Hospital	
Reason for exclusion	
Maternal age	
Maternal BMI in the first trimester	
Maternal height	
Marital status	(married/cohabiting, partners living apart, single)
Smoking	
Occurrence of diabetes	Pre-existing, GDM A1, GDM A2
Occurrence of hypertensive disorders	Pre-existing, gestational hypertension, preeklampsia
Fear of childbirth	
Labour start	Spontaneous, induction
Method of induction	Prostaglandins, balloon, amniotomy, augmentation
Colour of amniotic fluid	Clear, meconium stained, non-visual
Occurrence of prolonged rupture of	
membranes (>18 hours)	
Epidural analgesia during labour	
Cervical dilation at the start of epidural	
analgesia	
Epidural analgesia during the passive	
second stage	
Fetal station at retracted cervix	
Duration of the first active stage	
Duration of the passive second stage	
Duration of the active second stage	
Occurrence of oxytocin augmentation	
Augmentation started in the passive second stage	
Duration of the passive second stage when	
the augmentation started	
Occurrence of intrapartum fever	
Occurrence of intermittent urinary	
catheterization	
Occurrence of directed pushing	
Documented numbers of change of	
maternal positioning	
Gestational age at delivery	
Fetal position at birth	Occiput anterior, occiput posterior or other
Mode of birth	Spontaneous vaginal delivery, instrumental delivery, caesarean delivery
Reason for operative delivery	Fetal asphyxia, obstructed labour
Occurrence of OASI	
Occurrence of episiotomy	
Occurrence of postpartum haemorrhage	

Occurrence of intra- or postpartum complications	Postpartum infection, urinary retention, shoulder dystocia, amnionitis, manual removal of the placenta
Documentation regarding postpartum breastfeeding (2h)	Temoval of the placenta
Occurrence of breastfeeding at discharge	
Negative birth experience	
Occurrence of breastfeeding support	
postpartum	
Neonatal Apgar score at 1, 5 and 10	
minutes	
Occurrence of umbilical cord artery acidosis	
(<7.10)	
Neonatal birth weight	
Head circumference	
Admittance to neonatal intensive care unit	
Reason for admittance NICU	Respiratory distress, asphyxia, clinical or
	laboratory verified neonatal infection,
	hypoglycaemia, jaundice