Health (Notifications by Midwives) Regulations 1994	Form 2 NOTIFICATION OF CASE ATTE	NDED MR15
Last name	Unit	Establishment
F	Record No.	Ward
First name	Birth date (Mother)	Marital status 1=never married 2=widowed 3=divorced
Address of usual residence Number and street	State Post code	4=separated 5=married (incl. defacto) 6=unknown
Town or suburb	Hoight Weight	Ethnic status of mother 1=Caucasian 10=Aboriginal not TSI
Maiden name_		11=TSI not Aboriginal 12=Aboriginal and TSI
		Other
PREGNANCY DETAILS	LABOUR DETAILS	BABY DETAILS
PREVIOUS PREGNANCIES:	Onset of labour:	(Please use a separate form for each baby)
Total number (excluding this pregnancy):	1=spontaneous 2=induced 3=no labour	Adoption: 1=yes 2=no
Previous pregnancy outcomes: - liveborn, now living	Augmentation (labour has begun): 1 □ none	Born before arrival: 1=yes 2=no
- liveborn, now dead	2 ☐ oxytocin 3 ☐ prostaglandins	Birth date:
- stillborn	4 artifical rupture of membranes	Birth time (24hr clock):
Number of previous caesareans	8 other	Plurality (number of babies this birth):
Caesarean last delivery 1=yes 2=no	Induction (before labour began): 1 □ none	Birth order
Previous multiple births 1=yes 2=no	2 oxytocin	(specify this baby, eg, 1=1st baby born, 2=2nd baby born, etc):
THIS PREGNANCY:	3 □ prostaglandins4 □ artificial rupture of membranes	Presentation:
Estimated gest wk at 1st antenatal visit	8 other	1=vertex 2=breech 3=face 4=brow 8=other
Total number of antenatal care visits	Analgesia (during labour): 1 □ none	Method of birth:
Date of LMP:	2 nitrous oxide	□ spontaneous □ vacuum successful
This date certain 1=yes 2=no	4 ☐ epidural/caudal 5 ☐ spinal	3 □ vacuum unsuccessful
Expected due date: 2 0	6 ☐ systemic opioids	4 ☐ forceps successful 5 ☐ forceps unsuccessful
based on 1=clinical signs/dates 2=ultrasound <20 wks	7	6 □ breech (vaginal)
3=ultrasound ≥20 wks	Duration of labour: hr min	7 ☐ elective caesarean 8 ☐ emergency caesarean
Smoking:	1st stage (hour & min):	Accoucheur(s):
Number of tobacco cigarettes usually smoked each day during first 20 weeks	2 nd stage (hour & min):	□ obstetrician □ other medical officer
Number of tobacco cigarettes usually	DELIVERY DETAILS	3 ☐ midwife
smoked each day after 20 weeks of pregnancy. (none, use '000'; occasional or smoked <1, use '998';	Anaesthesia (during delivery):	4 □ student 5 □ self/no attendant
undetermined, use '999')	1 □ none	8 other
Complications of pregnancy:	2 ☐ local anaesthesia to perineum 3 ☐ pudendal	Gender:
1	4 ☐ epidural/caudal	1=male 2=female 3=indeterminate
3 ☐ urinary tract infection 4 ☐ pre-eclampsia	5 □ spinal	Status of baby at birth: 1=liveborn 2=stillborn (unspecified)
□ pre-eclampsia □ Antepartum haemorrhage (APH) –	6 ☐ general 7 ☐ combined spinal/epidural	3=antepartum stillborn 4=intrapartum stillborn
placenta praevia 6 □ APH – placental abruption	8 □ other	Infant weight (whole gram):
7 APH – other	Complications of labour and delivery (includes the reason for operative delivery):	Length (whole cm):
8 ☐ pre-labour rupture of membranes 9 ☐ gestational diabetes	1 ☐ precipitate delivery	Head circumference (whole cm):
10 other (specify)	2 ☐ fetal distress 3 ☐ prolapsed cord	Time to establish unassisted regular
	4 cord tight around neck	breathing (whole min):
Medical conditions:	5 □ cephalopelvic disproportion6 □ PPH(≥500mls)	Resuscitation: (record one only – the most invasive or
□ essential hypertension □ pre-existing diabetes mellitus	7 retained placenta - manual removal	highest number) 1 □ none
3 □ asthma	8 ☐ persistent occipito posterior 9 ☐ shoulder dystocia	2
4 ☐ genital herpes 8 ☐ other (specify)	9 ☐ shoulder dystocia 10 ☐ failure to progress ≤3cm	3 □ oxygen therapy only 4 □ bag and mask (IPPR)
	11 ☐ failure to progress > 3cm	5 endotrachaeal intubation
Procedures/treatments:	12 ☐ previous caesarean section 13 ☐ other (specify)	6 □ ext. cardiac massage and ventilation 8 □ other
□ fertility treatments (include drugs) □ cervical suture		Apgar score: 1 minute
3 ☐ CVS/placental biopsy	Perineal status:	5 minutes
4 □ amniocentesis 5 □ ultrasound	1 ☐ intact	Estimated gestation (whole weeks):
6 ☐ CTG antepartum	 2	Birth defects (specify):
7 □ CTG intrapartum	4 3rd degree tear	Birth trauma (specify):
Intended place of birth at onset of labour: 1=hospital 2=birth centre attached to hospital	5 □ episiotomy	BABY SEPARATION DETAILS
3=birth centre free standing 4=home 8=other	7	Separation date: 2 0
MIDWIFE		Mode of separation:
Name	ABORIGINAL STATUS OF BABY	1=transferred 8=died 9=discharged home
Signature	(Tick one box only) 1 □ Aboriginal but not TSI	Transferred to: (specify establishment code)
Date 2 0	2 TSI but not Aboriginal	Special care number of days:
Reg. No.	3 ☐ Aboriginal and TSI	(excludes Level 1; whole days only)

HEALTH DEPARTMENT'S COPY

Health (Notifications by Midwives) Regulations 1994 Form 2 NOTIFICATION OF CASE ATTENDED MR15				
Last name	Unit Record No.	Establishment		
First name	Birth date (Mother)	Marital status		
Address of usual residence Number and street	State Post code	1=never married 2=widowed 3=divorced 4=separated 5=married (incl. defacto) 6=unknown		
Town or suburb_	Height Weight	Ethnic status of mother 1=Caucasian 10=Aboriginal not TSI		
Maiden name	(whole cm) (whole kilogram) Telephone	11=TSI not Aboriginal 12=Aboriginal and TSI		
PREGNANCY DETAILS		OtherBABY DETAILS		
	LABOUR DETAILS	(Please use a separate form for each baby)		
	Onset of labour: 1=spontaneous 2=induced 3=no labour	Adoption: 1=yes 2=no		
Previous pregnancy outcomes:	Augmentation (labour has begun):	Born before arrival: 1=yes 2=no		
- liveborn, now living	1 □ none 2 □ oxytocin	Birth date: 20		
1 1 11	3 □ prostaglandins 4 □ artifical rupture of membranes	Birth time (24hr clock):		
Ottili Ot	8 other	Plurality (number of babies this birth):		
Caesarean iasi delivery T-ves Z-no	Induction (before labour began): 1 □ none	Birth order		
Previous multiple births 1=yes 2=no L	2 □ oxytocin	(specify this baby, eg, 1=1st baby born, 2=2nd baby born, etc):		
This pregnancy:	3 □ prostaglandins4 □ artificial rupture of membranes	Presentation:		
	8 other	1=vertex 2=breech 3=face 4=brow 8=other		
Dete of LMD:	Analgesia (during labour): 1 □ none	Method of birth: 1 □ spontaneous		
	2 □ nitrous oxide 4 □ epidural/caudal	2 □ vacuum successful		
Everanted due date:	5 □ spinal	3 □ vacuum unsuccessful 4 □ forceps successful		
	6 □ systemic opioids 7 □ combined spinal/epidural	5 ☐ forceps unsuccessful 6 ☐ breech (vaginal)		
1	8 other	7 🗆 elective caesarean		
Smoking:	Duration of labour: hr min	8 — emergency caesarean		
Number of tobacco cigarettes usually	1st stage (hour & min):	Accoucheur(s): 1 □ obstetrician		
		2 □ other medical officer 3 □ midwife		
Number of tobacco cigarettes usually smoked each day after 20 weeks of pregnancy.	DELIVERY DETAILS	4 □ student		
(none, use '000'; occasional or smoked <1, use '998'; undetermined, use '999')	Anaesthesia (during delivery): 1 □ none	5 □ self/no attendant 8 □ other		
Complications of pregnancy:	2 ☐ local anaesthesia to perineum	Gender:		
	3 □ pudendal 4 □ epidural/caudal	1=male 2=female 3=indeterminate		
3 ☐ urinary tract infection	5 □ spinal	Status of baby at birth: 1=liveborn 2=stillborn (unspecified)		
l · · · · · · · · · · · · · · · · ·	6 □ general 7 □ combined spinal/epidural	3=antepartum stillborn 4=intrapartum stillborn		
placenta praevia	8 □ other	Infant weight (whole gram):		
7 APH – other	Complications of labour and delivery (includes the reason for operative delivery):	Length (whole cm):		
9	1 ☐ precipitate delivery	Head circumference (whole cm):		
10 □ other (specify)	2 ☐ fetal distress 3 ☐ prolapsed cord	Time to establish unassisted regular		
	4 ☐ cord tight around neck	breathing (whole min):		
ivicultai conditions.	5 □ cephalopelvic disproportion 6 □ PPH(≥500mls)	Resuscitation: (record one only – the most invasive or		
2 pre-existing diabetes mellitus	7 🔲 retained placenta - manual removal	highest number) 1 □ none		
-	8 ☐ persistent occipito posterior 9 ☐ shoulder dystocia	2 ☐ suction only 3 ☐ oxygen therapy only		
8	10 ☐ failure to progress ≤3cm	4 □ bag and mask (IPPR)		
	11 ☐ failure to progress > 3cm 12 ☐ previous caesarean section	5 □ endotrachaeal intubation 6 □ ext. cardiac massage and ventilation		
Procedures/treatments: 1 □ fertility treatments (include drugs)	13 other (specify)	8 other		
2 □ cervical suture		Apgar score: 1 minute		
4 amniocentesis	Perineal status:	5 minutes		
5 □ ultrasound	1	Estimated gestation (whole weeks):		
7 □ CTG intrapartum	3 ☐ 2 nd degree tear	Birth defects (specify):		
Intended place of birth at onset of labour:	4 □ 3 rd degree tear 5 □ episiotomy	BABY SEPARATION DETAILS		
1=hospital 2=birth centre attached to hospital	7 🗆 4 th degree tear			
	8 other			
MIDWIFE Name	ABORIGINAL STATUS OF BABY	Mode of separation:		
Signature	(Tick one box only)	Transferred to: (specify establishment code)		
	1 □ Aboriginal but not TSI 2 □ TSI but not Aboriginal	Special care number of days:		
Reg No	3 □ Aboriginal and TŠI	(excludes Level 1; whole days only)		
	4 ☐ Other	Coder ID:		

MEDICAL RECORDS' COPY

Health (Notifications by Midwives) Regulations 1994	4 Form 2 NOTIFICATION OF CASE ATTE	NDED MR15
Last name	Unit Record No.	Establishment
First name	Birth date (Mother)	Marital status
Address of usual residence		1=never married 2=widowed 3=divorced 4=separated 5=married (incl. defacto)
Number and street	State Post code	6=unknown
	Height Weight	Ethnic status of mother 1=Caucasian 10=Aboriginal not TSI
Town or suburb		11=TSI not Aboriginal 12=Aboriginal and TSI
Maiden name	Telephone	Other
PREGNANCY DETAILS	LABOUR DETAILS	BABY DETAILS
PREVIOUS PREGNANCIES:	Onset of labour:	(Please use a separate form for each baby)
Total number (excluding this pregnancy):	1=spontaneous 2=induced 3=no labour	Adoption: 1=yes 2=no
Previous pregnancy outcomes: - liveborn, now living	Augmentation (labour has begun): 1 □ none	Born before arrival: 1=yes 2=no
- liveborn, now dead	2 □ oxytocin 3 □ prostaglandins	Birth date: 2 0
- stillborn	4 ☐ artifical rupture of membranes	Birth time (24hr clock):
Number of previous caesareans	8 other	Plurality (number of babies this birth):
Caesarean last delivery 1=yes 2=no	Induction (before labour began): 1 □ none	Birth order
Previous multiple births 1=yes 2=no	2 □ oxytocin 3 □ prostaglandins	(specify this baby, eg, 1=1 st baby born, 2=2 nd baby born, etc):
THIS PREGNANCY: Estimated gest wk at 1st antenatal visit	4 ☐ artificial rupture of membranes	Presentation:
Total number of antenatal care visits	8	1=vertex 2=breech 3=face 4=brow 8=other
	1 🗍 none	Method of birth: 1 □ spontaneous
Date of LMP: 2 0 This date certain 1=yes 2=no	2 □ nitrous oxide 4 □ epidural/caudal	2 ☐ vacuum successful
Expected due date: 2 0	5 □ spinal	3 □ vacuum unsuccessful 4 □ forceps successful
based on 1=clinical signs/dates	6 ☐ systemic opioids 7 ☐ combined spinal/epidural	5 ☐ forceps unsuccessful
2=ultrasound <20 wks	8 □ other	6 ☐ breech (<i>vaginal</i>) 7 ☐ elective caesarean
3=ultrasound ≥20 wks Smoking:	Duration of labour: hr min	8
Number of tobacco cigarettes usually	1st stage (hour & min):	Accoucheur(s): 1 □ obstetrician
smoked each day during first 20 weeks	2 nd stage (hour & min):	2 ☐ other medical officer 3 ☐ midwife
Number of tobacco cigarettes usually smoked each day after 20 weeks of pregnancy.	DELIVERY DETAILS	4 □ student
(none, use '000'; occasional or smoked <1, use '998'; undetermined, use '999')	Anaesthesia (during delivery):	5 □ self/no attendant 8 □ other
Complications of pregnancy:	□ none □ local anaesthesia to perineum	Gender:
1 ☐ threatened abortion (<20wks)	3 □ pudendal	1=male 2=female 3=indeterminate
2 ☐ threatened preterm labour (<37 wks) 3 ☐ urinary tract infection	4 □ epidural/caudal 5 □ spinal	Status of baby at birth: 1=liveborn 2=stillborn (unspecified)
4 ☐ pre-eclampsia 5 ☐ Antepartum haemorrhage (APH) –	6 ☐ general 7 ☐ combined spinal/epidural	3=antepartum stillborn 4=intrapartum stillborn
placenta praevia	8 other	Infant weight (whole gram):
6 ☐ APH – placental abruption 7 ☐ APH – other	Complications of labour and delivery	Length (whole cm):
8 pre-labour rupture of membranes9 gestational diabetes	(includes the reason for operative delivery): 1 □ precipitate delivery	Head circumference (whole cm):
9 ☐ gestational diabetes 10 ☐ other (specify)	2 ☐ fetal distress 3 ☐ prolapsed cord	, ,
	4 ☐ cord tight around neck	Time to establish unassisted regular breathing (whole min):
Medical conditions:	5 ☐ cephalopelvic disproportion 6 ☐ PPH(≥500mls)	Resuscitation: (record one only – the most invasive or
1 □ essential hypertension2 □ pre-existing diabetes mellitus	7	highest number) 1 □ none
3 ☐ asthma 4 ☐ genital herpes	8 persistent occipito posterior9 shoulder dystocia	2 suction only
8 other (specify)	10 ☐ failure to progress ≤3cm	3 □ oxygen therapy only 4 □ bag and mask (IPPR)
	11 ☐ failure to progress > 3cm 12 ☐ previous caesarean section	5 □ endotrachaeal intubation
Procedures/treatments:	13 other (specify)	6 □ ext. cardiac massage and ventilation 8 □ other
 1 □ fertility treatments (include drugs) 2 □ cervical suture 		Apgar score: 1 minute
3 ☐ CVS/placental biopsy 4 ☐ amniocentesis	Perineal status:	5 minutes
5 □ ultrasound	1 □ intact 2 □ 1 st degree tear/vaginal tear	Estimated gestation (whole weeks):
6 ☐ CTG antepartum 7 ☐ CTG intrapartum	3 ☐ 2 nd degree tear	Birth defects (specify):
Intended place of birth at onset of labour:	4 ☐ 3 rd degree tear 5 ☐ episiotomy	Birth trauma (specify):
1=hospital 2=birth centre attached to hospital	 5 □ episiotomy 7 □ 4th degree tear 	BABY SEPARATION DETAILS
3=birth centre free standing 4=home 8=other	8 □ other	Separation date: 2 0
MIDWIFE	ABORIGINAL STATUS OF BABY	Mode of separation: 1=transferred 8=died 9=discharged home
Name	(Tick one box only)	Transferred to:
Signature	1 ☐ Aboriginal but not TSI	(specify establishment code)
Date 2 0	2 TSI but not Aboriginal Aboriginal and TSI	Special care number of days: (excludes Level 1; whole days only)

CHILD HEALTH'S COPY

Coder ID:

General guidelines for completion of this form

- 1. When completing this form, please use a ballpoint pen and place the form on a firm surface to ensure legibility of all three copies.
- 2. Answer ALL questions.
- 3. If a particular item of information is not available, then record as "unknown".
- 4. When text is required, please PRINT (preferably with the use of block letters).
- 5. Abbreviations should be limited to those in common use, to avoid miscoding of information.
- 6. Addressograph labels may be used but please ensure that one is placed on each of the three copies of the form.
- 7. Wherever possible, insert home or contact telephone number to facilitate continuity of care by Child Health Nurses. If unavailable, indicate with a dash or write "none".
- 8. Where there are more boxes provided than required, please "right adjust" your response, e.g. a birth weight of 975 grams inserted as 0975.
- 9. For all dates, eight boxes are provided, e.g. 6 March 2013 inserted as 06 03 2013.
- 10. Some items allow more than one response. These are identified by multiple boxes, e.g. Complications of labour and delivery.

Complications not listed in tick boxes should be recorded as text under the appropriate headings.

If further information is required for completion of this form, please refer to the "Guidelines for Completion of the Notification of Case Attended Health Act (Notification by Midwife) Regulations Form 2" available from the website below or from the following:

The Manager
Maternal and Child Health Unit
Department of Health, Western Australia
1st Floor, C Block
189 Royal Street
EAST PERTH WA 6004

Telephone: (08) 9222 2417

Email: BirthData@health.wa.gov.au

Web: www.health.wa.gov.au/publications/subject_index/p/Perinatal_infant_maternal.cfm

Forward form to:

Maternal and Child Health Unit Department of Health, Western Australia Reply Paid 70042 (Delivery to Locked Bag 52)

Perth BC WA 6849

NB: Guidelines for completion of this form are available from the above address or www.health.wa.gov.au/publications/subject_index/p/Perinatal_infant_maternal.cfm or email: BirthData@health.wa.gov.au