

WAC 246-491-029 Information collected on the confidential section of live birth and fetal death certificates; modifications to the United States standard certificates and report forms. (1) Effective January 1, 2003, the department shall use the 2003 revisions of the United States standard forms of live birth and fetal death as the basis for the state certificates of live birth and fetal death. These forms are developed by the United States Department of Health and Human Services, National Center for Health Statistics.

(2) Copies of these forms may be obtained by contacting the department's center for vital statistics.

(3) Tables 1 and 2 list the statistical information contained in the confidential sections of the birth and fetal death certificates that the board requires the department to collect, and the differences between the state and U.S. standard.

U.S. STANDARD CERTIFICATE OF LIVE BIRTH

**TABLE 1:
Confidential Birth Certificate Items**

Item Number	Item Name	Difference from U.S. Standard, if any
15	Is mother married to the father?	
	If no, was mother married to anyone during the pregnancy?	Added
	Has the paternity affidavit been signed?	
20	Mother's education	Add "Specify": next to box for "8th Grade or less"
21	Mother of Hispanic origin?	
22	Mother's race	
23	Mother's occupation	Added
24	Mother's kind of business/industry	Added
29	Father's education	Add "Specify": next to box for "8th Grade or less"
30	Father of Hispanic origin?	
31	Father's race	
32	Father's occupation	Added
33	Father's kind of business/industry	Added
34	Mother's medical record number	
35	Mother's prepregnancy weight	
36	Mother's weight at delivery	
37	Mother's height	

U.S. STANDARD CERTIFICATE OF LIVE BIRTH

**TABLE 1:
Confidential Birth Certificate Items**

Item Number	Item Name	Difference from U.S. Standard, if any
38	Did mother get WIC food for herself during pregnancy?	
39	Cigarette smoking before and during pregnancy	
40a	Number of previous live births	
40b	Date of last live birth	
41a	Number of other pregnancy outcomes	
41b	Date of last other pregnancy outcome	
42a	Date of first prenatal care visit	
42b	Date of last prenatal care visit	
43	Total number of prenatal visits for this pregnancy	
44	Date last normal menses began	
45	Was mother transferred to higher-level care for maternal medical or fetal indications for delivery?	
46	Principal source of payment for this delivery	Add "Indian Health" and "CHAMPUS"
47	Newborn medical record number	
48	Birth weight	
49	Infant head circumference	Added
50	Obstetric estimate of gestation	
51	Apgar score at 5 min; if score is less than 6, score at 10 minutes	
52	Plurality	
53	If not single birth - born 1st, 2nd, 3rd etc.	
54	Was infant transferred within 24 hours of delivery?	
55	Is infant living at time of the report?	
56	Is infant being breastfed?	
57	Risk factors in this pregnancy	Add "Group B streptococcus culture positive"

U.S. STANDARD CERTIFICATE OF LIVE BIRTH

**TABLE 1:
Confidential Birth Certificate Items**

Item Number	Item Name	Difference from U.S. Standard, if any
58	Method of delivery	
59	Infections present and/or treated during this pregnancy	Add "HIV infection" and "Other: Specify"
60	Obstetric procedures	
61	Abnormal conditions of the newborn	
62	Characteristics of labor and delivery	
63	Congenital anomalies of the newborn	
64	Maternal morbidity	
65	Onset of labor	

U.S. STANDARD REPORT OF FETAL DEATH

**TABLE 2:
Confidential Fetal Death Certificate Items**

Item Number	Item Name	Difference from U.S. Standard, if any
38	Weight of fetus	
39	Obstetric estimate of gestation	
40	Plurality	
41	If not single birth - Born 1st, 2nd, 3rd etc.	
42	Mother's education	Add "Specify": next to box for "8th Grade or less"
43	Mother of Hispanic origin?	
44	Mother's race	
45	Mother's occupation	Added
46	Mother's kind of business/industry	Added
47	Mother married?	
48	Mother's height	
49	Did mother get WIC food for herself during pregnancy?	
50	Mother's prepregnancy weight	
51	Mother's weight at delivery	
52	Date last normal menses began	
53	Date of first prenatal care visit	

U.S. STANDARD REPORT OF FETAL DEATH

**TABLE 2:
Confidential Fetal Death Certificate Items**

Item Number	Item Name	Difference from U.S. Standard, if any
54	Date of last prenatal care visit	
55	Total number of prenatal visits for this pregnancy	
56a	Number of previous live births	
56b	Date of last live birth	
57a	Number of other pregnancy outcomes	
57b	Date of last other pregnancy outcome	
58	Cigarette smoking before and during pregnancy	
59	Was mother transferred to higher-level care for maternal medical or fetal indications for delivery?	
60	Father's education	Added
61	Father of Hispanic origin?	Added
62	Father's race	Added
63	Father's occupation	Added
64	Father's kind of business/industry	Added
65	Risk factors in this pregnancy	
66	Method of delivery	
67	Congenital anomalies of the fetus	
68	Maternal morbidity	
69	Infections present and/or treated during this pregnancy	Add "HIV infection" and "Other: Specify"

[Statutory Authority: RCW 43.70.150, 70.58.055, and chapter 70.58 RCW. WSR 02-20-092, § 246-491-029, filed 10/1/02, effective 11/1/02. Statutory Authority: Chapter 70.58 RCW. WSR 91-20-073 (Order 196B), § 246-491-029, filed 9/26/91, effective 10/27/91. Statutory Authority: RCW 43.20.050. WSR 91-02-051 (Order 124B), recodified as § 246-491-029, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.58.200. WSR 88-19-092 (Order 310), § 248-124-010, filed 9/20/88. Statutory Authority: RCW 43.20.050 and 70.58.200. WSR 84-02-004 (Order 270), § 248-124-010, filed 12/23/83; Order, § 248-124-010, filed 9/1/67.]