

## Australian and New Zealand Assisted Reproduction Database (ANZARD)

### **ANZARD 3.0 DATA DICTIONARY SHORT FORM Version 4.0**

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## INTRODUCTION

This *ANZARD 3.0 Data Dictionary - Short Form* is a supplement to the *ANZARD 3.0 Data Dictionary – Long Form*, and supersedes the *ANZARD 2.0 Data Dictionary*.

All ART cycles performed in Australian and New Zealand clinics from January 1<sup>st</sup> 2020 must provide data to ANZARD using these data definitions.

The ANZARD 3.0 data structure records information about each cycle for each female patient from the start of treatment to infant outcomes, if applicable. Each cycle is represented by one record (row).

This version of the Data Dictionary includes all existing ANZARD 2.0 items, plus the following ANZARD 3.0 items:

- 26 new data items have been added (indicated by ▲).
- 6 data items have been modified (indicated by Δ).
- 12 data items have been replaced
- 6 items have been removed (please refer to the Long Form Data Dictionary).

Each data item in the Short Form Data Dictionary, has six attributes:

- ANZARD Label: Name of the data item
- Definition: Short description of the data item
- Guide for use: Guidelines for interpretation. Please see the Long Form Data Dictionary for detailed examples and guide for use sections.
- Type and Length: Type of data item (numeric, character, free text, date) and number of characters or digits.
- Coding: Acceptable options (values and ranges) for coding. Leave value of a field blank if it is not applicable; do not leave a field blank when the value is “unknown.”
- Obligation: Indicates whether a field is mandatory (i.e. must be completed), conditional (i.e. must be completed if it meets certain conditions – see related metadata) or optional (i.e. is not mandatory).

**Note: For validation rules, comprehensive descriptions and guide for use of each data item, please refer to the ANZARD 3.0 Data Dictionary - Long Form.**

### **Definition of an ANZARD 3.0 cycle**

An **ANZARD 3.0 treatment cycle** involves an attempted/actual medical procedure being carried out on a female patient and includes the following scenarios:

- Ovarian stimulation with the intention of oocyte collection in autologous or donation cycle.
- Attempted/actual oocyte collection, whether in a stimulated or unstimulated, autologous or donation cycle.
- Attempted/actual oocyte thaw with intention of fertilisation and embryo transfer.
- Attempted/actual embryo thaw with the intention of embryo transfer
- Insemination of donated sperm as part of an IUI cycle

An **ANZARD 3.0 laboratory cycle** involves a laboratory procedure with no planned patient involvement and includes the following scenarios:

- Receipt of donor oocytes with the intention of fertilisation and freezing of all resulting embryos.
- Attempted/actual oocyte thaw with intention of fertilisation and freezing of all resulting embryos.
- PGT cycles where embryos are thawed and refrozen with no intention of embryo transfer in the reported cycle.

**Please note**, that the following cycles will **not be recorded** in ANZARD 3.0:

1. Commissioning cycles involving intending parents for surrogacy arrangements where no medical treatment or procedure takes place
2. Embryo disposal cycles.
3. Import/export of oocytes or embryos to another clinic regardless of whether the clinics are part of the same company or not.
4. Autologous IUI cycles.
5. Cycles involving 'transfer of ownership' of gametes or embryos where no medical or laboratory procedures occur, including:
  - i. Receipt of donor oocytes with no intention of attempted fertilisation.
  - ii. Receipt of donor embryos with no intention of transfer.
  - iii. Intending parent surrogacy cycles where no medical treatment is initiated.
  - iv. Oocyte thaw with the intention of or actual donation.

### **Associated Documents and Training**

- ANZARD 3.0 Data Dictionary – Long Form
- ANZARD 3.0 Cycle-specific Reporting Manual

### **ANZARD Data Capture Portal**

Data should be submitted via the secure data capture portal (<https://anzard.med.unsw.edu.au/>) in a CSV file format. If it is not possible to submit data via the ANZARD Data Capture Portal, please contact [ANZARD@unsw.edu.au](mailto:ANZARD@unsw.edu.au) or call the ANZARD team on 61 (2) 9385 9463.

The following table lists the inventory of ANZARD 3.0 fields:

NO.	ANZARD LABEL	DEFINITION	GUIDE FOR USE	TYPE & LENGTH	CODE	OBLIGATION
01	ANZARD_UNIT	A unit's ID number.	Supplied by NPESU.	Num-3	3-digit ANZARD unit code	Mandatory
02	ART_UNIT	RTAC ART unit number.	Supplied by RTAC.	Num-3	3-digit RTAC ART unit code	Mandatory
03	PARENT_SEX ▲	Sex of the intending parents involved in the cycle.	Record the sex at birth, not the gender identification, of the intending parents.	Num-1	1 = Female-male couple 2 = Single female 3 = Female-female couple 4 = Single male 5 = Male-male couple 6 = Unknown – only for use in egg donation cycles to unknown intending parents	Mandatory
04	PAT_ID	Patient's ID/Medical Record Number	ART unit-issued unique patient identifier used by RTAC and the NPESU for data verification and auditing purposes.	Char-20	e.g. P0516	Mandatory
05	FNAM_FST2	First two letters of female patient's first name	Facilitates creation of the statistical linkage key used by ANZARD to track cycles undertaken by the same woman.	Char-2	e.g. AL	Mandatory
06	FNAM_SUR2	First two letters of female patient's surname	Facilitates creation of the statistical linkage key used by ANZARD to track cycles undertaken by the same woman.	Char-2	e.g. WA	Mandatory
07	FDOB_PAT ▲	Female patient's date of birth.	The female patient's DOB is the DOB of the woman who is intending to or receiving treatment.	Date-10	DD/MM/YYYY	Conditional
08	HEIGHT_F ▲	The female patient's height (in centimetres).	Can be self-reported (by the female patient) or measured by the ART unit at the time of treatment. The height entered must correspond to the female patient whose date of birth is recorded in FDOB_PAT in the cycle.	Num-3	999 = Unknown	Conditional
09	WEIGHT_F ▲	The female patient's weight (in kilograms).	Can be self-reported (by the female patient) or measured by the ART unit at the time of treatment. The weight entered must correspond to the female patient whose date of birth is recorded in FDOB_PAT in the cycle.	Num-3	999 = Unknown	Conditional
10	MNAM_FST2 ▲	First two letters of male intending parent's first name.	Facilitates creation of the statistical linkage key used by ANZARD.	Char-2	e.g. AL	Conditional

NO.	ANZARD LABEL	DEFINITION	GUIDE FOR USE	TYPE & LENGTH	CODE	OBLIGATION
11	MNAM_SUR2 ▲	First two letters of male intending parent's surname.	Facilitates creation of the statistical linkage key used by ANZARD.	Char-2	e.g. WA	Conditional
12	MDOB_1 ▲	First male intending parent's date of birth	Must be completed if the intending parents are a female-male couple, a single male, a male-male couple. If one of the intending parents is also the sperm donor, record the DOB for that parent here. Otherwise, leave blank.	Date-10	DD/MM/YYYY	Conditional
13	FDOB_NON_PAT ▲	Non-patient, female intending parent's date of birth.	Record the female intending parent's date of birth who is not receiving treatment in the cycle. Complete this field if this is an embryo transfer for a surrogacy cycle (SURR=y) where the intending parents are female-male couple or single female.	Date-10	DD/MM/YYYY	Conditional
14	MDOB_2 ▲	Second male intending parent's date of birth	This field should only be completed if the intending parents are a male-male couple.	Date-10	DD/MM/YYYY	Conditional
15	POSTCODE	The female patient's residential postcode	If the patient resides in Australia, record their residential postcode. If the patient resides in New Zealand, record "NZ" If the patient resides in neither Australia nor New Zealand, record the name of their usual country of residence.	Text-50	NZ = New Zealand  Record country name for overseas patients	Conditional
16	CYCLE_ID	The cycle identification number, allocated by the ART unit.	Uniquely identifies each cycle (record).	Char-20	e.g. FET001	Mandatory
17	CYC_DATE Δ	The date when a cycle started	Record the date that the treatment cycle or lab-only cycle began using the following rules: 1. The first date where FSH/stimulation drug was administered or 2. The date of Last Menstrual Period (LMP) for unstimulated cycles (including natural fresh cycles, thaw cycles and donor insemination) or 3. The date of oocyte/embryo thawing for lab-only cycles	Date-10	DD/MM/YYYY	Mandatory
18	CYCLE_TYPE ▲	The type of cycle that took place – treatment cycle or laboratory-only cycle.	Consider the origin of the oocytes (autologous, non-autologous) and their intended destination (donation, recipient, surrogacy), or whether the cycle took place for lab procedure purposes only.	Num-1	<b>1 = Autologous: Female-male couple, single female, female-female</b> Oocytes involved in this cycle were intended to be or were, provided by a female intending parent for use in the same female.	Mandatory

NO.	ANZARD LABEL	DEFINITION	GUIDE FOR USE	TYPE & LENGTH	CODE	OBLIGATION	
					<p><b>2 = Non-autologous: Female-female couple</b> Oocytes involved in this cycle were intended to be or were, provided by a female intending parent for use by the other female intending parent.</p> <p><b>3 = Non-autologous: Oocyte/embryo donation</b> Oocytes involved in this cycle were intended to be or were, collected from an egg donor who is <u>not</u> an intending parent, for the purpose of donation.</p> <p><b>4 = Non-autologous: Oocyte recipient</b> Oocytes involved in this cycle were provided by an oocyte donor (outside of the intending parents) and intend to be transferred as embryos in this cycle.</p> <p><b>5 = Non-autologous: Embryo recipient</b> Embryo/s involved in this cycle have been donated from someone other than the intending parents and intend to be transferred in this cycle and are not part of a surrogacy arrangement.</p> <p><b>6 = Surrogacy – intending parent(s): Oocyte/embryo provision</b> Oocytes/embryos involved in this cycle were provided by a female intending parent for use in a gestational carrier.</p> <p><b>7 = Surrogacy – gestational carrier: Transfer (or thawing with the intention of transfer) of embryos to a gestational carrier</b> Embryo/s involved in this cycle have been</p>		

NO.	ANZARD LABEL	DEFINITION	GUIDE FOR USE	TYPE & LENGTH	CODE	OBLIGATION
					provided by someone other than the gestational carrier (surrogate).  <b>8 = Laboratory only cycle</b> Oocytes/embryos involved in this cycle underwent a laboratory procedure only (e.g. thaw, fertilisation or PGT with no intention of transfer in the same cycle). The cycle did not involve a female patient.	
19	SURR	Surrogacy arrangement	Determine whether the cycle was a <b>planned</b> part of a surrogacy arrangement.	Char-1	n = No y = Yes	Conditional
20	FERT_PRES ▲	Fertility preservation	Determine whether the treatment cycle took place for fertility preservation purposes (where the female patient does not intend to use the oocytes or resulting embryos within the next 12 months).	Num-1	1 = No 2 = Yes	Conditional
21	FP_TYPE ▲	The reason for female fertility preservation.	Indicate whether the reason for fertility preservation was medical or non-medical.	Num-1	1 = Medical reason – cancer diagnosis 2 = Medical reason - other 3 = Non-medical reason	Conditional
22	DATE_TTC ▲	The month and year that the female intending parent started trying to conceive	Applies to female-male couples only. Determine the period of infertility experienced by the female intending parent.  <b>The 'day' element of the date is fixed and must be recorded as "01" for all entries.</b>	Date-10	01/MM/YYYY e.g. 01/08/2018 = August 2018	Conditional
23	PREG_20W	Pregnancies of twenty weeks or more gestation.	Determine if the female patient has previously had any pregnancies of 20 weeks or more gestation regardless if by fertility treatment or with a different partner.	Char-1	n = No y = Yes u = unknown	Conditional
24	ART_REASON ▲	Reason for ART treatment	Applies to female-male couples only. Determine if the ART treatment is being undertaken for reasons other than to treat clinical infertility (e.g. chromosomal testing, HLA matching and fertility pres. (medical or non-social).	Char-1	n = No y = Yes	Conditional
25	CI_TUBE	Cause of Infertility due to tubal disease	For female intending parent (where PARENT_SEX=female-male couple) only; captures whether cause of infertility is due to tubal disease	Char-1	n = No y = Yes u = Unknown	Conditional

NO.	ANZARD LABEL	DEFINITION	GUIDE FOR USE	TYPE & LENGTH	CODE	OBLIGATION
26	CI_ENDO	Cause of Infertility due to endometriosis	For female intending parent only (where PARENT_SEX = female-male couple); captures whether cause of infertility is due to endometriosis.	Char-1	n = No y = Yes u = Unknown	Conditional
27	CI_OTH	Cause of infertility due to other female factors	For female intending parent (where PARENT_SEX = female-male couple); captures whether cause of infertility is due to other female factors apart from endometriosis and tubal disease.	Char-1	n = No y = Yes u = Unknown	Conditional
28	PCOS ▲	Whether the female intending parent has PCOS	Whether the female intending parent (where PARENT_SEX is female-male couple) has PCOS, regardless of whether it is contributing to infertility or not.	Char-1	n = No y = Yes u = Unknown	Conditional
29	CI_MALE	Cause of infertility due to male factors	For male intending parents only (where PARENT_SEX = female-male couple); captures whether cause of infertility is due to male factors.	Char-1	n = No y = Yes u = Unknown	Conditional



NO.	ANZARD LABEL	DEFINITION	GUIDE FOR USE	TYPE & LENGTH	CODE	OBLIGATION
30	MALE_DIAG ▲	Primary cause of male factor infertility diagnosis	<p><b>This data item applies to the male intending parent only (where PARENT_SEX is female-male couple).</b></p> <p>In the opinion of the treating clinician or clinic, the principal cause of male factor infertility. To be completed for autologous, donation/provision and recipient cycles where CI_MALE is "yes".</p>	Num-2	<p><i>SPERMATOGENIC FAILURE:</i></p> <p>1= Idiopathic (unexplained)  2= Genetic – Klinefelter  3= Genetic - Y deletion  4= Genetic – other aneuploidies, single gene.  5= Testis damage - cancer treatment  6= Testis damage - other (incl. past/[resent cryptorchidism, vascular, infective, trauma)  7= Gonadotrophin deficiency</p> <p><i>OBSTRUCTION:</i></p> <p>8= Vasectomy  9= Congenital absence of the vas deferens/cystic fibrosis  10= Obstructive disorder (other)</p> <p><i>ERECTILE &amp; EJACULATORY:</i></p> <p>11= Erectile dysfunction (incl. psychosexual)  12= Ejaculatory disorders (incl. spinal injury, retrograde and anejaculation)</p>	Conditional
31	CI_UNEX	Cause of infertility is unexplained in the intending parents	<p><b>This data item should only be completed where PARENT_SEX = female-male couple.</b></p> <p>In the opinion of the treating clinician, the cause of infertility is unexplained in the intending parents.</p>	Char-1	n = No y = Yes	Conditional
32	OV_STIM	Ovarian stimulation via follicle stimulating hormone (FSH)	<p>Indicate whether this is an FSH stimulated cycle or not.</p> <p>Do not answer 'y' if clomiphene or hCG alone <b>unless</b> FSH was also administered.</p>	Char-1	n = No y = Yes	Conditional

NO.	ANZARD LABEL	DEFINITION	GUIDE FOR USE	TYPE & LENGTH	CODE	OBLIGATION
33	STIM_1ST	First ever FSH stimulated cycle for intended or actual oocyte pick up (OPU).	Determine whether this is the female patient's first ever FSH stimulated cycle with the intention of OPU (consider all treatments the female patient has had at other clinics or in other countries). Do not consider any previous FSH stimulated artificial insemination cycles.	Char-1	n = No y = Yes u = Unknown	Conditional
34	CAN_DATE	The date the cycle was cancelled before OPU.	If the cycle was cancelled before OPU, enter the last date that FSH was administered. Otherwise, leave the field blank.	Date-10	DD/MM/YYYY	Conditional
35	OPU_DATE	The date when oocyte pickup occurred.	Record the date when oocyte pickup occurred in the current cycle.	Date-10	DD/MM/YYYY	Conditional
36	N_EGGS	Number of oocytes retrieved at OPU	If no oocytes were retrieved in the cycle, then record "0" (zero) for this field. Do not leave this field blank.	Num-2	0 - 50 0 = no eggs retrieved	Mandatory
37	IVM ▲	In-vitro Maturation	A cycle is considered an IVM cycle if the female patient was prepared specifically for an IVM cycle or if an alternate treatment cycle was converted prior to OPU into an IVM treatment cycle, and the immature oocytes were then matured in vitro.	Char-1	1 = No 2 = Yes	Conditional
38	SP_SOURCE ▲	Source of sperm	Source of sperm in cycles where fertilisation is attempted, or an embryo is thawed.	Num-1	1= A male intending parent 2= A sperm donor outside of the intending parents	Conditional
39	SP_SITE	Site of sperm used	Indicate the anatomical site of the sperm from which the sperm was extracted.	Char-1	e = Ejaculate t = Testicular p = Epididymal o = Other u = unknown	Conditional
40	SP_QUAL ▲	Semen quality	Concentration of sperm in either ejaculated sample (before being processed for the ART cycle) used for fertilisation or the most recent NATA analysis, measured in millions per millilitre (x10 <sup>6</sup> /ml).	Num-4	A valid number between 0.0 – 400.0 888= No semen available 999= not tested	Conditional
41	DON_AGE Δ	Age (in years) of the oocyte or embryo donor/provider	In the case of oocyte or embryo donation/provision, enter the female provider's age at the time their applicable OPU occurred.	Num-2	18-55 99 = Unknown	Conditional

NO.	ANZARD LABEL	DEFINITION	GUIDE FOR USE	TYPE & LENGTH	CODE	OBLIGATION
42	N_EGGDON_FRESH	Number of fresh oocytes donated/provided	The number of <b>fresh</b> oocytes provided/donated to another patient for immediate or later use. To record the donation/provision of cryopreserved oocytes, use one of N_EGFZ_S or N_EGFZ_V data items instead.	Num-2	0 - 50 0 = no eggs donated/provided	Mandatory
43	N_EGGREC_FRESH	Number of fresh oocytes received	Number of fresh (not cryopreserved) oocytes received from another patient. If a patient is receiving cryopreserved oocytes, use N_S_EGTH or N_V_EGTH data items to record the number of thawed/warmed oocytes received.	Num-2	0 - 50 0 = no eggs received	Mandatory
44	N_EMBDON_FRESH	Number of fresh embryos provided/donated to another patient	This data item should be completed in the cycle of the individual who provided/donated fresh embryos. To record the number of cryopreserved embryos provided/donated, use one of N_CLFZ_S, N_CLFZ_V, N_BLFZ_S, N_BLFZ_V data items.	Num-2	0 - 30 0 = No embryos donated/provided	Mandatory
45	N_EMBREC_FRESH	Number of fresh embryos received from another patient.	This data item should be completed in the cycle for the female patient who received the fresh embryos. If cryopreserved (frozen) embryos are received, please use N_S_CLTH, N_S_BLTH, N_V_CLTH, N_V_BLTH data items instead to record the number of embryos received.	Num-2	0 - 20 0 = No embryos received	Mandatory
46	N_EGFZ_S	Number of oocytes slow frozen	Number of oocytes slow frozen in this cycle. For oocyte donation/provision cycles, use this data item to record the number of slow frozen oocytes donated/provided. If fresh oocytes are donated/provided, use the N_EGGDON_FRESH data item instead.	Num-2	0-40 0 = no oocytes cryopreserved	Mandatory
47	N_EGFZ_V	Number of oocytes vitrified	Number of oocytes vitrified in this cycle. For oocyte donation/provision cycles, use this data item to record the number of vitrified oocytes donated/provided. If fresh oocytes are donated/provided, use the N_EGGDON_FRESH data item instead.	Num-2	0-40 0 = no oocytes cryopreserved	Mandatory

NO.	ANZARD LABEL	DEFINITION	GUIDE FOR USE	TYPE & LENGTH	CODE	OBLIGATION
48	N_S_EGTH	Number of slow frozen oocytes thawed	Record the number of slow frozen oocytes thawed in this cycle. For oocyte recipient cycles, use this data item to record the number of cryopreserved oocytes received, being thawed in this cycle. If fresh oocytes are received, use the N_EGGREC_FRESH data item instead.	Num-2	0-40 0 = no oocytes thawed	Mandatory
49	N_V_EGTH	Number of vitrified oocytes warmed	Record the number of vitrified oocytes warmed in this cycle. For oocyte recipient cycles, use this data item to record the number of cryopreserved oocytes received being warmed in this cycle. If fresh oocytes are received, use the N_EGGREC_FRESH data item instead.	Num-2	0-40 0 = no oocytes warmed	Mandatory
50	FDAT_EGG	Initial cryopreservation date of thawed/warmed oocytes	If there is more than one batch of thawed/warmed oocytes being used in the cycle, with different cryopreservation dates, record the earliest cryopreservation date.	Date-10	DD/MM/YYYY	Conditional
51	N_GIFT	Number of oocytes replaced in a GIFT	Record, the number of oocytes that are placed in the fallopian tube for GIFT.	Num-1	0 - 3 0 = GIFT not performed	Mandatory
52	N_IVF	Number of oocytes treated with IVF	Number of oocytes attempted to be fertilised using IVF.	Num-2	0 - 50 0 = no oocytes treated with IVF	Mandatory
53	N_ICSI	Number of oocytes treated with ICSI	Number of oocytes treated with ICSI.	Num-2	0 - 50 0 = no oocytes treated with ICSI	Mandatory
54	N_FERT	Number of oocytes fertilised normally	To be recorded in the opinion of the treating embryologist. For example, in their opinion, although two pronuclei are not seen but cleavage has occurred, normal fertilisation has occurred.	Num-2	0 - 40 0 = No normal fertilisation occurred	Mandatory
55	IUI_DATE	Date of intra-uterine insemination	This data item applies only to treatment cycles where IUI is performed using <b>donated sperm</b> . Intra-vaginal insemination using donated sperm is not considered in this context and should not be recorded in ANZARD.	Date-10	DD/MM/YYYY	Conditional
56	ASS_HATC	Assisted hatching	Identify whether the embryos' zona pellucida were thinned to facilitate embryo hatching.	Char-1	n = No y = Yes	Conditional

NO.	ANZARD LABEL	DEFINITION	GUIDE FOR USE	TYPE & LENGTH	CODE	OBLIGATION
57	N_PGT_ASSAY ▲	Number of embryos biopsied for the purpose of performing any form of invasive PGT in this cycle.	Record the number of embryos that underwent any form of PGT (including PGT-A or PGT-D) and met any of the following criteria: 1. Embryos fertilised in the cycle and biopsied 2. Embryos thawed in the cycle and biopsied Include an embryo if a biopsy was performed, even if testing did not follow.	Num-2	0-50	Mandatory
58	NI_PGT_ASSAY ▲	Number of embryos' culture media sampled for the purpose of performing non-invasive PGT in this cycle.	Record the number of embryos' culture media sampled for non-invasive PGT meeting any of the following criteria: 3. Embryos fertilised in the cycle and media sampled 4. Embryos thawed in the cycle and media sampled	Num-2	0-50	Mandatory
59	N_PGT_ET ▲	Number of PGT embryos transferred in this cycle.	Determine whether any form of PGT was done on any embryo transferred in the cycle.	Num-2	0-3	Mandatory
60	NI_PGT_ET ▲	Number of NI-PGT embryos transferred in this cycle.	Determine whether any form of NI-PGT was done on any embryo transferred in the cycle.	Num-2	0-3	Mandatory
61	N_PGT_TH ▲	Number of embryos thawed that had PGT performed in a previous cycle.	Record the number of embryos thawed in this cycle that underwent any form of PGT in a previous cycle.	Num-2	0-20	Mandatory
62	NI_PGT_TH ▲	Number of embryos thawed that had NI-PGT performed in a previous cycle.	Record the number of embryos thawed in this cycle that underwent NI-PGT in a previous cycle.	Num-2	0-20	Mandatory
63	PGT_REASON ▲	Why PGT/NI-PGT was performed	If PGT/NI-PGT was performed, specify the primary reason for performing PGT/NI-PGT.	Char-1	1 = Aneuploidy screening 2 = Single gene variation 3 = Chromosomal structural rearrangements (e.g. translocations) 4 = Other	Conditional
64	N_CLFZ_S	Number of cleavage-stage embryos slow frozen	ANZARD defines a cleavage embryo as an embryo that is one to four days old, after fertilisation. For embryo donation/provision cycles, use this data item to record the number of slow frozen cleavage-stage embryos donated/provided. If fresh embryos are being donated/provided, use the N_EMBDON_FRESH data item instead.	Num-2	0 - 30 0 = No cleavage-stage embryos slow frozen	Mandatory

NO.	ANZARD LABEL	DEFINITION	GUIDE FOR USE	TYPE & LENGTH	CODE	OBLIGATION
65	N_CLFZ_V	Number of cleavage-stage embryos vitrified	ANZARD defines a cleavage embryo as an embryo that is one to four days old, after fertilisation. For embryo donation/provision cycles, use this data item to record the number of vitrified cleavage-stage embryos donated/provided. If fresh embryos are being donated/provided, use the N_EMBDON_FRESH data item instead.	Num-2	0 - 30 0 = No cleavage-stage embryos vitrified	Mandatory
66	N_BLFZ_S	Number of blastocysts slow frozen	ANZARD defines a blastocyst as an embryo that is five to six days old, after fertilisation. For embryo donation/provision cycles, use this data item to record the number of slow frozen blastocysts donated/provided. If fresh embryos are being donated/provided, use the N_EMBDON_FRESH data item instead.	Num-2	0 - 30 0 = No blastocyst slow frozen	Mandatory
67	N_BLFZ_V	Number of blastocysts vitrified	ANZARD defines a blastocyst as an embryo that is five to six days old, after fertilisation. For embryo donation/provision cycles, use this data item to record the number of vitrified blastocysts donated/provided. If fresh embryos are being donated/provided, use the N_EMBDON_FRESH data item instead.	Num-2	0 - 30 0 = No blastocyst vitrified	Mandatory
68	N_S_CLTH Δ	Number of slow frozen cleavage-stage embryos thawed	ANZARD defines a cleavage embryo as an embryo that is one to four days old, after fertilisation. For embryo recipient cycles, use this data item to record the number of received, slow frozen cleavage-stage embryos being thawed in the cycle. If fresh embryos were received, use N_EMBREC_FRESH data item instead.	Num-2	0 - 30 0 = No cleavage-stage embryos thawed	Mandatory
69	N_V_CLTH Δ	Number of vitrified cleavage-stage embryos warmed	ANZARD defines a cleavage embryo as an embryo that is one to four days old, after fertilisation. For embryo recipient cycles, use this data item to record the number of received, vitrified cleavage-stage embryos being warmed in the cycle. If fresh embryos were received, use N_EMBREC_FRESH data item instead.	Num-2	0 - 30 0 = No cleavage-stage embryos warmed	Mandatory

NO.	ANZARD LABEL	DEFINITION	GUIDE FOR USE	TYPE & LENGTH	CODE	OBLIGATION
70	N_S_BLTH Δ	Number of slow frozen blastocysts thawed	ANZARD defines a blastocyst as an embryo that is five to six days old, after fertilisation. For embryo recipient cycles, use this data item to record the number of received, slow frozen blastocysts being thawed in the cycle. If fresh embryos were received, use N_EMBREC_FRESH data item instead.	Num-2	0 - 30 0 = No blastocysts thawed	Mandatory
71	N_V_BLTH Δ	Number of vitrified blastocysts warmed	ANZARD defines a blastocyst as an embryo that is five to six days old, after fertilisation. For embryo recipient cycles, use this data item to record the number of received, vitrified blastocysts being warmed in the cycle. If fresh embryos were received, use N_EMBREC_FRESH data item instead.	Num-2	0 - 30 0 = No blastocysts embryos warmed	Mandatory
72	FDAT_EMB	Initial cryopreservation date of thawed/warmed embryos	If there is more than one embryo being thawed/warmed and the embryos have different cryopreservation dates (from different batches), then record the earliest cryopreservation date.	Date-10	DD/MM/YYYY	Conditional
73	ET_DATE	Embryo transfer date	Determine the date when embryo transfer to the female patient was performed. If no embryos were transferred, leave this data item blank.	Date-10	DD/MM/YYYY	Conditional
74	N_CL_ET	Number of cleavage-stage embryos transferred	Number of cleavage-stage embryos transferred. ANZARD defines a cleavage embryo as an embryo that is one to four days old, after fertilisation.	Num-1	0 - 3 0 = No cleavage-stage embryos transferred	Mandatory
75	N_BL_ET	Number of blastocysts transferred	Number of blastocyst stage embryos transferred. ANZARD defines a blastocyst as an embryo that is five to six days old, after fertilisation.	Num-1	0 - 3 0 = No blastocysts transferred	Mandatory
76	EMB_ICSI	Whether any transferred embryos were fertilised by ICSI	Determine if any of the embryos transferred were a result of an oocyte being fertilised using ICSI. If no embryo transfer occurred, leave this data item blank.	Char-1	n = No y = Yes	Conditional

NO.	ANZARD LABEL	DEFINITION	GUIDE FOR USE	TYPE & LENGTH	CODE	OBLIGATION
77	PR_CLIN	Clinical pregnancy	A clinical pregnancy must fulfil at least one of the following criteria: 1. Pregnancy known to be ongoing at 20 weeks 2. Evidence by ultrasound of an intrauterine sac and/or fetal heart. 3. Examination of products of conception reveal chorionic villi 4. A definite ectopic pregnancy that has been diagnosed laparoscopically or by ultrasound	Char-1	n = No y = Yes	Conditional
78	PR_END_DT	Date pregnancy ended	The end of a pregnancy includes delivery, miscarriage or termination.	Date-10	DD/MM/YYYY	Conditional
79	N_FH	Number of fetal hearts	Number of fetal hearts seen on first ultrasound (intrauterine only) This field must be completed if PR_CLIN field is "y".	Num-2	0 – 3 0 = No fetal hearts detected 99 = number of FH unknown	Conditional
80	PR_ECTOP	Ectopic pregnancy	Determine whether the pregnancy is an ectopic pregnancy or a heterotopic pregnancy.	Char-1	n = neither ectopic nor heterotopic e = ectopic h = heterotopic	Conditional
81	PR_TOP	Elective termination of pregnancy	Determine whether the female patient elected to terminate the pregnancy for any reason. Provide details about reason for elective termination in the ABN_LESS data item. <b>Do not</b> consider a planned fetal reduction in a multiple pregnancy subsequently resulting in an unintended miscarriage, as an elective termination of pregnancy. <b>Do not</b> consider a pregnancy where there has been an intrauterine fetal death (IUFD) which required induced delivery, as an elective termination of pregnancy.	Char-1	n = No y = Yes	Conditional
82	PR_REDUC	Selective reduction performed	Determine whether selective reduction was performed. If it was performed, provide details about reasons in the ABN_LESS data item.	Char-1	n = No y = Yes	Conditional
83	ABN_LESS	Fetal abnormality in a pregnancy ending <20 weeks or by selective reduction	Applies to elective terminations of pregnancy and fetal reductions due to fetal abnormality. Specify as much detail as possible.	Text 255	Leave blank where no fetal abnormality. Do not insert "nil" or "none".	Conditional
84	MAT_COMP	Maternal complications of pregnancy	Record any maternal complications of pregnancy. Insert as much detail as possible.	Text 255	Leave blank where no complications. Do not insert "nil" or "none".	Optional



NO.	ANZARD LABEL	DEFINITION	GUIDE FOR USE	TYPE & LENGTH	CODE	OBLIGATION
85	N_DELIV	Number of babies born.	The number of babies born meeting at least one of the following criteria: 1. Born at 20 weeks or more gestation 2. Birthweight is $\geq$ 400 grams Include all live born and stillborn babies.	Num-1	0 – 4 0 = No babies born 1 = one baby born 2 = two babies born	Conditional
86	CS	Caesarean birth	Regardless whether caesarean section was planned or not, indicate whether at least one baby was born by caesarean section. If any baby of a multiple birth is a caesarean section delivery, enter 'y'	Char-1	n = No y = Yes u = Unknown	Conditional
87	BAB1_OUT	Outcome of first-born baby	Outcome of the first-born baby. Every attempt must be made to obtain this information.	Char-1	s = Stillbirth l = Livebirth/Survived n = Livebirth/Died < 28 days (neonatal death) u = baby born but outcome unknown	Conditional
88	BAB1_SEX	Sex of first-born baby	Sex of the first-born baby. Every attempt must be made to obtain this information.	Char-1	m = Male f = Female u = sex unknown	Conditional
89	BAB1_WT	Birthweight of first-born baby	Birthweight (in grams) of the first-born baby. Every attempt must be made to obtain this information.	Num-4	9999 = birthweight unknown	Conditional
90	BAB1_ABN	Abnormalities in first-born baby	If present, record any information about the congenital malformation of the first-born baby.	Text 255	Leave blank where no abnormality. Do not insert "nil" or "none".	Optional
91	BAB1_NND	Date of neonatal death of first-born baby	If the first-born baby died within 28 days of birth, record the date of neonatal death.	Date-10	DD/MM/YYYY	Conditional
92	BAB2_OUT	Outcome of second-born baby	Outcome of the second-born baby. Every attempt must be made to obtain this information.	Char-1	s = Stillbirth l = Livebirth/Survived n = Livebirth/Died < 28 days (neonatal death) u = baby born but outcome unknown	Conditional
93	BAB2_SEX	Sex of second-born baby	Sex of the second born baby. Every attempt must be made to obtain this information.	Char-1	m = Male f = Female u = sex unknown	Conditional
94	BAB2_WT	Birthweight of second-born baby	Birthweight (in grams) of the second-born baby. Every attempt must be made to obtain this information.	Num-4	9999 = birthweight unknown	Conditional
95	BAB2_ABN	Abnormalities in second-born baby	If present, record any information about the congenital malformation of the second-born baby.	Text 255	Leave blank where no abnormality. Do not insert "nil" or "none".	Optional

NO.	ANZARD LABEL	DEFINITION	GUIDE FOR USE	TYPE & LENGTH	CODE	OBLIGATION
96	BAB2_NND	Date of neonatal death of second-born baby	If the second-born baby died within 28 days of birth, record the date of neonatal death.	Date-10	DD/MM/YYYY	Conditional
97	BAB3_OUT	Outcome of third-born baby	Outcome of the third-born baby. Every attempt must be made to obtain this information.	Char-1	s = Stillbirth l = Livebirth/Survived n = Livebirth/Died < 28 days (neonatal death) u = baby born but outcome unknown	Conditional
98	BAB3_SEX	Sex of third-born baby	Sex of the third-born baby. Every attempt must be made to obtain this information.	Char-1	m = Male f = Female u = sex unknown	Conditional
99	BAB3_WT	Birthweight of third-born baby	Birthweight (in grams) of the third-born baby. Every attempt must be made to obtain this information.	Num-4	9999 = birthweight unknown	Conditional
100	BAB3_ABN	Abnormalities in third-born baby	If present, record any information about the congenital malformation of the third-born baby.	Text 255	Leave blank where no abnormality. Do not insert "nil" or "none".	Optional
101	BAB3_NND	Date of neonatal death of third-born baby	Record the date of death of the third-born baby if the death occurred within 28 days after birth.	Date-10	DD/MM/YYYY	Conditional
102	BAB4_OUT	Outcome of fourth-born baby	Outcome of fourth-born baby. Every attempt must be made to obtain this information.	Char-1	s = Stillbirth l = Livebirth/Survived n = Livebirth/Died < 28 days (neonatal death) u = baby born but outcome unknown	Conditional
103	BAB4_SEX	Sex of fourth-born baby	Sex of the fourth-born baby. Every attempt must be made to obtain this information.	Char-1	m = Male f = Female u = sex unknown	Conditional
104	BAB4_WT	Birthweight of fourth-born baby	Birthweight (in grams) of the fourth-born baby.	Num-4	9999 = birthweight unknown	Conditional
105	BAB4_ABN	Abnormalities in fourth-born baby	If present, record any information about the congenital malformation of the fourth-born baby.	Text 255	Leave blank where no abnormality. Do not insert "nil" or "none".	Optional
106	BAB4_NND	Date of neonatal death of fourth-born baby	Record the date of death of the fourth-born baby if the death occurred within 28 days after birth.	Date-10	DD/MM/YYYY	Conditional
107	MORB_ADM	Hospital admission with ART related morbidity	Indicate whether the female patient was admitted to hospital with any condition related to fertility treatment. Examples include but are not limited to OHSS, infection, bleeding after OPU. Record as much information as is known about the hospital admission and morbidity in the MORB_INF field.	Char-1	n = No y = yes	Optional

NO.	ANZARD LABEL	DEFINITION	GUIDE FOR USE	TYPE & LENGTH	CODE	OBLIGATION
108	MRB_OHSS	Morbidity – OHSS	Indicate whether the female patient experienced ovarian hyperstimulation syndrome at any time during the treatment cycle. If the patient did experience OHSS, record as much information as is known in the MORB_INF field.	Char-1	n = No y = yes	Optional
109	MORB_INF	Morbidity information and detail	Record any information related to the female patient's hospital admission or cause of morbidity in this field.	Text-255	Leave this field blank if no morbidity Do not insert "nil" or "none".	Conditional
110	COMMENT	Additional comments about the cycle	Record additional comments or further explanations related to the treatment provided in the cycle or outcomes as a result of treatment.	Text 255	Leave this field blank if no morbidity Do not insert "nil" or "none".	Optional

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