Appendix 1. Inclusion and Exclusion Criteria Using The Joint Commission List of Indications Possibly Justifying Elective Induction Prior to 39 Weeks

Diagnosis/Condition	ICD-9-CM Code
Antepartum conditions excluded from study population	
Multiple gestation	651.01, 641.11, 651.21, 651.31, 651.41, 651.51, 651.61, 651.71, 651.81, 651.91
Multiple gestation malpresentation	652.61
Antepartum conditions/indications excluded from both expectant and elective induction groups	
HIV disease/infection	042, V08
Placenta previa	641.01, 641.11
Hypertension	642.01, 642.02, 642.11, 642.12, 642.21, 642.22
Toxiemia with old hypertension	642.71, 642.72
Renal or liver conditions	646.21, 646.22
Diabetes	648.01, 648.81, 648.82
Cardiovascular disease	648.51, 648.52, 648.61, 648.62
Vasa previa	663.51
Coagulation deficiency	649.32
Fetal abnormalities or conditions	655.01, 655.11, 655.31, 655.41, 655.51, 655.61, 655.81
Other indications retained as part of the risk of expectant management and excluded from the elective induction group	
Antepartum hemorrhage	641.81, 641.91
Transient hypertension	642.31, 642.32
Mild hypertension	642.41
Mild preeclampsia	642.42
Severe preeclampsia	642.51, 642.52
Eclampsia	642.61, 642.62
Hypertension nonspecified	642.91, 642.92
Postterm pregnancy	645.11
Liver/bile tract disorder (HELLP syndrome)	646.71
Coagulation deficiency with or without mention of antepartum condition	649.31
Unstable lie	652.01
Rh isoimmunization	656.11
ABO isoimmunization	656.21

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IUFD/stillbirth	656.41, V27.1
IUGR	656.51
Poly/oligohydramnios	657.01, 658.01
PROM	658.11, 658.21
Poor reproductive history	V23.5
Premature separation of placenta*	641.21
Fetal-maternal hemorrhage*	656.01
Coagulation deficiency hemorrhage*	641.31
Amniotic infection*	658.41
Fetal distress*	656.31
Abnormal fetal heart rate*	659.71

ICD-9-CM, International Classification of Diseases, 9th Revision, Clinical Modification; HELLP, hemolysis, elevated liver enzymes, and low platelet count; IUFD, intrauterine fetal demise; IUGR, intrauterine growth restriction; PROM, premature rupture of membranes.

* Intrapartum conditions retained in elective induction group in sensitivity analysis.

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Appendix 2. Sensitivity Analysis: Induction Without Medical Indication Compared With Expectant Management and Cesarean Delivery, Neonatal Intensive Care Unit Admission, Respiratory Distress, and Hyperbiliruinemia, California, 2006

			Cesarean Delivery	Respiratory Distress	Hyperbilirubinemia
	Gestational Age Group	Model n	OR (CI)	OR (CI)	OR (CI)
All deliveries					
	37 weeks	305685	1.02 (.87-1.18)	1.33 (.93-1.90)	1.34 (1.16-1.56)
	38 weeks	246263	.87 (.78-.97)	.96 (.73-1.25)	1.19 (1.06-1.33)
	39 weeks	152696	.90 (.82-.97)	.74 (.61-.91)	1.02 (.94-1.10)
	40 weeks	60204	1.00 (.91-1.11)	.64 (.49-.83)	1.11 (.99-1.24)
Nulliparous					
	37 weeks	144293	1.10 (.92-1.32)	1.20 (.73-1.95)	1.39 (1.14-1.71)
	38 weeks	118915	.96 (.85-1.08)	.99 (.68-1.45)	1.43 (1.23-1.66)
	39 weeks	76864	.99 (.91-1.09)	.88 (.65-1.21)	1.09 (.99-1.21)
	40 weeks	31671	1.04 (.93-1.16)	.78 (.57-1.07)	1.15 (1.00-1.33)
Prior vaginal only					
	37 weeks	161392	.88 (.69-1.13)	1.62 (.99-2.64)	1.44 (1.20-1.74)
	38 weeks	127348	.75 (.64-.88)	1.12 (.80-1.56)	1.22 (1.06-1.40)
	39 weeks	75832	.74 (.65-.85)	.74 (.55-1.00)	1.12 (.99-1.27)
	40 weeks	28533	.94 (.79-1.11)	.49 (.31-.80)	1.17 (1.02-1.35)

NICU, neonatal intensive care unit; OR, odds ratio, CI, 95% confidence interval.

As compared to the baseline analyses, these elective induction groups included women with documented fetal distress, amniotic infection, hemorrhage, or premature separation of the placenta and without other antenatal indications were included in the elective induction groups (see Appendix 1 for list of indications and associated ICD-9 codes).

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