

Appendix 1. Adjusted Relative Risk of Composite Neonatal Morbidity

	Fetal growth	Total live births	Morbidity cases	Morbidity rate (per 1,000 live births)	Crude RR (95% CI)	aRR (95% CI)
All ^a	Total	3,901,819	23,939	6.14		
	AGA	3,851,403	23,380	6.07	Referent	Referent
	Non-macrosomic LGA	50,416	559	11.09	1.83 (1.68-1.99)	1.47 (1.35-1.60)
Non-diabetic ^b	Total	3,673,653	21,919	5.97		
	AGA	3,629,274	21,490	5.92	Referent	Referent
	Non-macrosomic LGA	44,379	429	9.67	1.63 (1.48-1.80)	1.38 (1.25-1.52)
Pre-gestational diabetes ^b	Total	22,433	396	17.65		
	AGA	21,358	352	16.48	Referent	Referent
	Non-macrosomic LGA	1,075	44	40.93	2.48 (1.83-3.38)	2.19 (1.58-3.02)
Gestational diabetes ^b	Total	205,733	1,624	7.89		
	AGA	200,771	1,538	7.66	Referent	Referent
	Non-macrosomic LGA	4,962	86	17.33	2.26 (1.82-2.81)	1.79 (1.44-2.24)

Data presented as the number of cases per 1,000 live births.

RR, relative risk; aRR, adjusted relative risk; CI, confidence interval; AGA, appropriate for gestational age (birth weight 10-89th percentile for gestational age and < 4,000 grams); LGA, large for gestational age (birth weight ≥ 90% for gestational age and < 4,000 grams).

Composite neonatal morbidity consisted of any of the following: Apgar score < 5 at 5 minutes, assisted ventilation required for > 6 hours, seizure or serious neurologic dysfunction, significant birth injury (fracture, nerve injury, hemorrhage requiring intervention), or neonatal mortality.

^aAdjusted for: age, race and ethnicity, education, marital status, pre-pregnancy body mass index, primiparous, prenatal care, cigarette use during pregnancy, diabetes, hypertensive disorder, infant sex, gestational age, delivery year.

^bAdjusted for: age, race and ethnicity, education, marital status, pre-pregnancy body mass index, primiparous, prenatal care, cigarette use during pregnancy, hypertensive disorder, infant sex, gestational age, delivery year.

Statistically significant results are highlighted in bold.

Doty MS, Chen HY, Sibai BM, Chauhan SP. Maternal and neonatal morbidity associated with early term delivery of large-for-gestational-age but nonmacrosomic neonates. *Obstet Gynecol* 2019; 133.

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Appendix 2. Sensitivity Analysis: Adjusted Relative Risk of Composite Maternal Morbidity Without Transfusion

	Fetal growth	Total live births	Morbidity cases	Morbidity rate (per 1,000 live births)	Crude RR (95% CI)	aRR (95% CI)
All ^a	Total	3,913,599	10,949	2.80		
	AGA	3,863,029	10,739	2.78	Referent	Referent
	Non-macrosomic LGA	50,570	210	4.15	1.49 (1.30-1.71)	1.31 (1.14-1.50)
Non-diabetic ^b	Total	3,685,137	9,854	2.67		
	AGA	3,640,610	9,687	2.66	Referent	Referent
	Non-macrosomic LGA	44,527	167	3.75	1.41 (1.21-1.64)	1.31 (1.13-1.53)
Pre-gestational diabetes ^b	Total	22,443	153	6.82		
	AGA	21,366	143	6.69	Referent	Referent
	Non-macrosomic LGA	1,077	10	9.29	1.39 (0.73-2.63)	1.06 (0.56-2.01)
Gestational diabetes ^b	Total	206,019	942	4.57		
	AGA	201,053	909	4.52	Referent	Referent
	Non-macrosomic LGA	4,966	33	6.65	1.47 (1.04-2.08)	1.36 (0.96-1.94)

Data presented as the number of cases per 1,000 live births.

RR, relative risk; aRR, adjusted relative risk; CI, confidence interval; AGA, appropriate for gestational age (birth weight 10-89th percentile for gestational age and < 4,000 grams); LGA, large for gestational age (birth weight ≥ 90% for gestational age and < 4,000 grams).

Composite maternal morbidity consisted of any of the following: ruptured uterus, unplanned hysterectomy, admission to intensive care unit, or unplanned operating room procedure following delivery.

^aAdjusted for: age, race and ethnicity, education, marital status, pre-pregnancy body mass index, primiparous, prenatal care, cigarette use during pregnancy, diabetes, hypertensive disorder, infant sex, gestational age, delivery year.

^bAdjusted for: age, race and ethnicity, education, marital status, pre-pregnancy body mass index, primiparous, prenatal care, cigarette use during pregnancy, hypertensive disorder, infant sex, gestational age, delivery year.

Statistically significant results are highlighted in bold.

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