### Small for Gestational Age Rate

<table>
<thead>
<tr>
<th>Name</th>
<th>Small for Gestational Age Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Short/Other Names</td>
<td>SGA</td>
</tr>
<tr>
<td>Description</td>
<td>Crude rate for small for gestational age (SGA)</td>
</tr>
<tr>
<td>Interpretation</td>
<td>The in-hospital SGA rate represents the proportion of singleton babies born in a Canadian hospital with a birth weight below the 10th percentile for their gestational age and sex. In other words, babies classified as SGA are smaller than 90% of the babies from a standard reference population of the same gestational age and sex. Lower rates for this indicator are desirable.</td>
</tr>
</tbody>
</table>

**HSP Framework Dimension**

Health System Outcomes: Improve health status of Canadians

**Areas of Need**

Not applicable

**Geographic Coverage**

All provinces/territories

**Reporting Level/Disaggregation**

National, Province/Territory, Region

**Indicator Results**


**Identifying Information**

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<td>Indicator Description and Calculation</td>
<td></td>
</tr>
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<td>Description</td>
<td>Crude rate for small for gestational age (SGA)</td>
</tr>
<tr>
<td>Calculation: Rate</td>
<td>(Number of live singleton newborns classified as SGA at birth) ÷ (Number of live singleton newborns with a valid birth weight, gestational age and gender) × 100</td>
</tr>
<tr>
<td>Unit of Analysis:</td>
<td>Discharges from acute care facilities</td>
</tr>
<tr>
<td>Type of Measurement</td>
<td>Rate - Per 100</td>
</tr>
<tr>
<td>Adjustment: None</td>
<td></td>
</tr>
<tr>
<td>Method of Adjustment</td>
<td>Not applicable</td>
</tr>
</tbody>
</table>
Description:
Number of live singleton newborns with a valid birth weight, gestational age and gender

Inclusions:
1. ICD-10-CA in-hospital singleton birth code:
   a. A diagnosis code of Z38.0 coded in any position

Exclusions:
1. Non-newborn records
2. Cadaveric donors
3. Invalid birth weight (Weight = blank, 0000, 0001 or ZZZZ)
4. Invalid or out-of-range gestational age (Delivery Gestational Age = blank or ZZ or <22 weeks or >43 weeks)
5. Gender Code not equal to F or M
6. ICD-10-CA multiple births codes:
   a. Any newborn record (Entry Code = N with a Z38 diagnosis code) where two or more newborn records are born to the same mother (duplicate Maternal Newborn Chart Number) within 40 days of one another (based on Admission Date) in the same institution (Institution Number) OR
   b. Any one ICD-10-CA multiple birth diagnosis code of Z38.3, Z38.4, Z38.5, Z38.6, Z38.7 or Z38.8 coded in any diagnosis field
7. ICD-10-CA abortion or other out-of-hospital birth codes:
   a. Any one diagnosis code of P96.4, Z38.1 or Z38.2 coded in any diagnosis field

Numerator Description:
Number of live singleton newborns classified as SGA at birth

Inclusions:
1. Weight <10th percentile for gestational age and gender category. Standard Canadian birth weights for gestational age by gender charts were used (M. S. Kramer et al., 2001).

Exclusions:
Same as denominator (numerator is a subset of the denominator)

Background, Interpretation and Benchmarks
Rationale
SGA rates continue to vary among provinces/territories. Given this variance, this indicator can be used to inform government planners, policy-makers, health system decision-makers, health care providers, patients and the general public. It can help raise awareness and allow Canada to compare its rates with the rates of other countries.

The in-hospital SGA rate represents the proportion of singleton babies born in a Canadian hospital with a birth weight below the 10th percentile for their gestational age and sex. In other words, babies classified as SGA are smaller than 90% of the babies from a standard reference population of the same gestational age and sex.

Lower rates for this indicator are desirable.

HSP Framework
Health System Outcomes: Improve health status of Canadians
Dimension
Areas of Need Not applicable
Targets Not applicable
Benchmarks

References

Availability of Data Sources and Results
Data Sources DAD, HMDB, MED-ÉCHO
Type of Year: Fiscal
Available Data Years
First Available Year: 2007
Last Available Year: 2017
Geographic Coverage All provinces/territories
Reporting Level/Disaggregation National, Province/Territory, Region
Result Updates
Update Frequency Every year
Indicator Results
Web Tool:
Quick Stats
Updates As of 2015–2016, the national results include non-residents of Canada.

Quality Statement
In order to provide a more stable rate estimate, only data from regions with a population of at least 50,000 was reported. Additional reasons for suppression were privacy, rate instability and under-reporting. As of 2015–2016, regions are not suppressed based on population; instead, the following suppression methodology is used:

a) Suppression due to privacy: To ensure privacy, a suppression rule is applied to all clinical indicator results. Numerators and/or denominators between 1 and 4 are suppressed.

b) Suppression due to unstable results: Unstable indicator results are suppressed. In general, these are indicator results with a denominator between 1 and 49.

Results are presented for a patient’s region of residence, rather than the location of the facility where hospitalization occurred. For P.E.I. and the territories, the entire province/territory is included as a region. Health regions in Nova Scotia and Alberta have changed over time. The Postal Code Conversion File (PCCF/PCCF+) was used to assign patients to their region of residence.

As of 2015–2016, the national results include non-residents of Canada.

2016–2017 data for Nunavut is incomplete; indicator results have therefore been suppressed.

Comments

Standard Canadian birth weights for gestational age by gender charts were used (M. S. Kramer et al., 2001).