Fetal Death Data Dictionary, 1992-2018

Washington State Department of Health

Center for Health Statistics, June, 2019

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ASCII data files are fixed format with a record length of 642.

\*Selected fields are retained for use with pre-1992 files.

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DATA DICTIONARY

Field Field Column Field Data

No. Name Loc. Len. Type Description

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1 certno\_e 1-10 10 C Encrypted Fetal Death Certificate Number

 The first four digits indicate the year of delivery.

2 certype 11-11 1 C Certificate Type

 \*\*\*1992-Present\*\*\*

 F - In-State Fetal Death

 P - Out-of-State Fetal Death

3 dob\_yr 12-15 4 N Year of Delivery

 \*\*\*1992-Present\*\*\*

 9999 - Unknown/Not Stated

4 dob\_mo 16-17 2 N Month of Delivery

 \*\*\*1992-Present\*\*\*

 01-12

 99 - Unknown/Not Stated

5 blank 18-19 2 This field is intentionally blank.

6 birth\_hr 20-21 2 C Delivery Hour

 Time of Delivery in 24-hour format. Midnight has a value of ‘24’, any time after midnight but before 1 am has a value of ‘00’. Prior to mid 1992, out of state occurrences were not coded.

 \*\*\*1993-Present\*\*\*

 00-24

 99 - Unknown/Not Stated

 \*\*\*1992\*\*\*

 00-24

 99 - Unknown/Not Stated

 blank - Not Coded

7 sex 22-22 1 C Sex of Fetus

 \*\*\*1992-Present\*\*\*

 F - Female

 M - Male

 U - Unknown

8 plural 23-23 1 C Plurality

 \*\*\*1992-Present\*\*\*

 1 - Single

 2 - Twin

 3 - Triplet

 4 - Quadruplet

 5 - Quintuplet

 6 - Sextuplet

 7 - Septuplet

 8 - Octuplet

 9 - Unknown

9 city\_occ 24-27 4 C County and City of Occurrence

 City in which the delivery occurred. If the delivery occurred in Washington State, this field will be greater than “0000.”

 If a delivery occurs in a place with a population less than 2,500, it is assigned to the rural portion of the county.

 Note: Use this field to select deliveries occurring in a specific county or city. See the County and City of Residence (city\_res) to select by place of residence. Before using this field, see “Data Quality Technical Notes - City/County/State of Residence and Occurrence.”

 \*\*\*1992-Present\*\*\*

 0000 - Non-Washington State or Unknown

 0100 - Adams County rural

 0103 - Othello

 0200 - Asotin County rural

 0203 - Clarkston

 0300 - Benton County rural

 0301 - Kennewick

 0302 - Richland

 0303 - Prosser

 0304 - West Richland (1981-Present)

 0305 – Benton City (2001-present)

 0400 - Chelan County rural

 0402 - Wenatchee

 0403 - Chelan

 0404 - Cashmere (1992-Present)

 0500 - Clallam County rural

 0501 - Forks(1981-Present)

 0502 - Port Angeles

 0503 - Sequim

 0600 - Clark County rural

 0602 - Vancouver

 0603 - Camas

 0604 - Washougal

 0605 - Battle Ground

 0606 – Ridgefield (2006-Present)

 0607 – La Center (2009-present)

 0700 - Columbia County rural

 0703 - Dayton(1980-1989,

 1992-Present)

 0800 - Cowlitz County rural

 0802 - Longview

 0803 - Kelso

 0804 - Woodland(1984-Present)

 0900 - Douglas County rural

 0901 - East Wenatchee(1992-Present)

 1000 - Ferry County rural

 1100 - Franklin County rural

 1102 - Pasco

 1103 - Connell (1994-Present)

 1200 - Garfield County rural

 1300 - Grant County rural

 1304 - Ephrata

 1305 - Moses Lake

 1306 – Quincy

 1307 – Mattawa (2001-present)

 1308 – Warden (2001-present)

 1400 - Grays Harbor County rural

 1401 - Aberdeen

 1402 - Hoquiam

 1403 - Montesano

 1404 - Elma(1980-1984,1992-Present)

 1405 - Ocean Shores(1993-Present)

 1500 - Island County rural

 1503 - Oak Harbor

 1600 - Jefferson County rural

 1603 - Port Townsend

 1700 - King County rural

 1701 - Seattle

 1702 - Renton

 1703 - Auburn

 1704 - Enumclaw

 1705 - Kent

 1706 - Kirkland

 1707 - Bellevue

 1708 - Normandy Park

 1709 - Mercer Island

 1710 - Redmond

 1711 - Bothell

 1712 - Clyde Hill(1981,1987,

 1992-Present)

 1713 - Des Moines

 1714 - Issaquah

 1715 - Lake Forest Park(1987- Present)

 1716 - Medina

 1717 - Tukwila

 1718 - Pacific(1986-Present)

 1719 - Federal Way(1990-Present)

 1720 - SeaTac(1990-Present)

 1721 - Duvall(1992-Present)

 1722 - North Bend(1992-Present)

 1723 - Burien(1993-Present)

 1724 - Woodinville(1993-Present)

 1725 - Newcastle (1995-Present)

 1726 – Shoreline (1997-Present)

 1727 – Black Diamond (1998-Present)

 1728 – Covington (1998-Present)

 1729 – Maple Valley (1998-Present)

 1730 – Kenmore (2000-Present)

 1731 – Sammamish (2000-Present)

 1732 – Algona (2001-present)

 1733 – Snoqualmie (2001-present)

 1800 - Kitsap County rural

 1802 - Bremerton

 1803 - Port Orchard

 1804 - Poulsbo

 1805 - Bainbridge Island(formerly Winslow)

 (1985-Present)

 1900 - Kittitas County rural

 1903 - Ellensburg

 2000 - Klickitat County rural

 2003 - Goldendale

 2100 - Lewis County rural

 2103 - Centralia

 2104 - Chehalis

 2200 - Lincoln County rural

 2300 - Mason County rural

 2303 - Shelton

 2400 - Okanogan County rural

 2403 - Omak

 2500 - Pacific County rural

 2503 - Raymond

 2600 - Pend Oreille County rural

 2700 - Pierce County rural

 2701 - Tacoma

 2702 - Puyallup

 2703 - Sumner

 2704 - Buckley

 2705 - Fircrest

 2706 - Bonney Lake

 2707 - Milton

 2708 - Steilacoom

 2709 - Gig Harbor(1984-Present)

 2710 - Fife(1987-Present)

 2711 - Edgewood (1996-Present)

 2712 - Lakewood (1996-Present)

 2713 - University Place (1996- Present)

 2714 – Orting (1997-present)

 2715 – DuPont (2001-present)

 2716 – Auburn (2006-Present)

 2800 - San Juan County rural

 2900 - Skagit County rural

 2903 - Anacortes

 2904 - Mount Vernon

 2905 - Sedro Woolley

 2906 - Burlington

 3000 - Skamania County rural

 3100 - Snohomish County rural

 3101 - Arlington

 3102 - Everett

 3103 - Snohomish

 3104 - Edmonds

 3105 - Lynnwood

 3106 - Marysville

 3107 - Mountlake Terrace

 3108 - Brier

 3109 - Monroe

 3110 - Mukilteo(1982-Present)

 3111 - Mill Creek(1985-Present)

 3112 - Lake Stevens(1988-Present)

 3113 - Bothell(1993-Present)

 3114 - Sultan (1994-Present)

 3115 - Stanwood (1995-Present)

 3116 – Granite Falls (2001-present)

 3200 - Spokane County rural

 3201 - Spokane (City)

 3203 - Medical Lake

 3204 - Cheney

 3205 - Airway Heights (1994- Present)

 3206 - Deer Park (1994-Present)

 3207 – Liberty Lake (2003-present)

 3208 – Spokane Valley (2004-

 Present)

 3300 - Stevens County rural

 3303 - Colville

 3400 - Thurston County rural

 3402 - Olympia

 3403 - Tumwater

 3404 – Lacey

 3405 – Yelm (1998-Present)

 3500 - Wahkiakum County rural

 3600 - Walla Walla County rural

 3602 - Walla Walla (City)

 3603 - College Place

 3700 - Whatcom County rural

 3702 - Bellingham

 3703 - Lynden

 3704 - Ferndale

 3705 - Blaine(1980,1990-Present)

 3706 – Everson (2015-Present)

 3800 - Whitman County rural

 3802 - Pullman

 3803 - Colfax

 3900 - Yakima County rural

 3902 - Yakima (City)

 3903 - Sunnyside

 3904 - Toppenish

 3905 - Grandview

 3906 - Wapato

 3907 - Selah

 3908 - Union Gap

 3909 – Granger (2001-present)

 3910 – Zillah (2006-Present)

10 cnty\_occ 24-25 2 C County of Occurrence

 County in which the delivery occurred. If the delivery occurred in Washington State, this field will be greater than “00.”

 Note: Use this field to select deliveries occurring in a specific county. See the County of Residence (cnty\_res) to select by county of residence. Before using this field, see “Data Quality Technical Notes - City/County/State of Residence and Occurrence.”

 \*\*\*1992-Present\*\*\*

 00 - Non-Washington State or Unknown

 01 - Adams County

 02 - Asotin County

 03 - Benton County

 04 - Chelan County

 05 - Clallam County

 06 - Clark County

 07 - Columbia County

 08 - Cowlitz County

 09 - Douglas County

 10 - Ferry County

 11 - Franklin County

 12 - Garfield County

 13 - Grant County

 14 - Grays Harbor County

 15 - Island County

 16 - Jefferson County

 17 - King County

 18 - Kitsap County

 19 - Kittitas County

 20 - Klickitat County

 21 - Lewis County

 22 - Lincoln County

 23 - Mason County

 24 - Okanogan County

 25 - Pacific County

 26 - Pend Oreille County

 27 - Pierce County

 28 - San Juan County

 29 - Skagit County

 30 - Skamania County

 31 - Snohomish County

 32 - Spokane County

 33 - Stevens County

 34 - Thurston County

 35 - Wahkiakum County

 36 - Walla Walla County

 37 - Whatcom County

 38 - Whitman County

 39 - Yakima County

11 facility 28-30 3 C Facility or Institution of Delivery.

 Before using this field, see “Data Quality Technical Notes - Facility of Birth.” For code table see ASCII file “facil.asc.”

12 age\_mom 31-32 2 N Mother’s Age

 Before using this field, see “Data Quality Technical Notes - Age (Mother, Father).”

 \*\*\*1992-Present\*\*\*

 99 - Not Stated

13 birplmom 33-34 2 C Mother’s Birth State

 NCHS state code. In addition to the 50 states, the District of Columbia, the Virgin Islands, Cuba, Guam, Puerto Rico, Canada and Mexico also receive unique codes in this field.

 \*\*\*1992-Present\*\*\*

 01 - Alabama

 02 - Alaska

 03 - Arizona

 04 - Arkansas

 05 - California

 06 - Colorado

 07 - Connecticut

 08 - Delaware

 09 - District of Columbia

 10 - Florida

 11 - Georgia

 12 - Hawaii

 13 - Idaho

 14 - Illinois

 15 - Indiana

 16 - Iowa

 17 - Kansas

 18 - Kentucky

 19 - Louisiana

 20 - Maine

 21 - Maryland

 22 - Massachusetts

 23 - Michigan

 24 - Minnesota

 25 - Mississippi

 26 - Missouri

 27 - Montana

 28 - Nebraska

 29 - Nevada

 30 - New Hampshire

 31 - New Jersey

 32 - New Mexico

 33 - New York

 34 - North Carolina

 35 - North Dakota

 36 - Ohio

 37 - Oklahoma

 38 - Oregon

 39 - Pennsylvania

 40 - Rhode Island

 41 - South Carolina

 42 - South Dakota

 43 - Tennessee

 44 - Texas

 45 - Utah

 46 - Vermont

 47 - Virginia

 48 - Washington

 49 - West Virginia

 50 - Wisconsin

 51 - Wyoming

 52 - Puerto Rico

 53 - Virgin Islands

 54 - Guam

 55 - Canada

 56 - Cuba

 57 - Mexico

 59 - Other Foreign

 60 – American Samoa

 69 - Marianas

 90 - US (Unspecified)

 91 - Refused to State

 99 - Not Classifiable

14 city\_res 35-38 4 C County and City of Residence

 Mother’s Residence. If the residence is in Washington State, this field will be greater than “0000.”

 If the place of residence has a population less than 2,500, it is assigned to the rural portion of the county.

 Note: Use this field to select deliveries for residents in a specific county or city. See the County and City of Occurrence (city\_occ) to select by place of occurrence. Before using this field, see “Data Quality Technical Notes - City/County/State of Residence and Occurrence.”

 For a list of the codes, see the county and city of occurrence (city\_occ) field.

15 cnty\_res 35-36 2 C County of Residence

 Mother’s residence. If the delivery occurred in Washington State, this field will be greater than “00.”

 Note: Use this field to select deliveres for residents in a specific county. See the County of Occurrence (cnty\_occ) to select by county of occurrence. Before using this field, see “Data Quality Technical Notes - City/County/State of Residence and Occurrence.”

 For a list of the codes, see the county of occurrence (cnty\_occ) field.

16 age\_dad 39-40 2 N Father’s Age

 Before using this field, see “Data Quality Technical Notes - Age (Mother, Father).”

 \*\*\*1992-Present\*\*\*

 99 - Not Stated

17 birpldad 41-42 2 C Father’s Birth State

 NCHS state code. In addition to the 50 states, the District of Columbia, the Virgin Islands, Cuba, Guam, Puerto Rico, Canada and Mexico also receive unique codes in this field. For a list of codes, see the mother’s birth state (birplmom) field.

18 attclass 43-44 2 C Attendant Classification

 This field will contain an entry only if the attendant is other than the certifier. Otherwise, this field will be blank. Note that most CNMs practice in a hospital setting and most LMs practice in a home setting. Lay midwives may act without a license if not charging or advertising. Before using this field, see “Data Quality Technical Notes - Attendant/Certifier Classification.”

 \*\*\*1992-Present\*\*\*

 00 - Hospital Administrator

 01 - Physician, MD

 02 - Licensed Midwife

 03 - Osteopath, DO

 04 - Father/Mother

 05 - Certified Nurse Midwife

 06 - Nurse

 07 - Other Midwife

 08 - Other

 09 - Not Stated

 Blank - Not Applicable

19 race\_dad 45-45 1 C Father’s Race

 Coding of race follows the National Center for Health Statistics (NCHS) guidelines. Before using this field, see “Data Quality Technical Notes - Race/Hispanic Origin (Mother, Father, Child).”

 \*\*\*2003-Present\*\*\*

Uses race assigned by NCHS bridging methods (see Data Quality Technical Notes for description). Coding same as in previous years plus:

Blank – Not process by NCHS

 \*\*\*1992-2002\*\*\*

 1 - White

 2 - Black

 3 - Native American

 4 - Chinese

 5 - Japanese

 6 - Other Non-White

 7 - Filipino

 8 - Refused to State

 9 - Unknown/Not Stated

 A - Hawaiian

 B - Other Asian/Pacific Islander

 C - Mexican/Chicano/Hispanic

 D - Asian Indian

 E - Korean

 F - Samoan

 G - Vietnamese

 H - Guamanian

20 race\_mom 46-46 1 C Mother’s Race

 Coding of race follows the NCHS guidelines. Before using this field, see “Data Quality Technical Notes - Race/Hispanic Origin (Mother, Father, Child).” For a list of the codes, see the Father’s Race (race\_dad) field.

21 raceccal 47-47 1 C Fetus’ Calculated Race

 The race code given here is from the NCHS algorithm which uses mother’s and father’s race to derive a code for the fetus’ race.

 Before using this field, see “Data Quality Technical Notes - Race/Hispanic Origin (Mother, Father, Child).” For a list of the codes, see the Father’s Race (race\_dad) field.

22 educ\_dad 48-49 2 N Father’s Education Level

 Highest grade completed by the father.

 \*\*\*2003-Present\*\*\*

01 – 8th grade or less (see dadle8ed, field 201)

 02 – 9th-12th grade, no diploma

 03 – High school graduate or GED

 04 – Some college, no degree

 05 – Associate degree

 06 – Bachelor’s degree

 07 – Master’s degree

08 – Doctorate or Professional degree

 09 – Unknown (09 or 99?)

 \*\*\*1992-2002\*\*\*

 00 - No education

 01 - Completed first grade

 02 - Completed second grade

 03 - Completed third grade

 04 - Completed fourth grade

 05 - Completed fifth grade

 06 - Completed sixth grade

 07 - Completed seventh grade

 08 - Completed eighth grade

 09 - Completed ninth grade

 10 - Completed tenth grade

 11 - Completed eleventh grade

 12 - High school graduate

 13 - Completed 1 year of college

 14 - Completed 2 years of college

 15 - Completed 3 years of college

 16 - College graduate

 17 - Post graduate work

 99 - Unknown/Not stated

23 educ\_mom 50-51 2 N Mother’s Education Level

 Highest grade completed by the mother. For a list of the codes, see the father’s education level (educ\_dad) field.

24 lb\_nl 52-54 3 N Number of Prior Live Births, Now Living

 Before using this field, see “Data Quality Technical Notes - Previous Pregnancy History.”

 \*\*\*1992-Present\*\*\*

 000 - None

 099 - Unknown/Not Stated

25 priorprg 55-57 3 N Total Prior Pregnancies. As of

2003, this field is calculated from prior pregnancy detail.

 \*\*\*1992-Present\*\*\*

 000 - None

 999 - Unknown/Not Stated

26-29 filler 58-75 Contained previous induced, live birth, and fetal death dates and menses date which are now moved to end of file (fields 148-151)

30 pnatalmo 76-78 3 N Month Prenatal Care Began

 Indicates the month from the beginning of the pregnancy at which Mother entered prenatal care. Before using this field, see “Data Quality Technical Notes - Month Prenatal Care Began.” As of

2003, this field is calculated from date of first prenatal visit (field 205) and menses date (field 151).

 \*\*\*1992-Present\*\*\*

 000 - None

 001 to 010 - First through tenth month

 999 - Unknown

31 pnatalvs 79-81 3 N Number of Prenatal Visits

 Indicates the number of prenatal visits for the entire pregnancy. The ‘95’ code was used until mid 1992. Before using this field, see “Data Quality Technical Notes - Number of Prenatal Visits.”

 \*\*\*1993-Present\*\*\*

 000 - None

 099 - Unknown/Not Stated

 \*\*\*1992\*\*\*

 000 - None

 095 - Some

 099 - Unknown/Not Stated

32 married 82-82 1 C Marital Status of Mother

 \*\*\*1992-Present\*\*\*

 Y - Yes

 N - No

 U - Not Stated

33 wt\_grams 83-86 4 N Delivery Weight - Grams

 Indicates gram weight of fetus. Pounds and ounces are converted as follows:

 grams = [(lbs\*16)+oz]\*28.3495267

 (Rounded to the nearest gram)

 \*\*\*1992-Present\*\*\*

 9999 - Unknown/Not Stated

34 blank 87-100 14 This field is intentionally blank.

35 fac\_type 101-101 1 C Facility Type for Place of Delivery

 Note that ‘home’ can be the mother’s residence (the majority of records), another person’s residence, or a midwife’s place of business (if it’s her home and not a licensed birth center). ). For

 further information please see the “Data Quality Technical Notes – Facility of Birth.”

 \*\*\*2003-Present\*\*\*

 1 - Hospital

 2 - Enroute

 3 - Birth Center

 4 – Clinic/Doctor’s Office

 5 – Home – Unknown Planning

 6 – Other

 7 – Home – Planned

 8 – Home - Unplanned

 9 - Unknown/Not Stated

 Blank - Not Coded

 \*\*\*1980-2002\*\*\* 1 - Hospital

 2 - Enroute

 3 - Birth Center

 4 - Other Medical Facility

 5 - Home

 6 - Other

 9 - Unknown/Not Stated

 Blank - Not Coded

36 occm\_dad 102-104 3 C Father’s Occupation - Sam Milham code

 Sam Milham occupation codes are obtained from a computer program which uses the occupation and industry literal fields. This program coded about 93-97% of the records; the remaining 3-7% need to be hand-coded. The hand coding has not been done for 1993-present and for a portion of the 1992 records. For further information please see the “Data Quality Technical Notes - Occupation (Milham Codes - Mother, Father).” For code table see ASCII file “occmil.asc”. Note: there are codes on the file which are invalid.

 \*\*\*1993-Present\*\*\*

 See “occmil.asc” for codes.

 Note: About 7% not coded.

 \*\*\*1992\*\*\*

 See “occmil.asc” for codes. Note: About 3.5% not coded.

37 occm\_mom 105-107 3 C Mother’s Occupation - Sam Milham code

 See Father’s Occupation - Sam Milham code (occm\_dad) field.

38 lb\_nd 108-110 3 N Number of Prior Live Births, Now Dead

 Before using this field, see “Data Quality Technical Notes - Previous Pregnancy History.”

 \*\*\*1992-Present\*\*\*

 000 - None

 099 - Unknown/Not Stated

39 fd\_lt20 111-113 3 N Fetal Deaths LT 20 Weeks

 Number of spontaneous fetal deaths of less than 20 weeks gestation. Before using this field, see “Data Quality Technical Notes - Previous Pregnancy History.”

 \*\*\*2003-present\*\*\*

Not Collected – see ‘Other Pregnancy Outcomes’ (field 202).

 \*\*\*1980-2002\*\*\*

 000 - None

 099 - Unknown/Not Stated

40 fd\_ge20 114-116 3 N Fetal Deaths GE 20 Weeks

 Number of spontaneous fetal deaths of 20 weeks gestation or later.

 Before using this field, see “Data Quality Technical Notes - Previous Pregnancy History.”

 \*\*\*2003-present\*\*\*

Not Collected – see ‘Other Pregnancy Outcomes’ (field 202).

 \*\*\*1980-2002\*\*\* 000 - None

 099 - Unknown/Not Stated

41 blank 117-122 3 This field is intentionally left blank.

42 order 123-123 1 C Birth Order at Delivery

 \*\*\*1992-Present\*\*\*

 0 - Single Birth

 1 - First Born

 2 - Second Born

 3 - Third Born

 ...

 9 - Unknown Order

43 crt\_clas 124-125 2 C Classification of Certifier

 Before using this field, see “Data Quality Technical Notes - Attendant/Certifier Classification.”

 \*\*\*1992-Present\*\*\*

 00 - Hospital Administrator

 01 - Physician, MD

 02 - Licensed Midwife

 03 - Osteopath, DO

 04 - Father/Mother

 05 - Certified Nurse Midwife

 06 - Nurse

 07 - Other Midwife

 08 - Other

 09 - Not Stated

44 underly 126-129 4 C Underlying Cause of Death

 \*\*\*1999-Present\*\*\*

 See “International Classification

 of Diseases - 10th revision (ICD-

 10) Volume 1.” For those causes

 that do not have a fourth digit,

 the last digit in this field will

 be blank.

 \*\*\*1980-1998\*\*\*

 See “International Classification

 of Diseases – 9th revision (ICD-9)

 Volume 1.” For those causes that

 do not have a fourth digit, the

 last digit in this field will be

 blank.

45 whendied 130-130 1 C When Died

 \*\*\*2003-present\*\*\*

1 – Dead at first assessment, no labor ongoing

2 – Dead at first assessment, labor ongoing

3 – Died during labor, after first assessment

 4 – Unknown time of fetal death

 \*\*\*1992-2002\*\*\*

 1 - Before labor

 2 - During labor

 3 - During delivery

 4 - Unknown

46 disptype 131-131 1 C Disposition Type

 Indicates type of disposition of

 the fetus.

 \*\*\*2003-present\*\*\*

 1 - Burial

 2 - Cremation

 3 - Removal from state

 4 - Donation

 5 – Hospital Disposition

 6 - Other

 9 - Unknown

 \*\*\*1992-2002\*\*\*

 1 - Burial

 2 - Cremation

 3 - Removal from state

 4 - Medical Research

 9 - Unknown

47 autopsy 132-132 1 C Autopsy

 Indicates whether an autopsy was performed.

 \*\*\*2003-Present\*\*\*

 Y - Yes

 N – No

 P - Planned

 U - Unknown

 \*\*\*1992-2002\*\*\*

 Y - Yes

 N - No

 U - Unknown

48 autcause 133-133 1 C Autopsy Used for Cause of

 Death

 Indicates whether or not the autopsy findings were used to determine the cause of death.

 \*\*\*1992-Present\*\*\*

 Y - Yes

 N - No

 U - Unknown

 Blank - no autopsy performed

49 ind\_num 134-136 3 N Induced Terminations

 Total number of induced terminations the mother has had. Before using this field, see “Data Quality Technical Notes - Previous Pregnancy History.”

 \*\*\*2003-present\*\*\*

Not Collected – see ‘Other Pregnancy Outcomes’ (field 202).

 \*\*\*1984-2002\*\*\*

 099 - Unknown/Not Stated

50 trnsferm 137-137 1 C Mother Transferred After Attempted Delivery

 Place transfer was from, if transferred.

 \*\*\*2003-Present\*\*\*

 N - Not Transferred

 Y - Yes

 U - Unknown

 \*\*\*1980-2002\*\*\*

 Blank Field - Not Collected

50a blank 138-144 8 This field is intentionally blank.

51 malf\_sam 145-147 3 C Malformation Code - Sam Milham

 For use with pre-1992 files.

52 hisp\_dad 148-148 1 C Father’s Hispanic Origin

 Before using this field, see “Data Quality Technical Notes - Race/Hispanic Origin (Mother, Father, Child).”

 \*\*\*1996-Present\*\*\*

 0 - Non-Hispanic

 1 - Mexican

 2 - Puerto Rican

 3 - Cuban

 4 - Central or South American

 5 - Other and Unknown Hispanic

 9 - Unknown/Not Stated

 \*\*\*1992-1995\*\*\*

 0 - Non-Hispanic

 1 - Mexican

 2 - Puerto Rican

 3 - Cuban

 4 - Central or South American

 5 - Other Hispanic

 6 - Unnkown Hispanic

 9 - Unknown/Not Stated

53 hisp\_mom 149-149 1 C Mother’s Hispanic Origin

 Before using this field, see “Data Quality Technical Notes - Race/Hispanic Origin (Mother, Father, Child).”

 \*\*\*1996-Present\*\*\*

 0 - Non-Hispanic

 1 - Mexican

 2 - Puerto Rican

 3 - Cuban

 4 - Central or South American

 5 - Other and Unknown Hispanic

 9 - Unknown/Not Stated

 \*\*\*1992-1995\*\*\*

 0 - Non-Hispanic

 1 - Mexican

 2 - Puerto Rican

 3 - Cuban

 4 - Central or South American

 5 - Other Hispanic

 6 - Unknown Hispanic

 9 - Unknown/Not Stated

54 hispccal 150-150 1 C Fetus’ Calculated Hispanic Ethnicity

 The ethnicity code given here is from the NCHS algorithm which uses mother’s and father’s Hispanic ethnicity to derive a code for the fetus Hispanic ethnicity. Before using this field, see “Data Quality Technical Notes - Race/Hispanic Origin (Mother, Father, Child).”

 \*\*\*1996-Present\*\*\*

 0 - Non-Hispanic

 1 - Mexican

 2 - Puerto Rican

 3 - Cuban

 4 - Central or South American

 5 - Other and Unknown Hispanic

 9 - Unknown/Not Stated

 \*\*\*1992-1995\*\*\*

 0 - Non-Hispanic

 1 - Mexican

 2 - Puerto Rican

 3 - Cuban

 4 - Central or South American

 5 - Other Hispanic

 6 - Unknown Hispanic

 9 - Unknown/Not Stated

55 res\_yymm 151-154 4 N Time at Residence

 Length of time the Mother lived at the current residence, at the time of delivery, in yymm format. Before using this field, see “Data Quality Technical Notes - Length of Time at Current Residence (Years, Months).”

 \*\*\*1992-Present\*\*\*

 YYMM

 9999 - Unknown

56 blank 155-166 12 This field is intentionally blank.

57 gest\_est 167-169 3 N Gestation Estimate

 In weeks as estimated by the physician at the time of the delivery. “Data Quality Technical Notes – Gestational Age –

 Calculated and Clinical Estimate.”

 \*\*\*1992-Present\*\*\*

 40 - Full Term or Forty Weeks

 99 - Unknown

58 zipcode 170-174 5 C ZIP Code of Residence

 Five digit zip code.

 \*\*\*1992-Present\*\*\*

 99999 - Unknown/Not Stated

59 blank 175-178 4 This field is intentionally blank.

60 mrf1 179-180 2 C Medical Risk Factors

61 mrf2 181-182 2 This field consists of six 2-digit 62 mrf3 183-184 2 entries. Each 2-digit entry

63 mrf4 185-186 2 corresponds to one of the factors

64 mrf5 187-188 2 listed below. Blanks in these

65 mrf6 189-190 2 2-digit entries will make up the remainder of the field after the last factor. In 2003 the name of

 this field was changed to ‘Risk Factors in this Pregnancy’.

 Before using this field, see “Data Quality Technical Notes - Medical and Health Information

 Section.”

 \*\*\*2003-Present\*\*\*

 01 - Diabetes

 02 - Hypertension

 03 – Previous Preterm Births

04 – Other Previous Poor Pregnancy Outcome

05 – Vaginal Bleeding During This Pregnancy Prior to the Onset of Labor

06 – Pregnancy Resulted from Infertility Treatment

07 – Mother Had a Previous Cesarean Delivery

 08 – None of the Above

 99 - Unknown/Not Stated

 \*\*\*1992-2002\*\*\*

 01 - Anemia (HCT.<30/HGH.<10)

 02 - Cardiac Disease

 03 - Acute or Chronic Lung Disease

 04 - Diabetes

 05 - Genital Herpes

 06 - Polyhydramnios

 07 - Oligohydramnios

 08 - Hemoglobinopathy

 09 - Chronic Hypertension

 10 - Hypertension, Pregnancy- Associated

 11 - Eclampsia

 12 - Incompetent Cervix

 13 - Previous Infant 4000+ Grams

 14 - Previous Preterm or Small-For- Gestational Age Infant

 15 - Renal Disease

 16 - RH Sensitization

 ` 17 - Uterine Bleeding

 19 - Syphilis

 20 - None

 21 - Other

 99 - Unknown/Not Stated

66 diabetes 191-191 1 C Diabetes

 Indicates type of diabetes if one of the medical risk factors (mrf1 - mrf6) notes that the mother had diabetes. The ‘U’ code was used until mid 1992. Starting in mid 1992 through 2002 if it is unknown

 whether the diabetes is established

 or gestational, a value of ‘G’ is assigned.

 \*\*\*2003-Present\*\*\*

 E - Prepregnancy

 G – Gestational

 U – Unknown

 Blank - No Diabetes

 \*\*\*mid 1992-2002\*\*\*

 E - Established

 G - Gestational

 Blank - No Diabetes

 \*\*\*beginning 92-mid 1992\*\*\*

 E - Established

 G - Gestational

 U - Unknown whether Established or Gestational

 Blank - No Diabetes

67 herpes 192-192 1 C Genital Herpes

 Indicates type of herpes if one of the medical risk factors (mrf1 - mrf6) notes that the mother had herpes. The ‘U’ code was used until mid 1992. Starting in mid 1992 if it is unknown whether the herpes is active or history, a value of ‘H’ is assigned.

 \*\*\*2003-Present\*\*\*

 Not Collected

 \*\*\*mid 1992-2002\*\*\*

 A - Active

 H - History

 Blank - No Herpes

 \*\*\*beginning 92-mid 1992\*\*\*

 A - Active

 H - History

 U - Unknown whether Active of History

 Blank - No Herpes

68 smokenum 193-195 3 N Number of Cigarettes

 The number of cigarettes a day that the mother smoked during pregnancy. For related information see the smoking status (smoking) field.

 Before using this field, see “Data Quality Technical Notes - Maternal Smoking (Yes/No and Number of Cigarettes per Day).”

 \*\*\*2003-Present\*\*\*

Not Collected. Replaced by Number of Cigarettes by Trimester (see fields 207-210).

 \*\*\*1992-2002\*\*\*

 000 - None

 001 - 1 or Less

 020 - One Pack

 099 - Unknown/Not Stated

69 drinknum 196-198 3 N Number of Drinks

 The number of Alcoholic Drinks mother drank per week during pregnancy. For related information see the drinking status (drinking) field.

 \*\*\*2003-Present\*\*\*

 Not Collected.

 \*\*\*1992-2002\*\*\*

 000 - None

 099 - Unknown/Not Stated

70 wghtgain 199-201 3 N Weight Gain

 Number of pounds Mother gained during pregnancy. Only whole number is kept. Before using this field, see “Data Quality Technical Notes - Weight Gained During Pregnancy and Prepregnancy Weight.”

\*\*\*2003-present\*\*\*

This field is calculated from prepregnancy and delivery weights (see fields 110 and 213).

098 – 98+ lbs for out of state occurrences only

 \*\*\*1992-2002\*\*\*

 000 - No Weight Change or Lost Weight

 999 - Unknown/Not Stated

71 obproc1 202-202 1 C Obstetric Procedures

72 obproc2 203-203 1 This field consists of four 1-digit

73 obproc3 204-204 1 entries. Each 1-digit entry

74 obproc4 205-205 1 corresponds to one of the procedures listed below. Blanks in these 1-digit entries will make up the remainder of the field after the last procedure.

 \*\*\*2003-Present\*\*\*

 Not Collected.

 \*\*\*1992-2002\*\*\*

 1 - Amniocentesis

 2 - Electronic Fetal Monitoring

 3 - Induction of Labor

 4 - Stimulation of Labor

 5 - Tocolysis

 6 - Ultrasound

 7 - None

 8 - Other

 9 - Unknown/Not Stated

75 amnio1 206-206 1 C Amniocentesis

76 amnio2 207-207 1 This field indicates the trimester

77 amnio3 208-208 1 in which an amniocentesis was performed.

 Starting in 1992, amnio1, amnio2, and amnio3 are used to record all trimesters in which amniocentesis was performed. Blanks will make up the remainder of the field after the last amniocentesis.

 \*\*\*2003-Present\*\*\*

 Not collected.

 \*\*\*1993-2002\*\*\*

 1 - 1st Trimester

 2 - 2nd Trimester

 3 - 3rd Trimester

 9 - Unknown/Not Specified

 \*\*\*1992\*\*\*

 1 - 1st Trimester

 2 - 2nd Trimester

 3 - 3rd Trimester

 8 - Yes, Not Specified

 9 - Unknown

78 dmeth1 209-209 1 C Method of Delivery

79 dmeth2 210-210 1 This field consists of four 1-digit 80 dmeth3 211-211 1 entries. Each 1-digit entry

81 dmeth4 212-212 1 corresponds to one of the methods listed below. Blanks in these 1- digit entries will make up the remainder of the field after the last method.

 \*\*\*2003-Present\*\*\*

Will be calculated from other fields. Only dmeth1 will be populated. Codes same as below.

 \*\*\*1992-Present\*\*\*

 1 - Vaginal

 2 - Vaginal Birth After Previous C-Section

 3 - Primary C-Section

 4 - Repeat C-Section With Labor

 5 - Repeat C-Section Without Labor

 6 - Forceps

 7 - Vacuum Extraction

 8 - Hysterotomy/Hysterectomy

 9 - Other

82 complab1 213-214 2 C Complications of Labor and/or

83 complab2 215-216 2 Delivery

84 complab3 217-218 2 This field consists of seven 2-

85 complab4 219-220 2 digit entries. Each 2-digit entry

86 complab5 221-222 2 corresponds to one of the

87 complab6 223-224 2 complications listed below. Blanks

88 complab7 225-226 2 in these 2-digit entries entries will make up the remainder of the field after the last complication.

 \*\*\*2003-Present\*\*\*

 Not collected.

 \*\*\*1992-2002\*\*\*

 01 - Febrile (>100 degrees F or 38 degrees C)

 02 - Meconium, Moderate/Heavy

 03 - Premature Rupture of Membrane (>12 Hours)

 04 - Abruptio Placenta

 05 - Placenta Previa

 06 - Other Excessive Bleeding

 07 - Seizures During Labor

 08 - Precipitous Labor (<3 Hours)

 09 - Prolonged Labor (>20 Hours)

 10 - Dysfunctional Labor

 11 - Breech/Malpresentation

 12 - Cephalopelvic Disproportion

 13 - Cord Prolapse

 14 - Anesthetic Complications

 15 - Fetal Distress

 17 - None

 18 - Other

 99 - Unknown/Not Stated

89 fetcond1 227-228 2 C Conditions of the Fetus

90 fetcond2 229-230 2 This field consists of six 2-digit 91 fetcond3 231-232 2 entries. Each 2-digit entry

92 fetcond4 233-234 2 corresponds to one of the

93 fetcond5 235-236 2 conditions listed below. Blanks in

94 fetcond6 237-238 2 2-digit entries will make up the remainder of the field after the last condition.

 \*\*\*2003-Present\*\*\*

 Not collected.

 \*\*\*1992-2002\*\*\*

 01 - Fetal Hemorrhage

 02 - Placenta and Cord conditions

 03 - Hemolytic Disease

 04 - Fetal Hydrops

 05 - Shoulder Dystocia

 06 - Other

 07 - None

 99 - Unknown/Not Stated

95 malf1 239-240 2 C Congenital Malformations of Fetus

96 malf2 241-242 2 This field consists of seven 2-

97 malf3 243-244 2 digit entries. Each 2-digit entry

98 malf4 245-246 2 corresponds to one of the anomalies 99 malf5 247-248 2 listed below. Blanks in these 2-

100 malf6 249-250 2 digit entries will make up the

101 malf7 251-252 2 remainder of the field after the last anomaly.

 \*\*\*2003-Present\*\*\*

 01 - Anencephaly

 02 – Meningocele/Spina Bifida

03 – Cyanotic Congenital Heart Disease

 04 – Congenital Diaphragmatic Hernia

 05 - Omphalocele

 06 - Gastroschisis

 07 – Limb Reduction Defect

08 – Cleft Lip with or without Cleft Palate

 09 – Cleft Palate Alone

 10 – Down Syndrome

 11 – Chromosomal Disorder

 12 - Hypospadias

 13 – None of the Above

 99 - Unknown/Not Stated

 \*\*\*1992-2002\*\*\*

 01 - Anencephalus

 02 - Spina Bifida/Meningocele

 03 - Hydrocephalus

 04 - Microcephalus

 05 - Other Central Nervous System Anomalies

 06 - Heart Malformations

 07 - Other Circulatory/Respiratory Anomalies

 08 - Rectal Atresia/Stenosis

 09 - Tracheo-Esophageal Fistula/Esophageal Atresia

 10 - Omphalocele/Gastroschisis

 11 - Other Gastrointestinal Anomalies

 12 - Malformed Genitalia

 13 - Renal Agenesis

 14 - Other Urogenital Anomalies

 15 - Cleft Lip/Palate

 16 - Polydactyly

 17 - Club Foot

 18 - Diaphragmatic Hernia

 19 - Other Musculoskeletal/ Integumental Anomalies

 20 - Down’s Syndrome

 21 - Other Chromosomal Anomalies

 22 - None

 23 - Other Anomalies

 99 - Unknown/Not Stated

102 st\_occ 253-254 2 C State of Occurrence

 State in which the delivery occurred. NCHS state code. In addition to the 50 states, the District of Columbia, the Virgin Islands, Cuba, Guam, Puerto Rico, Canada and Mexico receive unique codes in this field. For a list of codes, see mother’s birth state (birplmom) field.

103 st\_res 255-256 2 C State of Residence

 Mother’s residence. NCHS state code. In addition to the 50 states, the District of Columbia, the Virgin Islands, Cuba, Guam, Puerto Rico, Canada Mexico receive unique codes in this field. For a list of codes, see mother’s birth state (birplmom)field.

104 blank 257-258 2 This field is intentionally blank.

105 carepay 259-259 1 C Principal Payment for Prenatal Care

 Indicates principal source of payment for prenatal care.

 \*\*\*2003-Present\*\*\*

Not Collected.

 \*\*\*1992-Present\*\*\*

 1 - Medicaid

 2 - Self-pay

 3 - Commercial Insurance

 4 - Charity Care

 5 - HMO

 6 - Other

 9 - Unknown/Not Stated

106 wic 260-260 1 C During pregnancy mother used WIC services. WIC (Women and Infant Children) is a free supplemental food and nutrition education program.

 \*\*\*2003-Present\*\*\*

 Replaced by new item (field 217).

 \*\*\*1992-Present\*\*\*

 1 - Yes

 9 - Box Not Checked

107 firsteps 261-261 1 C During pregnancy mother participated in the First Steps program. First Steps is an expanded Medicaid program.

 \*\*\*2003-Present\*\*\*

 Not Collected

 \*\*\*1992-2002\*\*\*

 1 - Yes

 9 - Box Not Checked

108 afdc 262-262 1 C During pregnancy mother received Aid for Families with Dependent Children (AFDC)

 \*\*\*2003-Present\*\*\*

 Not Collected

 \*\*\*1992-2002\*\*\*

 1 - Yes

 9 - Box Not Checked

109 localhd 263-263 1 C During pregnancy mother received services from a Local Health Department

 \*\*\*2003-Present\*\*\*

 Not Collected

 \*\*\*1992-2002\*\*\*

 1 - Yes

 9 - Box Not Checked

110 wghtpre 264-266 3 N Weight Prior to Pregnancy

 Number of pounds Mother weighed before pregnancy. Only whole number is kept. This field was first collected in 1992. Before using this field, see Weight Gained During Pregnancy, Prepregnancy Weight and Delivery Weight.”

 \*\*\*1992-Present\*\*\*

 999 - Unknown

111 ubleed1 267-267 1 C Uterine Bleeding

112 ubleed2 268-268 1 Indicates whether there was any

113 ubleed3 269-269 1 uterine bleeding during pregnancy and which trimesters. More than one trimester may be indicated.

 Blanks will make up the remainder of the field after the last entry.

 \*\*\*2003-Present\*\*\*

 Not Collected

 \*\*\*1992-2002\*\*\*

 1 - Uterine Bleeding During First Trimester

 2 - Uterine Bleeding During Second Trimester

 3 - Uterine Bleeding During Third Trimester

 9 - Unknown

114 smoking 270-270 1 C Smoking Status

 Indicates whether Mother smoked cigarettes at any time during the pregnancy.

 Changes in the wording and placement of this item have occurred over time. Therefore, before using this field, see “Data Quality Technical Notes - Maternal Smoking (Yes/No and Number of Cigarettes per Day).”

 \*\*\*2003-Present\*\*\*

Not Collected. Replaced by Number of Cigarettes by Trimester (see fields 207-210).

 \*\*\*1992-2002\*\*\*

 Y - Yes

 N - No

 U - Unknown

115 drinking 271-271 1 C Drinking Status

Indicates whether Mother drank alcoholic beverages during the pregnancy. Before using this field, see “Data Quality Technical Notes – Alcohol Use.”

 \*\*\*2003-Present\*\*\*

 Not Collected

 \*\*\*1992-2002\*\*\*

 Y - Yes

 N - No

 U - Unknown

116 blank 272-272 1 This field is intentionally blank.

117-118 filler 273-280 Contained previous other pregnancy and prior pregnancy dates which are now moved to end of file (fields 152-153)

119 lb\_f\_nl 281-283 3 N Liveborn - Fullterm - Now Alive

 The number of prior live births that were full-term and are still living.

 For use with pre-1992 files.

120 lb\_f84 284-286 3 N Liveborn - Fullterm

 The number of prior live births that were full-term.

 For use with pre-1992 files.

121 lb\_p\_nl 287-289 3 N Liveborn - Premature - Now Alive

 The number of prior live births that were premature and are still living.

 For use with pre-1992 files.

122 lb\_p84 290-292 3 N Liveborn - Premature

 The number of prior live births that were premature.

 For use with pre-1992 files.

123 lb\_p\_nd 293-295 3 N Liveborn - Premature - Now Dead

 The number of prior live births that were premature and are now dead.

 For use with pre-1992 files.

124 lb\_f\_nd 296-298 3 N Liveborn - Fullterm - Now Dead

 The number of prior live births that were fullterm and are now dead.

 For use with pre-1992 files.

125 fd\_2036 299-301 3 N Fetal Deaths 20-36 Weeks

 Number of spontaneous fetal deaths of 20-36 weeks gestation.

 For use with pre-1992 files.

126 fd\_ge37 302-304 3 N Fetal Deaths GE 37 Weeks

 Number of spontaneous fetal deaths of 37 weeks gestation or later.

 For use with pre-1992 files.

127 malficd1 305-308 4 C Congenital Malformation ICD-9

128 malficd2 309-312 4 For use with pre-1992 files.

129 malficd3 313-316 4

130 malficd4 317-320 4

131 malficd5 321-324 4

132 malficd6 325-328 4

133 malficd7 329-332 4

134 malficd8 333-336 4

135 gestcalc 337-338 2 N Calculated Gestation in Weeks

 Calculated from the date of delivery and last menses date (mensdate) or estimated from birth weight. Before using this field, see “Data Quality Technical Notes –

 Gestational Age – Calculated and

 Clinical Estimate.”

 \*\*\*2003-Present\*\*\*

 New method of calculation, see Data

 Quality Technical Notes

 99 - Missing, Not able to calculate

 \*\*\*1992-2002\*\*\*

 99 - Missing, Not able to calculate

136 gestflag 339-339 1 C Calculated Gestation Flag

 Indicates whether the calculated Gestation (gestcalc) field was calculated based on last menses date or estimated based on birth weight.

 \*\*\*1992-Present\*\*\*

 0 - Gestcalc was calculated based on Date of Birth and Last Menses Date.

 1 - Gestcalc was based on clinical estimate of gestation.

 9 - Gestcalc could not be calculated or estimated

137 mrfnon1 340-341 2 C Complication Not Related to

138 mrfnon2 342-343 Pregnancy

139 mrfnon3 344-345 For use with pre-1992 files.

140 mrfnon4 346-347 (Note: For related information

141 mrfnon5 348-349 see medical risk factors (mrf1-

142 mrfnon6 350-351 mrf6 fields.)

143 mrfnon7 352-353

144 mrfnon8 354-355

145 mrfnon9 356-357

146-147filler 358-359

148 indmm4y 360-365 6 N Last Induced Termination, Month and Year

 \*\*\*2003-Present

 Not collected

 \*\*\*1989-2002\*\*\*

 MMYYYY

 999999 - Unknown/Not Stated

 \*\*\*1980-1988\*\*\*

 999999 - Not Collected

149 llbmm4y 366-371 6 N Last Live Birth, Month and Year

 \*\*\*1980-Present\*\*\*

 MMYYYY

 888888 – Not applicable

 999999 - Unknown/Not Stated

150 lfdmm4y 372-377 6 N Last Fetal Death or Spontaneous Outcome, Month and Year

 \*\*\*2003-Present

 Not collected

 \*\*\*1989-2002\*\*\*

 MMYYYY

 999999 - Unknown/Not Stated

 \*\*\*1985-1988\*\*\*

 999999 - Not Collected

 For related information see the last other pregnancy outcome (lothmm4yy) field.

 \*\*\*1980-1984\*\*\*

 MMYYYY

 999999 - Unknown/Not Stated

151 mensmd4y 378-385 8 N Date of Last Normal Menses

 Before using this field, see “Data Quality Technical Notes - Date of Last Normal Menses.”

 \*\*\*1980-Present\*\*\*

 MMDDYYYY

 99999999 - Unknown/Not Stated

152 lothmm4y 386-391 6 N Last Other Pregnancy Outcome, Month and Year. (for 2003+ see field

 203).

 \*\*\*1989-Present\*\*\*

 999999 - Not Collected

 \*\*\*1985-1988\*\*\*

 MMYYYY

 999999 - Unknown/Not Stated

 \*\*\*1980-1984\*\*\*

 999999 - Not Collected

153 lppmm4y 392-397 6 N Last Prior Pregnancy, Month and Year

 \*\*\*1984-Present\*\*\*

 999999 - Not Collected

 \*\*\*1980-1983\*\*\*

 MMYYYY

 999999 - Unknown/Not Stated

154 bctrymom 398-400 3 C Mother’s Birth Country Code

 For code table see ASCII file “country.asc.”

 \*\*\*1999\*\*\*

 000 – see ‘birplmom’ for country

 Blank – Mother is not foreign born

 \*\*\*1980-1998\*\*\*

 Blank field

155 bctrydad 401-403 3 C Father’s Birth Country Code

 For code table see ASCII file “country.asc.”

 \*\*\*1999\*\*\*

 000 – see ‘birpldad’ for country

 Blank – Father is not foreign born

 \*\*\*1980-1998\*\*\*

 Blank field

156 geozip 404-408 5 C Zip code assigned by GIS software

 \*\*\*1988–present\*\*\*

 This is the zip code that was

 assigned by the GIS software.

 Before using this field, see “Data

 Quality Technical Notes – Reported

 zip code and geocoded zip code.”

157 blank 409-409 1 This field is intentionally blank.

158 fac\_int 410-410 1 C Intended facility type

Indicates the planned birth place type, if different from the actual type.

 \*\*\*2003-Present\*\*\*

 1 – Hospital

 3 – Birth Center

 4 – Clinic/Doctor’s Office 6 – Other

 7 – Home - Planned

 \*\*\*1980-2002\*\*\*

 Not Collected

159 trib\_res 411-413 3 N Mother’s residence tribal

reservation code. Used if the mother lives on a tribal reservation, regardless of whether or not she is Native American.

 For code table see ASCII file “tribres.asc.”

 \*\*\*1980-2002\*\*\*

 Not Collected

\*\*\*NOTE: Fields 160-199 give data for each check box on the birth certificate filing form. Before using these fields, see “Data Quality Technical Notes - Race/Hispanic Origin (Mother, Father, Child).” Bridged race data and Hispanic data are found in the old race/Hispanic fields. Edited data for multiple race analysis are at the end of the file (fields 249-250).\*\*\*

160 momh\_no 414-414 1 C Mother’s Hispanic Origin, Not

 Hispanic, as reported on the birth

 Certificate.

 \*\*\*2003-Present\*\*\*

 Y – Yes, this box checked

 N – No, box not checked

 U – Entire Mother’s Hispanic item

 unknown

 \*\*\*1980-2002\*\*\*

 Not Collected. See hisp\_mom.

161 momh\_mex 415-415 1 C Mother’s Hispanic Origin, Mexican,

 as reported on the birth

 certificate. See momh\_no for

 codes.

162 momh\_pr 416-416 1 C Mother’s Hispanic Origin, Puerto

 Rican, as reported on the birth

 certificate. See momh\_no for

 codes.

163 momh\_cub 417-417 1 C Mother’s Hispanic Origin, Cuban,

 as reported on the birth

 certificate. See momh\_no for

 codes.

164 momh\_oth 418-418 1 C Mother’s Hispanic Origin, Other

 Hispanic, as reported on the birth

 certificate. See momh\_no for

 codes.

165 momr\_wht 419-419 1 C Mother’s Race, White,

 as reported on the birth

 Certificate.

 \*\*\*2003-Present\*\*\*

 Y – Yes, this box checked

 N – No, box not checked

 U – Entire Mother’s Race item

 unknown

 \*\*\*1980-2002\*\*\*

 Not Collected. See race\_mom.

166 momr\_blk 420-420 1 C Mother’s Race, Black or African

 American, as reported on the birth

 certificate. See momr\_wht for

 codes.

167 momr\_ami 421-421 1 C Mother’s Race, American Indian or

 Alaska Native, as reported on the

 birth certificate. See momr\_wht

 for codes.

168 momr\_asi 422-422 1 C Mother’s Race, Asian Indian,

 as reported on the birth

 certificate. See momr\_wht for

 codes.

169 momr\_chi 423-423 1 C Mother’s Race, Chinese,

 as reported on the birth

 certificate. See momr\_wht for

 codes.

170 momr\_fil 424-424 1 C Mother’s Race, Filipino,

 as reported on the birth

 certificate. See momr\_wht for

 codes.

171 momr\_jap 425-425 1 C Mother’s Race, Japanese,

 as reported on the birth

 certificate. See momr\_wht for

 codes.

172 momr\_kor 426-426 1 C Mother’s Race, Korean,

 as reported on the birth

 certificate. See momr\_wht for

 codes.

173 momr\_vie 427-427 1 C Mother’s Race, Vietnamese,

 as reported on the birth

 certificate. See momr\_wht for

 codes.

174 momr\_oas 428-428 1 C Mother’s Race, Other Asian,

 as reported on the birth

 certificate. See momr\_wht for

 codes.

175 momr\_haw 429-429 1 C Mother’s Race, Native Hawaiian,

 as reported on the birth

 certificate. See momr\_wht for

 codes.

176 momr\_gua 430-430 1 C Mother’s Race, Guamanian or

 Chamorro, as reported on the birth

 certificate. See momr\_wht for

 codes.

177 momr\_sam 431-431 1 C Mother’s Race, Samoan,

 as reported on the birth

 certificate. See momr\_wht for

 codes.

178 momr\_opi 432-432 1 C Mother’s Race, Other Pacific

 Islander, as reported on the birth

 certificate. See momr\_wht for

 codes.

179 momr\_oth 433-433 1 C Mother’s Race, Other Race,

 as reported on the birth

 certificate. See momr\_wht for

 codes.

180 dadh\_no 434-434 1 C Father’s Hispanic Origin, Not

 Hispanic, as reported on the birth

 Certificate.

 \*\*\*2003-Present\*\*\*

 Y – Yes, this box checked

 N – No, box not checked

 U – Entire Mother’s Hispanic item

 unknown

 \*\*\*1980-2002\*\*\*

 Not Collected. See hisp\_dad.

181 dadh\_mex 435-435 1 C Father’s Hispanic Origin, Mexican,

 as reported on the birth

 certificate. See dadh\_no for

 codes.

182 dadh\_pr 436-436 1 C Father’s Hispanic Origin, Puerto

 Rican, as reported on the birth

 certificate. See dadh\_no for

 codes.

183 dadh\_cub 437-437 1 C Father’s Hispanic Origin, Cuban,

 as reported on the birth

 certificate. See dadh\_no for

 codes.

184 dadh\_oth 438-438 1 C Mother’s Hispanic Origin, Other

 Hispanic, as reported on the birth

 certificate. See dadh\_no for

 codes.

185 dadr\_wht 439-439 1 C Father’s Race, White,

 as reported on the birth

 Certificate.

 \*\*\*2003-Present\*\*\*

 Y – Yes, this box checked

 N – No, box not checked

 U – Entire Mother’s Race item

 unknown

 \*\*\*1980-2002\*\*\*

 Not Collected. See race\_dad.

186 dadr\_blk 440-440 1 C Father’s Race, Black or African

 American, as reported on the birth

 certificate. See dadr\_wht for

 codes.

187 dadr\_ami 441-441 1 C Father’s Race, American Indian or

 Alaska Native, as reported on the

 birth certificate. See dadr\_wht

 for codes.

188 dadr\_asi 442-442 1 C Father’s Race, Asian Indian,

 as reported on the birth

 certificate. See dadr\_wht for

 codes.

189 dadr\_chi 443-443 1 C Father’s Race, Chinese,

 as reported on the birth

 certificate. See dadr\_wht for

 codes.

190 dadr\_fil 444-444 1 C Father’s Race, Filipino,

 as reported on the birth

 certificate. See dadr\_wht for

 codes.

191 dadr\_jap 445-445 1 C Father’s Race, Japanese,

 as reported on the birth

 certificate. See dadr\_wht for

 codes.

192 momr\_kor 446-446 1 C Father’s Race, Korean,

 as reported on the birth

 certificate. See dadr\_wht for

 codes.

193 dadr\_vie 447-447 1 C Father’s Race, Vietnamese,

 as reported on the birth

 certificate. See dadr\_wht for

 codes.

194 dadr\_oas 448-448 1 C Father’s Race, Other Asian,

 as reported on the birth

 certificate. See dadr\_wht for

 codes.

195 dadr\_haw 449-449 1 C Father’s Race, Native Hawaiian,

 as reported on the birth

 certificate. See dadr\_wht for

 codes.

196 dadr\_gua 450-450 1 C Father’s Race, Guamanian or

 Chamorro, as reported on the birth

 certificate. See dadr\_wht for

 codes.

197 dadr\_sam 451-451 1 C Father’s Race, Samoan,

 as reported on the birth

 certificate. See dadr\_wht for

 codes.

198 momr\_opi 452-452 1 C Father’s Race, Other Pacific

 Islander, as reported on the birth

 certificate. See dadr\_wht for

 codes.

199 dadr\_oth 453-453 1 C Father’s Race, Other Race,

 as reported on the birth

 certificate. See dadr\_wht for

 codes.

200 momle8ed 454-454 1 C Mother’s Years of Education if

 highest education level (educ\_mom) is 8th grade or less.

 \*\*\*2003-Present\*\*\*

 0 – No education

 1-8 – 1st – 8thgrade

 9 – Unknown

 \*\*\*1980-2002\*\*\*

 Not Collected

201 dadle8ed 455-455 1 C Father’s Years of Education if

 highest education level (educ\_dad) is 8th grade or less.

 \*\*\*2003-Present\*\*\*

 0 – No education

 1-8 – 1st – 8thgrade

 9 – Unknown

 \*\*\*1980-2002\*\*\*

 Not Collected

202 otherout 456-458 3 N Number of Other Pregnancy Outcomes

 Before using this field, see “Data Quality Technical Notes - Previous Pregnancy History.”

 \*\*\*2003-Present\*\*\*

 000 - None

 099 - Unknown/Not Stated (or 999?)

 \*\*\*1980-2002\*\*\*

 Not Collected

203 othmm4y 459-464 6 N Last Other Outcome, Month and Year

 \*\*\*2003-Present\*\*\*

 MMYYYY

 888888 – Not applicable

 999999 - Unknown/Not Stated

 \*\*\*1980-2002\*\*\*

 Not Collected

204 blank 465-465 1 This field is intentionally blank.

205 fpvmd4y 466-473 8 N Date of First Prenatal Care Visit

 \*\*\*2003-Present\*\*\*

 MMDDYYYY

 88888888 – No prenatal care

 99999999 - Unknown/Not Stated

\*\*\*1980-2002\*\*\*

Not Collected.

206 lpvmd4y 474-481 8 N Date of Last Prenatal Care Visit

 \*\*\*2003-Present\*\*\*

 MMDDYYYY

 88888888 – No prenatal care

 99999999 - Unknown/Not Stated

\*\*\*1980-2002\*\*\*

Not Collected.

207 cigs\_bef 482-483 2 N Number of Cigarettes Smoked 3

 Months Before Pregnancy

The number of cigarettes a day that the mother smoked three months before she became pregnant.

 Before using this field, see “Data Quality Technical Notes – Maternal

 Smoking”

 \*\*\*2003-Present\*\*\*

 00 - None

 01 - 1 or Less

 20 - One Pack

 99 - Unknown/Not Stated

 \*\*\*1980-2002\*\*\*

 099 - Not Collected

208 cigs\_1st 484-485 2 N Number of Cigarettes Smoked First

 Trimester

The number of cigarettes a day that the mother smoked during the first three months of pregnancy.

 Before using this field, see “Data Quality Technical Notes – Maternal

 Smoking.” See cigs\_bef for

 codes.

209 cigs\_2nd 486-487 2 N Number of Cigarettes Smoked Second

 Trimester

The number of cigarettes a day that the mother smoked during the second three months of pregnancy.

 Before using this field, see “Data Quality Technical Notes – Maternal

 Smoking.” See cigs\_bef for

 codes.

210 cigs\_3rd 488-489 2 N Number of Cigarettes Smoked Third

 Trimester

The number of cigarettes a day that the mother smoked during the third three months of pregnancy.

 Before using this field, see “Data Quality Technical Notes – Maternal

 Smoking.” See cigs\_bef for

 codes.

211-212 blank 490-494 5 This field is intentionally blank.

213 wghtdelv 495-497 3 N Mother’s Weight at Delivery

 Number of pounds Mother weighed at delivery. Only whole number is kept. Before using this field, see “Data Quality Technical Notes - Weight Gained During Pregnancy, Prepregnancy Weight and Delivery Weight.”

 \*\*\*2003-Present\*\*\*

 999 - Unknown

 \*\*\*1980-2002\*\*\*

 Not Collected

214 ht\_ft 498-498 1 C Mother’s Height, Feet

Gives the feet part of the mother’s height

 \*\*\*2003-Present\*\*\*

 9 – Unknown

 \*\*\*1980-2002\*\*\*

 Not Collected

215 ht\_in 499-500 2 C Mother’s Height, Inches

Gives the inches part of the mother’s height

 \*\*\*2003-Present\*\*\*

 99 – Unknown

 \*\*\*1980-2002\*\*\*

 Not Collected

216 blank 501-501 1 This field is intentionally blank.

217 WIC\_new 502-502 1 C WIC Benefits

Indicates whether the mother received WIC benefits during pregnancy. WIC (Women and Infant Children) is a free supplemental food and nutrition education program.

 \*\*\*2003-present\*\*\*

 Y - Yes

 N - No

 U – Unknown

 \*\*\*1980-2002\*\*\*

Not Collected. See field 106.

218 hyperflg 503-503 1 C Hypertension Flag

Indicates type of hypertension if one of the medical risk factors (mrf1 - mrf6) notes that the mother had hypertension.

 \*\*\*2003-Present\*\*\*

 E - Prepregnancy

 G – Gestational

 U – Unknown

 Blank – No hypertension

 \*\*\*1980-2002\*\*\*

Not Collected. See individual medical risk factors (fields #59-64).

219 blank 504-504 1 This field is intentionally blank.

220 prev\_cno 505-506 2 N Number of Previous Cesarean

Deliveries. Entered if Medical Risk Factors Box 07 is checked.

 \*\*\*2003-Present\*\*\*

 99 – Unknown

 \*\*\*1980-2002\*\*\*

 Not Collected

221 forcfail 507-507 1 C Method of Delivery, Forceps Failed

Indicates whether forceps delivery was attempted but unsuccessful.

 \*\*\*2003-Present\*\*\*

 N - No

 Y - Yes

 U - Unknown

 \*\*\*1980-2002\*\*\*

Not Collected.

222 vacfail 508-508 1 C Method of Delivery, Vacuum Failed

Indicates whether vacuum extraction delivery was attempted but unsuccessful.

 \*\*\*2003-Present\*\*\*

 N - No

 Y - Yes

 U - Unknown

 \*\*\*1980-2002\*\*\*

Not Collected.

223 fet\_pres 509-509 1 C Fetal Presentation at Birth

 \*\*\*2003-Present\*\*\*

 C - Cephalic

 B – Breech

 O - Other

 U - Unknown

 \*\*\*1980-2002\*\*\*

Not Collected.

224 dmethfin 510-510 1 C Final Route and Method of Delivery

 \*\*\*2003-Present\*\*\*

 1 – Spontaneous vaginal

 2 – Forceps

 3 - Vacuum

 4 – Cesarean with Trial of Labor

 5 – Cesarean without Trial Labor

 9 - Unknown

 \*\*\*1980-2002\*\*\*

Not Collected.

225-231 blank 511-524 14 This field is intentionally blank.

232 minfect1 525-526 2 C Maternal Infections

233 minfect2 527-528 2 Infections Present and/or Treated 234 minfect3 529-530 2 During This Pregnancy. This field 235 minfect4 531-532 2 consists of seven 2-digit entries.

236 minfect5 533-534 2 Each 2-digit entry corresponds to

237 minfect6 535-536 2 one of the infections listed below.

238 minfect7 537-538 2 Blanks in these 2-digit entries will make up the remainder of the field after the last

 infection.

 \*\*\*2003-present\*\*\*

 01 – Gonorrhea

 02 – Syphilis

 03 – Herpes Simplex Virus (HSV)

04 – Chlamydia

05 – Listeria

 06 – Group B Streptococcus

07 – Cytomegalovirus

08 – Parvovirus

09 – Toxoplasmosis

10 – HIV Infection

 11 – Other Specify:

 12 – None of the Above

 99 - Unknown/Not Stated

 \*\*\*1980-2002\*\*\*

Not collected

239 mmorbid1 539-540 2 C Maternal Morbidity. Complications

240 mmorbid2 541-542 2 Associated with Labor and

241 mmorbid3 543-544 2 Delivery. This field consists of

242 mmorbid4 545-546 2 five 2-digit entries. Each 2-digit

243 mmorbid5 547-548 2 entry corresponds to one of the

 complications listed below.

 Blanks in these 2-digit entries will make up the remainder of the field after the last

 complication.

 \*\*\*2003-present\*\*\*

 01 – Maternal Transfusion

02 – Third or Fourth Degree Perineal Laceration

 03 – Ruptured Uterus

04 – Unplanned Hysterectomy

05 – Admission to Intensive Care Unit

 06 – Unplanned Operating Room Procedure Following Delivery

 07 – None of the Above

 99 - Unknown/Not Stated

 \*\*\*1980-2002\*\*\*

Not collected.

244-246 blank 549-554 6 This field is intentionally blank.

247 downsflg 555-555 1 C Down Syndrome Flag

Indicates whether karyotype was confirmed or pending. Entered if Congenital Malformations Box 10 is checked.

 \*\*\*2003-Present\*\*\*

 C – Confirmed

 P - Pending

 U - Unknown

 \*\*\*1980-2002\*\*\*

Not Collected.

248 chromflg 556-556 1 C Chromosomal Disorder Flag

Indicates whether karyotype was confirmed or pending. Entered if Congenital Malformations Box 11 is checked.

 \*\*\*2003-Present\*\*\*

 C – Confirmed

 P - Pending

 U - Unknown

 \*\*\*1980-2002\*\*\*

 Not Collected.

249 moracsum 557-558 2 N Mother’s Summary Race

Mother’s race based on all check boxes reported, edited to remove duplicate race group. There is one code for each possible race combination. Before using this field, see “Data Quality Technical Notes – Race/Hispanic Origin (Mother, Father, Child).”

Note: for the race codes below, AIAN = American Indian/Alaska Native; NHOPI = Native Hawaiian or Other Pacific Islander.

 \*\*\*2003-Present\*\*\*

Single race

10 – White only

11 – Black only

12 – AIAN only

13 – Asian only

14 – NHOPI only

Two races

20 – White, Black

21 – White, AIAN

22 – White, Asian

23 – White, NHOPI

24 – Black, AIAN

25 – Black, Asian

26 – Black, NHOPI

27 – AIAN, Asian

28 – AIAN, NHOPI

29 – Asian, NHOPI

Three races

30 – White, Black, AIAN

31 – White, Black, Asian

32 – White, Black, NHOPI

33 – White, AIAN, Asian

34 – White, AIAN, NHOPI

35 – White, Asian, NHOPI

36 – Black, AIAN, Asian

37 – Black, AIAN, NHOPI

38 – Black, Asian, NHOPI

39 – AIAN, Asian, NHOPI

Four races

40 – White, Black, AIAN, Asian

41 – White, Black, AIAN, NHOPI

42 – White, Black, Asian, NHOPI

43 – White, AIAN, Asian, NHOPI

44 – Black, AIAN, Asian, NHOPI

Five races

50 – White, Black, AIAN, Asian, NHOPI

Unknown

99 – Unknown

 \*\*\*1980-2002\*\*\*

 Not Collected

250 faracsum 559-560 2 N Father’s Summary Race

Father’s race based on all check boxes reported, edited to remove duplicate race group. There is one code for each possible race combination. Before using this field, see “Data Quality Technical Notes – Race/Hispanic Origin (Mother, Father, Child).”

 \*\*\*2003-Present\*\*\*

 See ‘Mother’s Summary Race” (moracsum) field

 \*\*\*1980-2002\*\*\*

 Not Collected

251 bmi 561-564 4 N Body Mass Index

Calculated from prepregnancy weight and height. Before using this field, see “Data Quality

Technical Notes – Body Mass Index (BMI).” BMI has one decimal place.

 \*\*\*2003-Present\*\*\*

 99.9 - Unknown

 \*\*\*1980-2002\*\*\*

 Not Collected

252 hyster 565-565 1 C Delivery Method of Hysterotomy or

 Hysterectomy

Indicates whether the method of delivery included a hysterotomy or hysterectomy

 \*\*\*2003-present\*\*\*

 Y - Yes

 N - No

 U – Unknown

 \*\*\*1980-2002\*\*\*

Not Collected.

253 placexam 566-566 1 C Histological placental exam

 performed

 \*\*\*2003-present\*\*\*

 Y - Yes

 N - No

 P – Planned

 U - Unknown

 \*\*\*1980-2002\*\*\*

Not Collected.

254 initcaus 567-568 2 C Initiating Cause of death

 \*\*\*2003-present\*\*\*

 01 – Maternal conditions/Diseases

 02 – Complications of placenta

 03 – Other OB or Preg complices

 04 – Fetal Anomaly

 05 – Fetal injury

 06 – Fetal infection

 07 – Other fetal

 conditions/disorders

 08 - Unknown

 \*\*\*1980-2002\*\*\*

Not Collected.

255 in\_plac 569-569 1 C Initiating cause of death is

 rupture of membranes prior to onset

 of labor

 \*\*\*2003-present\*\*\*

 Y - Yes

 N - No

 \*\*\*1980-2002\*\*\*

Not Collected.

256 in\_abrup 570-570 1 C Initiating cause of death is

 abruptio placenta

 \*\*\*2003-present\*\*\*

 Y - Yes

 N - No

 \*\*\*1980-2002\*\*\*

Not Collected.

257 in\_insuf 571-571 1 C Initiating cause of death is

 Placental insufficiency

 \*\*\*2003-present\*\*\*

 Y - Yes

 N - No

 \*\*\*1980-2002\*\*\*

Not Collected.

258 in\_prol 572-572 1 C Initiating cause of death is

 prolapsed cord

 \*\*\*2003-present\*\*\*

 Y - Yes

 N - No

 \*\*\*1980-2002\*\*\*

Not Collected.

259 in\_chor 573-573 1 C Initiating cause of death is

 chorioamnionitis

 \*\*\*2003-present\*\*\*

 Y - Yes

 N - No

 \*\*\*1980-2002\*\*\*

Not Collected.

260 in\_other 574-574 1 C Initiating cause of death is

 other complications of placenta,

 cord, or membranes

 \*\*\*2003-present\*\*\*

 Y - Yes

 N - No

 \*\*\*1980-2002\*\*\*

Not Collected.

261 othsig1 575-576 2 C Other significant causes of death

262 othsig2 577-578 2

263 othsig3 579-580 2 This field consists of six 2-digit

264 othsig4 581-582 2 entries. There is one code for

265 othsig5 583-584 2 each box checked under ‘Other

266 othsig6 585-586 2 significant causes or conditions.’

 Blanks in these 2-digit entries will make up the remainder of the field after the last box checked.

 \*\*\*2003-present\*\*\*

 01 – Maternal conditions/Diseases

 02 – Complications of placenta

 03 – Other OB or Preg complices

 04 – Fetal Anomaly

 05 – Fetal injury

 06 – Fetal infection

 07 – Other fetal

 conditions/disorders

 08 - Unknown

 \*\*\*1980-2002\*\*\*

Not Collected.

267 ot\_rupt 587-587 1 C Other significant condition is

 rupture of membranes prior to onset

 of labor

 \*\*\*2003-present\*\*\*

 Y - Yes

 N - No

 \*\*\*1980-2002\*\*\*

Not Collected.

268 ot\_abrup 588-588 1 C Other significant condition is

 abruptio placenta

 \*\*\*2003-present\*\*\*

 Y - Yes

 N - No

 \*\*\*1980-2002\*\*\*

Not Collected.

269 ot\_insuf 589-5891 1 C Other significant condition is

 Placental insufficiency

 \*\*\*2003-present\*\*\*

 Y - Yes

 N - No

 \*\*\*1980-2002\*\*\*

Not Collected.

270 ot\_prol 590-590 1 C Other significant condition is

 prolapsed cord

 \*\*\*2003-present\*\*\*

 Y - Yes

 N - No

 \*\*\*1980-2002\*\*\*

Not Collected.

271 ot\_chor 591-591 1 C Other significant condition is

 chorioamnionitis

 \*\*\*2003-present\*\*\*

 Y - Yes

 N - No

 \*\*\*1980-2002\*\*\*

Not Collected.

272 ot\_other 592-592 1 C Other significant condition is

 other complications of placenta,

 cord, or membranes

 \*\*\*2003-present\*\*\*

 Y - Yes

 N - No

 \*\*\*1980-2002\*\*\*

Not Collected.

273 multcs1 593-597 5 C Multiple cause of death Codes

274 multcs2 598-602 5 Series of five ICD-10 codes for

275 multcs3 603-607 5 each multiple cause of death given.

276 multcs4 608-612 5 Blanks in these codes will make up

277 multcs5 613-617 5 the remainder of the field after 278 multcs6 618-622 5 the last cause given.

279 mutlcs7 623-627 5

280 multcs8 628-632 5

281 multcs9 633-637 5

282 multcs10 638-642 5

283 res\_totm 643-644 2 N Months at residence calculated