CPeTS, NICU, HRIF Database Changes

2021 Birth Year
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INTRODUCTION

We never stop working to improve care for California’s most vulnerable infants and children, and we know you don’t either. Every year, CPQCC staff, members, experts and volunteers review and reconsider the data elements being collected to be sure we’re staying on the cutting edge of neonatal quality improvement care. Elements are sometimes added, removed, or renamed and renumbered.

In addition, other groups often make changes to data elements or definitions that necessitate changes to CPQCC data collection:

- High Risk Infant Follow-up (HRIF)
- California Perinatal Transport Systems (CPeTS)
- California Children’s Services (CCS)
- Vermont Oxford Network (VON)

This document describes the changes that have been made to the 2021 NICU, CPeTS, and HRIF data sets.

CCS – No Changes for 2021

We are happy to report that there are no changes for 2021 to:

- CCS Supplemental Form and Report

CCS-approved NICUs are required to report total birth weight and gestational age specific NICU activity, morbidity and mortality through CPQCC.

CPeTS requires NICUs to systematically review and report on neonatal transports in California.

It is also the responsibility of the discharging to home CCS NICU/hospital, or the last CCS NICU/Hospital providing care, to make referrals to the HRIF Program.

These mandates require membership in CPQCC and reporting the required elements using the CPQCC/VON, the CPQCC/CPeTS, CPQCC/HRIF, and the CPQCC/CCS data formats. Compliance with the data set changes is required for a CCS-approved NICU to meet this mandate.
TRANSPORT DATA SET (TRS)

Time Sequence (tab 3, items C.10 - C.19):

**Item C.21 Method of Cooling**

**Change:** Remove choice “Selective Head”

**2021 Updated CPeTS Definition:**

Select Passive
Select Selective Head
Select Whole Body
Select Other
Select Unknown

Infant Conditions/TRIPS (tab 4, items C.20 - C.29):

**C.28 Blood Pressure**

**Change:**
Add option “Not Done” to C.28 a-c Blood Pressure for Referral, Initial Transport, NICU Admit.

- Systolic Blood Pressure [T_BPSYS1-T_BPSYS3]
- Diastolic Blood Pressure [T_BPDIA1-T_BPDIA3]
- Mean Blood Pressure [T_BPMEAN1-T_BPMEAN3]

**2021 Updated CPeTS Definition:**

Check Not Done if the blood pressure was not recorded.
NICU ADMISSION DISCHARGE (A/D) AND DELIVERY ROOM DEATH (DRD) FORM

Delivery Room and the First Hour after Birth (tab 3, items 19-23):

Item 19 a-e. Delayed Cord Clamping [DCC]

Change:
- DRD form: remove Delayed Cord Clamping items 19 a-e.

Updated 2021 Definition:
No update to the definition.

Post-Delivery Diagnoses and Interventions - Respiratory (tab 4, items 24-39):

Item 24d. Cooling for HIE Method [ACOOLINGMETHOD]

Change: Remove choice “Selective head”

Updated 2021 Definition:
Select Passive
Select Selective Head
Select Whole Body
Select Other
Select Unknown

Item 38 a-f. Respiratory Support at 36 weeks

Change: Changed the definition for the following respiratory support at 36 weeks items. It will be updated from “at any time” to “at any time after leaving the delivery room/initial resuscitation area”.

Oxygen at 36 weeks
Conventional Vent at 36 weeks
High Frequency vent at 36 weeks
Hi Flow Nasal Cannula at 36 weeks
Nasal Vent at 36 weeks
Nasal CPAP at 36 weeks
Updated 2021 Definition:

Example:
Item 38a. Supplemental Oxygen on the Day of Week 36 Adjusted Gestational Age [OX36]

Select Continuous if the infant was hospitalized and received 4 or more hours of continuous supplemental oxygen at any time after leaving the delivery room/initial resuscitation area on the date of week 36 adjusted gestational age. This does not include "blow-by" oxygen.

Select Intermittent if the infant was hospitalized and received any supplemental oxygen at any time after leaving the delivery room/initial resuscitation area on the date of week 36, but did not receive continuous oxygen during that day. Examples include oxygen given only with feeds or occasional apneic spells. "Blow-by" oxygen qualifies as intermittent supplemental oxygen.

Select None if the infant was hospitalized on the date of week 36 and did not receive supplemental oxygen at any time after leaving the delivery room/initial resuscitation area on that date.

Select Not Applicable if a) the infant's gestational age in rounded weeks is greater than 36 weeks; OR b) the infant is discharged home or dies prior to the Date of Week 36; OR c) the infant is transported from your center to another hospital prior to the Date of Week 36 and either is NOT readmitted to your center before discharge home, death or first birthday, or is transported a second time before the Date of Week 36.

Post-Delivery Diagnoses and Interventions - Neurological (tab 7, items 48-51):

Item 51. Hypoxic Ischemic Encephalopathy [HIE]

Change: Lower GA to 35 weeks to capture infants who are 35 weeks or greater.

Updated 2021 Definition:

Select Not Applicable if the infant has a gestational age at birth of less than 35 weeks and your center does not participate in the VON expanded data collection. If your center participates in the VON expanded data collection, this item applies to all NICU admissions starting from 2017.

HRIF DATA SET

HRIF Referral/ Registration (RR) form (Program Registration Information)

Infant enrolled in a CCS Clinic other than the HRIF Program

Change: Remove “Infant enrolled in a CCS Clinic other than the HRIF Program” from the Referral Registration and Standard Visit Forms.
Updated 2021 Definition:

No update to the definition.

**Infant’s Ethnicity**

**Change:** Remove “Unknown” and “Declined” options from Infant’s Ethnicity on the Referral Registration Form.

**Updated 2021 Definition:**

Select Hispanic/Latino
Select Non-Hispanic
Select Unknown
Select Declined

**Infant’s Race**

**Change:** Remove “Unknown” and “Declined” options from Infant’s Race on the Referral Registration Form.

**Updated 2021 Definition:**

Select Single if the infant/child's race is reported as a single race.
Select Multiracial if the infant/child's parent identifies with more than one race category.
Select the race that appears first in the hierarchy:

- Black or African American
- Asian
- Native Hawaiian or Other Pacific Islander
- American (North, South or Central)
- Indian or Alaskan Native
- White
- Other
- Unknown
- Declined

**Primary Language Spoken at Home**

**Change:** Remove “Unknown” and “Declined” options from “Primary Language Spoken at Home” on the Referral Registration Form.

**Updated 2021 Definition:**
Select only one primary language spoken at the home as reported by the mother or primary caregiver:

- English
- Spanish
- Arabic
- Cantonese
- Farsi/Persian
- Hmong/Miao
- Mandarin
- Korean
- Tagalog
- Russian
- Vietnamese
- Other
- Unknown
- Declined

**HRIF Standard Visit (SV) form (Medical Services Review)**

**Change:** Add new medical service “Allergy/Immunology”

**Updated 2021 Definition:**

Is the Child Receiving or Being Referred for Medical Services?

- Complete the following if the child has received or has been referred to medical services prior to the current evaluation/HRIF assessment:
- Select Yes, if the infant/child is being referred for Medical Services. Select the Medical Services below.
  - Allergy/Immunology
  - Audiology
  - Cardiology
  - Craniofacial
  - Endocrinology
  - Gastroenterology
  - Hematology/Oncology
  - Metabolic/Genetics
  - Nephrology
  - Neurology
  - Neurosurgery
  - Ophthalmology
  - Orthopedic
Prepopulate Data Fields

Change:

Carry over the following collected information from the RR form to SV form:

- Insurance
- Primary Caregiver
- Education of Primary Caregiver
- Caregiver Employment

Carry over the following collected information from SV to subsequent SV forms:

- Insurance
- Living Arrangements of Child
- Education of Primary Caregiver
- Caregiver Employment
- Routine Childcare

Updated 2021 Definition:

No update to the definition.