# Electronic Data Submission (EDS)

2024 Member Instructions





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# What is Electronic Data Submission (EDS)?

Electronic Data Submission (EDS) is an optional method for submitting NICU data to CPQCC. Instead of entering infant records one at a time through the NICU Data website, centers can submit many records at once in a comma separated values (.csv or. txt) file, saving time and effort. Extracting the data from the center's electronic medical record (EMR) removes the requirement for abstracting that information out by hand, which makes the process much more efficient.

#### **Caveats and Considerations**

Centers that elect to participate in EDS are those that have set up mechanisms to extract data from their EMR into electronic files in the required format. This format's specifications are in this manual.

Each participating center must build a system that is compatible with their own resources. It is very important that the system produces output files that meet CPQCC requirements for both data submissions and for documentation of the eligibility and enrollment status of individual infants.

An experienced programmer or software developer is an integral part of the data collection team for a center interested in participating in EDS. Only centers with programming staff available for building and testing data extraction procedures are encouraged to participate in EDS.

### How to Participate in EDS

Centers who are interested in participating in EDS must read these instructions and assess their resources. If your center has the appropriate resources (at minimum, a programmer or developer available to build a system capable of producing CPQCC-standard files based on data extracted from the EMR), we will be happy to facilitate your participation. Centers will not be able to submit EDS files unless they have been approved by the Data Center team. Please submit a <u>Help</u> <u>Desk</u> ticket to discuss your center's capacities and to make specific plans for submitting 2024 data via EDS.

#### **Important Terms**

#### **Files (or Data Files)**

Files must be sent as comma-separated value (.csv or .txt) text files only.

#### **File Names**

Data files submitted to CPQCC must follow the specific file naming system explained below, or the files will be rejected.

Filenames must follow this pattern: HnnnnEDSxxxx where:



- "nnnn" represents the four-digit center ID number with leading zero(s). If you do not know your center ID number, please submit a <u>Help Desk Ticket</u>.
- "xxxx" represents a four-digit sequential file number.

The file number should be sequentially numbered by the member's system to uniquely identify each electronic file submitted to CPQCC (optimally with no gaps in sequence). Members can find the last file submitted by reviewing the EDS Activity report. A file is not processed if the file number was previously used. If a file's file numbers is not in sequence the user will receive a warning, but the file can still be uploaded.

As an example, the first EDS file submitted by Center 999 would be called H0999EDS0001, the second H0999EDS0002, etc.

**NOTE:** Each file must contain records from **one** birth year **only**. For example, you cannot include an infant born in 2023 in a file with infants born in 2024.

#### **Fields**

A <u>field</u> contains a single piece of information about each unique episode of care being submitted to the NICU database. The new 2024 EDS Specifications for the NICU list the fields required for electronic submission of data beginning in 2024. The 2024 EDS Specifications specify the ranges and coding rules for each field.

#### **File Contents**

The first row of data must contain the field names, in correct order, for every file submitted. The field names and their order are listed in the new <u>2024 EDS Specifications</u>. A text file submission is a "flat file" named either **HnnnEDSxxxx.csv or HnnnEDSxxxx.txt**.

When submitting a file, it must contain all of the fields as listed in the EDS Specifications. The following fields should not be empty to pass the initial test for EDS submission: FILENUM, FILEDATE, DELETED, HOSPNO, ID, and BYEAR.

We recommend that EDS participants submit at a minimum the variables needed to save an online data entry: Birth Year, Infant ID, Birth Weight, Birth Date, Sex, Delivery Room Death, Acute Transport In.

If the "Delivery Room Death" and "Acute Transport In" indicator fields are are not included in the EDS file the record will be considered an A/D record without CPeTS form.

**NOTE**: EDS file users MUST submit all date/time variables as string variable values enclosed in double quotes. In other words, in a comma separated ascii file, a date variable must be submitted as "12/12/2024{space}12:00" instead of 12/12/2024{space}12:00.

#### **Episode of Care**

An episode of care is defined as the entire period of care before an infant is discharged home. This can include multiple stays in one NICU, if the infant is transferred from the NICU to another service within the hospital and subsequently readmitted to the NICU, or multiple stays



at other NICUs, if the infant is transported from another hospital's NICU, as long as the infant is not discharged home at any point. Readmission after discharge home starts another episode of care and thus a new NICU record for the infant.

#### Records

Each unique episode of care constitutes a record. A record is made up of its component fields (for definition of **field**, see <u>above</u>). For more on eligibility and episodes of care, please see <u>Is That</u> <u>Baby Eligible?</u>

#### **New Record**

A record that is sent to CPQCC for the first time.

#### **Updated Record**

A record which has been sent to CPQCC previously.

#### **Deleted Record**

An updated record that is submitted with the "deleted" field set to 1. ID numbers for submitted records that have the "deleted" field set to 1 cannot be reused for another infant's episode of care.

#### Values for "Record Status" in NICU Database

Once you have uploaded a 2024 EDS file via the NICU Data website, you can examine the uploaded records by selecting 2024 from the year drop-down in the left menu bar and clicking on **Edit Data**. The "status" field (header **STTS**) shows the status of each individual record as follows:

#### Complete Record (CMPLT, CMPLT+, CMPLT-)

A processed record in which there are no blank fields. If a NICU participates in optional data collections, CMPLT is suffixed by a + / - if all optional data elements have been submitted / not submitted.

#### Pending Record (PND)

An incomplete record with blank fields, but no errors. The column PND shows the number of pending fields.

#### Still-in-house (SIH)

A record that is complete with the exception of items that can only be provided when the infant is discharged, in other words, the episode of care relevant for the NICU Data collection has not yet ended.



#### Error (ERRSPND)

A record with some blank fields and with one or more inconsistencies. The number of inconsistencies or errors is shown in the ERR column specific to each form. The errors can be reviewed using the error report.

#### Error (ERRSSIH)

A record with one or more inconsistencies related to SIH fields, i.e., fields that can only be provided when the infant is discharged and the episode of care has ended.

#### Error (ERRS)

A record without blank fields, but with one or more inconsistenies. For instance, if based on the CPeTS form the infant was on nasal CPAP at referral, however Nasal CPAP or DR CPAP are not answered Yes.

#### **Deleted (DEL)**

A record that has been marked as deleted

### **Summary of EDS Procedures for 2024**

#### What to Expect

It is important to closely follow the rules about the EDS file name and its structure. If your NICU is approved for EDS submissions, the EDS intake process is facilitated throught he NICU data website, in other words EDS files can be uploaded and are immediately processed upon upload.

There is no restriction to the number of EDS files that can be uploaded per day. 2024 EDS files are accepted through the end of close-out of the 2024 birth year in June 2025.

#### Submitting EDS Files for the 2024 Birth Year

- 1. Prepare your EDS file according to the specifications outlined above regarding file name and file structure.
- 2. Log in to the NICU Data site at <u>www.cpqccdata.org</u>.
- 3. Select Upload EDS File in the left sidebar.
- 4. Follow the menu to upload your EDS file.
  - In the first upload step, the intake system verifies that your EDS file is named correctly and follows the required specifications.
  - If you EDS file passes this check, you may complete the upload using the menu returned. This second step processes the records in your EDS file and adds them to the NICU Data data files.
  - If you EDS file does not pass this check, you will receive a message explaining the problem. For example: If the length of the filename including the extension and

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period is not equal to 16, the following error message will appear: "Error: The length of the filename including the extension and period is not equal to 16. Unable to process EDS file. Please contact CPQCC Support if you have questions." You have to address the problem(s) and then retry uploading your file.

- 5. After the records in your EDS file are processed, a summary page is displayed describing the content of the upload including any record rejections. Please review this summary carefully.
- 6. To verify that your records were uploaded as intended, review the records submitted for your NICU by clicking on Edit Data in the left sidebar. Sort your list by date of last update by clicking the header "Last Updated." All the records added from your EDS file should have the same date of last update. The STTS (record status) column can be used to identify records with errors and incomplete records.
- 7. To locate uploaded records with errors, click on Data Reports in the left sidebar and select Error Report to obtain a list of fields in error. You can either fix these errors using the web interface, or you can include these records in another EDS file and correct them with another EDS upload.

**NOTE:** There is no limit to the number of files that can be submitted per day.

# Updating Records for Infants born in 2023 who were Still In-House Infants on the 2023 Close-Out Date

Records for infants born in 2023 who were SIH at the time of the 2023 close-out in June 2024 <u>MUST</u> be updated through the NICU Data site at <u>www.cpqccdata.org</u>. 2023 EDS files are no longer accepted after a birth year's close-out process has completed.

#### **Common File Errors**

Here are some of the more common errors that you may see, and how to correct them.

- 1. File name does not begin with the letter H. Make sure the file name fits the specifications in the <u>File Name</u> section.
- 2. File name does not have EDS in positions 6 through 8. The file must be named in the format "H*nnn*EDS*xxxx*", where *nnnn* is your center number and *xxxx* is the file number in order of submission. For details, please see the **File Name** section.
- File does not have the .zip or .csv extension. If you are uploading zip files, make sure your file is properly compressed and named before submitting.
- 4. Center is not approved for EDS submission based on the center ID number in the file name. Before starting your first EDS submission, make sure your center is approved for EDS submissions.
- 5. The EDS password is incorrect. This error can only occur if you choose to submit a zipped and encrypted EDS file. Review your NICU's EDS password on the NICU Settings page and ensure that this password is used to encrypt your EDS file. Note that starting with birth year 2022, it is acceptable to upload a zip file without a password.

- 6. If you are uploading a zip file, either the zip file could not be unzipped successfully (the EDS password is incorrect), or the file or files in the zip archive are not named correctly (see the **File Name** section).
- 7. File number previously used. This means that the file number has already been used; please select the next available number in sequence after the last one submitted. File numbers already used can be viewed as follows:
  - a. Log into NICU Data
  - b. Select birth year 2024
  - c. Select **Data Reports** from the navigation pane.
  - d. Select EDS Activity
- 8. If you are uploading a zip archive, the file in the archive does not have the correct extension (.txt or .csv).

Example: The .zip file could be unzipped, but the file it contained did not have the correct extension. Check to be sure that the file is of the correct type and then correct the extension before re-zipping) and uploading to the NICU data site.

9. The header line of your csv or txt file does not match the header required for 2024. Two headers are acceptable for birth year 2024, one without optional fields, and one with optional fields.

To remedy this issue, compare the header (first) line in your EDS csv or txt file with the header lines in the EDS skeletons available on the cpqcc.org website.

- 10. The submitted file does not have the same file number and center number for all records.
- The length of the file name, including the extension and period, does not equal 16. See the <u>File Name</u> section for instructions on how to name data files, and correct the file name.
- 12. If you are uploading a zip file, the zip file is corrupted, and the file cannot be properly unzipped and read. You may need to recreate the zip archive again. Use the test archive feature of your archiving software to ensure that the archive is not corrupt.
- 13. The BYEAR is not 2024 for all records.

You might also encounter the message that the file number is not in sequence. Note that this message is a warning, the EDS upload is still allowed. If an EDS file has an out-of-sequence number, this may mean that one or more files were not uploaded when they should have been. Please check to make sure all files were uploaded properly as intended.

## **EDS Specification Sections**

CPQCC's NICU Database includes delivery room death (DRD), admission/discharge (A/D) and acute transport-in (CPeTS) data.

The 2024 EDS file is divided into three sections:

- 1. Tracking fields section (described below)
- 2. CPeTS section (described in the 2024 CPQCC EDS Specifications)
- 3. DRD and A/D section (described in the 2024 CPQCC EDS Specifications)
- 4. Optional fields section (described in the 2024 CPQCC EDS Specifications)

#### **Tracking Fields**



The following fields are used for file control. Although – with the exception of the DELETED and BYEAR fields – these fields are not included on the CPeTS, DRD or A/D databases and the on-line data collection forms, these fields are important for EDS file tracking.

#### File Number (FILENUM)

Files must be named in the format "HxxxxEDSnnnn.csv" or "HxxxxEDSnnnn.txt" and the **FILENUM** field must be the same as the file number nnnn.

A file is not processed if the file number was previously used.

#### File Date (FILEDATE)

The FILEDATE field contains the date that the file was generated on your system.

Every record in a file must have the same file date (mm/dd/yyyy). An EDS file is rejected otherwise.

#### **Deleted Records (DELETED)**

There are situations when an infant's record must be removed from the database. For example, a user may discover that a reported infant is not eligible. For these situations, such a record should have the **DELETED** field set to 1.

For all other records, the **DELETED** field should be left blank.

Records with the DELETED field set to 1 remain in the NICU Database, and their record ID cannot be re-used.

**NOTE**: Records deleted before ever being exported to CPQCC may be removed from the center's computer system entirely and the record ID may be re-used.

#### Application Used to Submit Records (APPLICATION)

This optional field is used to specify the name of the application your center uses to generate the EDS file. Although not required, the application name can be useful if assistance is needed from the Data Center team to resolve file submission problems.

#### **Application Version (VERSION)**

This optional field allows a user to report the version number of the application used to generate EDS files. Although not required, the application version information can be useful if assistance is needed from the Data Center team to resolve file submission problems.

#### Birth Year (BYEAR)

This field must contain the infant's birth year. All birth years in the file must be the same, because the file's format may change from year to year.

#### Acute Transport-In Eligibility (ACUTETRS)



This field must contain a "1" if the infant was acutely transported **into** your NICU and qualifies for a CPeTS form, and a "0" if they were not. If an infant was acutely transported in, all CPeTS data fields must be filled in, otherwise they may be left blank.

**NOTE:** Not all acute transports require a CPeTs form, for only the first transport.

#### **Record Keys**

#### Center ID (HOSPNO)

This field must contain the center's network ID number. It must match the network ID number in the file name ("*xxxx*" as explained previously). All records must contain the same center network ID.

#### Record ID (ID)

Each infant record must include a unique Record Identification Number (ID). No two infants at a center may have the same ID. A record ID is the unique identifier for an infant within one NICU during a single <u>episode of care</u>.

#### **Records for Infants Who Are Not Transported-Out**

If an infant does not transport-out from your center to another hospital, all fields on the Transport/Post-Transport Form should be submitted with the appropriate N/A codes.

#### **Delivery Room Death Records**

For infants who die in the delivery room, per EDS specifications, the fields that appear on the Admission/Discharge Form and CPeTS Form, but which do not appear on the Delivery Room Death Form, must be coded using the appropriate not applicable N/A code.

#### **Optional Fields**

Starting with 2024, it is possible to include the optional Delivery Room Oxygen QI items (2), FCC pilot items (4) and the Total Duration of all Episodes of Intubated Assisted Ventilation into your EDS file.

If you include any optional fields into your EDS file, you must include all optional fields in your file, just leave the optional fields that you do not use empty. You must also use the header line that includes the optional items.



# Appendices

Appendix A. 2024 CPQCC EDS Specifications

#### Appendix A. 2024 CPQCC EDS Specifications 2024EDS Specifications for the combined NICU and CPeTS Databases (Version 23)

#### Summary of FIELDS for 2024

2024	I. Tracking Fields Field Name	Description	Field	Range of Possible	Coding Rules
Item			Туре	Values	
None	FILENUM	File Submission Number	Integer	{1 - 9999}	Sequentially assigned file number, incremented with each submission
None	FILEDATE	File Submission Date	Date	01/01/2024- 07/06/2024	Date on which data is exported to file for submission to CPQCC. Valid date, format should be mm/dd/yyyy
None	DELETED	Record deleted	Integer	{BLANK, 1}	BLANK=No, 1=Yes record deleted (but unique network ID number preserved)
None	APPLICATION	Application Submitting the Data File	Char25		Up to 25 alphanumeric characters.
None	VERSION	Version of Application Submitting Data File	Char15		Up to 15 alphanumeric characters.
None	HOSPNO	Center ID Number	Integer		Center ID Number as assigned by CPQCC
None	ID	Network ID Number	Integer	{00001 - 99998}	Each ID number is to be sequentially assigned by hospital
None	BYEAR	Birth Year	Integer	{2024}	For infants born in 2024, EDS Specifications for 2024 must be used. Submit EDS files for 2022 separately from EDS files for 2024. 2023 EDS files are accepted through the end of close-out. After close-out, they are no longer accepted. If you need to update any 2023 records after closeout, use cpqccdata.org to edit these records.
None	ACUTETRS	Acute Transport-In Eligibility	Integer	{0, 1}	0=No, 1=Yes. Each record is tracked for eligibility into the CPeTS database. If [ACUTETRS]=1, then all variables starting with [T_*] must be filled out; otherwise if [ACUTETRS]=0, then CPeTS section should be Not Applicable. This field MUST be completed, otherwise the record will be rejected.

Section I	Section II. 2024 EDS Specifications for the CPeTS Database						
NOTE: N	EW & REVISED FIELDS FOR	R 2024 ARE HIGHLIGHTED in Ye					
PATIENT DIAGNOSIS							
Transpor 2024	Field Name	Description	Field	Range of Possible	Coding Rules		
Item			Туре	Values	county kules		
None	T_SPECIALSITUATION	Transport Special Situation	Char4	{0000}	0000=N/A, Record does NOT require a Transport Special Situation Override. Make sure to code this field as a character field, so the zeros are preserved.		
				{1000}	1000=Situation A. Delivery Room Attendance: 7777=N/A TRIP Referral section first column Items C.20 through C.29 (T_COOLING1, T_COOLINGMETHOD1, T_RESP1, T_RESPRATE1, T_SA021, T_RESPSTATUS1, T_FIO21, T_HEARTRATE1, T_BPSYS1, T_BPDIA1, T_BPMEAN1, T_PRESSOR1, T_TEMP1, T_VENTMODE1). NOTE: Situation A CANNOT occur with any of the other three Special Situations.		
				{0100, 0110, 0101, 0111}	0100= Situation B.Transport by Referring Center (Self-Transport): 7777=N/A T_TTDEPDATETIME, T_EVALINITDATETIME, TRIP Referral section second column Items C.20 through C.29 (T_COOLING2, T_COOLINGMETHOD2, T_RESP2, T_RESPRATE2, T_SA022, T_RESPSTATUS2, T_FIO22, T_HEARTRATE2, T_BPSYS2, T_BPDIA2, T_BPMEAN2, T_PRESSOR2, T_TEMP2, T_VENTMODE2), T_TTDEPDATETIME, T_TTARRDATETIME, and T_TEAMBASE must equal 3=Referring Hospital; 0110= Situation B and Situation C; 0101= Situation B and Situation D; 0111= Situation B, Situation C, and Situation D.		

	{0010, 0110, 0011, 0111}	0010= Situation C. Transport from Emergency Department or other non- perinatal setting: N/A=T_MADMDATETIME, T_CMAL, T_BDC1 to T_BDC5, T_ASTERDATETIME; T_BDATETIME= Must submit Date of Birth, then enter N/A=Time of Birth ONLY, T_BWGT= enter current weight (if current weight is missing, enter 9999); 0110= Situation B and Situation C; 0011= Situation C and Situation D; 0111= Situation B, Situation C, and Situation D.
	{0001, 0101, 0011, 0111}	0001= Situation D. Safe Surrender: N/A=T_MADMDATETIME, T_CMAL, T_BDC1 to T_BDC5,T_ASTERDATETIME, DRSURF, T_SURFX; T_BDATETIME= Must submit Date of Birth, then enter N/A=Time of Birth ONLY, T_BWGT= enter current weight (if current weight is missing, enter 9999); BIRTHLOCATION= Must equal 900099=Safe Surrender; 0101= Situation B and Situation D; 0011= Situation C and Situation D; 0111= Situation B, Situation C, and Situation D.

C.1	T_TYPE	Transport Type	Integer	{1 - 5, 7}	1=Requested Delivery Attendance, 2= Emergent, 3=Scheduled Neonatal, 4=Other (Describe), 5=Urgent, 7=N/A (only if [ACUTETRS]=0 OR [DELDIE]=1). NOTE: If [T_TYPE]=1, then C.20-C.29=7 or N/A and special situation A = 1000 should be coded.	
C.1	T_TYPEDESC	Type Describe	Char50	{Description, 77}	Up to 50 alphanumeric characters; 77=N/A (only if [ACUTETRS]=0 OR [DELDIE]=1 or [T_TYPE] = {1,2,3,5})	
Indication	for Transport					
NOTE: A baby that is transported into your hospital for reasons of Staffing/Census Issues (Bed availability), Insurance restrictions, Growth/Discharge Planning, Chronic, or Hospice Care is NOT eligible, and you do not need to fill out this form.						
C.2	T_TRANSCODE	Indication for Transport	Integer	{2, 3, 7}	(Only if [ACUTETRS]=1): 2=Medical DX/RX Services, 3=Surgery; 7=N/A (only if [ACUTETRS]=0 OR [DELDIE]=1)	
<b>Referral D</b>	ate and Time (Time Seque	ence CPeTS)	-			
NOTE: This is the same as Referral Date/Time in Item C.14. Submit this variable only once using this field.						

C.14	T_REFDATETIME	Date/Time of Referral (and Referring	Char16	{01 - 12}/{01 -	16 alphanumeric characters using forward
		Hospital Evaluation)		31}/{2024}{space}{	slashes for the date, a {space} between
				00}:{00};	date and time, and a colon between hour
				{07}/{07}/{1907}{s	and minutes=mm/dd/yyyy{space}hh:mm;
				pace}{07}:{07};	07/07/1907 07:07=N/A (only if
				{09}/{09}/{1909}{s	[ACUTETRS]=0 OR [DELDIE]=1);
				pace}{09}:{09}	09/09/1909 09:09=Unknown. Note: Text
					file submittors MUST submit all Date/Time
					variables as string variable values enclosed
					in quotes. In other words in a comma
					separated ASCII file, a Date/Time variable
					must be submitted as
					"12/12/2024{space}12:00" instead of
					12/12/2024{space}12:00.
				<u> </u>	
Date/Tim	ne of Acceptance (Time Seq	uence CPeTS)			

C.15	T_ACCDATETIME	Date/Time of Acceptance	Char16	<pre>{01 - 12}/{01 - 31}/{2024}{space}{ 00}:{00}; {07}/{07}/{1907}{s pace}{07}:{07}; {09}/{09}/{1909}{s pace}{09}:{09}</pre>	16 alphanumeric characters using forward slashes for the date, a {space} between date and time, and a colon between hour and minutes=mm/dd/yyyy{space}hh:mm; 07/07/1907 07:07=N/A (only if [ACUTETRS]=0 OR [DELDIE]=1); 09/09/1909 09:09=Unknown. NOTE: Text file submittors MUST submit all Date/Time variables as string variable values enclosed in quotes. In other words in a comma separated ASCII file, a Date/Time variable must be submitted as "12/12/2024{space}12:00" instead of 12/12/2024{space}12:00.
		HISTORY AND	DEMOGRA	PHICS	
Date & T	ime of Maternal Admissi				
C.10	T_MADMDATETIME	Date/Time of Mother's Admission to Perinatal Unit or L&D	Char16	ce}{00}:{00};	16 alphanumeric characters using forward slashes for the date, a {space} between date and time, and a colon between hour and minutes=mm/dd/yyyy{space}hh:mm; 07/07/1907 07:07=N/A (only if [ACUTETRS]=0 OR [DELDIE]=1); 09/09/1909 09:09=Unknown. NOTE: Text file submittors MUST submit all Date/Time variables as string variable values enclosed in quotes. In other words in a comma separated ASCII file, a Date/Time variable must be submitted as "12/12/2024{space}12:00" instead of 12/12/2024{space}12:00.
C.12	T_MFTRANSCON	Maternal and Fetal Transport Consideration	Integer	{1, 2, 3, 4, 5, 7, 9}	1= Advanced Dilation/ Labor, 2=Bleeding, 3= Mother Medically Unstable, 4=Non- reassuring Fetal Status, 5= Not Considered, 7= N/A (only if [GAWEEKS] >32 OR [DELDIE] =1, OR [T_SPECIALSITUATION]= 0001, 0010 OR [T_TYPE]=3, 4, 7 OR [T_MADMDATETIME] <24 hours before [T_BDATETIME], 9= Unknown

<b>Birth Weig</b>						
-	$f$ [ACUTETRS]=1 AND [T_BWGT] is not equal to 9999, then C.3 [T_BWGT] must = [BWGT] in the CPQCC Section. Submit this variable once by only entering the data in the CPQCC Section.					
	ate of gestational age					
If [ACUTETI the CPQCC		GADAYS] must = [GAWEEKS, GADAYS]	in the CP	QCC Section. Submit 1	his variable once by only entering the data in	
Infant Sex						
If [ACUTETI	RS]=1, then C.5 [SEX] must	= [SEX] in the CPQCC Section. Submit	this variat	ble once by only enteri	ng the data in the CPQCC Section.	
Congenita	l Anomalies					
	T_CMAL	Major congenital anomaly Diagnosed Prenatally	Integer	{0, 1, 7, 9}	0=No, 1=Yes, 7=N/A (only if [ACUTETRS]=0 OR [DELDIE]=1), 9=Unknown	
		to T_BDCD5] must = [BDCD1 to BDCD there is a limit of only 5 congenital ano			this variable once by only entering the data ly or post-natally diagnosed.	
Mother's D	Date of Birth					
If [ACUTETI	RS]=1, then C.7a [MDATE] r	nust = [MDATE] in the CPQCC Section.	Submit thi	s variable once by only	$\prime$ entering the data in the CPQCC Section.	
Antenatal	Steroids					
If [ACUTETI	RS]=1, then C.8a [ASTER] n	nust = $[ASTER]$ in the CPQCC Section.	Submit this	variable once by only	entering the data in the CPQCC Section.	
Antenatal	Conditions, Magnesium -	Antenatal Magnesium Sulfate				
If [ACUTETRS]=1, then C.8b [ANCMAMAGSULF] must = [ANCMAMAGSULF] in the CPQCC Section. Submit this variable once by only entering the data in the CPQCC Section.						
Surfactant Use						
If [ACUTETI	RS]=1, then C.9a [DRSURF]	must = [DRSURF] in the CPQCC Section	n. Submit	this variable once by o	nly entering the data in the CPQCC Section.	
С.9Ь	T_SURFX	Surfactant Given at Any Time	Integer	{0, 1, 7, 9}	0= No, 1= Yes, 7=N/A (only if [ACUTETRS]=0 OR [DELDIE]=1), 9= Unknown	

C.13	T_SURFXDATETIME	Date/Time of Surfactant	Char16	{01 - 12}/{01 -	16 alphanumeric characters using forward
		Administration		31}/{2024}{space}{	slashes for the date, a {space} between
				00}:{00};	date and time, and a colon between hour
					and minutes=mm/dd/yyyy{space}hh:mm;
				pace}{07}:{07};	07/07/1907 07:07=N/A (only if
				{09}/{09}/{1909}{s	[ACUTETRS]=0 OR [DELDIE]=1 or
				pace}{09}:{09}	[T_surfx]=0); 09/09/1909
					09:09=Unknown (only if [T_surfx]=9).
					While Text file submittors MUST submit all
					Date/Time variables as string variable
					values enclosed in quotes. In other words
					in a comma separated ASCII file, a
					Date/Time variable must be submitted as
					"12/12/2024{space}12:00" instead of
					12/12/2024{space}12:00.
		INFANT CO	NDITION	S	
Date/Tin	ne at which infant condition	on was evaluated			

<b>NOTE: Thi</b>	NOTE: This is the same as Referral Date/Time in Item C.14. Submit this variable only once.					
Date/Time	e of Initial Evaluation by T	ransport Team within 15 minutes of	f Arrival a	t Referring Hospital		
	T_EVALINITDATETIME	Date/Time of Initial Evaluation by Transport Team within 15 Minutes of Arrival at Referring Hospital	Char16	<pre>{01 - 12}/{01 - 31}/{2024}{space}{ 00}:{00}; {07}/{07}/{1907}{s pace}{07}:{07}; {09}/{09}/{1909}{s pace}{09}:{09}</pre>	16 alphanumeric characters using forward slashes for the date, a {space} between date and time, and a colon between hour and minutes=mm/dd/yyyy{space}hh:mm; 07/07/1907 07:07=N/A (only if [ACUTETRS]=0 OR [DELDIE]=1 OR Special Situation B); 09/09/1909 09:09=Unknown. NOTE: Text file submittors MUST submit all Date/Time variables as string variable values enclosed in quotes. In other words in a comma separated ASCII file, a Date/Time variable must be submitted as "12/12/2024{space}12:00" instead of 12/12/2024{space}12:00.	
Date/Time	e of Initial Evaluation by T	ransport Team within 15 minutes of	f Arrival a	t Referring Hospital		
		Date/Time of Arrival at Receiving NICU and Initial NICU Evaluation	Char16	{01 - 12}/{01 -	16 alphanumeric characters using forward slashes for the date, a {space} between date and time, and a colon between hour and minutes=mm/dd/yyyy{space}hh:mm; 07/07/1907 07:07=N/A (only if [ACUTETRS]=0 OR [DELDIE]=1); 09/09/1909 09:09=Unknown. NOTE: Text file submittors MUST submit all Date/Time variables as string variable values enclosed in quotes. In other words in a comma separated ASCII file, a Date/Time variable must be submitted as "12/12/2024{space}12:00" instead of 12/12/2024{space}12:00.	
Responsiv			- ·			
C.20	T_RESP1	Responsiveness at Referral	Integer	{0, 1, 2, 3, 7, 9}	0=Death; 1=None, Seizures, Muscle Relaxant; 2=Lethargic, no cry; 3=Vigorously withdraws, cry; 7=N/A (only if [ACUTETRS]=0 OR [DELDIE]=1 OR [T_TYPE]=1 or Special Situation A); 9=Unknown	

	T_RESP2	Responsiveness at Initial Evaluation	Integer	{0, 1, 2, 3, 7, 9}	0=Death; 1=None, Seizures, Muscle
			5		Relaxant; 2=Lethargic, no cry;
					3=Vigorously withdraws, cry; 7=N/A (only
					if [ACUTETRS]=0 OR [DELDIE]=1 OR
					Special Situation B); 9=Unknown
	T_RESP3	Responsiveness at NICU Admission	Integer	{0, 1, 2, 3, 7, 9}	0=Death; 1=None, Seizures, Muscle
					Relaxant; 2=Lethargic, no cry;
					3=Vigorously withdraws, cry; 7=N/A (only
					if [ACUTETRS]=0 OR [DELDIE]=1);
					9=Unknown
	tory Rate (0 to 400)		1	-	-
C.23	T_RESPRATE1	Respiratory Rate at Referral	Integer	{0 - 400, 777, 999}	777=N/A (only if [ACUTETRS]=0 OR
					[DELDIE]=1 OR [T_TYPE]=1 OR Special
					Situation A), 999=Unknown
	T_RESPRATE2	Respiratory Rate at Initial Evaluation	Integer	{0 - 400, 777, 999}	777=N/A (only if [ACUTETRS]=0 OR
					[DELDIE]=1 OR Special Situation B),
					999=Unknown
	T_RESPRATE3	Respiratory Rate at NICU Admission	Integer	{0 - 400, 777, 999}	777=N/A (only if [ACUTETRS]=0 OR
					[DELDIE]=1), 999=Unknown
	Saturation (SaO2) (0 to		I		
C.24	T_SAO21	Oxygen Saturation (SaO2) at Referral	Integer	{0 - 100, 777, 999}	777=N/A (only if [ACUTETRS]=0 OR
					[DELDIE]=1 OR [T_TYPE]=1 OR Special
					Situation A), 999=Unknown
	T_SAO22	Oxygen Saturation (SaO2) at Initial	Integer	{0 - 100, 777, 999}	777=N/A (only if [ACUTETRS]=0 OR
		Evaluation			[DELDIE]=1 OR Special Situation B),
			-		999=Unknown
	T_SAO23	Oxygen Saturation (SaO2) at NICU	Integer	{0 - 100, 777, 999}	777=N/A (only if [ACUTETRS]=0 OR
Deeniver	how Chatura	Admission			[DELDIE]=1), 999=Unknown
C.25	tory Status	Pospiratory Status at Poformal	Integer	(1 2 2 7 0)	1-Ventilator: 2-Severe (appear gasping);
C.25	T_RESPSTATUS1	Respiratory Status at Referral	Integer	{1,2,3,7,9}	1=Ventilator; 2=Severe (apnea, gasping); 3=Other; 7=N/A (only if [ACUTETRS]=0
					OR [DELDIE]=1 OR [T_TYPE]=1 OR Special
					Situation A); 9=Unknown
	T_RESPSTATUS2	Respiratory Status at Initial Evaluation	Integer	{1,2,3,7,9}	1=Ventilator; 2=Severe (apnea, gasping);
			integer	(1, 2, 3, 7, 5)	3=Other; 7=N/A (only if [ACUTETRS]=0
					OR [DELDIE]=1 OR [T_TYPE]=1 OR Special
					Situation A); 9=Unknown
	T_RESPSTATUS3	Respiratory Status at NICU Admission	Integer	{1,2,3,7,9}	1=Ventilator; 2=Severe (apnea, gasping);
					3=Other; 7=N/A (only if [ACUTETRS]=0
					OR [DELDIE]=1 OR [T_TYPE]=1 OR Special
					Situation A); 9=Unknown
Oxygen	Index (for infants on re	spirator only)			
C.26		centration (FiO2) (21 to 100)			

	T_FI021 T_FI022		Integer Integer	{21 - 100, 777, 999} {21 - 100, 777, 999}	777=N/A (only if [ACUTETRS]=0 OR [DELDIE]=1) OR [T_RESPSTATUS1] in {2, 3} OR [T_TYPE]=1 OR Special Situation A), 999=Unknown (always if [T_RESPSTATUS1]=9) 777=N/A (only if [ACUTETRS]=0 OR
		at Initial Evaluation			[DELDIE]=1) OR [T_RESPSTATUS2] in {2, 3} OR Special Situation B), 999=Unknown (always if [T_RESPSTATUS2]=9)
	T_FI023	Inspired Oxygen Concentration (FIO2) at NICU Admission	Integer	{21 - 100, 777, 999}	777=N/A (only if [ACUTETRS]=0 OR [DELDIE]=1 OR [T_RESPSTATUS3] in {2, 3}), 999=Unknown (always if [T_RESPSTATUS3]=9)
	e (0 to 400)				
C.22	T_HEARTRATE1	Heart Rate at Referral	Integer	{0 - 400, 777, 999}	777=N/A (only if [ACUTETRS]=0 OR [DELDIE]=1) OR [T_TYPE]=1 or Special Situation A), 999=Unknown
	T_HEARTRATE2	Heart Rate at Initial Evaluation	Integer	{0 - 400, 777, 999}	777=N/A (only if [ACUTETRS]=0 OR [DELDIE]=1) OR Special Situation B), 999=Unknown
	T_HEARTRATE3	Heart Rate at NICU Admission	Integer	{0 - 400, 777, 999}	777=N/A (only if [ACUTETRS]=0 OR [DELDIE]=1), 999=Unknown
Blood Pre					
C.28a	Systolic (0 to 140)		I		
	T_BPSYS1	Systolic Blood Pressure at Referral	Integer	{0 - 140, 777, 888, 999}	777=N/A (always if [ACUTETRS]=0 OR [DELDIE]=1 OR [T_TYPE]=1 OR Special Situation A), 777=Not Done, 888=Too Low to Register, 999=Unknown
	T_BPSYS2	Systolic Blood Pressure at Initial Evaluation	Integer	{0 - 140, 777, 888, 999}	777=N/A (always if [ACUTETRS]=0 OR [DELDIE]=1 OR Special Situation B), 777=Not Done, 888=Too Low to Register, 999=Unknown
	T_BPSYS3	Systolic Blood Pressure at NICU Admission	Integer	{0 - 140, 777, 888, 999}	777=N/A (always if [ACUTETRS]=0 OR [DELDIE]=1), 777=Not Done, 888=Too Low to Register, 999=Unknown
C.28b	Diastolic (0 to 100)				
	T_BPDIA1	Diastolic Blood Pressure at Referral	Integer	{0 - 100, 777, 888, 999}	777=N/A (always if [ACUTETRS]=0 OR [DELDIE]=1 OR [T_TYPE]=1 OR Special Situation A), 777=Not Done, 888=Too Low to Register, 999=Unknown

	T_BPDIA2	Diastolic Blood Pressure at Initial Evaluation	Integer	{0 - 100, 777, 888, 999}	777=N/A (always if [ACUTETRS]=0 OR [DELDIE]=1 OR Special Situation B),777=Not Done, 888=Too Low to Register, 999=Unknown
	T_BPDIA3	Diastolic Blood Pressure at NICU Admission	Integer	{0 - 100, 777, 888, 999}	777=N/A (always if [ACUTETRS]=0 OR [DELDIE]=1), 777=Not Done, 888=Too Low to Register, 999=Unknown
C.28c	Mean (0 to 100)				
	T_BPMEAN1	Mean Blood Pressure at Referral	Integer	{0 - 100, 777, 888, 999}	777=N/A (always if [ACUTETRS]=0 OR [DELDIE]=1 OR [T_TYPE]=1 OR Special Situation A), 777= Not Done, 888=Too Low to Register, 999=Unknown
	T_BPMEAN2	Mean Blood Pressure at Initial Evaluation	Integer	{0 - 100, 777, 888, 999}	777=N/A (always if [ACUTETRS]=0 OR [DELDIE]=1 OR Special Situation B), 777=Not Done, 888=Too Low to Register, 999=Unknown
	T_BPMEAN3	Mean Blood Pressure at NICU Admission	Integer	{0 - 100, 777, 888, 999}	777=N/A (always if [ACUTETRS]=0 OR [DELDIE]=1), 777= Not Done, 888=Too Low to Register, 999=Unknown
Use of P	ressors				
C.29	T_PRESSOR1	Use of Pressors at Referral	Integer	{0, 1, 7, 9}	0=No, 1=Yes, 7=N/A (only if [ACUTETRS]=0 OR [T_TYPE]=1 OR Special Situation A), 9=Unknown
	T_PRESSOR2	Use of Pressors at Initial Evaluation	Integer	{0, 1, 7, 9}	0=No, 1=Yes, 7=N/A (only if [ACUTETRS]=0 OR Special Situation B), 9=Unknown
	T_PRESSOR3	Use of Pressors at NICU Admission	Integer	{0, 1, 7, 9}	0=No, 1=Yes, 7=N/A (only if [ACUTETRS]=0), 9=Unknown
	ature (20 to 45 Celsius				
C.21a	T_TEMP1	Temperature (20 to 45 Celsius) at Referral	Double	{20.0 - 45.0, 777.7, 888.8, 999.9}	20.0 -45.0 degrees Celcius, 777.7=N/A (only if [ACUTETRS]=0 OR [T_TYPE]=1 OR [DELDIE]=1 OR Special Situation A), 999.9=Unknown, 888.8=Too Low to Register - Note: Enter if the attempted reading is lower than the thermometer could measure.
C.21a	T_TEMP2	Temperature (20 to 45 Celsius) at Referral at Initial Evaluation	Double	{20.0 - 45.0, 777.7, 888.8, 999.9}	20.0 -45.0 degrees Celcius, 777.7=N/A (only if [ACUTETRS]=0 OR [DELDIE]=1 OR Special Situation B), 999.9=Unknown, 888.8=Too Low to Register - Note: Enter if the attempted reading is lower than the thermometer could measure.

NOTE: I	NOTE: If [ACUTETRS]=1, then C.21a [T_TEMP3] must = 22b [ATEMP] in the CPQCC Section.						
C.21a	Т_ТЕМРЗ	Temperature (20 to 45 Celsius) at Referral at NICU Admission	Double	{20.0 - 45.0, 777.7, 888.8, 999.9}	20.0 -45.0 degrees Celcius, 777.7=N/A (only if [ACUTETRS]=0 OR [DELDIE]=1), 999.9=Unknown, 888.8=Too Low to Register - Note: Enter if the attempted reading is lower than the thermometer could measure.		
Cooling C.21b	T_COOLING1	Cooling for HIE at Referral	Integer	{0,1,7, 9}	0=No, 1=Yes, 7=N/A (only if		
			Integer		[ACUTETRS]=0 OR [DELDIE]=1 OR [T_TYPE]=1 or Special Situation A), 9=Unknown		
C.21b	T_COOLING2	Cooling for HIE at Initial Evaluation	Integer	{0,1,7, 9}	0=No, 1=Yes, 7=N/A (only if [ACUTETRS]=0 OR [DELDIE]=1 OR Special Situation B), 9=Unknown		
C.21b	T_COOLING3	Cooling for HIE at NICU Admission	Integer	{0,1,7,9}	0=No, 1=Yes, 7=N/A (only if [ACUTETRS]=0 OR [DELDIE]=1), 9=Unknown		
C.21c	T_COOLINGMETHOD1	Type of Hypothermic Therapy for HIE at Referral (Check the last method used)	Integer	{1,3,4,7,9}	1=Passive, 3=Whole Body, 4=Other (if [T_COOLING1]=1, 7=N/A (if [T_COOLING1]=0 OR [ACUTETRS]=0 OR [DELDIE]=1 OR [T_TYPE]=1 OR Special Situation A), 9=Unknown (always if [T_COOLING1]=9)		
C.21c	T_COOLINGMETHOD2	Type of Hypothermic Therapy for HIE at Initial Evaluation (Check the last method used)	Integer	{1,3,4,7,9}	1=Passive, 3=Whole Body, 4=Other (if [T_COOLING2]=1, 7=N/A (if [T_COOLING2]=0 OR [ACUTETRS]=0 OR [DELDIE]=1 OR Special Situation B), 9=Unknown (always if [T_COOLING2]=9)		
C.21c	T_COOLINGMETHOD3	Type of Hypothermic Therapy for HIE at NICU Admission (Check the last method used)	Integer	{1,3,4,7, 9}	1=Passive, 3=Whole Body, 4=Other (if [T_COOLING3]=1, 7=N/A (if [T_COOLING3]=0 OR [ACUTETRS]=0 OR [DELDIE]=1), 9=Unknown (always if [T_COOLING3]=9)		
	ory Support	Despiratory Cuppert at Deferral	Integer		Q-Napa 1-Haad/NC Plawby 2- CDAD		
C.27	T_VENTMODE1	Respiratory Support at Referral	Integer	{0, 1, 2, 3, 7, 9}	0=None, 1=Hood/NC,Blowby, 2= CPAP, 3=Noninvasive Ventilation, 4=Oral/Nasal ETT, 7=N/A (only if [ACUTETRS]=0) OR [DELDIE]=1 OR [T_TYPE]=1 OR Special Situation A), 9=Unknown		

C.27 C.27	T_VENTMODE2 T_VENTMODE3	Respiratory Support at Initial Evaluation Respiratory Support at NICU Admission	Integer Integer	{0, 1, 2, 3, 7, 9} {0, 1, 2, 3, 7, 9}	0=None, 1=Hood/NC,Blowby, 2= CPAP, 3=Noninvasive Ventilation, 4=Oral/Nasal ETT, 7=N/A (only if [ACUTETRS]=0) OR [DELDIE]=1 OR [T_TYPE]=1 OR Special Situation A), 9=Unknown 0=None, 1=Hood/NC,Blowby, 2=CPAP, 3=Noninvasive Ventilation, 4=Oral/Nasal ETT, 7=N/A (only if [ACUTETRS]=0) OR [DELDIE]=1 OR [T_TYPE]=1 OR Special Situation A), 9=Unknown
		REFERRAL	DDOCESS		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Referring	Hospital	KEFEKKAL	PROCESS		
C.30	T_REFERRINGHOSPITAL	Referrring Hospital	Char6	{HCAI ID (formerly OSHPD), 777777}	Valid HCAI ID (formerly OSHPD) number (see list); 77777=N/A (only if [ACUTETRS]=0 OR [DELDIE]=1)
Previous					
C.31a	T_FIRSTTRANS	Is This The First Transfer for This Infant?	Integer	{0, 1, 7}	0=No , this was NOT the infant's first transfer, 1=Yes, infant transferred for the first time, 7=N/A (only if [ACUTETRS]=0 OR [DELDIE]=1)
C.31b	T_PREVHOSPITAL	Previously Transfer Referring Hospital	Char6	{HCAI ID (formerly OSHPD), 777777}	Valid HCAI ID (formerly OSHPD) number (see list); 77777=N/A (if [T_firstTrans] =1 OR [ACUTETRS]=0 OR [DELDIE]=1)
Location	of Birth	l.			
entering	the data in the CPQCC Sect		OCATION	] in the CPQCC Section	on. Submit this variable once by only
C.33	Team On-Site Leader	Team Leader	Integer	{1, 2, 3, 4, 5, 6, 7}	1=Sub-Specialist, 2=Pediatrician, 3=Other MD/Resident, 4=Neonatal Nurse Practitioner, 5=Transport Specialist, 6=Nurse, 7=N/A (only if [ACUTETRS]=0 OR [DELDIE]=1)
Team Bas C.34a	T_TEAMBASE	Team Base	Integer	{1, 2, 3, 7}	1=Receiving Hospital, 2=Contract Service,
C.37a			Integel	τ, <i>2</i> , <i>3</i> , <i>i f</i>	3=Referring Hospital, 2=Contract Service, 3=Referring Hospital, 7=N/A (only if [ACUTETRS]=0 OR [DELDIE]=1) For Special Situation B, this item is always 3.

C.34b	T_TEAMBASECS	Contract Service used	Char6	{Contract Service ID Number, 777777}	If [T_teamBase]=2, valid contract service ID number (see list); 777777 if [T_teamBase] = {1,3} OR [ACUTETRS]=0 OR [DELDIE]=1)
	Transport		1		
C.35	T_TRANSMODE	Mode of Transport	Integer	{1, 2, 3, 7}	1=Ground, 2=Helicopter, 3=Fixed Wing, 7=N/A (only if [ACUTETRS]=0 OR [DELDIE]=1)
		parture for Referring Hospital			
C.16	T_TTDEPDATETIME	Date/Time of Transport Team Departure from Transport Team Office/NICU for Referring Hospital	Char16	<pre>{01 - 12}/{01 - 31}/{2024}{space}{ 00}:{00}; {07}/{07}/{1907}{s pace}{07}:{07}; {09}/{09}/{1909}{s pace}{09}:{09}</pre>	16 alphanumeric characters using forward slashes for the date, a {space} between date and time, and a colon between hour and minutes=mm/dd/yyyy{space}hh:mm; 07/07/1907 07:07=N/A (only if [ACUTETRS]=0 OR [DELDIE]=1 OR Special Situation B); 09/09/1909 09:09=Unknown. NOTE: Text file submittors MUST submit all Date/Time variables as string variable values enclosed in quotes. In other words in a comma separated ASCII file, a Date/Time variable must be submitted as "12/12/2024{space}12:00" instead of 12/12/2024{space}12:00.
Date/Tin	ne of Arrival of Transport	Team at Referring Hospital			
C.17	T_TTARRDATETIME	Date/Time of Transport Team Arrival at Referring Hospital/Patient Bedside	Char16	<pre>{01 - 12}/{01 - 31}/{2024,2024}{spa ce}{00}:{00}; {07}/{07}/{1907}{s pace}{07}:{07}; {09}/{09}/{1909}{s pace}{09}:{09}</pre>	16 alphanumeric characters using forward slashes for the date, a {space} between date and time, and a colon between hour and minutes=mm/dd/yyyy{space}hh:mm; 07/07/1907 07:07=N/A (only if [ACUTETRS]=0 OR [DELDIE]=1 OR Special Situation B); 09/09/1909 09:09=Unknown. NOTE: Text file submittors MUST submit all Date/Time variables as string variable values enclosed in quotes. In other words in a comma separated ASCII file, a Date/Time variable must be submitted as "12/12/2024{space}12:00" instead of 12/12/2024{space}12:00.
<b>User</b> Com	ment Box			• 	•
	T_USERCOMMENT	User Comment Box	Char256	{Description, 77}	Up to 256 alphanumeric characters; 77=N/A (only if [ACUTETRS]=0 OR [DELDIE]=1)

Section	Section III. 2024 EDS Specifications for the CPQCC Database								
	IOTE: NEW & REVISED FIELDS FOR 2024 ARE HIGHLIGHTED IN Yellow for CPQCC								
Trackin	Tracking Fields (See Section I for Tracking Fields)								
		IDENTIFICATION A	ND DEMO	GRAPHICS					
2024	Field Name	Description	Field	Range of Possible	Coding Rules				
Item			Туре	Values					
NOTE:	If [ACUTETRS]=1 ANI	D [T_BWGT] is not equal to 9999, then C.3	[T_BWG	T] must = [BWGT] in	the CPQCC Section.				
1	BWGT	Birth Weight (in Grams)	Long	{1 - 7000}	Enter birthweight in grams.Do not use a				
-			Integer		comma separator as in 1,224. Use only				
			ege.		numbers as in 1224.				
2	BHEADCIR	Head Circumference at Birth (in cm to	Double	{10.0 - 70.0, 777.7,					
		nearest 10th of a cm)		999.9}	= N/A (Not Done), 999.9 = Unknown				
		en C.4 [GAWEEKS, GADAYS] must = [GAWI	EEKS, GAI	DAYS] in the CPQCC S	Section. Submit this variable once by				
only en	tering the data in the	CPQCC Section.	-						
3a	GAWEEKS	Best Estimate of Gestational Age	Integer	{15 - 46, 99}	If [ACUTETRS]=1, then C.8 [GAWEEKS]				
		Weeks			must = [GAWEEKS] in CPQCC Section;				
					99=Unknown				
3b	GADAYS	Best Estimate of Gestational Age	Integer	{0 - 6, 99}	If [ACUTETRS]=1, then C.8 [GADAYS]				
		Days			must = [GADAYS] in CPQCC Section;				
					99=Unknown				
NOTE: 1	If [ACUTETRS]=1, the	n C.12 [T_BDATETIME] must = [BDATE] in	the CPQ	CC Section. Submit th	is variable once.				

4a.	BDATETIME	Birth Date/Time	Char16		16 alphanumeric characters using forward slashes for the date, a {space} between date and time, and a colon between hour and minutes=mm/dd/yyyy{space}hh:mm; {01-12}/{01-31}/{2024} {00-23}:{00- 59}= Date & Time of Birth if time of birth is known {01-12}/{01-31}/{2024} {99:99} = Date & Time of birth if time of birth is unknown NOTE: Text file submittors MUST submit all Date/Time variables as string variable values enclosed in quotes. In other words in a comma separated ASCII file, a Date/Time variable must be submitted as "12/12/2024{space}12:00" instead of 12/12/2024{space}12:00. NOTE: If [ACUTETRS]=1, then T.6 [T_BDATE] must = [BDATE] in the CPQCC Section. Submit this variable once.
		C.5 [SEX] must = [SEX] in the CPQC	C Section. Su	bmit this variable on	ice by only entering the data in the
CPQCC S	Section.				
5	SEX	Sex of infant	Integer	{0, 1, 2, 9}	If [ACUTETRS]=1, then C.9 [SEX] must = [SEX] in CPQCC Section; 0=Female, 1=Male, 2=Undetermined, 9=Unknown
6	DELDIE	Delivery Room Death	Integer	{0, 1}	0=No, 1=Yes
7a	LOCATE	Location of Birth	Integer	{0, 1, 2}	0=Inborn; 1=Outborn; 2=Born at Co- Located Hospital (Satellite NICU ONLY). Always 0 if [DELDIE]=1.
7b	DAYADMISS	Age in days at admission	Integer	{1 - 28, 77}	1 to 28 for outborn infants or inborn infants not meeting Small Baby criteria. DAYADMISS for inborn infants 401 to 1,500 grams or 22 to 29 <b>completed</b> weeks gestation should be 1. Note: Currently a value of 77 is accepted for inborn infants 401 to 1,500 grams or 22 to 29 <b>completed</b> weeks gestation and mapped to 1 by the EDS intake routine.

	NOTE: If [ACUTETRS]=1, then C.32 [BIRTHLOCATION] must = [BIRTHLOCATION] in the CPQCC Section. Submit this variable once by only entering the data in the CPQCC Section. A home birth does NOT qualify for checking "Previously Discharged Home From a Hospital after Birth."								
7c	BIRTHLOCATION	Hospital of Birth (for Outborn Infants)	Char6	{HCAI ID (formerly OSHPD) number, 777777}	777777 if [LOCATE]=0; valid HCAI ID (formerly OSHPD) number (see list) For acute Transports-In with Special				
7d	TRANSCODE_IN	Reason for Transport-In	Integer	{0, 1, 2, 3, 4, 5, 6, 7, 9, 10,}	0=ECMO, 10=Hypothermic Therapy, 3=Surgery, 2=Other Medical/Diagnostic services, 1=Growth/Discharge planning, 4=Chronic care, 5=Other, 6=Insurance, 7=Not applicable (Only if [DELDIE]=1 OR [LOCATE] in {0,2}), 9=Confirmed unknown				
8a	PDH	Was Previously Discharged Home after Birth (Outborn Infants).	Integer	{0, 1, 7}	0=Never Discharged Home from a Hospital after Birth (Only if [LOCATE]=1), 1=Was Previously Discharged Home after Birth (Only if [LOCATE]=1), 7=N/A (only if [DELDIE]=1 OR [LOCATE] in {0,2}).				

8b	READMIT	Infant Readmitted to your Hospital (fe Outborn Infants previously discharged home)	-	{0, 1, 7}	0=No (Only if [PDH]=1 and infant was not in your center's NICU prior to home discharge), 1=Yes (Only if [PDH]=1 and infant was in your center's NICU prior to
					home discharge), 7=N/A (only if [DELDIE]=1 OR [LOCATE] in {0,2} OR [PDH] in {0,7})
		MATERNAL HISTORY, DELIVERY I	ROOM CAR	E, AND SURFACTANT	USE
	If [ACUTETRS]=1, then ( CC Section.				iable once by only entering the data in
9	MDATE	Mother's Date of Birth	Date	{Range depends on mother's age on infant's birth date, 09/09/1909}	Date format mm/dd/yyyy; 09/09/1909=Unknown
	MAGE	Mother's Age at Infant's Birth (Age Last Birthday)	Integer	{10 - 60, 99}	99=Unknown
10a	HISP	Is Mother of Hispanic Origin?	Integer	{0, 1, 9}	1=Yes, 0=No, 9=Unknown
10b	MATRACE	Maternal Race	Integer	{1, 3, 4, 5, 6, 7, 99}	1=Black, 3=White, 4=Asian, 5=American Indian or Alaska Native, 6=Native Hawaiian or Pacific Islander, 7=Other identified race, 99=Unknown
11	PCARE	Prenatal Care	Integer	{0, 1, 9}	0=No, 1=Yes, 9=Unknown
12	GROUPBSTREP	Group B Strep Positive	Integer	{0, 1, 7, 9}	0=No, 1=Yes, 7=Not Done, 9=Unknown

	If [ACUTETRS]=1, then C.8 QCC Section.	Ba [ASTER] must = [ASTER] in the CP	QCC Sect	ion. Submit this varia	ble once by only entering the data in
13a	ASTER	Antenatal Steroids Received Prior to Delivery	Integer	{0, 1, 9}	0=No, 1=Yes, 9=Unknown
NOTE: Sage.	Starting from 2018, this ite	m [ASTERDOCUMENT] is only applica	ble and C	PTIONAL for inborn i	nfants who are <34 weeks gestational
13b	ASTERDOCUMENT	Documentation in the medical record for reasons for NOT initiating antenatal steroid therapy before delivery.		{0,1, 7, 9}	0=No (If [ASTER]=0 AND [LOCATE] in {0,2}), 1=Yes (If [ASTER]=0 AND [LOCATE] in {0,2}), 7=N/A (Always if [ASTER]=1 OR [LOCATE]=1 OR [GAWEEKS]>33), 9=Unknown (Always if [ASTER]=9)
NOTE: :	Starting from 2018, this ite	m [ASTERREASON] is only applicable	and OPT	IONAL for indorn infa	nts who are <34 weeks gestational age.
13c	ASTERREASON	If Yes, what was the documented reason for NOT administering antenatal steroids?	Integer	{0, 1, 2, 3, 4, 5, 6, 7, 77, 99}	1=Chorioamnionitis (if [ASTERDOCUMENT]=1), 2=Other active infection (if [ASTERDOCUMENT]=1), 3=Immediate delivery (if [ASTERDOCUMENT]=1), 4=Fetus has anomalies incompatible with life (if [ASTERDOCUMENT]=1), 5=History of adverse reaction to corticosteroids (if [ASTERDOCUMENT]=1), 6=Comfort Care (if [ASTERDOCUMENT]=1), 7=Other (if [ASTERDOCUMENT]=1), 77=N/A (only if [ASTERDOCUMENT]=0 OR [ASTER]=1 OR [LOCATE]=1 OR [GAWEEKS]>33), 99=Unknown (always if [ASTER]=9 OR [ASTERDOCUMENT]=9)
14	SPLABOR	Spontaneous Labor. Did the Mother Go into Labor on Her Own?	Integer	{0, 1, 9}	0=No, 1=Yes, 9=Unknown
15a	MULT	Multiple Births or Gestation	Integer	{0, 1, 9}	0=No, 1=Yes, 9=Unknown; Note: At least one fetus must survive beyond 20 weeks
15b	NBIRTHS	Number of Infants Delivered	Integer	{1 - 10, 77, 99}	1 TO 10 if [MULT]=1; 77=N/A (only if [MULT]=0); 99=Unknown (always if [MULT]=9)
15c	BIRTHORDER	Birth Order for Multiple Births	Integer	{1- 10 [NBIRTHS], 77, 99}	1 TO 10 [NBIRTHS] if [MULT]=1; 77=N/A (only if [MULT]=0); 99=Unknown (always if [MULT]=9 OR [NBIRTHS]=99)

16	DELMOD	Mode of Delivery	Integer	{0, 1, 2, 9}	0=Cesarean Section; 1=Normal or
					Spontaneous Vaginal; 2=Operative Vaginal,
					9=Unknown
Matoria		ONDITIONS: EVENTS THAT MAY AFFECT	I HE PRE	GNANCY AND/OR DEL	IVERY OF THE INFANT
Materna		Maternali, Hunertension	Integer	(0, 1, 0)	
17a		Maternal: Hypertension	Integer	{0, 1, 9}	0=No, 1=Yes, 9=Unknown
17a 17a		Maternal: Chorioamionitis	Integer	{0, 1, 9}	0=No, 1=Yes, 9=Unknown
		Maternal: Other Infection Maternal: Diabetes	Integer	{0, 1, 9}	0=No, 1=Yes, 9=Unknown
17a 17a	ANCMDIA ANCMAMAGSULF	Maternal: Antenatal Magnesium	Integer	{0,1,9}	0=No, 1=Yes, 9=Unknown
		Sulfate	Integer	{0,1, 9}	0=No, 1=Yes, 9=Unknown
17a	ANCMCES	Maternal: Previous Cesarean	Integer	{0,1, 9}	0=No, 1=Yes, 9=Unknown
17a	ANCMOTH	Maternal: Other	Integer	{0, 1, 9}	0=No, 1=Yes, 9=Unknown
17a	ANCMDESC	Description of 'Other'	Char50	{Description, 77, 99}	Up to 50 alphanumeric characters; 77=N/A if [ANCMOTH]=0, 99=Unknown if [ANCMOTH]=9
Fetal					
17b	ANCFIUGR	Fetal: IUGR	Integer	{0, 1, 9}	0=No, 1=Yes, 9=Unknown
17b	ANCFDIS	Fetal: Non-reassuring Fetal Status	Integer	{0, 1, 9}	0=No, 1=Yes, 9=Unknown
17b	ANCFANO	Fetal: Anomaly	Integer	{0, 1, 9}	0=No, 1=Yes, 9=Unknown
17b	ANCFOTH	Fetal: Other	Integer	{0, 1, 9}	0=No, 1=Yes, 9=Unknown
17b	ANCFDESC	Description of 'Other'	Char50	{Description, 77, 99}	Up to 50 alphanumeric characters; 77=N/A if [ANCFOTH]=0, 99=Unknown if [ANCFOTH]=9
Obstetri			1		
17c	ANCOLABOR	Obstetrical: Preterm Labor (regular contractions in the context of cervical change at >37 wks)	Integer	{0, 1, 9}	0=No, 1=Yes, 9=Unknown
17c	ANCOPREPROM	Obstetrical:Preterm Premature ROM (<37 wks)	Integer	{0, 1, 9}	0=No, 1=Yes, 9=Unknown
17c	ANCOPREROM	Obstetrical: Term Premature ROM (rupture BEFORE the onset of labor, not premature gestation)	Integer	{0, 1, 7, 9}	0=No, 1=Yes, 7=N/A if [GAWEEKS]=<37, 9=Unknown
17c	ANCOPROM	Obstetrical: Prolonged ROM (>18 hour)	Integer	{0, 1, 9}	0=No, 1=Yes, 9=Unknown
17c	ANCOMAL	Obstetrical: Malpresentation / Breech	Integer	{0, 1, 9}	0=No, 1=Yes, 9=Unknown
17c	ANCOBLEED	Obstetrical: Bleeding / Abruption / Previa	Integer	{0, 1, 9}	0=No, 1=Yes, 9=Unknown
17c	ANCOOTH	Obstetrical: Other	Integer	{0, 1, 9}	0=No, 1=Yes, 9=Unknown
17c	ANCODESC	Description of 'Other'	Char50	{Description, 77, 99}	Up to 50 alphanumeric characters; 77=N/A if [ANCOOTH]=0, 99=Unknown if [ANCOOTH]=9
Indication infants.		y. What are the indications? All applica	ble indica	tions may be recorde	d. Mandatory for all CPQCC-eligible

NOTE:	These indications only a	apply if the birth was cesarean. For Vagi	nal Births	all of these must be c	oded 7 = N/A
18	INDCESBR	Indication for Cesarean Delivery Malpresentation / Breech	Integer	{0, 1, 7, 9}	0=No (if [DELMOD]=0), 1=Yes (if [DELMOD]=0), 7=N/A (only if [DELMOD] in {1,2}), 9=Unknown (always if [DELMOD]=9)
18	INDCESMG	Indication for Cesarean Delivery Multiple Gestation	Integer	{0, 1, 7, 9}	0=No (if [DELMOD]=0), 1=Yes (if [DELMOD]=0), 7=N/A (only if [DELMOD] in {1,2}), 9=Unknown (always if [DELMOD]=9)
18	INDCESFD	Indication for Cesarean Delivery Non-reassuring Fetal Status	Integer	{0, 1, 7, 9}	0=No (if [DELMOD]=0), 1=Yes (if [DELMOD]=0), 7=N/A (only if [DELMOD] in {1,2}), 9=Unknown (always if [DELMOD]=9)
18	INDCESER	Indication for Cesarean Delivery Elective	Integer	{0, 1, 7, 9}	0=No (if [DELMOD]=0), 1=Yes (if [DELMOD]=0), 7=N/A (only if [DELMOD] in {1,2}), 9=Unknown (always if [DELMOD]=9)
18	INDCESDY	Indication for Cesarean Delivery Dystocia/Failure to Progress	Integer	{0, 1, 7, 9}	0=No (if [DELMOD]=0), 1=Yes (if [DELMOD]=0), 7=N/A (only if [DELMOD] in {1,2}), 9=Unknown (always if [DELMOD]=9)
18	INDCESPP	Indication for Cesarean Delivery Placental Problems	Integer	{0, 1, 7, 9}	0=No (if [DELMOD]=0), 1=Yes (if [DELMOD]=0), 7=N/A (only if [DELMOD] in {1,2}), 9=Unknown (always if [DELMOD]=9)
18	INDCESHTN	Indication for Cesarean Delivery Hypertension	Integer	{0, 1, 7, 9}	0=No (if [DELMOD]=0), 1=Yes (if [DELMOD]=0), 7=N/A (only if [DELMOD] in {1,2}), 9=Unknown (always if [DELMOD]=9)
18	INDCESOTH	Indication for Cesarean Delivery Other	Integer	{0, 1, 7, 9}	0=No (if [DELMOD]=0), 1=Yes (if [DELMOD]=0), 7=N/A (only if [DELMOD] in {1,2}), 9=Unknown (always if [DELMOD]=9 <b>)</b>
18	INDCESDESC	Indication for Cesarean Delivery Other Description	Char50	{Description, 77, 99}	Up to 50 alphanumeric characters characters (if [DELMOD]=0 AND [INDCESOTH]=1); 77=N/A (only if [INDCESOTH] in {0,7}); 99=Unknown (always if [INDCESOTH]=9 OR [DELMOD]=9)
19a	DCCDONE	Was delayed umbilical cord clamping performed?	Integer	{0, 1, 7, 9}	0=No, 1=Yes, 7=Not Applicable (always if [DELDIE=1]), 9=Unknown

19b	DCCTIME	How long was umbilical cord clamping delayed?	Integer	{2, 4, 5, 7, 9}	2= 30-60 seconds (if [DCCDONE]=1), 4=61-120 seconds (if [DCCDONE]=1), 5= > 120 seconds (if [DCCDONE]=1), 7= N/A (if [DCCDONE]=0 for [DELDIE]=1), 9=Unknown (always if [DCCDONE]=9)
<b>19</b> c	DCCNOTWHY	If DCC was not done, reason why (OPTIONAL)?	Integer	{1, 2, 6, 7, 9}	1=Maternal Bleeding (if [DCCDONE]=0), 2= Neonatal Causes (if [DCCDONE]=0), 6=Other (if [DCCDONE]=0), 7= N/A (only if [DCCDONE]=1 or [DELDIE]=1), 9= Confirmed Unknown (always if [DCCDONE]=9)
<b>19</b> c.	DCCNOTWHYDESC	Description of "Other" (OPTIONAL)	Char64	{77,99,Description}	Up to 64 alphanumeric characters characters , 77=N/A (only if [DCCDONE]=1 OR [DCCNOTWHY] in {1,2} or [DELDIE]=1), 99=Unknown (always if [DCCDONE]=9 OR [DCCNOTWHY]=9)
19d	DCCCORDMILK	Was umbilical cord milking performed?	Integer	{0, 1, 7, 9}	0=No, 1=Yes, 7=Not Applicable (always if [DELDIE=1]), 9=Unknown
19e	DCCBREATH	Did breathing begin before umbilical cord clamping?	Integer	{0, 1, 7, 9}	0=No, 1=Yes, 7=Not Applicable (always if [DELDIE=1]), 9=Unknown
20	AP1	Apgar Score - 1 minute	Integer	{0 - 10, 77, 99}	77 = N/A (Not Done); 99=Unknown
20	AP5	Apgar Score - 5 minute	Integer	{0 - 10, 77, 99}	77 = N/A (Not Done); 99=Unknown
20	AP10	Apgar Score - 10 minute	Integer	{0 - 10, 77, 99}	77=N/A (Not Done); 99=Unknown
21a	ΡΑ	Suspected Encephalopathy or Suspected Perinatal Asphyxia	Integer	{0, 1, 7, 9}	0=No, 1=Yes, 7=N/A (if [BWGT]<=1500 OR [DELDIE]=1), 9=Unknown
21b	GAS	Umbilical cord blood gas or baby blood gas in the first hour of life available	Integer	{0, 1, 7, 9}	0=No (if [BWGT]>1500 AND [DELDIE]=0 AND [[PA]=1 OR [HIE] in {3,4,5} OR [ACOOLINGMETHOD] in {3}), 1=Yes (if [BWGT]>1500 AND [DELDIE]=0 AND [[PA]=1 OR [HIE] in {3,4,5} OR [ACOOLINGMETHOD] in {3}), 7=N/A (only if [BWGT]<=1500 OR [DELDIE]=1 OR [[PA] in {0,7} and [HIE] in {0,7} and [ACOOLINGMETHOD] in {0,1,4,7), 9=Unknown (always if [BWGT]>1500 AND [DELDIE]=0 AND [PA]=9 AND [HIE] in {7,9} AND [ACOOLINGMETHOD] in {7,9})

21c	GASSOURCE	Source of blood gas	Integer	{1, 2, 3, 4, 5, 7, 9}	1=Cord umbilical arterial (UA) (only if [GAS]=1), 2=Cord umbilical venous (UV) (only if [GAS]=1), 3=Arterial baby gas (only if [GAS]=1), 4=Venous baby gas (only if [GAS]=1), 5=Capillary baby gas (only if [GAS]=1), 7=N/A (only if [GAS] in {0,7}), 9=Unknown (always if [GAS]=9)
21d	GASPH	pH within 1 hour of life	Double	{6.00-8.00, 77.7, 99.9}	77.7=N/A (only if [GAS] in {0,7}), 99.9=Unknown (always if [GAS]=9)
21e	GASBD	Base deficit in umbilical cord blood / baby blood gas within first hour of life	Double	{0.0-50.0, 77.7, 88.8, 99.9}	77.7=N/A (only if [GAS] in {0,7}), 88.8= Too Low to Register, 99.9=Unknown (always if [GAS]=9)
22a	DROX	Initial Resuscitation Supplemental Oxygen	Integer	{0, 1, 9}	1=Yes, 0=No, 9=Unknown
22b	DRCPAP	Initial Resuscitation Nasal CPAP	Integer	{0, 1, 9}	1=Yes (always if [DRNIPPV}=1), 0=No, 9=Unknown
22c	DRBM	Initial Resuscitation Positive Pressure Ventilation (PPV) via Mask or Bag/Mask PPV	Integer	{0, 1, 9}	1=Yes, 0=No, 9=Unknown
22d	DRET	Initial Resuscitation – Endotrachael Tube Ventilation	Integer	{0, 1, 9}	1=Yes, 0=No, 9=Unknown
22e	DREP	Initial Resuscitation Epinephrine	Integer	{0, 1, 9}	1=Yes, 0=No, 9=Unknown
22f	DRCC	Initial Resuscitation Cardiac Compression	Integer	{0, 1, 9}	1=Yes, 0=No, 9=Unknown
22g	DRNIPPV	Initial Resuscitation Noninvasive ventilation	Integer	{0, 1, 9}	1=Yes, 0=No, 9=Unknown [DRNIPPV]=1 implies that [DRCPAP]=1.
<mark>22h</mark>	DRLMA	Initial Resuscitation - Supraglottic Airway Device	Integer	{0, 1, 9}	1=Yes, 0=No, 9=Unknown
	If [ACUTETRS]=1, the QCC Section.	n C.9a [DRSURF] must = [DRSURF] in the	CPQCC S	ection. Submit this v	ariable once by only entering the data in
23a	DRSURF	Surfactant in the DR	Integer	{0, 1, 9}	1=Yes, 0=No, 9=Unknown
23b	SURFX	Surfactant Given at Any Time	Integer	{0, 1, 9}	1=Yes, 0=No, 9=Unknown, 7=N/A (Only if [DELDIE]=1)
23c	SURF1DHR	Surfactant Age at First Dose, Hours	Integer	{0 - 6665, 7777, 9999}	0-6665 (if [SURFX] = 1 OR ([DELDIE]=1 AND [DRSURF]=1)); 7777=N/A (only if [SURFX] = 0 OR ([DELDIE]=1 AND [DRSURF]=0)); 9999 = Unknown (always if [SURFX]=9 OR ([DRSURF]=9 AND [DELDIE]=1))

23c	SURF1DMIN	Surfactant Age at First Dose, Minutes	Integer	{0 - 59, 77, 99}	0-59 (if [SURFX] = 1 OR ([DELDIE]=1 AND [DRSURF]=1)); 7777=N/A (only if [SURFX] = 0 OR ([DELDIE]=1 AND [DRSURF]=0)); 9999 = Unknown (always if [SURFX]=9 OR ([DRSURF]=9 AND [DELDIE]=1))
		POST DELIVERY DIAGNOSIS AND			
24a	АТЕМРМ	Temperature Measured within One Hour of Admission to Your NICU	Integer	{0, 1, 7, 9}	0=No; 1=Yes; 7=N/A (only if [DELDIE]=1); 9=Unknown.
NOTE:	If [ACUTETRS]=1, then C	.21a [T_TEMP3] must = 24b [ATEMP] i	n the CPO	QCC Section.	
24b	АТЕМР	Temperature at Admission to Your NICU (in Degrees Centigrade to Nearest 10th of a Degree)	Double	{20.0 - 45.0, 777.7, 888.8, 999.9}	20.0-45.0 (if [DELDIE]=0 AND [ATEMPM]=1); 777.7=N/A (onloy if [DELDIE]=1 OR [ATEMPM]=0); 888.8=Too Low to Register (if [DELDIE]=0 AND [ATEMPM]=1); 999.9 (always if [DELDIE]=0 and [ATEMPM]=9). NOTE: If the infant was undergoing intentional body/head cooling for therapeutic purposes, enter actual temperature. If actual temperature is < 20°C/82.4°F at the time of obtaining the first temperature within 1 hour of NICU admission, enter 20°C/68°F!
24c	ACOOLING	Infant Cooling during NICU Admission	Integer	{0, 1, 2, 7, 9}	0=No Cooling for HIE, 1=Cooling Started for HIE, 2=Cooling Continued for Transfer- In for HIE (if [LOCATE]=1), 7=N/A (only if [DELDIE]=1), 9=Unknown
24d	ACOOLINGMETHOD	Type of LAST Hypothermic Therapy for HIE during NICU Admission	Integer	{1, 3, 4, 7, 9}	1=Passive, 3=Whole Body, 4=Other, 7=N/A (only if [ACOOLING]=0 OR [DELDIE]=1), 9=Unknown (always if [ACOOLING]=9)
25a	ΟΧΥ	Post DR Respiratory Support Supplemental Oxygen	Integer	{0, 1, 7, 9}	0=No, 1=Yes, 7=N/A (only if [DELDIE]=1), 9=Unknown
25b	VENT	Post DR Respiratory Support Intubated Conventional Ventilation	Integer	{0, 1, 7, 9}	0=No, 1=Yes, 7=N/A (only if [DELDIE]=1), 9=Unknown
25c	HFV	Post DR Respiratory Support Intubated HIFI Ventilation	Integer	{0, 1, 7, 9}	0=No, 1=Yes, 7=N/A (only if [DELDIE]=1), 9=Unknown

25d	HFNC	Nasal Cannula	Integer	{0, 2, 3, 4, 7, 9}	0=No, 4=Yes, flow rate > 2l/min, 3= Yes, flow rate <= 2l/min, 2= Yes, flow rate unknown, 7=N/A (only if [DELDIE]=1), 9=Unknown,
25e	NIMV	Noninvasive ventilation for greater than 4 hours.	Integer	{0, 1, 2, 7, 9}	0=None, $1 = \leq 4$ hours, $2 = > 4$ hours, 7=N/A (only if [DELDIE]=1), 9=Unknown
25f	СРАР	Post DR Respiratory Support CPAP of any type	Integer	{0, 1, 7, 9}	0=No, 1=Yes, 7=N/A (only if [DELDIE]=1), 9=Unknown
27a	DURVENT	Duration of Intubated Assisted Ventilation (in your NICU)	Integer	{0, 1, 2, 7, 9}	0=None, 1= <=4 Hours, 2= >4 Hours, 7=N/A (only if [DELDIE]=1), 9=Unknown
27Ь	VENTDAYS	Duration of First Episode of Intubated Assisted Ventilation in Your NICU	Long Integer	{1-366 OR 367, 7777, 9999}	1 - 366 (367 for leap years), 1=Less than 24 Hours, 2= 24 Hours to under 48 Hours, ETC. 7777=N/A (only if [DURVENT] IN (0,1,7) OR [DELDIE]=1), 9999=Unknown (always if [DURVENT]=9)
28	DIE12	Did Infant Die within First 12 Hours of Entering Your NICU?	Integer	{0, 1, 7}	0=No, 1=Yes, 7=N/A (only if [DELDIE]=1)
29	RDS	Respiratory Distress Syndrome	Integer	{0, 1, 7, 9}	0=No, 1=Yes, 7=N/A (only if [DELDIE]=1), 9=Unknown
30	PNTX	Pneumothorax	Integer	{0, 7, 9, 11, 12, 13}	0=No, 7=N/A (only if [DELDIE]=1), 9=Unknown, 11=Yes Here, 12=Yes Elsewhere, 13=Yes Here AND Elsewhere
31	MECONIUM	Meconium Aspiration Syndrome	Integer	{0, 1, 7, 9}	0=No, 1=Yes, 7=N/A (only if [DELDIE]=1), 9=Unknown
32	CAFFEINE	Caffeine for Any Reason	Integer	{0, 1, 7, 9}	0=No, 1=Yes, 7=N/A (only if [DELDIE]=1), 9=Unknown
33	VITAMINA	Intramuscular Vitamin A for Any Reason	Integer	{0, 1, 7, 9}	0=No, 1=Yes, 7=N/A (only if [DELDIE]=1), 9=Unknown
34	NITRICO	Inhaled Nitric Oxide >4 hours	Integer	{0, 7, 9, 11, 12, 13}	0=No, 7=N/A (only if [DELDIE]=1), 9=Unknown, 11=Yes Here, 12=Yes Elsewhere, 13=Yes Here AND Elsewhere
35	ЕСМО	ECMO	Integer	{0, 7, 9, 11, 12, 13}	0=No, 7=N/A (only if [DELDIE]=1), 9=Unknown, 11=Yes Here, 12=Yes Elsewhere, 13=Yes Here AND Elsewhere
36a	POSTSTER	Postnatal Steroids	Integer	{0, 1, 7, 9}	0=No, 1=Yes, 7=N/A (only if [DELDIE]=1), 9=Unknown

36b	POSTERCLD	Postnatal Steroids for Indication Chronic Lung Disease	Integer	{0, 7, 9, 11, 12, 13}	0=No, 7=N/A (only if [POSTSTER] in {0,7}) OR ([DELDIE]=1), 9=Unknown (always if [POSTSTER]=9), 11=Yes Here, 12=Yes Elsewhere, 13=Yes Here AND Elsewhere
36b	POSTEREX	Postnatal Steroids for Indication Extubation	Integer	{0, 1, 7}	0=No, 1=Yes, 7=N/A (only if [POSTSTER] in {0,7} or [DELDIE]=1), 9=Unknown (always if [POSTSTER]=9).
36b	POSTERBP	Postnatal Steroids for Indication Hypotension	Integer	{0, 1, 7}	0=No, 1=Yes, 7=N/A (only if [POSTSTER] in {0,7} or [DELDIE]=1), 9=Unknown (always if [POSTSTER]=9).
36b	POSTEROTH	Postnatal Steroids for Indication Other	Integer	{0, 1, 7}	0=No, 1=Yes, 7=N/A (only if [POSTSTER] in {0,7} or [DELDIE]=1), 9=Unknown (always if [POSTSTER]=9).
37	NEWOX28	Supplemental Oxygen on Day 28	Integer	{0, 2, 3, 7, 9}	0=No, 2=Intermittent, 3=Continuous, 7=N/A (only if infant not in hospital on Day 28 OR [DELDIE]=1), 9=Unknown
38a	OX36	Supplemental Oxygen at 36 Weeks (Adjusted Gestational Age)	Integer	{0, 2, 3, 7, 9}	0=No, 2=Intermittent, 3=Continuous, 7=N/A (only if infant not in hospital at 36 weeks OR ([bwgt]>1500 AND [gaweeks]>31) OR [DELDIE]=1), 9=Unknown
38b	VENT36	Intubated Conventional Ventilation at 36 Weeks	Integer	{0, 1, 7, 9}	0=No, 1=Yes, 7=N/A (only if infant not in hospital at 36 weeks OR ([bwgt]>1500 AND [gaweeks]>31) OR [DELDIE]=1), 9=Unknown.
38c	HFV36	Intubated High Frequency Ventilation at 36 Weeks	Integer	{0, 1, 7, 9}	0=No, 1=Yes, 7=N/A (only if infant not in hospital at 36 weeks OR ([bwgt]>1500 AND [gaweeks]>31) OR [DELDIE]=1), 9=Unknown.
38d	HFNC36	Nasal Cannula at 36 Weeks	Integer	{0, 2, 3, 4, 7, 9}	0=No, 4=Yes, flow rate > 2l/min, 3=Yes, flow rate <= 2l/min, 2=Yes, flow rate unknown, 7=N/A (only if infant not in hospital at 36 weeks OR ([bwgt]>1500 AND [gaweeks]>31) OR [DELDIE]=1), 9=Unknown.
38e	NIMV36	Noninvasive Ventilation at 36 Weeks	Integer	{0, 1, 7, 9}	0=No, 1=Yes, 7=N/A (only if infant not in hospital at 36 weeks OR ([bwgt]>1500 AND [gaweeks]>31) OR [DELDIE]=1), 9=Unknown.

38f	СРАРЗ6	Nasal CPAP at 36 Weeks	Integer	{0, 1, 7, 9}	0=No, 1=Yes, 7=N/A (only if infant not in hospital at 36 weeks OR ([bwgt]>1500 AND [gaweeks]>31) OR [DELDIE]=1), 9=Unknown.
39a.	ACFINAL	Respiratory Monitoring and Support Devices at Discharge - Apnea or Cardio-Respiratory Monitor	Integer	{0, 1, 7, 9}	0=No, 1=Yes, 7=N/A (only if [DELDIE]=1), 9=Unknown
39b	OXFINAL	Respiratory Monitoring and Support Devices at Discharge Supplemental Oxygen	Integer	{0, 1, 7, 9}	0=No, 1=Yes, 7=N/A (only if [DELDIE]=1), 9=Unknown
39с	VENTFINAL	Respiratory Monitoring and Support Devices at Discharge Intubated Conventional Ventilation at Discharge	Integer	{0, 1, 7, 9}	0=No, 1=Yes, 7=N/A (only if [DELDIE]=1), 9=Unknown
39d	HVFINAL	Respiratory Monitoring and Support Devices at Discharge Intubated High Frequency Ventilation at Discharge	Integer	{0, 1, 7, 9}	0=No, 1=Yes, 7=N/A (only if [DELDIE]=1), 9=Unknown
39e	HFNCFINAL	Respiratory Monitoring and Support Devices at Discharge Nasal Cannula at Discharge	Integer	{0, 2, 3, 4, 7, 9}	0=No, 4=Yes, flow rate > 2l/min, 3=Yes, flow rate <= 2l/min, 2=Yes, flow rate unknown,, 7=N/A (only if [DELDIE]=1), 9=Unknown
39f	NIMVFINAL	Respiratory Monitoring and Support Devices at Discharge Noninvasive Ventilation at Discharge	Integer	{0, 1, 7, 9}	0=No, 1=Yes, 7=N/A (only if [DELDIE]=1), 9=Unknown

39g	CPAPFINAL	Respiratory Monitoring and Support Devices at Discharge Nasal CPAP at Discharge	Integer	{0, 1, 7, 9}	0=No, 1=Yes, 7=N/A (only if [DELDIE]=1), 9=Unknown
		POST-DELIVERY DIAGNOSES AND			
		on items is based on whether the infant have a set of the time of birth. For an			
40	EBSEPS	Sepsis Early Bacterial (On or Before Day 3)	e Integer	{0, 1, 7, 9}	0=No, 1=Yes, 7=N/A (only if [DELDIE]=1), 9=Unknown
40	EBSEPSCD1	Early Bacterial Sepsis Code 1	Integer	{Bacterial Pathogen Codes, 7777, 8888, 9999}	Enter First Bacterial Pathogen Code (only if [EBSEPS]=1); 7777=N/A (only if [EPSEPS] in {0,7} OR [DELDIE]=1); 8888=Other (pathogen not listed on pathogen list, need to provide [EBSEPSDESC]; 9999=Unknown (only if [EPSEPS]=9).
40	EBSEPSCD2	Early Bacterial Sepsis Code 2	Integer	{Bacterial Pathogen Codes, 7777, 8888, 9999}	Enter Second Bacterial Pathogen Code (only if [EBSEPS]=1); 7777=N/A (only if [EPSEPS] in {0,7} OR [DELDIE]=1 OR [EBSEPS]=1 AND no 2nd pathogen); 8888=Other (pathogen not listed on pathogen list, need to provide [EBSEPSDESC]; 9999=Unknown (only if [EPSEPS]=9).
40	EBSEPSCD3	Early Bacterial Sepsis Code 3	Integer	{Bacterial Pathogen Codes, 7777, 8888, 9999}	Enter Third Bacterial Pathogen Code (only if [EBSEPS]=1); 7777=N/A (only if [EPSEPS] in {0,7} OR [DELDIE]=1 OR [EBSEPS]=1 AND no 3rd pathogen); 8888=Other (pathogen not listed on pathogen list, need to provide [EBSEPSDESC]; 9999=Unknown (only if [EPSEPS]=9).
40	EBSEPSDESC	If Other, Organism	Char128	{Description, 77, 99}	Up to 128 alphanumeric characters (only if one of [EBSEPSCD1-3]=8888); 77=N/A if [EPSEPS]=0,7 or if [DELDIE]=1; 99=Unknown (only if [EPSEPS]=9)
41a	LBPATH	Sepsis Late Bacterial Sepsis and/or Meningitis (after Day 3)	Integer	{0, 1, 7, 9}	0=No,7=N/A (only if [DELDIE]=1 OR infant not hospitalized in your NICU after Day 3), 9=Unknown, 11=Yes Here, 12, Yes Elsewhere, 13= Yes Here and Elsewhere

41a 41a	LBPATHCD1	Late Bacterial Sepsis Code 1 Late Bacterial Sepsis Code 2	Integer	{Bacterial Pathogen Code, 7777, 8888, 9999} {Bacterial Pathogen	Enter First Bacterial Pathogen Code (only if [LBPATH]=1); 7777=N/A (only if [LBPATH] in {0,7} OR [DELDIE]=1); 8888=Other (pathogen not listed on pathogen list, need to provide [EBSEPSDESC]; 9999=Unknown (only if [LBPATH]=9) Enter Second Bacterial Pathogen Code
410			integer	Codes, 7777, 8888, 9999}	(only if [LBPATH]=1); 7777=N/A (only if [LBPATH] in {0,7} OR [DELDIE]=1 OR no 2nd pathogen); 8888=Other (pathogen not listed on pathogen list, need to provide [EBSEPSDESC]; 9999=Unknown (only if [LBPATH]=9)
41a	LBPATHCD3	Late Bacterial Sepsis Code 3	Integer	{Bacterial Pathogen Codes, 7777, 8888, 9999}	Enter Third Bacterial Pathogen Code (only if [LBPATH]=1); 7777=N/A (only if [LBPATH] in {0,7} OR [DELDIE]=1 OR no 3rd pathogen); 8888=Other (pathogen not listed on pathogen list, need to provide [EBSEPSDESC]; 9999=Unknown (only if [LBPATH]=9)
41a	LBPATHDESC	If Other, Organism	Char128	{Description, 77, 99}	Up to 128 alphanumeric characters (only if one of [LBPATHCD1-3]=8888); 77=N/A if [LBPATH]=0,7 or if [DELDIE]=1; 99=Unknown (only if [LBPATH]=9)
41b	CNEGSTAPH	Sepsis Late - Coag Neg Staph	Integer	{0, 7, 9, 11, 12, 13}	0=No, 7=N/A (only if [DELDIE]=1 or infant not hospitalized in your NICU after Day 3), 9=Unknown, 11=Yes Here, 12=Yes Elsewhere, 13=Yes Here AND Elsewhere
41c	FUNGAL	Sepsis Late - Fungal	Integer	{0, 7, 9, 11, 12, 13}	0=No, 7=N/A (only if [DELDIE]=1 or infant not hospitalized in your NICU after Day 3), 9=Unknown, 11=Yes Here, 12=Yes Elsewhere, 13=Yes Here AND Elsewhere
42	VIRAL	Congenital Infection	Integer	{0, 1, 7, 9}	0=Negative culture, 7=N/A (only if [DELDIE]=1), 1=Yes, 9=Unknown

42	VIRALCD1		Integer	8888, 9999}	Enter First Congenital Infection Pathogen Code (only if [VIRAL]=1); 7777=N/A (only if [VIRAL] in {0,7} OR [DELDIE]=1); 8888=Other (pathogen not listed on pathogen list, need to provide description [VIRALDESC]); 9999=Unknown (only if [VIRAL]=9).
42	VIRALCD2		Integer	8888, 9999}	Enter Second Congenital Infection Pathogen Code (only if [VIRAL]=1); 7777=N/A (only if [VIRAL] in {0,7} OR [DELDIE]=1 OR no 2nd pathogen code); 8888=Other (pathogen not listed on pathogen list, need to provide description [VIRALDESC]); 9999=Unknown (only if [VIRAL]=9).
42	VIRALCD3	Congenital Infection Pathogen Code 3	Integer	{Congenital Infection Pathogen code, 7777, 8888, 9999}	Enter Third Congenital Infection Pathogen Code (only if [VIRAL]=1); 7777=N/A (only if [VIRAL] in {0,7} OR [DELDIE]=1 OR no 3rd pathogen code); 8888=Other (pathogen not listed on pathogen list, need to provide description [VIRALDESC]); 9999=Unknown (only if [VIRAL]=9).
42	VIRALDESC	If Other, Pathogen Description	Char128	{Description, 77, 99}	Up to 128 alphanumeric characters (only if one of one of [VIRALCD1-3]=8888); 77=N/A if [VIRAL]=0,7 or if [DELDIE]=1; 99=Unknown (only if [VIRAL]=9)
43a	PDA	Patent Ductus Arteriosus	Integer	{0, 1, 2, 7, 9}	0=No, 1=PDA meeting revised 2011 VON definition, 2=PDA diagnosis based on echo and/or clinical evidence or was treated for PDA, but not meeting all 2011 VON criteria, 7=N/A (only if [DELDIE]=1), 9=Unknown
43b	INDOMETH	Indomethacin For Any Reason	Integer	{0, 1, 7, 9}	0=No, 1=Yes, 7=N/A (only if [DELDIE]=1), 9=Unknown
43c	IBUPROFEN	Ibuprofen for Treatment or Prevention of PDA	Integer	{0, 1, 7, 9}	0=No, 1=Yes, 7=N/A (only if [DELDIE]=1), 9=Unknown.
43d.	ACETAMIN	Acetaminophen (Paracetamol) for prevention and treatment of PDA	Integer	{0, 1, 7, 9}	0=No, 1=Yes, 7=N/A (only if [DELDIE]=1), 9=Unknown.
43e	PROSTAGLANDIN	Prostaglandin for the Treatment of PDA	Integer	{0, 1, 7, 9}	0=No, 1=Yes, 7=N/A (only if [DELDIE]=1 OR [PDA]=0), 9=Unknown (always if [PDA]=9)
43f	SRGPDA	PDA Ligation or PDA Closure by Catheterization	Integer	{0, 1, 7, 9, }	0=No, 1=Yes, 7=N/A (only if [DELDIE]=1 OR [PDA]=0), 9=Unknown (always if [PDA]=9),

43g.	SRGPDAWTCHD	PDA Surgery in conjunction with	Integer	{0, 1, 7, 9, }	0=No, 1=Yes, 7=N/A (only if [DELDIE]=1
		Repair or Palliation of Congenital Heart Disease	:		OR [SRGPDA]=0), 9=Unknown (always if [SRGPDA]=9)
44a	PROBIOTICS	Probiotics	Integer	{0, 1, 7, 9}	0=No, 1=Yes, 7=N/A (only if [DELDIE]=1), 9=Unknown
44b	NEC	Necrotizing Enterocolitis	Integer	{0, 7, 9, 11, 12, 13}	0=No, 7=N/A (only if [DELDIE]=1), 9=Unknown, 11=Yes Here, 12=Yes Elsewhere, 13=Yes Here AND Elsewhere
44c	SRGNEC	Surgery: NEC Surgery	Integer	{0, 7, 9, 11, 12, 13}	0=No, 7=N/A (only if [DELDIE]=1 or [NEC]=0), 9=Unknown, 11=Yes Here, 12=Yes Elsewhere, 13=Yes Here AND Elsewhere
45a	GIPERF	Focal Intestinal Perforation	Integer	{0, 7, 9, 11, 12, 13}	0=No, 7=N/A (only if [DELDIE]=1), 9=Unknown, 11=Yes Here, 12=Yes Elsewhere, 13=Yes Here AND Elsewhere
45b	GIPERF_SC	Surgically Confirmed or Clinically Diagnosed Focal Intestinal Perforation	Integer	{1, 2, 9}	1 =Surgically Confirmed, 2 = Clinically Diagnoised, 9= Unknown
	Starting from 2013, the ompleted weeks of gesta	Retinopathy of Prematurity section (Ite ation.	ms 46a.	To 46d.) is only applie	cable for infants 401-1500 grams or 22
46a	EYEX	Retinal Exam	Integer	{0, 1, 7, 9}	0=No,1=Yes, 7=N/A (only if [DELDIE]=1 OR (([BWGT]<400 OR [BWGT]>1500) AND [GAWEEKS<22] OR [GAWEEKS]>31))), 9=Unknown
46b	ISTAGE	Worst Stage of ROP	Integer	{0 - 5, 7, 9}	0=No evidence of ROP, 1=Presence of demarcation line (+/- abnormal vascularization), 2=Presence of intraretinal ridge, 3=Presence of a ridge with extraretinal fibrovascular proliferation, 4=Partial retinal detachment, 5=Total retinal detachment; 7=N/A (only if [DELDIE]=1 OR [EYEX] in {0,7}); 9=Unknown (always if [EYEX]=9)
46c	VEGF	Treatment of ROP with Anti-VEGF Drug	Integer	{0, 1, 7, 9}	0=No,1=Yes, 7=N/A (only if [DELDIE]=1 OR (([BWGT]<400 OR [BWGT]>1500) AND [GAWEEKS<22] OR [GAWEEKS]>31))), 9=Unknown

46d	SRGROP	Surgery: ROP	Integer	{0, 7, 9, 11, 12, 13}	0=No, 7=N/A (only if [DELDIE]=1 OR [EYEX] in {0,7} OR [ISTAGE]=0), 9=Unknown (always if [EYEX]=9 OR [ISTAGE]=9), 11=Yes Here, 12=Yes Elsewhere, 13=Yes Here AND Elsewhere
47a	SRGOTH	Other Surgery	Integer	{0, 1, 7, 9}	0=No,7=N/A (only if [DELDIE]=1), 1=Yes, 9=Unknown
47b	SRGCD1	First Other Surgery Code	Char6	{(Surgery Codes)B, (Surgery Codes)E, (Surgery Codes)H, 77, 99}	xxxxB,xxxxB=Both Here AND Elsewhere; xxxxE,xxxxxE=Elsewhere; xxxxH,xxxxxH= Here; 77 = N/A (only if [SRGOTH] in {0,7} OR [DELDIE] =1); 99 = Unknown (always if [SRGOTH]=9).
47Ь	SRGCD2	Second Other Surgery Code	Char6	{(Surgery Codes)B, (Surgery Codes)E, (Surgery Codes)H, 77, 99}	xxxxB,xxxxxB=Both Here AND Elsewhere; xxxxE,xxxxxE=Elsewhere; xxxxH,xxxxxH= Here; 77 = N/A (only if [SRGOTH] in {0,7} OR [DELDIE]=1 OR No 2nd Surgery Code); 99 = Unknown (always if [SRGOTH]=9).
47b	SRGCD3	Third Other Surgery Code	Char6	{(Surgery Codes)B, (Surgery Codes)E, (Surgery Codes)H, 77, 99}	xxxxB,xxxxxB=Both Here AND Elsewhere; xxxxE,xxxxE=Elsewhere; xxxxH,xxxxxH= Here; 77 = N/A (only if [SRGOTH] in {0,7} OR [DELDIE]=1 OR No 3rd Surgery Code); 99 = Unknown (always if [SRGOTH]=9).
47b	SRGCD4	Fourth Other Surgery Code	Char6	{(Surgery Codes)B, (Surgery Codes)E, (Surgery Codes)H, 77, 99}	xxxxB,xxxxxB=Both Here AND Elsewhere; xxxxE,xxxxE=Elsewhere; xxxxH,xxxxxH= Here; 77 = N/A (only if [SRGOTH] in {0,7} OR [DELDIE]=1 OR No 4th Surgery Code); 99 = Unknown (always if [SRGOTH]=9).
47Ь	SRGCD5	Fifth Other Surgery Code	Char6	{(Surgery Codes)B, (Surgery Codes)E, (Surgery Codes)H, 77, 99}	xxxxB,xxxxxB=Both Here AND Elsewhere; xxxxE,xxxxE=Elsewhere; xxxxH,xxxxxH= Here; 77 = N/A (only if [SRGOTH] in {0,7} OR [DELDIE]=1 OR No 5th Surgery Code); 99 = Unknown (always if [SRGOTH]=9).
47b	SRGCD6	Sixth Other Surgery Code	Char6	{(Surgery Codes)B, (Surgery Codes)E, (Surgery Codes)H, 77, 99}	xxxxB,xxxxxB=Both Here AND Elsewhere; xxxxE,xxxxE=Elsewhere; xxxxH,xxxxxH= Here; 77 = N/A (only if [SRGOTH] in {0,7} OR [DELDIE]=1 OR No 6th Surgery Code); 99 = Unknown (always if [SRGOTH]=9).

47Ь	SRGCD7	Seventh Other Surgery Code	Char6	{(Surgery Codes)B, (Surgery Codes)E, (Surgery Codes)H, 77, 99}	xxxxB,xxxxxB=Both Here AND Elsewhere; xxxxE,xxxxE=Elsewhere; xxxxH,xxxxxH= Here; 77 = N/A (only if [SRGOTH] in {0,7} OR [DELDIE]=1 OR No 7th Surgery Code); 99 = Unknown (always if [SRGOTH]=9).
47Ь	SRGCD8	Eighth Other Surgery Code	Char6	{(Surgery Codes)B, (Surgery Codes)E, (Surgery Codes)H, 77, 99}	xxxxB,xxxxxB=Both Here AND Elsewhere; xxxxE,xxxxE=Elsewhere; xxxxH,xxxxxH= Here; 77 = N/A (only if [SRGOTH] in {0,7} OR [DELDIE]=1 OR No 8th Surgery Code); 99 = Unknown (always if [SRGOTH]=9).
47Ь	SRGCD9	Ninth Other Surgery Code	Char6	{(Surgery Codes)B, (Surgery Codes)E, (Surgery Codes)H, 77, 99}	xxxxB,xxxxxB=Both Here AND Elsewhere; xxxxE,xxxxE=Elsewhere; xxxxH,xxxxxH= Here; 77 = N/A (only if [SRGOTH] in {0,7} OR [DELDIE]=1 OR No 9th Surgery Code); 99 = Unknown (always if [SRGOTH]=9).
47Ь	SRGCD10	Tenth Other Surgery Code	Char6	{(Surgery Codes)B, (Surgery Codes)E, (Surgery Codes)H, 77, 99}	xxxxB,xxxxxB=Both Here AND Elsewhere; xxxxE,xxxxxE=Elsewhere; xxxxH,xxxxxH= Here; 77 = N/A (only if [SRGOTH] in {0,7} OR [DELDIE]=1 OR No 10th Surgery Code); 99 = Unknown (always if [SRGOTH]=9).
47b	SRGSSI1	Surgical Site Infection at Your hospital for Surgery 1	Integer	{0,1,7,9}	0=No, 1=Yes, 7=N/A (only if [DELDIE]=1 OR [SRGOTH] in {0,7} OR Surgery Code 1 Elsewhere OR Surgery Code 1 Here and Elsewhere), 9=Unknown (only if [SRGOTH]=9).
47Ь	SRGSSI2	Surgical Site Infection at Your hospital for Surgery 2	Integer	{0,1,7,9}	0=No, 1=Yes, 7=N/A (only if [DELDIE]=1 OR [SRGOTH] in {0,7} OR Surgery Code 2 Elsewhere OR Surgery Code 2 Here and Elsewhere OR No 2nd Surgery Code), 9=Unknown (only if [SRGOTH]=9).
47Ь	SRGSSI3	Surgical Site Infection at Your hospital for Surgery 3	Integer	{0,1,7,9}	0=No, 1=Yes, 7=N/A (only if [DELDIE]=1 OR [SRGOTH] in {0,7} OR Surgery Code 3 Elsewhere OR Surgery Code 3 Here and Elsewhere OR No 3rd Surgery Code), 9=Unknown (only if [SRGOTH]=9).

47Ь	SRGSSI4	Surgical Site Infection at Your hospital for Surgery 4	Integer	{0,1,7,9}	0=No, 1=Yes, 7=N/A (only if [DELDIE]=1 OR [SRGOTH] in {0,7} OR Surgery Code 4 Elsewhere OR Surgery Code 4 Here and Elsewhere OR No 4th Surgery Code), 9=Unknown (only if [SRGOTH]=9).
47b	SRGSS15	Surgical Site Infection at Your hospital for Surgery 5	Integer	{0,1,7,9}	0=No, 1=Yes, 7=N/A (only if [DELDIE]=1 OR [SRGOTH] in {0,7} OR Surgery Code 5 Elsewhere OR Surgery Code 5 Here and Elsewhere OR No 5th Surgery Code), 9=Unknown (only if [SRGOTH]=9).
47Ь	SRGSS16	Surgical Site Infection at Your hospital for Surgery 6	Integer	{0,1,7,9}	0=No, 1=Yes, 7=N/A (only if [DELDIE]=1 OR [SRGOTH] in {0,7} OR Surgery Code 6 Elsewhere OR Surgery Code 6 Here and Elsewhere OR No 6th Surgery Code), 9=Unknown (only if [SRGOTH]=9).
47Ь	SRGSS17	Surgical Site Infection at Your hospital for Surgery 7	Integer	{0,1,7,9}	0=No, 1=Yes, 7=N/A (only if [DELDIE]=1 OR [SRGOTH] in {0,7} OR Surgery Code 7 Elsewhere OR Surgery Code 7 Here and Elsewhere OR No 7th Surgery Code), 9=Unknown (only if [SRGOTH]=9).
47Ь	SRGSS18	Surgical Site Infection at Your hospital for Surgery 8	Integer	{0,1,7,9}	0=No, 1=Yes, 7=N/A (only if [DELDIE]=1 OR [SRGOTH] in {0,7} OR Surgery Code 8 Elsewhere OR Surgery Code 8 Here and Elsewhere OR No 8th Surgery Code), 9=Unknown (only if [SRGOTH]=9).
47Ь	SRGSS19	Surgical Site Infection at Your hospital for Surgery 9	Integer	{0,1,7,9}	0=No, 1=Yes, 7=N/A (only if [DELDIE]=1 OR [SRGOTH] in {0,7} OR Surgery Code 9 Elsewhere OR Surgery Code 9 Here and Elsewhere OR No 9th Surgery Code), 9=Unknown (only if [SRGOTH]=9).
47b	SRGSSI10	Surgical Site Infection at Your hospital for Surgery 10	Integer	{0,1,7,9}	0=No, 1=Yes, 7=N/A (only if [DELDIE]=1 OR [SRGOTH] in {0,7} OR Surgery Code 10 Elsewhere OR Surgery Code 10 Here and Elsewhere OR No 10th Surgery Code), 9=Unknown (only if [SRGOTH]=9).

47b	SRGOTHDESC	Other Surgery Description	Char255	{Description, 77, 99}	77=N/A (only if [SRGOTH] in {0,7} OR [DELDIE]=1 OR surgery code does not require description); 99=Unknown (always
					if [SRGOTH]=9); description of surgical procedure(s) if [SRGOTH]=1 and code for
					type of surgery in Appendix requires a
		POST-DELIVERY DIAGNOSES AND I			description.
48a	IMAGE28	Imaging Done On or Before Day 28	Integer	{0, 1, 7, 9}	0=No, 7=N/A (only if [DELDIE]=1), 1=Yes,
400			integer		9=Unknown
48b	IGRADE	Worst Grade of Hemorrhage	Integer	{0-4, 7, 9}	0 (no peri IVH) to 4, 7=N/A (only if [DELDIE]=1 or if [IMAGE28] in {0,7}), 9=Unknown (always if [IMAGE28]=9). Grade 0: No subependymal or intraventricular hemorrhage; Grade 1: Subependymal germinal matrix hemorrhage only; Grade 2: Intraventricular blood, no ventricular dilation; Grade 3: Intraventricular blood, ventricular dilation; Grade 4: Intraparenchymal hemorrhage.
48c	PIHHEMLOC	Periventricular-Intraventricular Hemorrhage (PIH), where first occurred	Integer	{7, 9, 11, 12}	11=Yes and First Here, 12=Yes and First Elsewhere, 7=N/A (only if [DELDIE]=1 OR [IMAGE28] in {0,7} OR [IGRADE] in {0,7}), 9=Unknown (always if [IMAGE28]=9 OR [IGRADE]=9).
48d	SHUNT	Shunt Placed for Bleed	Integer	{0, 1, 7, 9}	0=No, 1=Yes, 7=N/A (only if [DELDIE]=1 OR [IMAGE28] in {0,7} OR [IGRADE] in {0,7}), 9=unknown (always if [IMAGE28]=9 OR [IGRADE]=9).
48e	отннем	Other Intracranial Hemorrage Present	Integer	{0,1, 7, 9}	0=No, 1=Yes, 7=N/A (only if [DELDIE]=1 OR [IMAGE28] in {0,7}), 9=Unknown (always if [IMAGE28]=9).
48e	OTHHEMDESC	Other Intracranial Hemorrhage Description	Char50	{Description, 77, 99}	Up to 50 alphanumeric characters (only if [OTHHEM]=1); 7=N/A (if [OTHHEM] in {0,7} OR [DELDIE]=1), 99=Unknown (always if [OTHHEM]=9).
49a	PVLIMAG	Neural Image Done at Any Time?	Integer	{0, 1, 7, 9}	0=No, 1=Yes, 7=N/A (only if [DELDIE]=1); 9=Unknown. Should always be 1 if [IMAGE28] is 1.

49b	PVL	Cystic Periventricular Leukomalacia	Integer	{0, 1, 7, 9}	0=No, 1=Yes, 7=N/A (only if [DELDIE]=1 OR [PVLIMAG]=0), 9=Unknown (always if [PVLIMAG]=9).
49c	CEREBELLAR_HEM	Cerebellar Hemorrhage	Integer	{0, 1, 7, 9}	0=No, 1=Yes, 7=N/A (only if [DELDIE]=1 OR [PVLIMAG]=0); 9=Unknown (always if [PVLIMAG]=9). Should always be 1 if [OTHHEM]=1 AND [OTHHEMDESC] = Cerebellar Hemorrhage.
50	SEIZURE	Seizures, EEG or Clinical	Integer	{0, 1, 7, 9}	0=No, 7=N/A (only if [DELDIE]=1), 1=Yes, 9=Unknown
51	HIE	Hypoxic-Ischemic Encephalopathy	Integer	{0, 3, 4, 5, 7, 9}	0=No; 3=Mild, 4=Moderate, 5=Severe, 7=N/A (only if [DELDIE]=1 OR [GAWEEKS]<35), 9=Unknown
		T-DELIVERY DIAGNOSES AND INTERVE	NTIONS		
52a	CMAL	Major Congenital Anomaly	Integer		0=No, 1=Yes, 9=Unknown
		.6b [T_BDCD1 to T_BDCD5] must = [Bl	T		
52b	BDCD1	Congenital Anomaly Code 1	Integer	{congenital anomalies Table, 7777, 9999}	7777=N/A (only if [T_CMAL]=0 AND [CMAL]=0), 9999=Unknown (only if [CMAL]=9)
	BDCD1FLAG	Congenital Anomaly Code 1 Diagnosed Prenatally	Integer	{1, 0, 7, 9}	1=Yes, 0=No, 7=N/A (only if [ACUTETRS]=0 OR ([ACUTETRS]=1 AND [T_CMAL]=0)), 9=Unknown (only if [T_CMAL]=9).
52b	BDCD2	Congenital Anomaly Code 2	Integer	{congenital anomalies Table, 7777, 9999}	7777=N/A (only if [T_CMAL]=0 AND [CMAL]=0 OR No 2nd Birth Defect), 9999=Unknown (only if [CMAL]=9)
	BDCD2FLAG	Congenital Anomaly Code 2 Diagnosed Prenatally	Integer	{1, 0, 7, 9}	1=Yes, 0=No, 7=N/A (only if [ACUTETRS]=0 OR ([ACUTETRS]=1 AND [T_CMAL]=0) OR [BDCD2]=7777), 9=Unknown (only if [T_CMAL]=9).
52b	BDCD3	Congenital Anomaly Code 3	Integer	{congenital anomalies Table, 7777, 9999}	7777=N/A (only if [T_CMAL]=0 AND [CMAL]=0 OR No 3rd Birth Defect), 9999=Unknown (only if [CMAL]=9)
	<b>BDCD3FLAG</b>	Congenital Anomaly Code 3 Diagnosed Prenatally	Integer		1=Yes, 0=No, 7=N/A (only if [ACUTETRS]=0 OR ([ACUTETRS]=1 AND [T_CMAL]=0) OR [BDCD3]=7777), 9=Unknown (only if [T_CMAL]=9).
52b	BDCD4	Congenital Anomaly Code 4	Integer		7777=N/A (only if [T_CMAL]=0 AND [CMAL]=0 OR No 4th Birth Defect), 9999=Unknown (only if [CMAL]=9)
	BDCD4FLAG	Congenital Anomaly Code 4 Diagnosed Prenatally	Integer	{1, 0, 7, 9}	1=Yes, 0=No, 7=N/A (only if [ACUTETRS]=0 OR ([ACUTETRS]=1 AND

52b	BDCD5	Congenital Anomaly Code 5	Integer	{congenital anomalys	
				Table, 7777, 9999}	[CMAL]=0 OR No 5th Birth Defect),
					9999=Unknown (only if [CMAL]=9)
	BDCD5FLAG	Congenital Anomaly Code 5 Diagnose	d Integer	{1, 0, 7, 9}	1=Yes, 0=No, 7=N/A (only if
		Prenatally			[ACUTETRS]=0 OR ([ACUTETRS]=1 AND
					[T_CMAL]=0) OR [BDCD5]=7777),
					9=Unknown (only if [T_CMAL]=9).
		C.6b [T_BDEFECT] must = [BDEFECT] i	n the CPQ	CC Section. Submit th	his variable once by only entering the
data in	the CPQCC Section.				
52b	BDEFECT	Congenital Anomaly Description	Char255	{Description, 77, 99}	NOTE: This variable applies to any
					description regardless if diagnosed
					prenatally or post-natally. Up to 255
					alphanumeric characters (necessary if
					codes 100, 150, 200, 300, 400, 504, 601,
					605, 800, 900 were filled in for one or
					more of the 5 codes); 77=N/A (only if
					[T_CMAL]=0 AND [CMAL]=0);
					99=Unknown (always if [CMAL]=9)
		POST-DELIVERY DIAGNOSES AND INT			
NOTE	Answer only for Outborr	Infants Previously Discharged Home		NS IIIPERDILIRUD	
53a	BILILEVEL	TSB Level (15 to 45)	Integer	{1, 2, 3, 7, 9}	1=less than 25, 2=25 to less than 30,
55a	BILILEVEL	13D Level (13 to 43)	Integer	{1, 2, 3, 7, 9}	3= greater than or equal to 30, $7=$ N/A (only
					if [DELDIE]=1 OR [LOCATE] in {0,2} OR
					[PDH]=0), 9=Not Done/ Unknown.
53b	EXCHANGE	Exchange Transfusion	Integer	{0, 1, 7, 9}	0=No, 1=Yes, 7=N/A (only if [DELDIE]=1
555			integel		OR [LOCATE] in {0,2} or [PDH]=0),
					9=Unknown.
53c	LASTHOSPITAL	Last Hospital Prior to Discharge	Char6	{HCAI ID (formerly	Valid HCAI ID (formerly OSHPD) number
	LASTINOSPITAL			OSHPD) number,	(see list); 777777=N/A (only if [DELDIE]=1
			1	777777, 9999999}	OR [LOCATE] in {0,2} OR [PDH]=0),
					999999=Unknown.
		LANGUAGE AN	<b>D INTERP</b>	RETER	

54a	LANGUAGE	Primary Caregiver's Preferred	Integer	{Language codes}	592 = English
		Language			593 = Arabic
					594 = Armenian
					595 = Cambodian/Khmer
					596 = Cantonese
					597 = Farsi/Persian
					598 = Hmong/Miao
					599 = Korean
					600 = Mandarin
					601 = Russian
					602 = Spanish
					603 = Tagalog
					604 = Vietnamese
					605 = Sign Language
					725 = Japanese
					726 = Hindi
					727 = Mixteco
					728 = Punjabi
					729 = Thai
					7777 = Not Applicable (only if [DELDIE]=1)
					8888 = Other, DESCRIBE
					9999 = Unknown
54b	LANGUAGEDESC	Primary Caregiver's Preferred	Char6	Char64	Only if [LANGUAGE]=8888
540	LANGUAGEDESC	Language, description for Other	Charo	Charot	
55	INTERPRETER	Did the primary caregiver require	Integer	{1, 0, 7, 9}	1=Yes, 0=No, 7=N/A (always if
		interpreter services (either in-person			[DELDIE]=1 or [LANGUAGE]=592),
		or remote) during this hospitalization?			9=Unknown (always if [LANGUAGE]=9999)
		INITIAL DI	SPOSITIO	N	
56	ENTFEED	Enteral Feeding at Discharge	Integer	{0, 1, 2, 3, 7, 9}	0=None, 1=Human Milk Only, 2=Formula
					Only, 3=Human Milk Fortified with Formula,
					7=N/A (only if [DELDIE]=1), 9=Unknown
57	FDISP	Initial Disposition From Your Hospital	Integer	{1, 2, 3, 5, 7, 9}	1=Home, 2=Transported, 3=Died, 5=Still
	_	- F			hospitalized as of first birthday, $7=N/A$
					(only if [DELDIE]=1), 9=Unknown

58	DWGT	Initial Disposition Weight (in Grams)	Long Integer	{201-66665, 99999}	201-66665, 77777=Not Done or N/A (always if [DELDIE]=1), 99999=Unknown
59	HEADCIRC	Head Circumference at Initial Disposition (in cm to nearest 10th of a cm)	Double	{10.0-70.0, 777.7, 999.9}	10.0 TO 70.0, 777.7=Not done or N/A (always if [DELDIE]=1) 999.9=Unknown
60	LOS1	Initial Length of Stay	Integer	{1-366 or 367, 999}	1 to 366 (367 if leap day must be added), 777=N/A (only if [DELDIE]=1); 999=Unknown.
61	TRANSCODE	Reason for Transport	SFER Integer	9, 10}	0=ECMO, 10= Hypothermic Therapy, 3=Surgery, 2=Other Medical/Diagnostic services, 1=Growth/Discharge planning, 4=Chronic care, 5=Other Reason, 6=Insurance, 7=N/A (only if [DELDIE]=1 OR FDISP in {1,3,5}), 9=Unknown (always if [FDISP]=9)
62	XFERLOCATION	Transferred to a CPQCC Center	Char6	{HCAI ID (formerly OSHPD) number, 777777, 999999}	Valid HCAI ID (formerly OSHPD)number (see list); 77777=N/A (only if [DELDIE]=1 OR [FDISP] in {1,3,5}); 999999=Unknown (always if [FDISP]=9).
63	F2DISP	Post-Transfer Disposition	Integer	{1, 2, 3, 4, 5, 7, 9}	1=Home, 2=Transferred again to another hospital, 3=Died, 4=Readmitted to your hospital, 5=Still hospitalized as of first birthday, 7=N/A {only if [DELDIE]=1 OR [FDISP] in {1,3,5}); 9=Unknown (always if [FDISP]=9)

64	F3WGT	Weight at Disposition after Re- Admission	Long Integer	{20166665, 77777, 99999}	201-66665 (if [F2DISP]=4), 77777=N/A (only if [F2DISP] in {1,2,3,5,7) OR
					[DELDIE]=1), 99999=Unknown (always if [F2DISP=9] or [FDISP=9])
65	F3DISP	Disposition after Re-Admission	Integer		1=Home, 2=Transferred again to another hospital, 3=Died, 5=Still hospitalized as of first birthday, 7=N/A (only if [DELDIE]=1 OR [F2DISP] in {1,2,3,5,7}), 9=Unknown (always if [F2DISP]=9 OR [FDISP]=9)
66	UDISP	Ultimate Disposition of Infant	Integer	{1, 3, 5, 7, 9}	1=Home, 3=Died, 5=Still hospitalized as of first birthday, 7=N/A (only if [DELDIE]=1 OR [F2DISP] in {1,3,5,7} OR [F3DISP] in {1,3,5,7}); 9 (always if [FDISP]=9 OR [F2DISP]=9 OR [F3DISP]=9).
67	LOSTOT	Total Length of Stay	Integer	999}	367 for leap years, 777=N/A (if [DELDIE]=1 OR [FDISP] in {1,3,5}), 999=Unknown (always if [FDISP]=9).

2024 Item	Field Name	Description	Situation A:	Situation B:	Situation C:	Situation D: Safe
2024 Rem			Requested Delivery Attendance	Transport by Referring Center (Self- Transport)	Transport from Emergency Department or other non- perinatal setting	Surrender
None	T_SPECIALSITUATION	Transport Special Situation	1000=Situation A; NOTE: Situation A CANNOT occur with any of the other three Special Situations	only; 0110= Situation B and Situation C; 0101= Situation B and	only; 0110= Situation B and Situation C; 0011= Situation C and	0001= Situation D only; 0101= Situation B and Situation D; 0011= Situation C and Situatio D; 0111= Situation B, Situation C, and Situatio D
C.1	T_TYPE	Transport Type	1=Requested Delivery	enter data	enter data	enter data
C.1	T_TYPEDESC	Type Describe	enter data	enter data	enter data	enter data
C.2	T_TRANSCODE	Indication for Transport	enter data	enter data	enter data	enter data
C.14	T_REFDATETIME	Date/Time of Referral	enter data	enter data	enter data	enter data
C.15	T_ACCDATETIME	Date/Time of Acceptance	enter data	enter data	enter data	enter data
C.10	T_MADMDATETIME	Date/Time of mother's admission to L&D	enter data	enter data	N/A	N/A
C.11	T_BDATETIME	Date/Time of birth	enter data	enter data		Submit Date of Birth; N/A=Time of Birth ONL
C.3	T_BWGT	Birthweight	enter data	enter data	Enter current weight	Enter current weight
C.4/ (AD3a, 3b)	GAWEEKS, GADAYS	Best estimate of gestational age weeks, days	enter data	enter data	enter data	enter data
C.5/ (AD5)	SEX	Sex of infant	enter data	enter data	enter data	enter data
C.6a	T_CMAL	Major Birth Defect Diagnosed Prenatally	enter data	enter data		N/A
C.6b	T_BDCD1 to T_BDCD5	Birth Defect Code 1 to 5	enter data	enter data	N/A	N/A

C.7a	MDATE	Mother's Date of Birth	enter data	enter data	N/A	N/A
C.8a	ASTER	Antenatal Steroids	enter data	enter data	N/A	N/A
C.8b	ANCMAMAGSULF	Antenatal Conditions, Magnesium - Antenatal	enter data	enter data	N/A	N/A
C.9a	DRSURF	Surfactant in the Delivery Room	enter data	enter data	enter data	N/A
C.9b	T_SURFX	Surfactant Given at any time	enter data	enter data	enter data	N/A
C.12	T_mftranscon	Maternal Fetal Transport Consideration	enter data	enter data	N/A	N/A
C.13	T_SURFXDATETIME	Date/Time of Surfactant administration	enter data	enter data	enter data	enter data
C.18	T_EVALINITDATETIME	Date/Time of Initial Evaluation by Transfer Team	enter data	N/A	enter data	enter data
C.19	T_EVALNICUDATETIME	Date/Time of NICU Admission	enter data	enter data	enter data	enter data
C.20	T_RESP1	at Referral	N/A	enter data	enter data	enter data
	T_RESP2	at Initial Evaluation	enter data	N/A	enter data	enter data
	T_RESP3	at NICU Admission	enter data	enter data	enter data	enter data
C.23	T_RESPRATE1	at Referral	N/A	enter data	enter data	enter data
	T_RESPRATE2	at Initial Evaluation	enter data	N/A	enter data	enter data
	T_RESPRATE3	at NICU Admission	enter data	enter data	enter data	enter data
C.24	T_SAO21	at Referral	N/A	enter data	enter data	enter data
	T_SAO22	at Initial Evaluation	enter data	N/A	enter data	enter data
	T_SAO23	at NICU Admission	enter data	enter data	enter data	enter data
C.25	T_RESPSTATUS1	at Referral	N/A	enter data	enter data	enter data
	T_RESPSTATUS2	at Initial Evaluation	enter data	N/A	enter data	enter data
	T_RESPSTATUS3	at NICU Admission	enter data	enter data	enter data	enter data
C.26	T_FIO21	at Referral	N/A	enter data	enter data	enter data
	T_FIO22	at Initial Evaluation	enter data	N/A	enter data	enter data
	T_FIO23	at NICU Admission	enter data	enter data	enter data	enter data
C.22	T_HEARTRATE1	at Referral	N/A	enter data	enter data	enter data
	T_HEARTRATE2	at Initial Evaluation	enter data	N/A	enter data	enter data
	T_HEARTRATE3	at NICU Admission	enter data	enter data	enter data	enter data
C.28a	T_BPSYS1	at Referral	N/A	enter data	enter data	enter data
	T_BPSYS2	at Initial Evaluation	enter data	N/A	enter data	enter data

1		T_BPSYS3	at NICU Admission	enter data	enter data	enter data	enter data
7	C.28b	T_BPDIA1	at Referral	N/A	enter data	enter data	enter data
		T_BPDIA2	at Initial Evaluation	enter data	N/A	enter data	enter data

	T BPDIA3	at NICU Admission	enter data	enter data	enter data	enter data
C.28c	T BPMEAN1	at Referral	N/A	enter data	enter data	enter data
	T_BPMEAN2	at Initial Evaluation	enter data	N/A	enter data	enter data
	T_BPMEAN3	at NICU Admission	enter data	enter data	enter data	enter data
C.29	T_PRESSOR1	at Referral	N/A	enter data	enter data	enter data
	T_PRESSOR2	at Initial Evaluation	enter data	N/A	enter data	enter data
	T_PRESSOR3	at NICU Admission	enter data	enter data	enter data	enter data
C.21.a	T_COOLING1	at Referral	N/A	enter data	enter data	enter data
	T_COOLING2	at Initial Evaluation	enter data	N/A	enter data	enter data
	T_COOLING3	at NICU Admission	enter data	enter data	enter data	enter data
C.21.b	T_COOLINGMETHOD1	at Referral	N/A	enter data	enter data	enter data
	T_COOLINGMETHOD2	at Initial Evaluation	enter data	N/A	enter data	enter data
	T_COOLINGMETHOD3	at NICU Admission	enter data	enter data	enter data	enter data
C.21.c	T_TEMP1	at Referral	N/A	enter data	enter data	enter data
	T_TEMP2	at Initial Evaluation	enter data	N/A	enter data	enter data
	T_TEMP3	at NICU Admission	enter data	enter data	enter data	enter data
C.27	T_VENTMODE1	at Referral	N/A	enter data	enter data	enter data
	T_VENTMODE2	at Initial Evaluation	enter data	N/A	enter data	enter data
C.30	T REFERRINGHOSPITAL	Referrring Hospital	enter data	enter data	enter data	enter data
C.31a	T_FIRSTTRANS	Is this the first transfer for this infant?	enter data	enter data	enter data	enter data
C.31b	T_PREVHOSPITAL	Previously Transfer Referring Hospital	enter data	enter data	enter data	enter data
C.32	BIRTHLOCATION	Hospital of Birth	enter data	enter data	enter data	900099= Safe Surrender
C.33	T_TEAMLEADER	Team Leader	enter data	enter data	enter data	enter data

C.34b	T_TEAMBASECS	Contract Service used	enter data	enter data	enter data	enter data
C.35	T_TRANSMODE	Mode of Transport	enter data	enter data	enter data	enter data
C.16	T_TTDEPDATETIME	Date/Time of transport team departure for referring hospital	enter data	N/A	enter data	enter data
C.17	T_TTARRDATETIME	Date/Time of transport team arrival at referring hospital	enter data	N/A	enter data	enter data
C.35	T_USERCOMMENT	User Comment Box	enter data [optional]	enter data [optional]	enter data [optional]	enter data [optional]