

Typical evidence of a total lack of understanding both of Medicine and of IT by those at the NHS Information Centre with the responsible for creating the National Maternity Services Dataset!

The following single entry is a typical example of the almost unbelievable lack of understanding of what is involved in the creation of Maternity Software, and indeed of what Obstetrics is all about:

Maternity Complicating Obstetric Diagnosis Type? NMSD Global Number: 17200720

The diagnosis or type of obstetric diagnosis presenting a risk or complicating factor for this pregnancy

Severe pre-eclampsia requiring pre-term birth
HELLP
Eclampsia
Puerperal psychosis
Liver cholestasis of pregnancy
Gestational diabetes mellitus
Gestational hypertension
Gestational oedema
Gestational proteinuria
Antepartum haemorrhage
Postpartum haemorrhage - requiring additional treatment or transfusion
Feto-maternal haemorrhage
Ante/postpartum thromboembolic disorder
Placental abruption with adverse outcome
Uterine rupture
Retained placenta requiring manual removal in theatre
Caesarean section
Extensive vaginal, cervical, or third or fourth degree perineal trauma

For those involved in creating maternity computer systems there is so much wrong with the above list that it is hard to know where to start. Five major comments for starters:

- A) According to those responsible for the NMSD this is a single “item” in their list of 195 items for the national Data Requirements contract. Anyone who has any knowledge of computer software will immediately object that this is not a single item at all. It requires a “Yes” / “No” / “Unknown” answer to 18 Questions (more than 18 in fact because there could easily be “Vaginal” and/or “Cervical” and/or “3rd or 4th degree tear” i.e. 20 pieces of data”)
- B) This is a totally arbitrary list of Obstetric Complications. Who has decided what should, or should not, be on such a list. What has been left out and why? Why is the no “Other (free text)” options.
- C) No definitions of what is meant by for example “Gestational Oedema” which all healthy pregnant women get anyway.
- D) Not even a grouping together of the various clinical conditions related to Pre-Eclampsia.
- E) What on earth is meant by “Severe Pre-Eclampsia requiring Pre-Term Birth” as single entity. “Pre-Term” should be calculated elsewhere. If an induction was needed then somewhere else on the computer database there should be “Indication for Induction” or “Indication for Caesarean”

See also [“Translating the NMSD Jargon”](#) and [WikiTemplate](#)