



<p><b>Reporting guide</b></p>	<p>(&gt;42iu/l), or an increased plasma aspartate aminotransferase concentration (&gt;42iu/l)</p> <ul style="list-style-type: none"> <li>○ Severe epigastric pain or right upper quadrant pain</li> <li>○ Pulmonary oedema</li> <li>○ Fetal growth restriction</li> <li>○ Placental abruption</li> </ul> <p>Please indicate how the diagnosis was made. If there is more than one piece of information that led to the diagnosis, please select all relevant diagnosis mechanisms.</p>
<p><b>Criteria for amniotic fluid embolism</b></p> <p><b>Definition</b></p> <p><b>Valid response</b></p> <p><b>Reporting guide</b></p>	<p>A case is defined when the clinician believes or has evidence that amniotic fluid has entered the maternal circulation, and the woman is treated as though she has had an amniotic fluid embolism.</p> <ul style="list-style-type: none"> <li>• A clinical diagnosis of AFE (acute hypotension or cardiac arrest, acute hypoxia and coagulopathy in the absence of any other potential explanation for the symptoms and signs observed);</li> <li>• A pathological/post mortem diagnosis (presence of fetal squames/debris in the pulmonary circulation)</li> </ul> <p>Please indicate how the diagnosis was made. If there is more than one piece of information that led to the diagnosis, please select all relevant diagnosis mechanisms.</p>
<p><b>Criteria for antenatal pulmonary embolism</b></p> <p><b>Definition</b></p> <p><b>Valid response</b></p> <p><b>Reporting guide</b></p>	<p>Pulmonary embolism (PE) occurs when a thrombosis in the deep venous system, usually of the lower limb or pelvic veins, embolises to the pulmonary vasculature.</p> <p>A case is defined when a woman has been objectively diagnosed with a pulmonary embolism in the antenatal period. Acceptable methods of diagnosis include imaging, surgery and post-mortem findings.</p> <ul style="list-style-type: none"> <li>• Diagnosed by imaging procedure E.g. angiography, computed tomography, echocardiography, magnetic resonance imaging or ventilation-perfusion scan showing a high probability of pulmonary embolism</li> <li>• Diagnosed at surgery</li> <li>• Diagnosed by post-mortem</li> </ul> <p>Please indicate how the diagnosis was made. If there is more than one piece of information that led to the diagnosis, please select all relevant diagnosis mechanisms.</p> <p>Given that the clinical signs and symptoms of pulmonary embolism are so non-specific, women should not be included in the absence of objective investigations to confirm the diagnosis, even when a course of anticoagulation is given.</p>

<p><b>Criteria for placenta accreta</b></p> <p><b>Definition</b></p> <p><b>Valid response</b></p> <p><b>Reporting guide</b></p>	<p>A case is defined as any woman identified as having placenta accreta, increta or percreta.</p> <p>Placenta accreta occurs when the placenta attaches abnormally to the uterine lining. Placenta increta refers to when the placenta invades the uterine muscle (myometrium), whilst placenta percreta refers to when the placenta grows through the myometrium and into adjacent structures, such as the bladder and ureters. The term placenta accreta is often used as a general term to describe all of these conditions. For the purpose of this survey, all cases of accreta, increta and percreta will be defined as a case of placenta accreta. Details of the type of abnormal placental growth are included in the data form.</p> <ul style="list-style-type: none"> <li>• Diagnosed by antenatal imaging</li> <li>• Diagnosed clinically, at operation</li> <li>• Diagnosed by pathology specimen</li> </ul> <p>Please indicate how the diagnosis was made. If there is more than one piece of information that led to the diagnosis, please select all relevant diagnosis tools.</p>
<p><b>Criteria for morbid obesity</b></p> <p><b>Definition</b></p> <p><b>Valid response</b></p> <p><b>Reporting guide</b></p>	<p>A case is defined as any woman with a weight over 140Kg at any point during pregnancy; and/or a Body Mass Index (BMI) greater than 50 at any point during pregnancy.</p> <ul style="list-style-type: none"> <li>• a weight over 140Kg at any point during pregnancy; and/or</li> <li>• a Body Mass Index (BMI) greater than 50 at any point during pregnancy; or</li> <li>• estimated to be in either of the above categories but weight exceeds the capacity of hospital scales</li> </ul> <p>Body mass index is the woman's body weight divided by the square of her height. The unit of measure is kg/m<sup>2</sup>. Please indicate if the BMI was calculated by measured or self-reported values of height and/or weight.</p>
<p><b>Criteria for peripartum hysterectomy</b></p> <p><b>Definition</b></p> <p><b>Valid response</b></p> <p><b>Reporting guide</b></p>	<p>Peripartum hysterectomy is the surgical intervention to control massive obstetric bleeding with the aim of saving the woman's life.</p> <p>Any woman whose pregnancy ends before 20 weeks' gestation and who undergoes a hysterectomy within six weeks postpartum, when the indication for hysterectomy is related to the pregnancy e.g. uterine sepsis</p> <p>Any woman giving birth and who undergoes a hysterectomy within six weeks postpartum when the indication for hysterectomy is related to the birth e.g. uterine atony, secondary postpartum haemorrhage</p>

	<p>Any hysterectomy that occurs immediately following or within six weeks of the end of a pregnancy. The pregnancy may have resulted in an elective termination, miscarriage, hydatiform mole, ectopic pregnancy, stillbirth or livebirth.</p> <p>If the hysterectomy was planned, for example due to known placenta accreta, then the woman is still defined as a case.</p>
<p><b>Criteria for Influenza in pregnancy (ICU admission)</b></p> <p><b>Definition</b></p> <p><b>Valid response</b></p> <p><b>Reporting guide</b></p>	<p>Any woman admitted to an Intensive Care Unit who is diagnosed (on admission or subsequently) with influenza, who is either pregnant or has given birth within the previous 42 days.</p> <p>Is diagnosed with Influenza (<i>any subtype</i>) and admitted to Intensive Care, and:</p> <p>a) is pregnant on admission to Intensive Care, or</p> <p>b) has given birth within the 42 days prior to admission to ICU</p> <p>Please indicate whether the woman was admitted to ICU for influenza pregnant or given birth within 42 prior to admission to ICU.</p> <p>If the woman gave birth in ICU after admission for influenza, select 'a) is pregnant on admission to Intensive Care'.</p>