|  | If baby remained at home.  | Were forcess used 9 Yes  | 8        |
|--|--|--|----------|
| Yes  | 17. Was special nursing care   | 01   |          |
| No2  | provided?  |  |          |
|  |  | (1f " Yes.")   |          |
| UnknownX   | Supplementary  | Questionnaire for Sheet yad staw yaw (a)   |          |
|  | into   |  |          |
|  | The state of the s | Serial Number  | •••••    |
|  | ROYAL COLLEGE OF OBSTET  | RICIANS AND GYNÆCOLOGISTS bemrotred ymotolziqe as W  | .0       |
| Yes  | edt to egran OPULATION INVEST  | FIGATION COMMITTEE   |          |
| B the old  | and INSTITUTE (  | OF CHILD HEALTH CS. HOUGHTON STREET, LONDON, W.C.2   |          |
| UnknownX   | NDON SCHOOL OF ECONOMIC  | S, HOUGHTON STREET, LONDON, W.C.2  |          |
| Name   |  | When deltan and adapt the  | V.       |
| ed to kospital.  | If baby born in hospital or admitt   | Where delivered  | .01      |
| Address (in 1946) w mi.  | 19 Where was he nursed ?   | injury ? No  |          |
| Ordinary children's ward 2   | Α  | UnknownX   |          |
| Ordinary babies' nursery 3   |  | Actual date of delivery (a) Please give full details   |          |
| NOTE-1. The 1  | 946 survey provided only limited info  | ormation about pregnancy confinement and the subsequent  |          |
| cure of  | ine outy. In order to make a sairs   | actory study of prematurity the loint Committee are most   |          |
| uroxivi  | is to obtain the supplementary inform  | ation asked for in this questionnaire. Each premature baby same sex, the same position in the family and of the same   |          |
| Social   | and economic group It is hoped that  | t the autormation asked for helow one he and he all It. I f  | .II      |
| mature   | e controls as well as for the premo  | ature babies eldee?  |          |
| 2. To sa   | ve time in filling in this questionnair  | e, the majority of questions have been "pre-coded." The  |          |
| answer   | rs should be shown by putting a ring   | with a soft pencil round the code number or letter opposite  |          |
| unknor   |  | question cannot be obtained, put a ring round "X" for  |          |
|  | ward or unit?  | ancy ending in, and the baby born in, March, 1946.   |          |
| G. These   | questions rejer involgnout to the pregn  | uncy enaing in, and the baby born in, March, 1946.   |          |
| 4.,  | single cubicle?  | UnknownX   | =        |
| No2  | DETAILS OF PREGNAN   | CY AND CONFINEMENT   |          |
| UnknownX   | ENDING IN  | MARCH, 1946. CARE OF THE BASY BORN IN MARCH, 1946.   |          |
| 1. What was the expected da  | te of delivery?? Seem relation as saw  | 4. Was labour induced? Yes shoth its wood you  | .17      |
|  | I pesu forgonnum as saw  | way born at nome.  . Was he admitted to ownes- Yes   |          |
| 2. Did the mother during he  | er pregnancy have:   | pital or nursing home during   |          |
| (a) A blood pressure of  | N. T.  | (If " Vec !!)  | .X       |
| 150/100 or higher ?  | 1(Jy. t. 1745.11) seY (a) For how many days,?  | (a) What method of induc- Medical  | . 1      |
|  | No2  | Surgical   |          |
| Yos  |  |  | .2       |
|  | Unknown  | Where was he admitted? Children's hospital   | .EI      |
|  | e good nown pagent an asw. Xee   | Where was he admitted? Children's hospital   | .EI      |
| No2  |  | Where was he admitted? Children's hospital:1  wondn't  | .EI      |
|  | Yes1   | Where was he admitted? Children's hospital   | . X      |
| No2  |  | Where was he admitted? Children's hospital   | .x.      |
| Vo   | Yes1   | I  | .gi      |
| No. (b) Albuminuma Pasks. X. (c) Albuminuma Pasks  | Yes  | Where was he admitted?  Unknown  Maternity hospital  (b) Why was labour induced?  (b) Why was labour induced?  Mutaing horse  Mutaing horse  The many of the reason brought of the service | . X      |
| No 2 Unkne sirunimudiA (d) . X days Solely in charge of babies 1   | Yes  | I  | .gi      |
| No   | Yes  | Unknown  (b) Why was labour induced?  (b) Why was labour induced?  (b) Why was labour induced?  (c) Grand Gr | .gi      |
| No 2 Unkne sirunimudiA (d) . X days Solely in charge of babies 1   | Yes  | I  | .gi      |
| ON  Unkneed Signature of babies  Solely in charge of babies  Solely in charge of babies  Unknown ? simas   | Yes  | Unknown  (b) Why was labour induced? (b) Why was labour induced?  (b) Why was labour induced?  (c) Grand forward forward for premature delivery?  (b) Was any other reason brought forward for premature delivery?  (c) Section of the infant, named, n | .gi      |
| ON  Unkneed Signature of babies  Solely in charge of babies  Solely in charge of babies  Unknown ? simas   | Yes  | Where was he admitted?  Maternity hospital  (b) Why was labour induced?  Maternity hospital  Ceneral hospital  Matsing home  More any other reason trought forward for premature delivery?  No  No  You what reason was he admitted?  (a) Condition of the infant, namely  (b) Condition of bome, namely  (c)  (d) Condition of bome, namely   |          |
| OM  Unknown  Solely in charge of babies  Lake the solely in charge of babies  Unknown  Solely in charge of babies  Unknown  Solely in charge of abies  Unknown  Adays  days  | Yes  | Unknown  (b) Why was labour induced?  (b) Why was labour induced?  (c) Was any other reason brought forward for premature delivery?  (a) Please state reason.  (b) Was any other reason of the infant, named, and the infant, named to notition of the infant, named to notition of the infant, named to notition of the caesarean section?  |          |
| 2 oM  X (b) Albuminuria ? MARIU  Eyeb  1. seided to egrado ni yielo?  2. (c) Any other signs of to aemia? nwominu  Eyeb. Signal of to aemia? nwominu   | Yes  | Indicated the state reason.  (b) Why was labour induced?  (b) Why was labour induced?  (b) Why was labour induced?  (c) State of the st |          |
| 2 OM  X (b) Albuminuria Paranti  sysb  1. solded to egrado at yielos  2. colubany other signs of to x aemia? nwominu  sysb  3. Sysb  3. Was there any haemorrha; before the beginning labour?  | Yes  | Unknown  (b) Why was labour induced?  (b) Why was labour induced?  (c) Was any other reason brought forward for premature delivery?  (b) Was any other reason brought forward for premature delivery?  (c) Was any other reason brought forward for premature delivery?  (a) Please state reason  (b) Was the baby delivered by Yes caesarean section?  (c) Was the baby delivered by Yes caesarean section?   |          |
| X (b) Albuminuria ? MARIU  X (b) Albuminuria ? MARIU  2 yesb  1. seided to egredo ni ylelos  2. com Any other signs of to  2. aemia ? Moondau  2. sysb  3. sysb  4. stiqso  3. sysb  3. sysb  4. stiqso  3. sysb  4. stiqso  3. sysb  4. stiqso  3. sysb  4. stiqso  4. stiqso  5. stiqso  6. stiqso  6. stiqso  7. stiqso  8. sysb  8. stiqso  1. st | Yes  | Indicated the state reason.  (b) Why was labour induced?  (b) Why was labour induced?  (b) Why was labour induced?  (c) State of the st |          |
| 2 OM  X (b) Albuminuria Paratil  zyab  1. zeidad to egrado ni yleloz  2. 7chu Any other signs of to  x aemia? nwomanu  zyab. Slatiqzo  3. Was there any haemorrha; before the beginning labour?  Latiqzon ni ro emon   | 1  | Latique of viring the still the second of the still the second of the se | .81 .X X |
| X (b) Albuminuria ? Albuminuri | Yes  | Unknown  (b) Why was labour induced?  (b) Why was labour induced?  (b) Why was labour induced?  (c) Grand for premature of the forward for premature delivery?  (b) Was any other reason brought forward for premature delivery?  (c) Seattlembar and see neason tanks and the following t | .81 .X X |
| 2 (a) At what week of pregna   | Yes  | Latique of control of the state | .81 .X X |
| 2 (a) At what week of pregna   | Yes  | Latique of viertelia (b) Why was labour induced?  (b) Why was labour induced?  (b) Why was labour induced?  (c) Was any other reason brought forward for premature delivery?  (c) Settlembs and seem needed to not the seem to see the seem to | .81 .X X |
| 2 (a) At what week of pregna   | Yes  | Latique of virtues of the stiffence of t | .81 .X   |

| 8.     | Were forceps used ?   | Yes1   | If be               | aby remained at home.  |                               |
|--------|---|--|---------------------|--|-------------------------------|
|        |   | No   | 17.                 | Was special nursing care provided?   | Yes                           |
|        | (If " Yes.")  | Olikilowii   |                     |  |                               |
| ***    | (a) Why were they used?   | nol priamolizad  | D THE               | (If "Yes.") (a) Please give full details   | UnknownX                      |
|        |   | Again an ann ann ag  | WHITE .             | William College  |                               |
|        |   | THE OWNER WHEN THE PARTY OF THE |                     | a wil sixuriga hayon   |                               |
| 9.     | Was episiotomy performed?   | Yes1   | 18.                 | Was a doctor in charge of the  | Yes                           |
|        |   | No2  | O THE               | case ?   | No2                           |
|        | Appeal March  | UnknownX   |                     | out to sooms house   | UnknownX                      |
|        |   |  |                     |  | CHRIOWIT                      |
|        | Did the baby have any birth<br>injury or suspected birth<br>injury? | Yes1   | If b                | aby born in hospital or admit  | ted to hospital.              |
|        | injury ?  | No2  | 19.                 | Where was he nursed?   | In ward with motherl          |
|        | (If " Yes.")  | UnknownX   |                     |  | Ordinary children's ward2     |
|        | (a) Please give full details  |  |                     |  | Ordinary babies' nursery3     |
|        | importanting the hospital   | estauro (cheneped nices apilanti   |                     | and spirit in the state of the state of the  | Special premature baby        |
|        | TOTAL ON SOMETHING OF   | ide coled for or this missiliad miles  | norther a           | a to octave the middlementary  | unit4                         |
| 11.    | What was the condition of the                                       | Vigorous1  | र्म किंद्र क        | and stations in their buildings to   | Elsewhere, namely             |
| •••    | baby at birth?  | Feeble2  | hold lessy          | in at 11 Course of Calculation Chil  |                               |
|        |   |  |                     |  | Unknown X                     |
|        | on for-redad. The   | Needing Resuscitation 3  |                     | many and or grand at Manda a   |                               |
|        | AND A S. PARTIES AND ADDRESS.                                       | Regaining good colour4   | 20.                 | How many other babies or ch  | ildren were there in the same |
|        |   | Continuing poor colour5  | - V                 | ward or unit ?   |                               |
|        | PAGE SAME THAN  | Other, namely  |                     | pestions refer toroughout to th  |                               |
| 100.00 |   |  | 21.                 | Was this baby isolated in a  | Yes                           |
|        |   | UnknownX   | No. of the state of | single cubicle?  | No                            |
|        |   | AND STATE OF STATE OF  | ME HT DI            |  | UnknownX                      |
|        | CARE OF THE BABY BO   | RN IN MARCH, 1946.   |                     | and the second s |                               |
| If b   | aby born at home.   | Was labout Stated V  | 22.                 | Was an incubator used?   | Yes1                          |
| 12.    |   | Yes1   |                     |  | No                            |
|        | pital or nursing home during<br>the first month of life?            | No2  |                     | s same contracted to   | UnknownX                      |
|        |   | UnknownX   |                     | (If "Yes")   |                               |
| MAN TO |   | gen to been saw not?   | 1                   | (a) For how many days?   | days                          |
| 13     | Where was he admitted?  | Children's hospital1   |                     |  |                               |
|        | A COUNTY  | Maternity hospital2  | 23.                 | Was an Oxygen tent used?   | Yes                           |
|        | 7 heer  | General hospital3  | The Carlo           | The state of the s | No 2                          |
|        | C.S. S. Markey Co.  |  |                     |  | Unknown X                     |
|        |   | Truising nome  |                     | (If " Yes")  |                               |
| 1.     | ark 16  | UnknownX   |                     | (a) For how many days?   | day                           |
|        |   | forwised for present of treesport  |                     | STATE OF STA |                               |
| 14.    | For what reason was he  | admitted ?   | 24.                 | Had the sister or nurse in   | Solely in charge of babies    |
| ^      | (a) Condition of the infant   | namely,  |                     | charge of this baby any res-<br>ponsibility for adult patients,  | Also in charge of adults      |
|        | APAN CARACTER CARACTER CONTRACTOR                                   | ECCUSA MINES AND TO THE  |                     | or was she solely in charge of babies?   | Unknown X                     |
|        |   | and the latest the spine |                     |  |                               |
|        | (b) Condition of home, name   | ely  | 25.                 | How long was the baby kept in h  | nospital ?day                 |
| . 1.   |   | becoming the base delivered i  |                     |  |                               |
| . 0    | No  |  | 26.                 | What was his weight on dischar   | ge ?lbsozs                    |
|        | (c) Other reason, namely  |  | 1 0                 | and the same to  | Tarestal.                     |
|        |   | AT SECTION AND ADDRESS OF THE SECTION ADDRESS OF THE SECTION ADDRESS OF THE SECTION AND ADDRESS OF THE SECTION ADDRESS O | For                 | r all babies whether nursed at   | home or in hospital.          |
|        | A NORTH RESIDENCE AND   | the same and the s | 27.                 | Were there any special com-  | Yes                           |
|        | On what date was he admitted  | Care and the second  |                     | plications ?   | No                            |
| 15.    |   |  |                     |  | Unknown                       |
|        | in section.   | If not delipored by cascafee   |                     | (If "Yes.") (a) Please give full details.  |                               |
| 16.    | Was the mother admitted as well?                                    | es   |                     |  |                               |
|        |   | Nd2  | 1                   |  |                               |
|        |   | Unknown X  |                     |  | .,,                           |

P.T.O.