

Appendixes

Glossary of Acronyms and Terms

List of Acronyms

AHA	—American Hospital Association
BPD	—bronchopulmonary dysplasia
BC/BS	—Blue Cross/Blue Shield
CEA	—cost-effectiveness analysis
CPAP	—continuous positive airway pressure
DRGs	—diagnosis-related groups
ECMO	—extracorporeal membrane oxygenation
HFV	—high-frequency ventilation
HMO	—health maintenance organization
IVH	—intraventricular hemorrhage
MDC	—major diagnostic category
NACHRI	—National Association of Children’s Hospitals and Related Institutions
NICU	—neonatal intensive care unit
NIH	—National Institutes of Health
OTA	—Office of Technology Assessment (U.S. Congress)
PEEP	—positive end expiratory pressure
Pro	—preferred provider organization
QALY	—quality-adjusted life-year
RDS	—respiratory distress syndrome
ROP	—retinopathy of prematurity
SIDS	—sudden infant death syndrome

Glossary of Terms

Antenatal transfer: The transport of pregnant women to the appropriate level of care prior to delivery.

Assisted ventilation: Mechanical assistance in performing or controlling the breathing function.

Baby Doe rules: Federal regulations issued from 1982 to 1984 under Section 504 of the Rehabilitation Act of 1973 that prohibited hospitals from withholding nourishment or care from handicapped infants. The Supreme Court ruled in 1986 that the 1973 act could not be used to justify the regulations. Meanwhile Congress passed the 1984 amendments to the Child Abuse Prevention and Treatment Act that permitted “reasonable medical judgement” to be used in making decisions about treatment for disabled newborns.

Birthweight: Weight of an infant at the time of delivery. Birthweight can be recorded in either pounds/ounces or grams.

Birthweight-specific mortality rate: Deaths in a birthweight category per 1000 live births in the same birthweight category.

Bronchopulmonary dysplasia: A chronic lung disease in newborns, often defined by a characteristic appearance of the lungs on X-ray and the use of assisted ventilation for more than 4 weeks.

Case mix: A measure of the mix of cases being treated by a particular health care provider that is intended to reflect the patients’ different needs for resources.

Cerebral palsy: A paralysis of varying severity that results from nonprogressive damage to the brain at or around birth.

Congenital anomalies: Birth defects that result from imperfect development during pregnancy.

Continuous positive airway pressure (CPAP): A respiratory therapy technique that prevents alveolar collapse by keeping up positive pressure on the lungs between breaths.

Cost-benefit analysis: An analytical technique that compares the costs of a technological application to the resultant benefits, with both costs and benefits expressed by the same measure. This measure is nearly always monetary.

Cost-effectiveness analysis (CEA): An analytical technique that compares the costs of a technology or of alternative technologies to the resultant benefits, with cost and benefits/effectiveness not expressed by the same measure.

Cost saving: An economic concept referring to the results of cost-benefit analysis when the net benefit is greater than zero.

Diagnosis-related groups (DRGs): A patient classification scheme based on the principal diagnosis, secondary diagnoses, surgical procedures, age, and discharge status of the patients treated in hospitals.

Extremely low birthweight: Birthweight of less than 1000 grams (2 lb 2 oz).

Gestational age: The number of completed weeks elapsed between the first day of the last normal menstrual period and the date of delivery.

Handicap rate: See serious *handicap* and *moderate handicap*.

Health maintenance organization (HMO): A health care organization that, in return for prospective per capita payments, acts as both insurer and provider of comprehensive but specified medical services.

Hydrocephalus: The distension of the head caused by the excessive buildup of cerebral spinal fluid.

Infant mortality: Death in the first year of life. It includes neonatal mortality and postneonatal mortality.

Intracranial hemorrhage: Bleeding in the brain.

Intraventricular hemorrhage: Bleeding into the cerebral ventricles, small cavities within the brain that secrete and convey cerebrospinal fluid.

Level I hospitals or facilities: Hospitals that provide only normal newborn care under the regional system for perinatal services.

Level II hospitals or facilities: Hospitals in the regional system for perinatal services that provide specialized neonatal care but lack some components and expertise found in Level III facilities.

Level III hospitals or facilities: Hospitals in the regional system for perinatal services that provide the most sophisticated neonatal intensive care.

Low birthweight: Birthweight of less than 2500 grams (5 lb 5 oz).

Major diagnostic category (MDC): The 23 principal divisions in the DRG patient classification scheme. The diagnoses in each MDC correspond to a single organ system or etiology and in general are associated with a particular medical specialty.

Mechanical ventilation: See *assisted ventilation*.

Medicaid: A federally aided, State-administered program of medical assistance for low-income people meeting categorical requirements.

Moderate handicap: Disabilities that include moderate mental retardation (IQ or developmental quotient between 70 and 80).

Morbidity: The condition of being diseased or disabled.

Neonatal intensive care: The constant and continuous care of the critically ill newborn.

Neonatal intensive care unit (NICU): A specialized hospital unit combining high technology and highly trained staff that treats seriously ill newborns.

Neonatal mortality: Death in the first 28 days of life.

Neonatal mortality rate: Deaths during the first 28 days of life per 1000 live births.

Neonate: A newborn infant less than a month old.

Neonatologist: A pediatrician specializing in newborn care.

Neurodevelopmental outcome: A measure of neurological and developmental status.

Outliers: Hospital cases with statistically unusual lengths of stay under the DRG patient classification scheme.

Perinatal care: Medical care pertaining to or occurring in the period shortly before and after birth, variously defined as beginning with the completion of the 20th to 28th week of gestation and ending 7 to 28 days after birth.

Postneonatal mortality: Death between the first 28 days and the end of the first year of life.

Postneonatal mortality rate: Postneonatal deaths (28 days to under 1 year) per 1,000 neonatal survivors.

Preferred provider organization (PPO): A form of health care delivery system in which an agreement is made between providers and purchasers that patients who seek medical care from the "preferred providers" will obtain benefits such as reduced cost sharing. In return for the potential increase in volume of patients, the preferred providers may agree to discount their charges, to accept capitated payments, or to submit to enhanced utilization review.

Preterm infant: A newborn whose gestational age is less than 37 completed weeks.

Prospective payment: Payment for medical care on the basis of rates set in advance of the time period in which they apply. The unit of payment may vary from individual medical services to broader categories, such as hospital case, episode of illness, or person (cavitation).

Pulmonary surfactant: A substance in the lung that reduces the surface tension along the alveoli and prevents the collapse of the pulmonary air spaces.

Quality-adjusted life-year (QALY): An economic measure used in cost-effectiveness analysis to express benefits/effectiveness.

Regionalization: The organization and coordination of perinatal services, including a three-tiered system of hospital care, by geographic region.

Respiratory distress syndrome (RDS): An acute respiratory disorder which, in premature infants, is thought to be caused by a deficiency of pulmonary surfactant. When RDS is in severe form, patients often need mechanical assistance to breathe.

Retinopathy of prematurity (ROP): A retinal disease afflicting premature infants that can lead to retinal scarring, retinal detachment, and blindness.

Serious handicap: Disabilities that include severe mental retardation (IQ or developmental quotient below 70), cerebral palsy of significant degree, major seizure disorders, or blindness.

Steroid treatment: A drug regimen administered to pregnant women in preterm labor in order to accelerate fetal lung maturation.

Surfactant: See *pulmonary surfactant*.

Very low birthweight: Birthweight of less than 1500 grams (3 lb 3 oz).