

# Revisions

## Change to OB20b and OB20c within Chapter 5

### Definition for OB20b. pH from Arterial, Venous, or Capillary Blood Gas was:

Enter the lowest pH from an arterial, venous, or umbilical blood gas obtained within the first hour after birth to two decimal places. If multiple umbilical cord samples were obtained, record the lowest pH observed to two decimal places.

Changed to:

Enter the lowest pH from an arterial, venous, or capillary blood gas obtained within the first hour after birth to two decimal places. If multiple capillary cord samples were obtained, record the lowest pH observed to two decimal places.

### Definition for OB20c. Base Deficit from Arterial, Venous, or Capillary Blood Gas was:

Enter the worst base deficit in mmoles/liter from an arterial, venous, or umbilical blood gas obtained within the first hour after birth.

Example 1: Base Deficit of 6.4 should be rounded to 6.

Example 2: Base Deficit of 6.5 should be rounded to 7.

Example 3: Base Deficit of – 6.4 should be rounded to -6.

Example 4: Base Deficit of – 6.5 should be rounded to -7.

**NOTE:** We are asking you to record the Base Deficit. Some laboratories report Base Excess rather than Base Deficit. This can be confusing. Please take the following steps when recording Base Deficit for the Registry:

1. Determine whether your laboratory is reporting results to you as Base Excess or Base Deficit.
2. If the laboratory is reporting Base Deficit, record the value exactly as reported by the laboratory.
3. If your laboratory is reporting Base Excess, you must change the sign in front of the number before recording it for the Registry. For example, if your laboratory reports a Base Excess of -6 (negative 6), the Base Deficit would be +6 (positive 6). You would enter 6 in eNICQ. If your laboratory reports a Base Excess of +3 (positive 3), the Base Deficit would be -3 (negative 3). You would enter -3 in eNICQ. The number stays the same; only the sign in front of the number changes.

Please also note that infants with acidosis usually have a positive Base Deficit. That means that they have a deficit of Base. The same infant would have a negative Base Excess meaning that there is a negative excess or a deficit! Confusing but important.

Changed to:

Enter the worst base deficit in mmoles/liter from an arterial, venous, or capillary blood gas obtained within the first hour after birth.

Example 1: Base Deficit of 6.4 should be rounded to 6.

Example 2: Base Deficit of 6.5 should be rounded to 7.

Example 3: Base Deficit of – 6.4 should be rounded to -6.

Example 4: Base Deficit of – 6.5 should be rounded to -7.

**NOTE:** We are asking you to record the Base Deficit. Some laboratories report Base Excess rather than Base Deficit. This can be confusing. Please take the following steps when recording Base Deficit for the Registry:

4. Determine whether your laboratory is reporting results to you as Base Excess or Base Deficit.
5. If the laboratory is reporting Base Deficit, record the value exactly as reported by the laboratory.
6. If your laboratory is reporting Base Excess, you must change the sign in front of the number before recording it for the Registry. For example, if your laboratory reports a Base Excess of -6 (negative 6), the Base Deficit would be +6 (positive 6). You would enter 6 in eNICQ. If your laboratory reports a Base Excess of +3 (positive 3), the Base Deficit would be -3 (negative 3). You would enter -3 in eNICQ. The number stays the same; only the sign in front of the number changes.

Please also note that infants with acidosis usually have a positive Base Deficit. That means that they have a deficit of Base. The same infant would have a negative Base Excess meaning that there is a negative excess or a deficit! Confusing but important.