-34	16	2334	25	25 Cord, other
009..OB-34	17	2334	26	26 Placenta, premature separation
010..OB-34	17	2334	27	27 Placenta, previa
011..OB-34	17	2334	28	28 Placenta; marginal sinus rupture
012..OB-34	18	2334	29	29 Induction; labor induction code
013..OB-34	19	2334	30	30 Induction method; oxytocin
014..OB-34	19	2334	31	31 Induction method; oxytocin
015..OB-34	19	2334	32	32 Induction method; oxytocin
016..OB-34	19	2334	33	33 Induction method; oxytocin
017..OB-34	19	2334	34	34 Induction method; oxytocin
018..OB-34	20	2334	35	35 Rupture of membranes, artificial
019..OB-34	21	2334	36	36 Oxytocin use
020..OB-34	21	2334	37	37 Oxytocin, induction
021..OB-34	21	2334	38	38 Oxytocin, latent phase
022..OB-34	21	2334	39	39 Oxytocin, active phase
023..OB-34	21	2334	40	40 Oxytocin, second stage
024..OB-34	21	2334	41	41 Oxytocin, induction, other
025..OB-34	21	2334	42	42 Oxytocin, unusual reaction
026..OB-34	21	2334	43	43 Labor procedures, special, first
027..OB-34	23	2334	44	44 Labor procedures, special, second
028..OB-34	23	2334	45	45 Bleeding during labor; vesicna
029..OB-34	23	2334	46	46 Bleeding during labor; placenta separation
030..OB-34	23	2334	47	47 Bleeding during labor; placenta previa
031..OB-34	23	2334	48	48 Uterine dysfunction
032..OB-34	24	2334	49	49 Torsion
033..OB-34	25	2334	50	50 Oxytocin, water
034..OB-34	26	2334	51	51 Oxytocin, total
035..OB-34	26	2334	52	52 Prolapsed cord
036..OB-34	26	2334	53	53 Prolapsed cord, immediate treatment
037..OB-34	26	2334	54	54 Prolapsed cord, all-time treatment
038..OB-34	26	2334	55	55 Rupture of uterus
039..OB-34	30	2334	56	56 Labor complications, other
040..OB-34	30	2334	57	57 Oxytocin
041..OB-34	30	2334	58	58 Cord number (sequence, form type, form number, revision number)
042..OB-34	30	2334	59	59 Case number
043..OB-34	30	2334	60	60 Data not coded because
044..OB-34	30	2334	61	61 Data not coded because
045..OB-34	30	2334	62	62 Data not coded because
046..OB-34	30	2334	63	63 Data not coded because
047..OB-34	30	2334	64	64 Data not coded because
048..OB-34	30	2334	65	65 Data not coded because
049..OB-34	30	2334	66	66 Data not coded because
050..OB-34	30	2334	67	67 Data not coded because
051..OB-34	30	2334	68	68 Data not coded because
052..OB-34	30	2334	69	69 Data not coded because
053..OB-34	30	2334	70	70 Data not coded because
054..OB-34	30	2334	71	71 Data not coded because
055..OB-34	30	2334	72	72 Data not coded because
056..OB-34	30	2334	73	73 Data not coded because
057..OB-34	30	2334	74	74 Data not coded because
058..OB-34	30	2334	75	75 Data not coded because
059..OB-34	30	2334	76	76 Data not coded because
060..OB-34	30	2334	77	77 Data not coded because
061..OB-34	30	2334	78	78 Data not coded because
062..OB-34	30	2334	79	79 Data not coded because
063..OB-34	30	2334	80	80 Data not coded because
064..OB-34	30	2334	81	81 Data not coded because
065..OB-34	30	2334	82	82 Data not coded because
066..OB-34	30	2334	83	83 Data not coded because
067..OB-34	30	2334	84	84 Data not coded because
068..OB-34	30	2334	85	85 Data not coded because
069..OB-34	30	2334	86	86 Data not coded because
070..OB-34	30	2334	87	87 Data not coded because
071..OB-34	30	2334	88	88 Data not coded because
072..OB-34	30	2334	89	89 Data not coded because
073..OB-34	30	2334	90	90 Data not coded because
074..OB-34	30	2334	91	91 Data not coded because
075..OB-34	30	2334	92	92 Data not coded because
076..OB-34	30	2334	93	93 Data not coded because
077..OB-34	30	2334	94	94 Data not coded because
078..OB-34	30	2334	95	95 Data not coded because
079..OB-34	30	2334	96	96 Data not coded because
080..OB-34	30	2334	97	97 Data not coded because
081..OB-34	30	2334	98	98 Data not coded because
082..OB-34	30	2334	99	99 Data not coded because
083..OB-34	30	2334	100	100 Data not coded because

and further Social Security Administration 'b6-m'.

DATA ITEM ID	ITEM TN PJON	CARD NUM	FROM	TO	DATA ITEM NAME
010--NM-34	12	3336	21	21	Cesarean section, labor status prior to
011--NM-34	13	3336	22	22	Cesarean section, indication: previous section
012--NM-34	13	3336	23	23	Cesarean section, indication: fetal distress
013--NM-34	13	3336	24	24	Cesarean section, indication: cephalopelvic disproportion
014--NM-34	13	3336	25	25	Cesarean section, indication: breech or malpresentation
015--NM-34	13	3336	26	26	Cesarean section, indication: directly prior to provide
016--NM-34	13	3336	27	27	Cesarean section, indication: transverse lie
017--NM-34	13	3336	28	28	Cesarean section, indication: prolonged labor
018--NM-34	13	3336	29	29	Cesarean section, indication: uterine anomaly
019--NM-34	13	3336	30	30	Cesarean section, indication: pelvic surgery: cervical repair
020--NM-34	13	3336	31	31	Cesarean section, indication: placenta
021--NM-34	13	3336	32	32	Cesarean section, indication: placenta previa
022--NM-34	13	3336	33	33	Cesarean section, indication: placental abruption
023--NM-34	13	3336	34	34	Cesarean section, indication: uterine dysfunction
024--NM-34	13	3336	35	35	Cesarean section, indication: other
025--NM-34	13	3336	36	36	Cesarean section, indication: delivery of head
026--NM-34	13	3336	37	37	Cesarean section, indication: delivery of head
027--NM-34	13	3336	38	38	Cesarean section, indication: delivery of head
028--NM-34	13	3336	39	39	Cesarean section, indication: delivery of head
029--NM-34	13	3336	40	40	Cesarean section, indication: delivery of head
030--NM-34	13	3336	41	41	Cesarean section, indication: delivery of head
031--NM-34	13	3336	42	42	Cesarean section, indication: delivery of head
032--NM-34	13	3336	43	43	Cesarean section, indication: delivery of head
033--NM-34	13	3336	44	44	Cesarean section, indication: delivery of head
034--NM-34	13	3336	45	45	Cesarean section, indication: delivery of head
035--NM-34	13	3336	46	46	Cesarean section, indication: delivery of head
036--NM-34	13	3336	47	47	Cesarean section, indication: delivery of head
037--NM-34	13	3336	48	48	Cesarean section, indication: delivery of head
038--NM-34	13	3336	49	49	Cesarean section, indication: delivery of head
039--NM-34	13	3336	50	50	Cesarean section, indication: delivery of head
040--NM-34	13	3336	51	51	Cesarean section, indication: delivery of head
041--NM-34	13	3336	52	52	Cesarean section, indication: delivery of head
042--NM-34	13	3336	53	53	Cesarean section, indication: delivery of head
043--NM-34	13	3336	54	54	Cesarean section, indication: delivery of head
044--NM-34	13	3336	55	55	Cesarean section, indication: delivery of head
045--NM-34	13	3336	56	56	Cesarean section, indication: delivery of head
046--NM-34	13	3336	57	57	Cesarean section, indication: delivery of head
047--NM-34	13	3336	58	58	Cesarean section, indication: delivery of head
048--NM-34	13	3336	59	59	Cesarean section, indication: delivery of head
049--NM-34	13	3336	60	60	Cesarean section, indication: delivery of head
050--NM-34	13	3336	61	61	Cesarean section, indication: delivery of head
051--NM-34	13	3336	62	62	Cesarean section, indication: delivery of head
052--NM-34	13	3336	63	63	Cesarean section, indication: delivery of head
053--NM-34	13	3336	64	64	Cesarean section, indication: delivery of head
054--NM-34	13	3336	65	65	Cesarean section, indication: delivery of head
055--NM-34	13	3336	66	66	Cesarean section, indication: delivery of head
056--NM-34	13	3336	67	67	Cesarean section, indication: delivery of head
057--NM-34	13	3336	68	68	Cesarean section, indication: delivery of head
058--NM-34	13	3336	69	69	Cesarean section, indication: delivery of head
059--NM-34	13	3336	70	70	Cesarean section, indication: delivery of head
060--NM-34	13	3336	71	71	Cesarean section, indication: delivery of head
061--NM-34	13	3336	72	72	Cesarean section, indication: delivery of head
062--NM-34	13	3336	73	73	Cesarean section, indication: delivery of head
063--NM-34	13	3336	74	74	Cesarean section, indication: delivery of head
064--NM-34	13	3336	75	75	Cesarean section, indication: delivery of head
065--NM-34	13	3336	76	76	Cesarean section, indication: delivery of head
066--NM-34	13	3336	77	77	Cesarean section, indication: delivery of head
067--NM-34	13	3336	78	78	Cesarean section, indication: delivery of head
068--NM-34	13	3336	79	79	Cesarean section, indication: delivery of head
069--NM-34	13	3336	80	80	Cesarean section, indication: delivery of head
070--NM-34	13	3336	81	81	Cesarean section, indication: delivery of head
071--NM-34	13	3336	82	82	Cesarean section, indication: delivery of head
072--NM-34	13	3336	83	83	Cesarean section, indication: delivery of head
073--NM-34	13	3336	84	84	Cesarean section, indication: delivery of head
074--NM-34	13	3336	85	85	Cesarean section, indication: delivery of head
075--NM-34	13	3336	86	86	Cesarean section, indication: delivery of head
076--NM-34	13	3336	87	87	Cesarean section, indication: delivery of head
077--NM-34	13	3336	88	88	Cesarean section, indication: delivery of head
078--NM-34	13	3336	89	89	Cesarean section, indication: delivery of head
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080--NM-34	13	3336	91	91	Cesarean section, indication: delivery of head
081--NM-34	13	3336	92	92	Cesarean section, indication: delivery of head
082--NM-34	13	3336	93	93	Cesarean section, indication: delivery of head
083--NM-34	13	3336	94	94	Cesarean section, indication: delivery of head
084--NM-34	13	3336	95	95	Cesarean section, indication: delivery of head
085--NM-34	13	3336	96	96	Cesarean section, indication: delivery of head
086--NM-34	13	3336	97	97	Cesarean section, indication: delivery of head
087--NM-34	13	3336	98	98	Cesarean section, indication: delivery of head
088--NM-34	13	3336	99	99	Cesarean section, indication: delivery of head
089--NM-34	13	3336	100	100	Cesarean section, indication: delivery of head
090--NM-34	13	3336	101	101	Cesarean section, indication: delivery of head
091--NM-34	13	3336	102	102	Cesarean section, indication: delivery of head
092--NM-34	13	3336	103	103	Cesarean section, indication: delivery of head
093--NM-34	13	3336	104	104	Cesarean section, indication: delivery of head
094--NM-34	13	3336	105	105	Cesarean section, indication: delivery of head
095--NM-34	13	3336	106	106	Cesarean section, indication: delivery of head
096--NM-34	13	3336	107	107	Cesarean section, indication: delivery of head
097--NM-34	13	3336	108	108	Cesarean section, indication: delivery of head
098--NM-34	13	3336	109	109	Cesarean section, indication: delivery of head
099--NM-34	13	3336	110	110	Cesarean section, indication: delivery of head
100--NM-34	13	3336	111	111	Cesarean section, indication: delivery of head
101--NM-34	13	3336	112	112	Cesarean section, indication: delivery of head
102--NM-34	13	3336	113	113	Cesarean section, indication: delivery of head
103--NM-34	13	3336	114	114	Cesarean section, indication: delivery of head
104--NM-34	13	3336	115	115	Cesarean section, indication: delivery of head
105--NM-34	13	3336	116	116	Cesarean section, indication: delivery of head
106--NM-34	13	3336	117	117	Cesarean section, indication: delivery of head
107--NM-34	13	3336	118	118	Cesarean section, indication: delivery of head
108--NM-34	13	3336	119	119	Cesarean section, indication: delivery of head
109--NM-34	13	3336	120	120	Cesarean section, indication: delivery of head
110--NM-34	13	3336	121	121	Cesarean section, indication: delivery of head
111--NM-34	13	3336	122	122	Cesarean section, indication: delivery of head
112--NM-34	13	3336	123	123	Cesarean section, indication: delivery of head
113--NM-34	13	3336	124	124	Cesarean section, indication: delivery of head
114--NM-34	13	3336	125	125	Cesarean section, indication: delivery of head
115--NM-34	13	3336	126	126	Cesarean section, indication: delivery of head
116--NM-34	13	3336	127	127	Cesarean section, indication: delivery of head
117--NM-34	13	3336	128	128	Cesarean section, indication: delivery of head
118--NM-34	13	3336	129	129	Cesarean section, indication: delivery of head
119--NM-34	13	3336	130	130	Cesarean section, indication: delivery of head
120--NM-34	13	3336	131	131	Cesarean section, indication: delivery of head
121--NM-34	13	3336	132	132	Cesarean section, indication: delivery of head
122--NM-34	13	3336	133	133	Cesarean section, indication: delivery of head
123--NM-34	13	3336	134	134	Cesarean section, indication: delivery of head
124--NM-34	13	3336	135	135	Cesarean section, indication: delivery of head
125--NM-34	13	3336	136	136	Cesarean section, indication: delivery of head
126--NM-34	13	3336	137	137	Cesarean section, indication: delivery of head
127--NM-34	13	3336	138	138	Cesarean section, indication: delivery of head
128--NM-34	13	3336	139	139	Cesarean section, indication: delivery of head
129--NM-34	13	3336	140	140	Cesarean section, indication: delivery of head
130--NM-34	13	3336	141	141	Cesarean section, indication: delivery of head
131--NM-34	13	3336	142	142	Cesarean section, indication: delivery of head
132--NM-34	13	3336	143	143	Cesarean section, indication: delivery of head
133--NM-34	13	3336	144	144	Cesarean section, indication: delivery of head
134--NM-34	13	3336	145	145	Cesarean section, indication: delivery of head
135--NM-34	13	3336	146	146	Cesarean section, indication: delivery of head
136--NM-34	13	3336	147	147	Cesarean section, indication: delivery of head
137--NM-34	13	3336	148	148	Cesarean section, indication: delivery of head
138--NM-34	13	3336	149	149	Cesarean section, indication: delivery of head
139--NM-34	13	3336	150	150	Cesarean section, indication: delivery of head
140--NM-34	13	3336	151	151	Cesarean section, indication: delivery of head
141--NM-34	13	3336	152	152	Cesarean section, indication: delivery of head
142--NM-34	13	3336	153	153	Cesarean section, indication: delivery of head
143--NM-34	13	3336	154	154	Cesarean section, indication: delivery of head
144--NM-34	13	3336	155	155	Cesarean section, indication: delivery of head
145--NM-34	13	3336	156	156	Cesarean section, indication: delivery of head
146--NM-34	13	3336	157	157	Cesarean section, indication: delivery of head
147--NM-34	13	3336	158	158	Cesarean section, indication: delivery of head
148--NM-34	13	3336	159	159	Cesarean section, indication: delivery of head
149--NM-34	13	3336	160	160	Cesarean section, indication: delivery of head
150--NM-34	13	3336	161	161	Cesarean section, indication: delivery of head
151--NM-34	13	3336	162	162	Cesarean section, indication: delivery of head
152--NM-34	13	3336	163	163	Cesarean section, indication: delivery of head
153--NM-34	13	3336	164	164	Cesarean section, indication: delivery of head
154--NM-34	13	3336	165	165	Cesarean section, indication: delivery of head
155--NM-34	13	3336	166	166	Cesarean section, indication: delivery of head
156--NM-34	13	3336	167	167	Cesarean section, indication: delivery of head
157--NM-34	13	3336	168	168	Cesarean section, indication: delivery of head
158--NM-34	13	3336	169	169	Cesarean section, indication: delivery of head
159--NM-34	13	3336	170	170	Cesarean section, indication: delivery of head
160--NM-34	13	3336	171	171	Cesarean section, indication: delivery of head
161--NM-34	13	3336	172	172	Cesarean section, indication: delivery of head
162--NM-34	13	3336	173	173	Cesarean section, indication: delivery of head
163--NM-34	13	3336	174	174	Cesarean section, indication: delivery of head
164--NM-34	13	3336	175	175	Cesarean section, indication: delivery of head
165--NM-34	13	3336	176	176	Cesarean section, indication: delivery of head
166--NM-34	13	3336	177	177	Cesarean section, indication: delivery of head
167--NM-34	13	3336	178	178	Cesarean section, indication: delivery of head
168--NM-34	13	3336	179	179	Cesarean section, indication: delivery of head
169--NM-34	13	3336	180	180	Cesarean section, indication: delivery of head
170--NM-34	13	3336	181	181	Cesarean section, indication: delivery of head
171--NM-34	13	3336	182	182	Cesarean section, indication: delivery of head
172--NM-34	13	3336	183	183	Cesarean section, indication: delivery of head
173--NM-34	13	3336	184	184	Cesarean section, indication: delivery of head
174--NM-34	13	3336	185	185	Cesarean section, indication: delivery of head
175--NM-34	13	3336	186	186	Cesarean section, indication: delivery of head
176--NM-34	13	3336	187	187	Cesarean section, indication: delivery of head
177--NM-34	13	3336	188	188	Cesarean section, indication: delivery of head
178--NM-34	13	3336	189	189	Cesarean section, indication: delivery of head
179--NM-34	13	3336	190	190	Cesarean section, indication: delivery of head
180--NM-34	13	3336	191	191	Cesarean section, indication: delivery of head
181--NM-34	13	3336	192	192	Cesarean section, indication: delivery of head
182--NM-34	13	3336	193	193	Cesarean section, indication: delivery of head
183--NM-34	13	3336	194	194	Cesarean section, indication: delivery of head
184--NM-34	13	3336	195	195	Cesarean section, indication: delivery of head
185--NM-34	13	3336	196	196	Cesarean section, indication: delivery of head
186--NM-34	13	3336	197	197	Cesarean section, indication: delivery of head
187--NM-34	13	3336	198	198	Cesarean section, indication: delivery of head
188--NM-34	13	3336	199	199	Cesarean section, indication: delivery of head
189--NM-34	13	3336	200	200	Cesarean section, indication: delivery of head
190--NM-34	13	3336	201	201	Cesarean section, indication: delivery of head
191--NM-34	13	3336	202	202	Cesarean section, indication: delivery of head
192--NM-34	13	3336	203	203	Cesarean section, indication: delivery of head
193--NM-34	13	3336	204	204	Cesarean section, indication: delivery of head
194--NM-34	13	3336	205	205	Cesarean section, indication: delivery of head
195--NM-34	13	3336	206	206	Cesarean section, indication: delivery of head
196--NM-34	13	3336	207	207	Cesarean section, indication: delivery of head
197--NM-34	13	3336	208	208	Cesarean section, indication: delivery of head
198--NM-34	13	3336	209	209	Cesarean section, indication: delivery of head
199--NM-34	13	3336	210	210	Cesarean section, indication: delivery of head
200--NM-34	13	3336	211	211	Cesarean section, indication: delivery of head
201--NM-34	13	3336	212	212	Cesarean section, indication: delivery of head
202--NM-34	13	3336	213	213	Cesarean section, indication: delivery of head
203--NM-34	13	3336	214	214	Cesarean section, indication: delivery of head
204--NM-34	13	3336	215	215	Cesarean section, indication: delivery of head

UNION FOR THE PROTECTION OF THE
 PUBLIC, INTERNATIONAL SUMMARY OF THE
 DELIVERY

[illegible]

OB-34, Obstetrician's Summary of Labor and Delivery

DATA	ITEM	CAUSE	DATA ITEM NAME
ITEM	CAUSE	DATA ITEM NAME	
ITEM	CAUSE	DATA ITEM NAME	
6150....VAR	1451	uterine stimulant, no response	
6151....VAR	1452	uterine stimulant, sustained contraction	
6152....VAR	1453	uterine stimulant, persistent increased uterine tone	
6153....VAR	1454	uterine stimulant, significant variation of fetal heart rate or rhythm	
6154....VAR	1455	uterine stimulant, simultaneous labor and/or delivery	
6155....VAR	1456	uterine stimulant, other unusual reaction	
6156....VAR	1457	uterine dysfunction	
6157....VAR	1458	labor, type of onset (onset/yr)	
6158....VAR	1459	uterine stimulant, induction indication, elective	
6159....VAR	1460	uterine stimulant, induction indication, ruptured membranes	
6160....VAR	1461	uterine stimulant, induction indication, toxemia	
6161....VAR	1462	uterine stimulant, induction indication, abruptio placentae	
6162....VAR	1463	uterine stimulant, induction indication, diabetes mellitus	
6163....VAR	1464	uterine stimulant, induction indication, erythroblastosis	
6164....VAR	1465	uterine stimulant, induction indication, infection, intrauterine	
6165....VAR	1466	uterine stimulant, induction indication, other	
6166....VAR	1467	uterine stimulant, induction indication, other	
6167....VAR	1468	uterine stimulant, induction indication, other	
6168....VAR	1469	uterine stimulant, induction indication, other	
6169....VAR	1470	uterine stimulant, induction indication, other	
6170....VAR	1471	uterine stimulant, induction indication, other	
6171....VAR	1472	uterine stimulant, induction indication, other	
6172....VAR	1473	uterine stimulant, induction indication, other	
6173....VAR	1474	uterine stimulant, induction indication, other	
6174....VAR	1475	uterine stimulant, induction indication, other	
6175....VAR	1476	uterine stimulant, induction indication, other	
6176....VAR	1477	uterine stimulant, induction indication, other	
6177....VAR	1478	uterine stimulant, induction indication, other	
6178....VAR	1479	uterine stimulant, induction indication, other	
6179....VAR	1480	uterine stimulant, induction indication, other	
6180....VAR	1481	uterine stimulant, induction indication, other	
6181....VAR	1482	uterine stimulant, induction indication, other	
6182....VAR	1483	uterine stimulant, induction indication, other	
6183....VAR	1484	uterine stimulant, induction indication, other	
6184....VAR	1485	uterine stimulant, induction indication, other	
6185....VAR	1486	uterine stimulant, induction indication, other	
6186....VAR	1487	uterine stimulant, induction indication, other	
6187....VAR	1488	uterine stimulant, induction indication, other	
6188....VAR	1489	uterine stimulant, induction indication, other	
6189....VAR	1490	uterine stimulant, induction indication, other	
6190....VAR	1491	uterine stimulant, induction indication, other	
6191....VAR	1492	uterine stimulant, induction indication, other	
6192....VAR	1493	uterine stimulant, induction indication, other	
6193....VAR	1494	uterine stimulant, induction indication, other	
6194....VAR	1495	uterine stimulant, induction indication, other	
6195....VAR	1496	uterine stimulant, induction indication, other	
6196....VAR	1497	uterine stimulant, induction indication, other	
6197....VAR	1498	uterine stimulant, induction indication, other	
6198....VAR	1499	uterine stimulant, induction indication, other	
6199....VAR	1500	uterine stimulant, induction indication, other	

FD-302a
1-60

**OBSTETRICIAN'S SUMMARY OF
LABOR AND DELIVERY**

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*Revised by new form as follows:
p. 1 by OB-56 (4-62)
pp. 2, 3 and 4 by OB-55 (4-62)
(p. 1 then 5)*

PATIENT'S NAME	
DELIVERED BY	
TYPE DELIVERY BY	DATE (MM-DD-YY)
TITLE OR POSITION	

1. ONSET OF LABOR (Document the corresponding onset and available information)		DATE TIME	TIME (MM-DD-YY)
2. DURATION OF LABOR (Hours and Minutes)	FIRST STAGE	SECOND STAGE	THIRD STAGE
3. GIVE A BRIEF NARRATIVE SUMMARY OF THIS PATIENT'S LABOR AND DELIVERY, NOTING ESPECIALLY ANY FEATURES WHICH SEEM UNUSUAL TO YOU.			

OBSTETRICIAN'S SUMMARY OF LABOR AND DELIVERY

(Complete only the portion of this page that deals with the appropriate type of delivery)

VAGINAL DELIVERY OR FORCE DELIVERY

Position during first stage (If operative)

Position in delivery room before any attempt at delivery (If operative)

Is labor or force

☐ Not operative

☐ Operative

ROTAION OF HEAD (If operative)

Head not rotated

Head rotated from _____ to _____

☐ Manual rotation

☐ Force rotation

☐ Simple or easy rotation (Caudal curve, head in)

☐ Long or (Force) rotation (Long in, one easily head on curve)

☐ Difficult rotation (Head on curve)

☐ Extremely difficult delivery (Extremely hard to rotate)

DELIVERY OF HEAD

☐ Spontaneous

☐ Controlled

☐ Uncontrolled

INDICATION FOR FORCEPS DELIVERY

☐ Classic

☐ Indicated (Cerebral malformations)

TYPE OF FORCEPS DELIVERY

☐ Low forceps (Application when head visible, shall be perineal)

☐ Mid-forceps (Application when head visible, shall be perineal)

☐ High forceps (Application when engagement of head is not taken place, but still is not on pelvic floor)

☐ Mid-forceps (Application when engagement of head is not taken place, but still is not on pelvic floor)

☐ High forceps (Application when engagement of head is not taken place, but still is not on pelvic floor)

☐ Uncontrolled attempt at forceps delivery

☐ Uncontrolled attempt at forceps delivery

☐ Uncontrolled attempt at forceps delivery

☐ Uncontrolled attempt at forceps delivery

☐ Uncontrolled attempt at forceps delivery

☐ Uncontrolled attempt at forceps delivery

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☐ Uncontrolled attempt at forceps delivery

VAGINAL AND EXTRACTING DELIVERY

INDICATION

☐ Second force

☐ Prolapsed cord

☐ Transverse lie

☐ Other (Specify)

DELIVERY OF HEAD

☐ Spontaneous

☐ Controlled

☐ Uncontrolled

FORCEPS TO AFTERBORN HEAD

☐ Simple or easy delivery (Caudal pull)

☐ Long or (Force) pull

☐ Difficult delivery (Head pull)

☐ Extremely difficult delivery (Extremely hard pull)

CEAREAN SECTION

☐ In labor

☐ Not in labor

INDICATION FOR CEAREAN SECTION

☐ Prolapsed umbilical cord

☐ Fetal distress

☐ Cephalopelvic disproportion

☐ Placenta previa with hemorrhage

☐ Early or late hemorrhage

☐ Transverse lie

☐ Prolapsed cord

☐ Uterine torsion

☐ Previous pelvic or cervical injury

☐ Distress

☐ Trauma

☐ Abruptio placentae

☐ Placenta previa

☐ Prolapsed forceps

☐ Uterine dysfunction

☐ Other (Specify)

TYPE OF CEAREAN SECTION

☐ Low

☐ Classical

☐ Extraperitoneal

☐ C-section (Specify)

DELIVERY OF HEAD

☐ Manual

☐ Forceps

☐ Simple or easy delivery (Caudal pull)

☐ Long or (Force) pull

☐ Difficult delivery (Head pull)

☐ Extremely difficult delivery (Extremely hard pull)

OBSTETRICIAN'S SUMMARY OF LABOR AND DELIVERY

CASE AND PLACENTAL OBSERVATIONS

(To be completed by ALL obstetricians)

1. COMPLICATIONS

- ☐ No complications noted
- ☐ Cord around neck _____ times - right
- ☐ Cord around neck _____ times - left
- ☐ Cord around body - right
- ☐ Cord around body - left
- ☐ True knot in cord - right
- ☐ True knot in cord - left
- ☐ Hypertension of cord
- ☐ Suppressed cord space
- ☐ Other cord pathology (Describe)

2. PLACENTAL OBSERVATIONS

EVIDENCE OF PREMATURE PLACENTAL DETACHMENT

- ☐ None
- ☐ Evidence to suggest partial detachment (Describe)

- ☐ Evidence to suggest complete detachment (Describe)

EVIDENCE OF PLACENTA PREVIA

- ☐ None
- ☐ Evidence to suggest placenta previa (Describe)

EVIDENCE OF CIRCUMFERENTIAL CORD CAPTURE

- ☐ None
- ☐ Evidence to suggest circumferential cord capture (Describe)

3. INDUCTION OF LABOR

1. LABOR NOT INDUCED

LABOR INDUCED:

- ☐ Successful
- ☐ Not successful

2. METHOD OF INDUCTION

- ☐ Induced
- ☐ Not induced
- ☐ Spontaneous
- ☐ Not reported
- ☐ Pitocin (If other oxytocic)
- ☐ Used
- ☐ Not used

CATOR OIL OR OILS

- ☐ Used
- ☐ Not used

OTHER OXYTOCIC

- ☐ Used (Describe)

- ☐ Not used

1. LOWEST METHOD OF INDUCTION

Department of Health, Education and Welfare
Public Health Service

20. ARTIFICIAL RUPTURE OF MEMBRANES

MEMBRANES NOT ARTIFICIALLY RUPTURED

MEMBRANES ARTIFICIALLY RUPTURED

- ☐ Indication of labor
- ☐ STIMULATION OF LABOR:
 - ☐ Latent phase (Before 5 cm dilatation)
 - ☐ Active phase (After 5 cm dilatation)
 - ☐ Second stage
 - ☐ Terminal or delivery room
 - ☐ Other indication (Describe)

21. OXYTOCIC USE

OXYTOCIC NOT USED

OXYTOCIC USED:

- ☐ INDUCTION OF LABOR
- ☐ STIMULATION OF LABOR:
 - ☐ Latent phase (Before 5 cm dilatation)
 - ☐ Active phase (After 5 cm dilatation)
 - ☐ Second stage
 - ☐ Other indication (Describe)

USUAL REACTION TO OXYTOCIC

- ☐ No unusual reaction
- ☐ Production of sustained contractions
- ☐ Production of intermittent tetanic contractions
- ☐ Other unusual reaction (Describe)

22. SPECIAL PRECAUTIONS DURING LABOR

- ☐ No special precautions
- ☐ Various measures (See report and comments) (Describe)

- ☐ Manual delivery of the cervix
- ☐ Delivery of the placenta
- ☐ Vaginal tear
- ☐ Anesthetic surgery during labor, not accompanied by Cesarean section (Specify)
- ☐ (Anesthesia record shall be completed)

- ☐ Other special attention (Describe)

OBSTETRICIAN'S SUMMARY OF LABOR AND DELIVERY

COMPLICATIONS DURING LABOR

22. BLEEDING DURING LABOR

- ☐ NO BLEEDING DURING LABOR
- ☐ BLEEDING DURING LABOR:
 - ☐ For other indication of the placenta:
 - ☐ Partial
 - ☐ Complete
 - ☐ Properly covered
 - ☐ Low implantation (Edge doesn't reach cervical os)
 - ☐ Marginal (Edge reaches os, but doesn't extend to os)
 - ☐ Placental (Edge partially reaches cervical os)
 - ☐ Total/Placenta completely covers cervical os
 - ☐ Marginal tears rupture
 - ☐ Vasa previa
 - ☐ Other cause (Specify)

24. UTERINE DYSFUNCTION

- ☐ NO UTERINE DYSFUNCTION
- ☐ UTERINE DYSFUNCTION OBSERVED (Check one after one of diagnoses occurred or more than one):
 - ☐ Latent phase (Lack of progress for 6 or more hours after labor has been established but before 3 cm. dilatation has been reached)
 - ☐ Active phase (Continued or arrested dilatation for 3 or more hours, after 3 cm. dilatation has been reached)
 - ☐ Arrested phase (Lack of progress in descent or rotation for 2 or more hours in active phase with full cervical dilation)
 - ☐ Unknown stage

25. PREGNANCY

- ☐ NO PREGNANCY
- ☐ PREGNANCY PRESENT OR HYPERTENSION PRESENT:
 - ☐ Chronic hypertension without response
 - ☐ Chronic hypertension with response
 - ☐ Chronic hypertension with edema
 - ☐ Chronic hypertension with oliguria
 - ☐ Pre-eclampsia
 - ☐ Eclampsia

26. MATERNAL DYSTOCIA

- ☐ NO MATERNAL DYSTOCIA
- ☐ MATERNAL DYSTOCIA PRESENT:
 - ☐ Cephalopelvic disproportion with contracted pelvis
 - ☐ Cephalopelvic disproportion, without contracted pelvis
 - ☐ Tumor blocking birth canal
 - ☐ Other maternal dysmaturia (Specify)

27. FETAL DYSTOCIA

- ☐ NO FETAL DYSTOCIA
- ☐ FETAL DYSTOCIA PRESENT:
 - ☐ Hydrocephalus (Obvious)
 - ☐ Breech
 - ☐ Head
 - ☐ Other fetal dysmaturia (Specify)

23. PROLAPSED CORD

- ☐ NO PROLAPSED CORD
- ☐ CORD PROLAPSED:
 - ☐ Cord through cervical os into vagina
 - ☐ Cord through vaginal introitus
- ☐ TREATMENT:
 - ☐ Immediate
 - ☐ No treatment
 - ☐ Replaced
 - ☐ Presented with hand
 - ☐ Pelvic placed in breech
 - ☐ Other (Specify)

28. POSITION OF FETUS

- ☐ NO POSITION OF FETUS
- ☐ POSITION OF FETUS:
 - ☐ Cephalic position
 - ☐ Breech position
 - ☐ Transverse position
 - ☐ Other (Specify)

29. POSITION OF FETUS

- ☐ UTERUS NOT RUPTURED
- ☐ UTERUS RUPTURED:
 - ☐ Before labor:
 - ☐ Spontaneous rupture of
 - ☐ Previous Cesarean scar
 - ☐ Previous operative scar
 - ☐ Intra-abdominal
 - ☐ Traumatic (Describe)
 - ☐ During labor:
 - ☐ Spontaneous rupture of
 - ☐ Previous Cesarean scar
 - ☐ Previous operative scar
 - ☐ Intra-abdominal
 - ☐ Traumatic (Describe)

30. OTHER LABOR COMPLICATIONS

- ☐ NO OTHER LABOR COMPLICATIONS
- ☐ OTHER LABOR COMPLICATIONS (Describe)

For Item Numbers linked to Data Items on 3P-16, Obstetrician's Summary of Labor and Delivery

ITEM
ON
FROM

DATA
ITEM
ID

CARD
NUM

FROM TO

DATA ITEM NAME

606A....VAR	22	22	Labor and delivery with (1200-34, 2000-55)
606B....VAR	1317	1317	Labor onset, spontaneous or induced
606C....VAR	43	43	Labor procedures, internal, first
606D....VAR	44	44	Labor procedures, internal, second
606E....VAR	1335	1335	Labor, arrested progress, other causes
606F....VAR	1336	1336	Labor, arrested progress, stage and stage
606G....VAR	1334	1334	Labor, arrested progress; pelvic disproportion; cephalopelvic
606H....VAR	1332	1332	Labor, arrested progress; presentation
606I....VAR	1333	1333	Labor, arrested progress; uterine activity abnormal
606J....VAR	1441	1441	Labor, duration of first and second stages (coded)
606K....VAR	1437	1440	Labor, duration of first and second stages (hrs/min)
606L....VAR	1426	1426	Labor, duration of first stage (coded)
606M....VAR	1425	1425	Labor, duration of first stage (hrs/min)
606N....VAR	1431	1432	Labor, duration of second stage (coded)
606O....VAR	1427	1430	Labor, duration of second stage (hrs/min)
606P....VAR	1433	1436	Labor, duration of third stage (hrs/min)
606Q....VAR	1446	1446	Labor, total duration, first, second and third stages (coded)
606R....VAR	1442	1445	Labor, total duration, first, second and third stages (hrs/min)
606S....VAR	1467	1467	Labor, total duration, first, second and third stages (hrs/min)
606T....VAR	1463	1463	Labor, total duration, first, second and third stages (hrs/min)
606U....VAR	14	15	Labor, total duration, first, second and third stages (hrs/min)
606V....VAR	2334	2334	Labor, total duration, first, second and third stages (hrs/min)
606W....VAR	1318	1318	Oxytocin use
606X....VAR	1319	1319	Placenta previa, degree
606Y....VAR	1320	1320	Placenta previa, degree
606Z....VAR	1365	1365	Polyhydramnios
607A....VAR	1321	1323	Presentation of fetus at delivery
607B....VAR	1324	1324	Presentation of fetus at delivery
607C....VAR	1304	1304	Records present, labor and delivery
607D....VAR	1327	1327	Records of membrane, reason
607E....VAR	1328	1328	Torsion of membrane, chronic (30-14)
607F....VAR	1464	1464	Uterine dysfunction
607G....VAR	1366	1366	Uterine rupture
607H....VAR	1451	1451	Uterine stimulant, no response
607I....VAR	1454	1454	Uterine stimulant, other unusual reaction
607J....VAR	1453	1453	Uterine stimulant, persistent increased uterine tone
607K....VAR	1367	1367	Uterine stimulant, reaction to
607L....VAR	1454	1454	Uterine stimulant, significant variation of fetal heart rate or
607M....VAR	1452	1452	Uterine stimulant, sustained contraction
607N....VAR	1455	1455	Uterine stimulant, simultaneous labor and/or delivery
607O....VAR	1461	1461	Uterine stimulant, induction indication, other
607P....VAR	1476	1476	Uterine stimulant, induction indication; abruptio placenta

Form Item Numbers Linked to Data Items on DR-10, Obstetrician's Summary of Labor and Delivery

ITEM
ON
FORM

DATA
ITEM
IN

CARD
BLANK

FROM TO

DATA ITEM NAME

6173.....VAR	1477	1477	Uterine stimulants; induction indications; diabetes mellitus
6169.....VAR	1473	1473	Uterine stimulants; induction indications; elective
6174.....VAR	1478	1478	Uterine stimulants; induction indications; erythroblastosis
6176.....VAR	1480	1480	Uterine stimulants; induction indications; infection, intrauterine
6175.....VAR	1479	1479	Uterine stimulants; induction indications; eclampsia
6170.....VAR	1474	1474	Uterine stimulants; induction indications; ruptured membranes
6171.....VAR	1475	1475	Uterine stimulants; induction indications; toxemia
6067.....VAR	1329	1329	Vertex delivery; forceps application
6087.....VAR	1361	1361	Vertex delivery; forceps, difficulty
6086.....VAR	1360	1360	Vertex delivery; forceps, difficulty of conversion
6085.....VAR	1359	1359	Vertex delivery; forceps, difficulty of rotation
6083.....VAR	1357	1357	Vertex delivery; forceps, difficulty of traction
6062.....VAR	1330	1330	Vertex delivery; vacuum extraction (DR-55)
603.....VAR	53	53	45 Vertex, brow or face delivery; position converted
601.....VAR	47	47	49 Vertex, brow or face delivery; position during first stage
602.....VAR	50	50	52 Vertex, brow or face delivery; position in delivery room
654.....VAR	23	23	24 Labor onset date (day)
653.....VAR	21	21	22 Labor onset date (hr)
655.....VAR	25	25	26 Labor onset date (yr)
656.....VAR	27	27	30 Labor onset date (hr, min, 24 hr clock)
6169.....VAR	1467	1467	1472 Labor, date of onset (mo/day/yr)
6155.....VAR	1447	1447	1450 Rupture of membranes, interval from ROM to onset of labor
6160.....VAR	43	43	46 Labor duration, first and second stages combined (hrs, min)
6157.....VAR	31	31	34 Labor duration, first stage (hrs, min)
6158.....VAR	35	35	38 Labor duration, second stage (hrs, min)
6159.....VAR	39	39	42 Labor duration, third stage (hrs, min)
6151.....VAR	1437	1440	1440 Labor, duration of first and second stages (hrs/min)
6145.....VAR	1427	1425	1425 Labor, duration of first stage (hrs/min)
6148.....VAR	1427	1430	1430 Labor, duration of second stage (hrs/min)
6150.....VAR	1433	1436	1436 Labor, duration of third stage (hrs/min)
6153.....VAR	1442	1445	1445 Labor, total duration, first, second and third stages (hrs/min)
605.....VAR	57	59	59 Vertex, brow or face delivery; head rotation, from
606.....VAR	60	62	62 Vertex, brow or face delivery; head rotation, to
604.....VAR	56	56	56 Vertex, brow or face delivery; head rotation, type
6111.....VAR	1387	1387	1387 Cesarean section, following attempt at vaginal delivery
6061.....VAR	1329	1329	1329 Vertex delivery; forceps application
6087.....VAR	1361	1361	1361 Vertex delivery; forceps, difficulty
607.....VAR	63	63	63 Vertex, brow or face delivery; delivery of head, type
608.....VAR	64	64	64 Vertex, brow or face delivery; forceps, type
609.....VAR	65	65	65 Vertex, brow or face delivery; forceps, degree of difficulty
6075.....VAR	1340	1349	1349 Breech delivery; orientation
6070.....VAR	66	66	66 Breech, type
6076.....VAR	1350	1350	1350 Breech delivery procedures attempted for delivery of body

Form 1 Item Numbers Indexed to Data Items on OB-34, Obstetrician's Summary of Labor and Delivery

ITEM
ON
FORM

DATA
ITEM
IN

CARD
NUM

FROM TO

DATA ITEM NAME

8	673...OB-34	3334	67	67	Breech, delivery of body, type	
9	6077...VAR		1351	1351	Breech, delivery procedures attempted for delivery of head	
9	672...OB-34	3334	68	68	Breech, delivery of head, type	
10	673...OB-34	3334	69	69	Breech, incisions to external head	
12	674...OB-34	3334	70	70	Version indications: extraction indications	
13	630...OB-34	3334	21	21	Cesarean section, labor status prior to	
13	6030...VAR		1305	1305	Anthrax, placenta, tetra	
13	6118...VAR		1394	1394	Cesarean section, indication, elderly primigravida (OB-34)	
13	646...OB-34	3334	37	37	Cesarean section, indication, other	
13	6120...VAR		1405	1405	Cesarean section, indication, other (OB-34)	
13	6114...VAR		1390	1390	Cesarean section, indication, previous cesarean section (OB-34)	
13	6109...VAR		1383	1383	Cesarean section, indication, primary (OB-34)	
13	647...OB-34	3334	33	33	Cesarean section, indication, abruptio placenta	
13	6125...VAR		1401	1401	Cesarean section, indication, abruptio placenta	
13	634...OB-34	3334	25	25	Cesarean section, indication, breech primigravida (OB-34)	
13	6117...VAR		1393	1393	Cesarean section, indication, breech primigravida (OB-34)	
13	631...OB-34	3334	24	24	Cesarean section, indication, cephalopelvic disproportion (OB-34)	
13	6116...VAR		1392	1392	Cesarean section, indication, cephalopelvic disproportion (OB-34)	
13	640...OB-34	3334	31	31	Cesarean section, indication, diabetes	
13	6123...VAR		1379	1379	Cesarean section, indication, diabetes mellitus (OB-34)	
13	635...OB-34	3334	26	26	Cesarean section, indication, elderly primigravida	
13	632...OB-34	3334	23	23	Cesarean section, indication, fetal distress	
13	6115...VAR		1391	1391	Cesarean section, indication, fetal distress	
13	6127...VAR		1401	1401	Cesarean section, indication, increased delivery failed (OB-34)	
13	644...OB-34	3334	35	35	Cesarean section, indication, increased delivery failed (OB-34)	
13	6121...VAR		1397	1397	Cesarean section, indication, increased delivery failed (OB-34)	
13	630...OB-34	3334	10	10	Cesarean section, indication, ovarian, uterine (OB-34)	
13	643...OB-34	3334	34	34	Cesarean section, indication, pelvic surgery, cervical repair	
13	6126...VAR		1402	1402	Cesarean section, indication, placenta previa	
13	631...OB-34	3334	27	27	Cesarean section, indication, placenta previa (OB-34)	
13	637...OB-34	3334	28	28	Cesarean section, indication, previous section	
13	6120...VAR		1396	1396	Cesarean section, indication, prolapsed cord	
13	6122...VAR		1398	1398	Cesarean section, indication, prolapsed cord (OB-34)	
13	641...OB-34	3334	32	32	Cesarean section, indication, repair (OB-34)	
13	6124...VAR		1400	1400	Cesarean section, indication, toxemia (OB-34)	
13	636...OB-34	3334	27	27	Cesarean section, indication, transverse lie	
13	6110...VAR		1395	1395	Cesarean section, indication, transverse lie (OB-34)	
13	645...OB-34	3334	35	35	Cesarean section, indication, uterine dysfunction	
13	6128...VAR		1404	1404	Cesarean section, indication, uterine dysfunction	
13	638...OB-34	3334	29	29	Cesarean section, indication, uterine dysfunction (OB-34)	
14	647...OB-34	3334	38	38	Cesarean section, indication, uterine dysfunction	
14	6108...VAR		1382	1382	Cesarean section, indication, uterine incision type	

FORA Item Numbers linked to Data Items on UA-14, Obstetrician's Summary of Labor and Delivery

ITEM ON FORM	DATA ITEM IN	CARD NUM	FROM	TO	DATA ITEM NAME
27	015...0A-14	2334	52	52	DYSTOCIA, fetal
27	015...0A-14	2334	1316	1316	DYSTOCIA, shoulder
28	015...0A-14	2334	1325	1325	PROLONGED CORP, degree
28	016...0A-14	2334	53	53	PROLONGED CORP
28	017...0A-14	2334	54	54	PROLONGED CORP, immediate treatment
29	018...0A-14	2334	55	55	PROLONGED CORP, ultimate treatment
30	019...0A-14	2334	56	56	MEASURE OF STRENGTH
31	020...0A-14	2334	57	57	LABOR COMPLICATIONS, other
32	021...0A-14	2334	1327	1327	RUPURE OF MEMBRANS, reason
32	022...0A-14	2334	1305	1305	ABRUPTION, placenta, degree

DEFINITION OF CODES
OBSTETRICIAN'S SUMMARY OF LABOR AND DELIVERY
FORM OB-34
CARD 1334

<u>FIELD</u>		<u>CARD COLUMN</u>
1.	<u>Card Number</u> Code: 1	1
2.	<u>Form Number</u> Code: 334	2-4
3.	<u>Revision Number</u> Code: 2 Form Dated: 1/59	5
4.	<u>WINDB Number</u> Nine-digit number for Patient Identification Code: As given	6-14
5.	<u>Not Coded Because</u> Code: 0 - None listed 1 - Abortion * 2 - Mole, Choriocarcinoma, ectopic pregnancy * 3 - Died undelivered * 4 - Delivered elsewhere * 5 - Unusual delivery procedures, not subject to coding * 9 - Other and unknown reasons *	15
6.	<u>Edit Code</u> Code: 0 - Not edited with other forms 1 - Edited with other forms 2 - Provisional coding of one or more items 3 - Data abstracted at PRB 9 - Edit code not used	16
7.	<u>Fetus Number</u> Code: 0 - Single birth 1 - 1st of multiple 2 - 2nd of multiple 3 - 3rd of multiple 4 - 4th of multiple	17

* Card 93342 replaces card 13342 and card ends in col. 20 (see card 9)

DEFINITION OF CODES (Continued)

FORM OB-34
Card 1334

FIELD

CARD
COLUMN

7. Fetus Number (continued) 17
Code: 9 - Unknown (includes abortion and fetus not specified as multiple)
8. Type of Delivery 18
Code: 0 - Not applicable
1 - Vertex, undifferentiated
2 - Breech
3 - Version and Extraction
4 - Cesarean Section
5 - Occiput
6 - Brow, face or chin (sinciput)
9 - Unknown
9. Unsuccessful Attempt to Deliver (Preceding Cesarean Section) 19
Code: 0 - None - not applicable
1 - Vertex
2 - Breech
3 - Version and Extraction
9 - Unknown
10. Labor 20
Code: 0 - None, Cesarean Section, questionable Labor
1 - Labor
8 - Labor, but no information on duration of any stage
9 - Unknown if Labor, not applicable
11. Date of Onset of Labor 21-26
Item 1
Six-digit code for month (cols. 21-22), day (cols. 23-24), and year (cols. 25-26)
Code: As given
000000 - Not applicable
6X** and four blanks - Decapitation (card ends in col. 35)
7X** and four blanks - No Labor (card ends in col. 35)

** X = 11 punch

DEFINITION OF CODES (Continued)

FORM OB-34
Card 1334

FIELD

CARD COLUMN

11. Date of Onset of Labor (continued)
Code: 8X** and four blanks - Abortion
(card ends in col. 22)
9X** and four blanks - Home or
other hospital delivery
(card ends in col. 35)
99 - Month, day and/or year unknown
21-26
12. Time of Onset of Labor
Item 1
Code: As given in hours and minutes based
on 24 hour clock
Blank - Codes 6X, 7X, 8X, 9X in Field 11
0000 - Not applicable
9999 - Unknown
27-30
13. Duration: First Stage of Labor
Item 2
Code: As given in hours and minutes
Blank - Same as in Field 12
0000 - Not applicable
9999 - Unknown
31-34
14. Duration: Second Stage of Labor *
Item 2
Code: Same as in Field 13 except that
X and three blanks - no labor, unknown,
no 2nd stage
35-38
15. Duration: Third Stage of Labor *
Item 2
Code: As given in hours and minutes
0000 - Not applicable
8888 - Placenta delivered with or before
infant (except C/S)
9999 - Unknown
39-42
16. Total - Combined First and Second Stages *
Item 2
Code: As given in hours and minutes
43-46

- * Blanks can exist in this field, see field 12
** X = 11 punch

DEFINITION OF CODES (Continued)

FORM 02-3-
Card 1334

FIELD

CARD
COLLAGE

16. Total - Combined First and Second Stages* (cont.) 43-46
Code: 0000 - Not applicable, combined total
not reported - duration of both
first and second stages specified
in Fields 13 and 14
9999 - Unknown
17. VERTEX, BROW, FACE DELIVERY
Position. Presentation During First Stage* 47-49
Code: See attachment "Position Codes"
page OB 34 - 20
- Additional codes:
000 - No labor
666 - Breach; all, including compound
breach
777 - Vertex undifferentiated
888 - Other presentations
999 - Unknown
18. Position in Delivery Room* 50-52
Code: See attachment "Position Codes"
page OB 34 - 20
- Additional codes:
Same as in Field 17, except
999 - Unknown, no labor, not applicable
19. Position Converted to (From Brow, Face, or
Chin)* 53-55
Code: See attachment "Position Codes"
page OB 34 - 20
- Additional codes:
000 - Conversion not attempted, not
applicable
777 - Converted to unknown position
888 - Unsuccessful attempt to convert
999 - Unknown

* Blanks can exist in this Field, see Field 12

DEFINITION OF CODES (Continued)

FORM OB-34
Card 1334

FIELD

CARD
COLUMNS

20. Rotation of Head*

56

Item 5

- Code: 0 - No attempt to rotate, not applicable
1 - Manual
2 - Simple, easy forceps
3 - Firm forceps
4 - Difficult forceps
5 - Extremely difficult forceps
6 - Unsuccessful attempt, any method
(even if followed by successful)
7 - Forceps used - degree of difficulty
not specified
8 - Successful rotation (more than one
direction, or two or more forcep
rotations)
9 - Unknown

21. Head Rotated From*

57-59

Item 5

Code: See attachment "Position Codes"
page OB 34 - 20

Additional codes:

- 000 - No attempt at rotation, not applicable
999 - Unknown
X** and two blanks - No attempt to rotate,
not applicable

22. Head Rotated To*

60-62

Item 5

Code: See attachment "Position Codes"
page OB 34 - 20

Additional codes:

- Same as in Field 21, except
Three blanks - No attempt to rotate, not applicable

23. Delivery of Head*

63

Item 6

- Code: 0 - Not applicable, no attempt to deliver
as vertex
1 - Spontaneous, controlled
2 - Spontaneous, uncontrolled
3 - Elective forceps attempt
4 - Indicated forceps attempt

* Blanks can exist in the Field, see Field 12

** X = 11 punch

DEFINITION OF CODES (Continued)

FORM OB-34
Card 1334

FIELD

CARD
COLUMN

23. Delivery of Head* (cont.)

- Code: 5 - Spontaneous, unknown if controlled or uncontrolled
6 - Forceps, unknown if elective or indicated
7 - Vacuum extractor without forceps
8 - Vacuum extractor with forceps
9 - Unknown

63

24. Type of Forcep Delivery Item 6

- Code: 0 or X** - Not applicable, no attempt at forcep delivery
1 - Low - Class I Outlet
2 - Mid (when skull on perineal floor, but sagittal suture not in AP diameter of pelvis) - Class II Low
3 - Mid (when engagement of BIP in inlet but skull not on pelvic floor) - Class III Mid
4 - High forceps - Class IV High
7 - Unknown if used
8 - Unsuccessful attempt
9 - Unknown

64

25. Degree of Difficulty of Forcep Delivery Item 6

- Code: Blank or 0 - Not applicable, no attempt at forcep delivery
1 - Simple, easy
2 - Snug fit
3 - Difficult
4 - Extremely difficult
7 - Unknown if forceps used
8 - Unsuccessful attempt
9 - Unknown

65

EMERGENCY DELIVERY

26. Type Item 7

- Code: 0 - Not applicable
1 - Frank
2 - Single footling, single knee
3 - Double footling, double knee
4 - Complete
5 - Compound
6 - Version and extraction attempt
9 - Unknown

66

* Blanks can exist in the field, see Field 12
** X = 11 punch

DEFINITION OF CODES (Continued)

FORM OB-34
Card 1334

FIELD

CARD
COLLAGE

27. Delivery of Baby
Item 8 67
Code: 0 - Not applicable
1 - Spontaneous
2 - Partial extraction
3 - Total extraction
4 - Breech decomposition only
8 - Version and extraction attempt
9 - Unknown
28. Delivery of Head
Item 9 68
Code: 0 - Not applicable, none
1 - Spontaneous, controlled, (manual)
2 - Spontaneous, uncontrolled
3 - Spontaneous, unknown if controlled or uncontrolled
8 - Unsuccessful attempt
9 - Unknown
29. Forceps to After-coming Head
Item 9 69
Code: 0 - Not applicable, none
1 - Simple, easy
2 - Smug
3 - Difficult
4 - Very difficult
5 - Unknown difficulty
8 - Unsuccessful attempt at delivery of head
9 - Unknown
30. VERSION AND EXTRACTION
Indications for Attempt 70
Item 10
Code: 0 - Not applicable
1 - Second twin
2 - Prolapsed cord
4 - Transverse lie
8 - Other and multiple indications
9 - Unknown

DEFINITION OF CODES (Continued)

FORM OB-34
Card 2334

FIELD

CARD
COLUMN

1. Card Number
Code: 2 1
2. Basic Data
Code: Same as in columns 2-20 of Card 1 2-20
3. Cord Complications
Item 16 21-25
 - Five-digit code for:
 - Around Neck, Tight (col. 21)
 - Code: 0 - None, no cord complications
 - 1-7 - Number of times as given
 - 8 - Unknown number of times
 - 9 - Unknown if around neck, tight
 - Around Neck, Loose (col. 22)
 - Code: 0 - None
 - 1-7 - Number of times as given (tension loose or unknown)
 - 8 - Unknown number of times
 - 9 - Unknown if around neck, loose
 - X* - No cord complications
 - Around Body (col. 23)
 - Code: Blank - No cord complications
 - 0 - None
 - 1 - Tight only, tight and loose
 - 2 - Loose only, unknown tension
 - 9 - Unknown if around body
 - True Knot in Cord (col. 24)
 - Code: Blank - No cord complications
 - 0 - None
 - 1 - Tight (one or more)
 - 2 - Loose (all loose), unknown tension
 - 9 - Unknown
 - Other Complications (col. 25)
 - Code: Blank - No cord complications
 - 0 - None
 - 1 - Hematoma
 - 2 - Ruptured cord or vessel
 - 3 - Combination of codes 1 and 2
 - 4 - Other cord complications
 - 5 - Combination of codes 1 and 4
 - 6 - Combination of codes 2 and 4
 - 7 - Combination of codes 1, 2, and 4
 - 9 - Unknown

* X = 11 punch

DEFINITION OF CODES (Continued)

FORM OB-34
Card 2334

FIELD

CARD
COLUMNS

4. Evidence of Premature Placental Separation (ABRUPTIO) 26
Item 17
Code: 0 - None
1 - Partial
2 - Complete
9 - Unknown
5. Evidence of Placenta Previa 27
Item 17
Code: 0 - None
1 - Present
9 - Unknown
6. Evidence of Marginal Sinus Rupture 28
Item 17
Code: Same as in Field 5
7. Induction of Labor 29
Item 18
Code: 0 - No attempt
1 - Successful
2 - Unsuccessful
8 - Attempted, unknown if successful
9 - Unknown if attempted
8. Method of Induction 30-34
Item 19
Five-digit code for:
Membranes Stripped (col. 30)
Code: 0 - Not stripped
1 - Stripped
6 - No attempt at induction
7 - Unknown if induction attempted
9 - Unknown if stripped
X* - Labor not induced, if induced method
unknown or unknown if induced

Membranes Ruptured (col. 31)
Oxytocic (col. 32)
Castor Oil or Quinine (col. 33)
Other (col. 34)
Code for each column:
X* or blank - Same as code "X" in col. 30
0 - No
1 - Yes
6 - No attempt at induction
7 - Unknown if induction attempted
9 - Unknown
Note: 6's in entire field = no attempt at induction;
7's in entire field = unknown if induction attempted
* X = 11 punch

DEFINITION OF CODES (Continued)

FORM OB-34
Card 2334

FIELD

CARD
COLUMNS

9. Artificial Rupture of Membranes Item 20

35

- Code: 0 - Not artificially ruptured
1 - For induction
2 - Stimulation - latent phase
3 - Stimulation - active phase
4 - Stimulation - second stage
5 - Terminal in delivery room; at C/S (if previously intact)
6 - Stimulation at unknown phase or stage
7 - Other indication, alone or in combination with one of the above
8 - Unknown if for induction, stimulation or other indication
9 - Unknown if artificially ruptured

10. Use of Oxytocic Item 21

36

- Code: 0 - Not used
1 - Used
9 - Unknown

11. Oxytocic Item 21

37-42

Six-digit code for:

Induction (col. 37)

- Code: 0 - Not used
1 - Used
6 or X* - Oxytocic not used
7 - Unknown if oxytocic used
9 - Unknown if used for induction

Stimulation Latent Phase (col. 38)

Stimulation Active Phase (col. 39)

Stimulation Second Stage (col. 40)

Other Indication (col. 41)

Code for each column:

- Blank - Oxytocic not used
0 - Not used
1 - Used
6 - Oxytocic not used
7 - Unknown if oxytocic used
9 - Unknown if used

* X = 11 punch

DEFINITION OF CODES (Continued)

FORM OB-34
Card 2334

FIELD

CARD
COLUMN

11. Oxytocic (cont.)
Unusual Reaction (col. 42)
Code: Blank - Oxytocic not used
0 - Not applicable, no unusual response, no reaction
1 - Sustained contraction
2 - Intermittent tetanic contraction
3 - Combination of codes 1 and 2
4 - Other unusual reaction
5 - Combination of codes 1 and 4
6 - Combination of codes 2 and 4
7 - Combination of codes 1, 2, and 4
9 - Unknown reaction

37-42

12. Special Procedures During Labor
Two-digit code for:

43-44

First Procedure (col. 43)

- Code: 0 - None
1 - Version maneuver (internal or external excluding version and extraction)
2 - Manual dilatation of cervix
3 - Combination of codes 1 and 2
4 - Dührssen's incisions
5 - Combination of codes 1 and 4
6 - Combination of codes 2 and 4
7 - Combination of codes 1, 2, and 4
9 - Unknown

Second Procedure (col. 44)

- Code: 0 - None
1 - Vorhees Bag
2 - Abdominal surgery during labor (not C/S)
3 - Combination of codes 1 and 2
4 - Other
5 - Combination of codes 1 and 4
6 - Combination of codes 2 and 4
7 - Combination of codes 1, 2, and 4
9 - Unknown

13. Bleeding
Item 23

45

- Code: 0 - None
1 - Yes (heavy show or free)
5 - Unknown

DEFINITION OF CODES (Continued)

FORM OB-34
Card 2334

FIELD

CARD
COLUMN

14.

Bleeding in Labor

Item 23

Three-digit code for:

Premature Separation (col. 46)

- Code: 0 - None, not applicable
1 - Partial
2 - Complete
8 - Separation of unknown degree
9 - Unknown

Placenta Previa (col. 47)

- Code: 0 - None, not applicable
1 - Low implantation
2 - Marginal
3 - Partial
4 - Total
8 - Previa of unknown degree
9 - Unknown

Other or Unknown Causes (col. 48)

- Code: 0 - None, not applicable
1 - Marginal sinus rupture
2 - Vasa previa
3 - Combination of codes 1 and 2
4 - Other causes (includes excessive "show")
5 - Combination of codes 1 and 4
6 - Combination of codes 2 and 4
7 - Combination of codes 1, 2, and 4
9 - Unknown

15.

Uterine Dysfunction

Item 24

- Code: 0 - None
1 - Latent phase
2 - Active phase
3 - Combination of codes 1 and 2
4 - Second stage
5 - Combination of codes 1 and 4
6 - Combination of codes 2 and 4
7 - Combination of codes 1, 2, and 4
8 - Unknown phase or stage
9 - Unknown if uterine dysfunction

49

DEFINITION OF CODES (Continued)

FORM OB-34
Card 2334

FIELD

CARD
COLUMN

16. Toxemia
 Item 25 50
 Code: 0 - None
 1 - Chronic hypertension without
 toxemia
 2 - Chronic hypertension with
 toxemia
 3 - Chronic hypertension with
 eclampsia
 4 - Pre-eclampsia
 5 - Eclampsia
 6 - Unclassified
 9 - Unknown
17. Maternal Dystocia
 Item 26 51
 Code: 0 - None
 1 - CPD with contracted pelvis
 2 - CPD without contracted pelvis
 3 - Tumor blocking birth canal
 4 - Other maternal dystocia
 7 - Multiple maternal causes of dystocia
 8 - Unknown type of dystocia
 9 - Unknown if any dystocia
18. Fetal Dystocia
 Item 27 52
 Code: 0 - None
 1 - Hydrocephalus
 2 - Shoulder
 3 - Head
 4 - Persistent posterior, positional
 dystocia
 5 - Other fetal dystocia
 7 - Multiple fetal causes
 8 - Unknown type of dystocia
 9 - Unknown if dystocia

DEFINITION OF CODES (Continued)

FORM OB-3
Card 2334

FIELD

CARD
COLLAGE

19. Prolapsed Cord
Item 28
Code: 0 - None
1 - Occult
2 - Cord through cervical Os into vagina
3 - Cord through vaginal introitus
8 - Unknown degree
9 - Unknown if prolapse
20. Prolapse of Cord: Treatment
Item 28
Two-digit code for:
Immediate (col. 54)
Code: Blank - No prolapse
0 - None, no prolapse
1 - Replaced
2 - Protected with hand
4 - Knee-chest position
7 - Multiple
8 - Other
9 - Unknown
Ultimate (col. 55)
Code: Blank - No prolapse
0 - None, no prolapse
1 - Replaced
2 - Cesarean Section
4 - Version and extraction
8 - Other
9 - Unknown
21. Rupture of Uterus
Item 29
Code: 0 - None
1 - Spontaneous (before labor), previous C/S scar
2 - Spontaneous (before labor), previous operative scar
3 - Spontaneous (before labor), intact uterus
4 - Traumatic (before labor)
5 - Spontaneous (during labor), previous C/S scar
6 - Spontaneous (during labor), previous operative scar
7 - Spontaneous (during labor), intact uterus
8 - Traumatic (during labor)
9 - Unknown

53

54-55

56

DEFINITION OF CODES (Continued)

FORM OB-34
Card 2334

FIELD

CARD
COLUMN

22. Other Labor Complications
Item 30
Code: 0 - No
1 - Yes
9 - Unknown

57

DEFINITION OF CODES (Continued)

FORM CB-34
Rev. 12/64

FIELD

CARD COLUMNS

1. Card Number
Code: 3 1
2. Basic Data
Code: Same as in cols. 2-20 of Card 1 2-20
CESAREAN SECTION
3. Labor
Item 12
Code: 0 - Not in labor, questionable 21
1 - In labor
9 - Unknown
4. Indication
Item 13 22-37
Sixteen digit code for:
Previous Cesarean Section (col. 22)
Fetal distress (col. 23)
Cephalo-pelvic disproportion (col. 24)
Primigravida with breech (col. 25)
Elderly primigravida (col. 26)
Transverse lie (col. 27)
Prolapsed cord (col. 28)
Uterine Myomata (col. 29)
Previous pelvic or cervical repair (col. 30)
Diabetes (col. 31)
Toxemia (col. 32)
Abruptio placentae (col. 33)
Placenta previa (col. 34)
Failed forceps (col. 35)
Uterine dysfunction (col. 36)
Other (col. 37)

Code for each column:
0 - No
1 - Yes
9 - Unknown
5. Type
Item 14 38
Code: 1 - Low
2 - Classical

DEFINITION OF CODES (Continued)

FORM OB-34
Card 3334

FIELD

CARD
CODE/ITEM

5. Type (continued)
Code: 3 - Extraperitoneal (in combination
 with other types except code 4)
 4 - Cesarean hysterectomy
 8 - Other (includes low and classical
 combined)
 9 - Unknown

38

6. Delivery of Head
 Item 15
Code: 1 - Manual
 2 - Forceps, simple or easy
 3 - Forceps, snug fit
 4 - Forceps, difficult
 5 - Forceps, extremely difficult
 6 - Forceps, difficulty unknown
 7 - Forceps, unsuccessful attempt
 9 - Unknown

39

DEFINITION OF CODES (Continued)

FORM OB-34
Card 9324

<u>FIELD</u>		<u>CARD COLUMN</u>
1.	<u>Card Number</u> Code: 9	1
2.	<u>Basic Data</u> Code: Same as in columns 2-14 of Card 1	2-14
3.	<u>Not Coded Because</u> Code: 1 - Abortion 2 - Mole, Choriocarcinoma, ectopic pregnancy 3 - Died undelivered 4 - Delivered elsewhere 5 - Unusual delivery procedures, not subject to coding 9 - Other and unknown reasons	15
4.	<u>Edit Codes</u> Code: 0 - Not edited with other forms 1 - Edited with other forms 2 - Provisional coding of one or more items 3 - Data abstracted at FRB 9 - None of the above	16
5.	<u>Fetus Number</u> Code: 0 - Single birth 1 - 1st of twins 2 - 2nd of twins 6 - One of twins - order of birth not specified 7 - Remaining twins - order of birth not specified 8 - Triplets or more (for all infants in case) 9 - Unknown (includes abortion and fetus not specified as multiple)	17
6.	<u>Type of Eventual Delivery</u> Code: 0 - Abortion, Choriocarcinoma, Ectopic Pregnancy, died undelivered 1 - Vertex, undifferentiated	18

DEFINITION OF CODES (Continued)

FORM OB-34
Card 9334

FIELD

CARD
COLUMN

6. Type of Eventual Delivery (cont.) 18
Code: 2 - Breech
3 - Version and Extraction
4 - Cesarean Section
5 - Occiput
6 - Brow, face or chin (sinciput)
9 - Unknown
7. Unsuccessful Attempt to Deliver (Preceding Cesarean Section) 19
Code: 0 - None, not applicable
1 - Vertex, brow, face, occiput
2 - Breech
3 - Version and extraction
9 - Unknown
8. Labor 20
Code: 0 - None, questionable labor in Cesarean Section
1 - Labor
8 - Labor, but no information on duration of any stage
9 - Unknown if labor, not applicable

OB-34
Attachment A
Position Codes

011	OA
012	OT
013	OP
021	MA
030	Brow
031	Brow, anterior
050	Face
051	Face anterior
110	LO
111	LOA
112	LOT
113	LOP
121	LMA
122	LMT
123	LMP
132	L brow T
141	L Sinciput A
142	L Sinciput T
143	L Sinciput P
211	ROA
212	ROT
213	ROP
221	RMA
222	RMT
223	RMP
231	R brow A
232	R brow T
233	R brow P

[illegible]

CONSTRUCTION'S SUMMARY OF LABOR AND DELIVERY
FORM OB-34

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
TOTAL # ON -GSM										1/20 Gsm										13										BLANK																																																																					
INSTRUCTIONS FOR CERAMIC SECTION										HMSB W										HMSB W										HMSB W																																																																					
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OB-34 - 23

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OB-34

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08-34

OBSTETRICIAN'S SUMMARY OF LABOR AND DELIVERY
(For Form OB-34, Dated 1-59)

I. INSTRUCTIONS FOR OBSTETRICIAN

This summary includes observations by the obstetrician which only he, by virtue of his training, experience, and role in the delivery, could be expected to know. It will serve to augment the observations of the labor room and delivery room observer. In general, observations which may be determined from the observer's form have been omitted from this summary in order to concentrate on certain crucial evaluations by the obstetrician.

At the top of the first page, in the space titled "Physician in Charge", fill in the name of the senior obstetrician in charge of the delivery. In some cases, it may be the same obstetrician who does the delivery. In the next space, titled "Delivered by", fill in the name of the physician actually doing the delivery. In the next space, fill in your own name. Under "Date", fill in the month, day, and year that this summary is prepared. In the next space, give the title or position of the person preparing the summary, whether an intern, resident, project obstetrician, etc. This summary may be prepared by the person doing the delivery and should be, if he has had sufficient obstetrical experience to be able to evaluate the items called for. If he is lacking such experience, the summary should be filled in by the physician in charge after detailed conversation with the person actually doing the delivery, in all areas concerned.

II. SPECIFIC INSTRUCTIONS

Item #1. "Onset of Labor"

The actual time of onset of labor should be determined at this point in retrospect using all available information. This may or may not be the same as the onset of labor which was determined at the time the patient was admitted, and recorded on the "Admitting Record", OB-30. It is anticipated that this recording of the onset of labor will be the most accurate that can be determined. Give the date (month, day, and year) and the time, utilizing the twenty-four hour clock.

Item #2. "Duration of Labor"

Using the time of onset of labor given in Item #1, calculate in hours and minutes the duration of the first stage, second stage, and the third stage.

Item #3. "Give a Brief Narrative Summary of this Patient's Labor and Delivery, Noting Especially any Features which seem Unusual to You"

This summary is included because it is very important in a study of this type to give the obstetrician a chance to note all unusual features of the patient's labor and delivery. Some of these may not be brought out in the check type of summary provided on the following three pages.

Page 2

This is the summary of the actual delivery, and is obviously a very important area. Only the portion of this page need be completed which is

Page 2 (Con't)

concerned with the appropriate type of delivery.

If the baby delivered as a vertex, brow, or face, only the first half of the first column need be filled in.

If the baby delivered as a breech, only Items #7, #8, and #9 need be filled in. .

If a version and extraction were done, only Items #10 and #11 need be completed.

If a cesarean section were done, Items #12, #13, #14, and #15 should be completed.

VERTEX, BROW, OR FACE DELIVERY

Under "Position during first stage", be as specific as possible, such as ROP, LOA, etc. This should be your best estimate as to the position of the baby during the first stage. Occasionally, sterile pelvic examination at delivery will make it obvious that what was thought to be one position in the first stage actually was another. Therefore, this should be determined retrospectively after you have made the pelvic examination in the delivery room, and should be the position which you, considering all available information, think the baby occupied during the majority of the first stage. If, with all this information at hand you are still unable to be specific, simply indicate "vertex", "brow", or "face" in this space.

The next item is the baby's position in the delivery room before any attempt at delivery. Be sure you understand what is asked for in each of these two questions, and be as specific as possible. It should be possible in most instances to be able to give the baby's exact position immediately before delivery, such as LOP, etc.

In the next category, if the baby presents as a brow or face, indicate that it was not converted by checking the box labeled "Not converted". If it was converted, check the appropriate box and indicate specifically what it was converted to. This item refers to a conversion performed by the obstetrician and not to a spontaneous conversion by the baby. If the baby presented as a vertex, these two boxes should not be checked.

Item #5. "Rotation of Head"

This relates to the rotation of the head by the obstetrician. If you do not rotate the head, check the box labeled, "Head not rotated". If you do rotate the head, indicate specifically what you rotated it from, what you rotated it to, and if it was a manual rotation, check the box marked, "Manual rotation". If a forceps rotation is done, check the degree of

Item #5. "Rotation of Head" (Con't)

difficulty. This calls for an honest, sincere evaluation of the difficulty of obstetrical procedure, which is obviously difficult to quantitate, but it is felt that with some serious thought, these procedures can be divided on the basis of difficulty into four categories. The first is the rotation which can best be described as "Simple", or "Easy". The head is a loose fit in the pelvis and turns easily. The second may best be described as a "Snug fit", but the head is not really hard to turn. Check the box marked "Difficult rotation", if the rotation is more than just a snug fit, and it is really hard to turn the head. This is the type of situation in which one might say, "I wouldn't say that rotation was extremely difficult, but it wasn't easy, either. It was a hard rotation". The fourth category labeled "Extremely difficult rotation", should be reserved for those rotations in which one eventually gets the head rotated, but only with extreme difficulty, and in retrospect wonders whether it might have been preferable to deliver the baby in its original position.

Item #6. "Delivery of Head"

If the head delivered spontaneously, check whether it delivered under "controlled" conditions with gentle back pressure and guiding out of the head by the obstetrician, or delivered under "uncontrolled" conditions in which the physician plays no role of any kind in the delivery of the head. If either one of these two boxes is checked, denoting a spontaneous delivery, no further filling out of this particular portion of the delivery summary is required. If the head is delivered with forceps, check either "Elective" or "Indicated". The forceps delivery is "elective" if this type of delivery is merely elected by the obstetrician as a means of terminating the second stage of labor. The forceps is "indicated" if it is done for a specific obstetrical indication. If you check the box labeled "Indicated", be sure to give the indication for which the procedure was done.

TYPE OF FORCEPS DELIVERY

One of the boxes under "type of forceps delivery" must be checked if the head was delivered with forceps. If the forceps were applied when the head was vertex, the skull on the perineal floor and the sagittal suture in the AP diameter of the pelvis, check the box labeled "low forceps". If the forceps are applied when the skull is on the perineal floor, but the sagittal suture is not in the AP diameter of the pelvis, check the first box labeled "Mid-forceps". There has been a great deal of discussion as to whether it is proper to call this a mid-forceps delivery. However, it makes no difference whether this particular category is labeled "low forceps" or "mid-forceps", as long as the definition is constant. Thus, whether or not you agree that this is properly called a mid-forceps application, be sure to check this particular box when the condition called for in the definition is present; i.e., "the

TYPE OF FORCEPS DELIVERY (Con't)

skull is on the perineal floor but the sagittal suture is not in the AP diameter of the pelvis".

The next box, also labeled "mid-forceps" should be checked when the forceps are applied when the engagement of the BIP in the inlet has taken place, but the skull is not on the pelvic floor. This is the classic definition of mid-forceps and should cause no difficulty in interpretation.

The box labeled "high forceps" should be checked when the forceps are applied before the head is engaged.

If an unsuccessful attempt at any type of forceps delivery is made and this type of delivery is abandoned, check the box labeled "unsuccessful attempt at forceps delivery". This should also include situations where you find it impossible to successfully apply forceps.

DEGREE OF DIFFICULTY OF FORCEPS DELIVERY

This calls for an evaluation of the force necessary for delivery, and as in the case of forceps rotation, can only be determined by the obstetrician who is actually doing the delivery. If it can be considered a simple or easy delivery in which only a gentle pull of the forceps is required, the box labeled "Simple or easy delivery (gentle pull)" should be checked. This would be the case in many multiparas delivered by forceps where it is obvious that little or no effort is required to deliver the head. If the head is a snug fit in the pelvis, requiring a firm pull for delivery, this category should be checked. This type of delivery could not be called "difficult" and yet it does not fit into the "simple or easy" category. Possibly forceps deliveries of many primi-gravidas might well fall into this category. Skipping to the last item, "extremely difficult delivery", this category should be reserved for those extremely difficult deliveries in which a very hard pull is required, and one wonders in retrospect whether another method of delivery might not have been preferable. This situation, although rare, is one to which the obstetrician is occasionally pushed by the circumstances of the case. The box labeled "difficult delivery" should be reserved for all those cases which cannot be called extremely difficult and yet require more than just a firm pull resulting from a snug fit of the head. This is a difficult delivery requiring a hard pull on the forceps.

BREECH DELIVERYItem #7. "Type"

This refers to the type of breech encountered in the delivery room just prior to delivery, and before any attempt at delivery has been made. If

OBSTETRICIAN'S SUMMARY OF LABOR AND DELIVERY (Con't)

OB-34
1/59

BREECH DELIVERY (Con't)

The baby presents by the buttocks only with neither foot down, check the box labeled "frank breech". If one foot is down, check "single footling", and check "double footling" if both feet are down.

Item #8. "Type of Delivery of Body"

If the entire body up to the head is delivered by maternal forces only, with no help from you, check the box labeled "Spontaneous". If the body is partially extracted, that is, extruded to the region of the umbilicus by maternal forces and the remainder of the body extracted by you, check the box labeled "Partial extraction". If the body is totally extracted by you, beginning at a point before the body has been extruded to the umbilicus, regardless of whether or not this involves breaking up of the breech, check the box marked "Total extraction". The fourth box "Breech decomposition only" is reserved for those cases in which you "break up the breech" but make no further effort to deliver the body and allow the remainder of the delivery of the body to be accomplished by maternal forces only.

Item #9. "Delivery of Head"

This refers to delivery of the after-coming head. If the head delivered spontaneously, that is, without the aid of forceps, indicate by checking the appropriate box whether the delivery of the head was "controlled" or "uncontrolled". If you perform a Mauriceau-Smellie-Viet Maneuver on the after-coming head, or make gentle back pressure on the head so that it delivers slowly, this should be considered a controlled spontaneous delivery. The delivery of the head is uncontrolled if it is delivered by expulsive forces of the mother with no gentle easing out of the head by the obstetrician. If forceps were used to deliver the after-coming head, one of the small boxes under "Forceps to After-coming Head" must be checked. The philosophy for determining into which category the difficulty of delivery of the head belongs is in general the same as that described under vertex delivery. The first box should be checked if the delivery of the head is "simple or easy", requiring only a gentle pull. The box labeled "Snug fit", should be checked if a firm pull on the after-coming head is required. If it is necessary to exert extreme pull on the head to effect delivery so that the procedure could be called extremely difficult, the last box should be checked. All other deliveries of the head falling between extremely difficult and firm pull should fall into the category labeled "Difficult delivery" in which a hard pull is required.

VERSION AND EXTRACTION DELIVERY

The next two items, #10 and #11, refer to a version and extraction procedure.

February 1959
(For Forms in Use April 1961)

OBSTETRICIAN'S SUMMARY OF LABOR AND DELIVERY (Con't)

OB-34
1/59

Item #10. "Indication"

If a version and extraction is performed, check whether the indication is for "Second twin", "Prolapsed cord", "Transverse lie", or some other indication. If the box labeled "Other" is checked, the indication must be described.

Item #11. "Delivery of Head"

This item refers to delivery of the after-coming head after the version has been done and the body extracted. All comments on Item #4, "Delivery of Head" under BREECH DELIVERY apply to Item #11.

CESAREAN SECTION

The next four items, #12, #13, #14, and #15, apply to cesarean section.

Item #12

If the patient is in labor when the cesarean section is performed, check the box labeled "In labor". If the patient is not in labor, the box labeled "Not in labor" should be checked.

Item #13. "Indication for Cesarean Section"

Any condition which entered into your decision to perform a cesarean section should be checked. In many cases, a cesarean section will be performed for only one of these indications, but in those cases where more than one condition is present and actually enters into the decision to perform this surgery, more than one indication should be checked. In the event that the cesarean is performed for an indication which is not listed, check the box labeled "Other", and describe the indication.

Item #14. "Type of Cesarean Section"

If the incision in the uterus is "low", through the lower uterine segment, check the box labeled "Low" regardless of whether the incision in the uterus is transverse or vertical. If a "classical" cesarean is done involving a classical longitudinal incision in the upper fundus, check the box so labeled. If an "extra-peritoneal" cesarean is performed, check the appropriate box. If the uterus is removed following the cesarean, check the box labeled "Cesarean-Hysterectomy".

Item #15. "Delivery of Head"

If the head is delivered manually, check the box labeled "Manual". If forceps are used for delivery, attempt to evaluate the degree of difficulty just as with other delivery procedures. If the head is easily delivered with a gentle pull, check the first box. If the head fits snugly in the uterine incision requiring a firm pull, the second box labeled "Tong Fit" should be checked. If delivery of the head through the uterine incision

February 1959
(For Form in Use April 1961)

08-34
1/34

1754

Page 3

The next two items, #10 and #11, are the histology and the gross pathology. Whether vertex, frontal, parietal and occipital, or coronal. The observations are extremely important and time consuming. It is the obstetrician at the time of delivery, and the pathologist, who is obvious to the pathologist in the laboratory.

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OBSTETRICIAN'S SUMMARY OF LABOR AND DELIVERY (Cont'd)

OB-34
1/59

Item #17. "Placental Observation" (Cont'd)

described. In some cases the placenta may deliver shortly after the baby, accompanied by a quantity of old and fresh clot. This situation would then be described under "evidence".

The next two observations "Evidence of Placenta Previa" and "Evidence of Marginal Sinus Rupture", should be checked as either "None" or "Evidence". In the case of placenta previa, the evidence would possibly be an area of ragged appearing placenta with overlying clot immediately adjacent to the area of rupture of the membranes. In the case of marginal sinus rupture, it presumably would be old clot lying along the placental margin. In the case of placenta previa and marginal sinus rupture, the pathologist will be able to confirm your observations through laboratory study. In the case of premature placental separation, however, the obstetrician may be the only one who can make a diagnosis of this condition.

PROCEDURES AFFECTING THE PROGRESS OF LABOR

The remaining items grouped together under "Procedures Affecting the Progress of Labor" must be evaluated for all cases.

Item #1. "Induction of Labor"

If labor was not induced, check the first box labeled "Labor not induced". If induction of labor was attempted by you, by the patient, or by anyone else, check the box labeled "Successful" if the patient went into labor, and check the box labeled "Not successful" if the induction was not effective.

Item #2. "Method of Induction"

This should not be filled out if no attempt was made to induce labor. If an attempt was made, whether successful or unsuccessful, indicate whether the membranes were "Stripped", or "Not stripped", and whether the cervix was "Dilated" or "Not dilated", by checking the appropriate box.

The next category refers to the use of an oxytocic in the induction of labor. If pituitin or any other oxytocic was used in the induction or attempted induction, check the box labeled "Used". If no oxytocic was used, check the box labeled "Not used".

For the next category, "Ocular oil or quinine", the box labeled "Used" should be checked if either of these substances was used in an attempt to induce labor. If neither of these substances was used, check the box labeled "Not used". If any method of induction other than those above was used, check the box labeled "Other method: Used" and describe the method of induction. If no other method was used, check the box labeled, "Not used". If labor was induced, but it is not known how the induction

February 1959
(For Forms in Use April 1961)

OBSTETRICIAN'S SUMMARY OF LABOR AND DELIVERY (Con't)

OB-34
1/59

Item #19. "Method of Induction" (Con't)

was accomplished, check the box labeled "Unknown method of induction". It is assumed that in most cases, the method of induction will be known.

Item #20. "Artificial Rupture of Membranes"

If the membranes ruptured spontaneously, check the first box labeled "Membranes not artificially ruptured". In this case, no further evaluation of this item is necessary. If membranes were artificially ruptured, indicate why the artificial rupture was done by checking the appropriate box, whether for "Induction of labor" or for "Stimulation of labor before three centimeters dilatation", "Stimulation of labor after three centimeters dilatation", "Stimulation of labor in the second stage", or as a terminal procedure in the delivery room immediately prior to delivery. If the membranes were artificially ruptured on any other indication, check the box labeled, "Other indication" and describe the indication for rupture.

Item #21. "Oxytocic Use"

This refers to the use of an oxytocic while the baby is still inside the uterus, and not to the use of oxytocic during the third stage of labor or that given with delivery of the anterior shoulder. If an oxytocic was not used during the first or second stages of labor or for induction, check the box labeled "Oxytocic not used". If an oxytocic was used, check the areas in which it was used by checking the appropriate boxes. If it was used for the induction of labor, check the box labeled "Induction of labor". If it was used during the latent phase before three centimeters dilatation, check this box. If it was used during the active phase after three centimeters dilatation check the box labeled "Active phase". If it was used in the second stage of labor, check the box labeled "Second stage". Be sure to check all boxes for all phases or stages of labor in which an oxytocic was used. Thus, if pitocin was used to induce labor and was continued through the latent phase, through the active phase, and the second stage, or was used at any time in all of these areas, all four of these boxes would be checked. If an oxytocic was used for any other indication, check the box labeled "Other indication" and describe the indication for its use.

The next subject, "Unusual reaction to oxytocic", must be evaluated for all cases in which an oxytocic is used before delivery. If no unusual reaction of any kind is noted, check the first box labeled, "No unusual reaction". If a sustained continuous contraction is noted, check the box labeled "Production of sustained contraction", and following this record the approximate number of minutes that this contraction lasted. If a number of intermittent tetanic contractions were produced, check the next box, and following this indicate over how long a period of time the tetanic contractions continued. If any other unusual reaction to an oxytocic was noted, check this box and describe the reaction.

February, 1959
(For Forms in Use April 1961)

OBSTETRICIAN'S SUMMARY OF LABOR AND DELIVERY (Con't)

OB-34
1/59

SPECIAL PROCEDURES DURING LABOR

If no special procedures noted below were performed, check the first box labeled "No special procedures", and no further evaluation of this group is necessary. If any type of version maneuver was done, (not to include version and extraction which would be described under Items #10 and #11 in this summary), check this box and describe the type of version maneuver that was done. If the cervix was manually dilated, or if Dührssen's incisions were performed, check the appropriate box. If a Mcorhees Bag was used, this box must be checked. If the patient had any type of abdominal surgery during labor which was not accompanied by the cesarean procedure, this box must be checked and the abdominal surgical procedure described. The anesthesia record obviously must be completed. If any special procedure was performed which you consider important and which is not listed in the group of special procedures above, check the box labeled "Other special procedures" and describe the procedure performed.

Page 4

COMPLICATIONS DURING LABOR

Items #23 through #30 refer to various labor complications. In each case if this complication was not present, a check in the first box will serve to negate the entire item.

Item #23. "Bleeding During Labor"

If the patient had free bleeding during labor, an attempt should be made to imitate the clinical condition responsible. This inditement should be based on all known factors, including clinical course during labor, any examinations performed, placental observations, etc. If the bleeding is apparently due to either partial or complete premature separation of the placenta, check the appropriate box. If the diagnosis of placenta previa is made, check one of the four appropriate boxes under "Placenta Previa". If, in your opinion, the bleeding was due to a marginal sinus rupture, check this box and similarly in the case of vasa previa. If any other cause is responsible for bleeding, check the box labeled "Other cause" and specify the cause. If the patient had free bleeding during labor, the etiology of which cannot be determined, check the box labeled "Cause of bleeding unknown".

Item #24. "Uterine Dysfunction"

If no uterine dysfunction was observed, check the first box labeled "No uterine dysfunction". If uterine dysfunction was observed at any time during labor, check the appropriate box according to the definition listed. The latent phase of labor is from the onset of labor until three centimeters dilatation of the cervix has been reached. Lack of progress for

February 1959
(For Forms in Use April 1961)

Item #24. "Uterine Dysfunction" (Con't)

six or more hours during this phase should result in the box labeled "Latent phase" being checked. The active phase of labor is from three centimeters cervical dilatation to complete dilatation. Cessation of dilatation for three or more hours during this phase constitutes uterine dysfunction, active phase, and the box labeled "Active phase" should be checked. Second stage dysfunction should be checked if there is lack of progress in descent or rotation for two or more hours in association with poor uterine function during the second stage. If uterine dysfunction has been observed, but it is not known at which stage or phase of labor the dysfunction took place, check the box labeled "Unknown stage". If uterine dysfunction occurred at more than one phase or stage, check more than one box.

Item #25. "Toxemia"

If no toxemia was present, check the first box labeled "No toxemia". If toxemia or hypertension was noted at any time during the prenatal course or during labor, the appropriate box should be checked.

Item #26. "Maternal Dystocia"

If no maternal dystocia was observed, check the first box labeled "No maternal dystocia". If maternal dystocia is believed to be present, check the appropriate box. If there is cephalopelvic disproportion, and the maternal pelvis is considered contracted, check the first box. If there is cephalopelvic disproportion and the maternal pelvis appears to be clinically adequate, the second box should be checked. If there is a type of maternal tumor blocking the birth canal and causing dystocia, this box should be checked. If any other cause of maternal dystocia is present, check the box labeled "Other maternal dystocia" and describe.

Item #27. "Fetal Dystocia"

This refers to fetal causes for dystocia, other than abnormal position. If no fetal cause for dystocia is present, check the box labeled "No fetal dystocia". If a fetal cause for dystocia is present, check the appropriate box. If the baby has obvious hydrocephalus, check the first box. If the baby has broad shoulders which constitute a reason for difficult delivery or delay during delivery, this box should be checked. If the baby's head, for reasons other than hydrocephalus, was a cause for dystocia, this box should be checked. If any other cause for dystocia was present, check the box labeled "Other fetal dystocia" and specify the fetal cause.

Item #28. "Prolapsed Cord"

If no prolapsed cord was observed, check the first box labeled "No prolapsed cord". If a prolapsed cord was noted, check one of the first three boxes indicating whether it was "Occult prolapse", "Cord through

Item #28. "Prolapsed Cord" (Con't)

cervical os into vagina" or "Cord through vaginal introitus". For all cases of cord prolapse, indicate the treatment both immediate and ultimate. Under immediate treatment, if no treatment of the prolapsed cord was elected immediately, the first box should be checked. If the cord was replaced, check the second box. If the cord was protected with the hand, check the third box. The fourth box should be checked if the patient was placed in the knee-chest position. If any other form of treatment was used, check the box labeled "Other", and describe the immediate treatment. If more than one treatment was used immediately, more than one box should be checked.

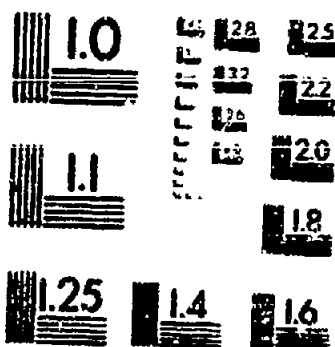
The next group listed under "Ultimate treatment", refers to the method of treatment which is ultimately selected. If no treatment for the cord prolapse is carried out (other than that specified as immediate treatment), the first box labeled "no treatment" should be checked, except that if replacement of the cord is the only treatment that is ever utilized, the second box labeled "replaced" should be checked. If a cesarean section is performed as ultimate treatment for the cord prolapse, this box labeled "Cesarean section" should be checked. If a version and extraction is done as the ultimate solution to the problem of prolapsed cord, this box should be checked. If any other treatment for prolapsed cord not listed above is elected, the box labeled "Other" should be checked and the treatment should be specified.

Item #29. "Rupture of Uterus"

If the uterus is not ruptured before or during labor, check the box labeled "Uterus not ruptured". Should uterine rupture occur, check whether before labor or during labor in the appropriate boxes, and check whether it was a spontaneous rupture or a previous cesarean scar, a spontaneous rupture of a previous operative scar, a spontaneous rupture of an intact uterus, or a traumatic rupture, by checking the appropriate boxes. If traumatic rupture is checked, the trauma responsible must be described.

Item #30. "Other Labor Complications"

If any other complications of labor were present which you consider important, check the box labeled "Other labor complications", and describe these complications. If, in your opinion, no other labor complications were present, check the box labeled "no other labor complications".



MICROCOPY RESOLUTION TEST CHART
NATIONAL BUREAU OF STANDARDS
STANDARD REFERENCE MATERIAL 1010A
(ANSI and ISO TEST CHART NO. 2)

CONTINUED ON NEXT FICHE