



TEXAS DEPARTMENT OF STATE HEALTH SERVICES

DAVID L. LAKEY, M.D.
COMMISSIONER

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Austin, Texas 78714-9347
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TTY: 1-800-735-2989
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August 15, 2013

Dear Birthing Center Provider:

Rider 94 of the Texas Department of State Health Services (DSHS) Appropriation Bill was passed during the 83rd Regular Session of the Texas Legislature. This rider requires DSHS to collect aggregate data from all licensed birthing centers in Texas. This data is only required to be collected for each year of the next biennium.

Birthing Centers, as defined by Section 244.002 of the Texas Health and Safety Code, will be required to report the following information for each year of the 2014-2015 biennium:

- the number of women who gave birth at the birthing center;
- the number of live births at the birthing center;
- the number of births of stillborn infants at the birthing center;
- the number of women transferred by the birthing center to another facility for birth or postpartum complications;
- the number of infants transferred by the birthing center to another facility for complications;
- the number of women with multiple gestations who received treatment at the birthing center;
- the number of vaginal breech deliveries at the birthing center;
- the number of births at the birthing center by women who have had a previous uterine surgery, including a cesarean delivery;
- the gestational age of infants at delivery at the birthing center;
- the number of infants with an APGAR score of less than three at five minutes after delivery at the birthing center;
- the number of women and infants admitted to a hospital not later than the 72nd hour after delivery at the birthing center; and
- the number of women and infants who visited an emergency room not later than the 72nd hour after delivery at the birthing center.

Please report the above referenced data for the following periods no later than the designated due dates below:

Due no later than	Reporting Period
January 31, 2014	September 1, 2013 – December 31, 2013
June 30, 2014	January 1, 2014 – May 31, 2014
January 31, 2015	June 1, 2014 – December 31, 2014
June 30, 2015	January 1, 2015 – May 31, 2015

You may submit your data by one of the following options:

- 1) completing a table (survey) on the Internet via
<http://www.dshs.state.tx.us/chs/vstat/BirthingCenters.shtm>;
- 2) completing the provided spreadsheet in the Excel format and sending it via email to: vstat@dshs.state.tx.us; or
- 3) sending the enclosed report by regular mail to:
VSTAT, Birthing Center Reports
Center for Health Statistics
Department of State Health Services
PO Box 149347, MC 1898
Austin, TX 78714-9347

If you have any questions on reporting with this form, please contact Dr. Marcia Becker at 512-776-6438 or by e-mail at Marcia.becker@dshs.state.tx.us.

Sincerely,

Renee Clack, L.N.F.A.
Director, Health Care Quality Section
Division for Regulatory Services

ATTACHMENT: Texas Birthing Center Data Report Form



Texas Birthing Center Data Report Form

As Directed by Senate Bill 1 - Appropriations, Rider 94

Facility Name: _____ ID Number: _____ (license#)

Reporting Period: _____

- 2013 Sept-Dec
- Jan - May 2014
- June - Dec 2014
- Jan - May 2014

Reporting Contact Name: _____
 Reporting Contact Phone: _____
 Reporting Contact Email: _____

- 1) Number of women who gave birth at the birthing center:
- 2) Number of live births at this birthing center:
- 3) Number of births of stillborn infants at the birthing center
- 4) Number of women transferred by the birthing center to another facility for birth or postpartum complications
- 5) Number of infants transferred by the birthing center to another facility for complications.
- 6) Number of women with multiple gestations who received treatment at the birthing center

twins	<input type="text"/>
triplets	<input type="text"/>
- 7) Number of vaginal breech deliveries* at the birthing center

4 or more

8) Number of births at the birthing center by women who had a previous uterine surgery, including a cesarean delivery*

9) Gestational age of infants* at delivery at the birthing center (number of births in each weekly group):

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
18 weeks	19 weeks	20 weeks	21 weeks	22 weeks	23 weeks	24 weeks	25 weeks	26 weeks	27 weeks
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
28 weeks	29 weeks	30 weeks	31 weeks	32 weeks	33 weeks	34 weeks	35 weeks	36 weeks	37 weeks
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
38 weeks	39 weeks	40 weeks	41 weeks	42 weeks	43 weeks	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

10) Number of infants with APGAR score of less than three at five minutes after delivery at the birthing center:

11) Number of women and infants admitted to a hospital not later than the 72nd hour after delivery* at the birthing center: women infants

12) Number of women and infants who visited an emergency room not later than the 72nd hour after delivery* at the birthing center: women infants

* live & stillborn

Questions? Call Dr. Marcia Becker 512-776-6438 or email: vstat@dshs.state.tx.us (email electronic Excel file to report preferred)

To mail your paper report, send to:

**Birthing Center Data Reporting
Center for Health Statistics, VSTAT
Department of State Health Services
PO Box 149347, MC 1898
Austin, Texas 78714-9347**



Formulario de informe de datos de centro de parto de Texas

De conformidad con la Cláusula adicional 94 del Proyecto de Ley 1 del Senado sobre asignaciones

Nombre del centro: _____ Número de identificación: _____ (licencia #)
 Periodo del informe: _____

septiembre-diciembre de 2013

enero-mayo de 2014

junio-diciembre de 2014

enero-mayo de 2014

Nombre del contacto para los informes: _____

Teléfono del contacto para los informes: _____

Correo electrónico del contacto para los informes: _____

1) Número de mujeres que dieron a luz en el centro de parto:

2) Número de partos vivos en el centro de parto:

3) Número de bebés nacidos muertos en el centro de parto

4) Número de mujeres que el centro de parto trasladó a otro centro a causa de complicaciones durante el parto o después del parto

5) Número de bebés que el centro de parto trasladó a otro centro a causa de complicaciones.

6) Número de mujeres con gestaciones múltiples que recibieron tratamiento en el centro de parto

Gemelos

Trillizos

4 o más

7) Número de partos vaginales en los que el bebé venía de nalgas* en el centro de parto

8) Número de partos en el centro de parto de mujeres que habían tenido una cirugía uterina, incluido el parto por cesárea*

9) Edad gestacional de los bebés* al momento del parto en el centro de parto (número de partos por cada grupo por semana):

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
18 semanas	19 semanas	20 semanas	21 semanas	22 semanas	23 semanas	24 semanas	25 semanas	26 semanas	27 semanas
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
28 semanas	29 semanas	30 semanas	31 semanas	32 semanas	33 semanas	34 semanas	35 semanas	36 semanas	37 semanas
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>				
38 semanas	39 semanas	40 semanas	41 semanas	42 semanas	43 semanas				

10) Número de bebés con una calificación de menos de tres en la escala de Apgar a los cinco minutos de haber nacido en el centro de parto:

11) Número de mujeres y bebés que fueron hospitalizados a más tardar 72 horas después del parto* en el centro de parto: Mujeres Bebés

12) Número de mujeres y bebés que fueron a la sala de emergencias a más tardar 72 horas después del parto* en el centro de parto: Mujeres Bebés

* Nacidos vivos y muertos

Si tiene alguna pregunta llame a la Dra. Marcia Becker al 512-776-6438 o mande un correo electrónico a:

vstat@dshs.state.tx.us (Presente su informe por correo electrónico como archivo Excel electrónico) (Método preferido)

Para enviar por correo postal su informe impreso, use este domicilio:

**Birth Center Data Reporting
Center for Health Statistics, VSTAT
Department of State Health Services
PO Box 149347, MC 1898
Austin, Texas 78714-9347**