REVISED FETAL DEATH CERTIFICATE


The process will pretty much follow the same path as that of the death certificate. Once the state office has developed the form, based on the National Center for Health Statistics (NCHS) national standard, the draft will be reviewed by internal agencies within the department. The next step is to conduct a review by external partners, such as the Florida Medical Examiner Commission, the Florida Hospital and Medical Associations, the Florida Funeral Board, and the funeral director associations. With input from these interested parties, we should have the final draft of the revised fetal death certificate by summer.

Implementation will be similar to that of the death certificate. Fall trainings will be conducted on the revised fetal death form, focusing on changes, additions, and how information is to be entered on the revised form. Times, dates and general format of the training opportunities will be announced in the fall.

The revision process comes along approximately every 10-15 years, so it presents opportunities for all those involved in vital records registration. This latest revision of Florida vital records’ forms over the last couple of years has allowed the state office to work closely with many of our partners involved in the registration of vital records. The experience has been a good one. We have developed stronger relationships that help all of us better understand the impact of what we do on the users of the forms and the data collected. Now, if we are lucky, the process will not be repeated for another 10 years or so!

ON THE ROAD WITH QA

This addition of the Vital News finds QA “on the road” once again. Mike Grant and Kevin Wright have recently conducted e-Vitals training in Tampa, Orlando, Ft. Lauderdale, Miami, and back to Ft. Lauderdale. Whew, they just have time to do laundry and head back out again!

In March, Mike was in Santa Rosa County, training their new CDR and Okaloosa’s new CDR, as well as several new deputies. He made a presentation in June to the Independent Funeral Directors Association of Florida annual conference on the upcoming revision of the fetal death certificate. It’s easy to see that QA takes their training responsibilities seriously!

E-VITALS TRAIN

A fter a successful whirl-wind tour of the middle and southern parts of the state, the e-Vitals train is has returned to the station. The e-Vitals training sessions have been a huge success. All Florida counties have now been trained. The old, outdated mainframe system is fading into the sunset, soon to be nothing more than a memory. In fact, most of the trained counties have had their access to the old mainframe completely removed and are operating 100% in e-Vitals.

Among the most popular features of e-Vitals are its expanded search capabilities and how its reports are making tedious logs obsolete. The further along we move with the system, the more we are amazed at its capability to provide data in a multitude of formats.

Never satisfied to rest on its laurels, the e-Vitals train is already getting revved up to respond to training requests from new groups, such as business managers. The e-Vitals trainings have been so popular that trainers Kevin Wright and Mike Grant jokingly say that they will be taking the show “off Broadway, to a theatre near you” very soon!
ORDERING FETAL DEATH FORM DH 428

Florida files approximately 1700 fetal deaths each year. Because of the small numbers, the Certificate of Fetal Death, DH 428, is not stocked in the warehouse. The forms are maintained at the state office in Jacksonville.

Funeral directors and hospitals utilizing the form should contact the CDR for a supply. To order a supply of the form, CDRs should email Dave Sanford: dave_sanford@doh.state.fl.us with the following information:
1. County Health Department Name
2. Number of forms or packages you need (100 per package)
3. Contact Name
4. Contact Phone Number

Remember when ordering that these are infrequent events; do not order more forms than you think you will actually need, especially since the form is being revised for 2006.

Once the forms are forwarded to the CDR, the health department will be invoiced $12.50 per package plus postage for shipping. Do not send a DH 1370H, SIMS requisition, for the fetal death form. Only emails will be accepted.

FILING DELAYED CERTIFICATE OF BIRTH

The state office has received a number of telephone requests from people who, after not finding birth records at the county level, were instructed to call the state office Delay Unit. In order for us to be able to offer the client the opportunity to file a Delayed Certificate, the applicant must first have requested an official search of the state's vital records. If the search proves that no record can be found, a statement is issued to that effect. At that point, once the state office has seen that an official search was done, a delay packet, with information to assist the client in the delay filing process, is sent to the applicant.

It would help us greatly if, when the county office cannot locate a record, county staff provides the client with a state application for a search and lets them go through the first phase before deciding they need to call our office. Not every circumstance fits into a generic pattern, and of course there will be instances where you'll feel the client needs to talk with our office directly before sending in the application for search. In those cases, no problem, we'll be glad to help as much as we can.

So, a good rule of thumb is:
- **Who** should call: the client. Usually this situation is not something that can be fixed over phone, so let them call from home.
- **When** to have the client call: after they've had the official record search done at the state office.
- **Who** should the **CDR** call if they have questions or concerns: Lorraine Kratz at (904) 359-6900, ext. 1081 or Barbara Smith, ext. 1097.

Funeral directors who want to be emailed the quarterly updates to the County Health Department phone list can provide their email addresses, and the listing will be sent automatically.

To have your name put on the list, send an email to: sharon_dover@doh.state.fl.us

TRAINING TOOLS FOR PHYSICIANS

Chief deputy registrars (CDR), funeral directors and physicians should remember that the state office now has two excellent training tools for physicians when certifying the cause of death on the Florida death certificate. Both of these tools provide the physician valuable information regarding how to complete the death certificate, time frames for filing, who should certify, and much more. These tools can be obtained by contacting the CDR at the county health department:
1. Informational brochure, *What the Physician Should Know about Certifying Cause of Death on the Florida Death Certificate*  
   DH 150-849, Stock # 5730-849-0150-9
2. Informational flyer, *MD Card* (commonly called the “yellow card”)  
   DH 1976, Stock Number 5744-000 1976-0

CDRs are asked to include a copy of each when mailing medical queries to the physician. Funeral directors are asked to provide them to physicians and the physicians’ staff when taking records to be signed. Local medical societies can also obtain a supply for their members by contacting the CDR at the county health department.

Questions about the brochure/flyer should be directed to the CDR or to the state office, Quality Assurance Unit, (904) 359-6900, ext. 1020, 1021, or 1056.

Welcome Aboard

The following appointments have been made to the position of Registrar:

**Local Registrar**  
Kathleen DeVore-Jones  Santa Rosa County  
Crystal Steele .......................... Walton County

**Chief Deputy Registrar**  
TBA …… Miami-Dade County  
Traci Fox .............................. St. Lucie County  
Solange Jones ...................... Okaloosa County  
TBA …… Orange County  
Michele Davis ……………….. Santa Rosa County
DEATH IN A HOSPICE

As we see more and more families utilizing community hospice facilities, we must be able to determine the number of deaths that occur in those facilities. As clarification on how this information is to be entered on the death certificate, and to be sure everyone is of the same understanding, the following instructions are provided on how to complete items 9 and 10 when the death occurs in a hospice.

There are three different hospice situations:

1. Freestanding hospice facility – a separate building that operates independent of any hospital. The preparer should complete the record as follows:
   - **Item 9**, Place of Death, NON-HOSPITAL: ✓ Hospice Facility
   - **Item 10**, Facility Name – should be completed with the name of the hospice, such as Earl Hadlow Community Hospice.

2. Hospice unit within a hospital – hospice actually is part of the hospital or is a unit of the hospital. The preparer should complete the record as follows:
   - **Item 9**, Place of Death, HOSPITAL: ✓ Inpatient
   - **Item 10**, Facility Name – should be completed with the name of the hospital only, such as Broward General Medical Center, in order for the data to be captured as a hospital inpatient death as directed by the National Center for Health Statistics (NCHS).

3. Hospice located within the confines of the hospital, but not part of the hospital -- if they rent/lease the space from the hospital, a simple business arrangement, then the hospice is not actually part of the hospital, but is a hospice facility and should be treated as a “freestanding” facility. The preparer should complete the record as follows:
   - **Item 9**, Place of Death, NON-HOSPITAL: ✓ Hospice Facility
   - **Item 10**, Facility Name – Enter only the name of the hospice, such as J. Robert Lauer Hospice. Do not enter the hospital name in order for the data to be captured as a hospice death as directed by NCHS.

There is also the possibility that a nursing home may have a similar situation and the same rationale applies:

1. Hospice unit within a nursing home – hospice actually is part of the nursing home or is a unit of the nursing home. The preparer should complete the record as follows:
   - **Item 9**, Place of Death, NON-HOSPITAL: ✓ Nursing Home/Long Term Care Facility
   - **Item 10**, Facility Name – should be completed with the name of the nursing home only, such as Park Ridge Nursing Home, in order for the data to be captured as a nursing home death as directed by NCHS.

2. Hospice located within the confines of the nursing home, but not part of the nursing home -- if they rent/lease the space from the nursing home, a simple business arrangement, then the hospice is not actually part of the nursing home, but is a hospice facility and should be treated as a “freestanding” facility. The preparer should complete the record as follows:
   - **Item 9**, Place of Death, NON-HOSPITAL: ✓ Hospice Facility
   - **Item 10**, Facility Name – Enter only the name of the hospice, such as Lasting Care Hospice. Do not enter the nursing home name in order for the data to be captured as a hospice death as directed by NCHS.

Refer to the Vital Records Registration Handbook, 2005 Revision for questions on completing these items or any item on the death certificate.

### TOP 20 FIRST NAMES FOR 2004

<table>
<thead>
<tr>
<th>MALE</th>
<th>FEMALE</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Joshua</td>
<td>12. Tyler</td>
</tr>
<tr>
<td>3. Jacob</td>
<td>13. Ethan</td>
</tr>
<tr>
<td>5. Daniel</td>
<td>15. Andrew</td>
</tr>
<tr>
<td>8. David</td>
<td>18. William</td>
</tr>
<tr>
<td>10. Alexander</td>
<td>20. James</td>
</tr>
</tbody>
</table>

| 1. Emily  | 11. Sarah |
| 2. Isabella | 12. Olivia |
| 5. Ashley | 15. Victoria |
| 7. Brianna | 17. Elizabeth |
| 8. Alyssa | 18. Jasmine |
| 10. Sophia | 20. Nicole |

### BITS ’N PIECES

- When a deputy registrar is no longer involved in vitals statistics, due to change of duties or separation from the department, that deputy’s commission should be returned to the state office, to the attention of Vickie Johns.
- Requests for out-of-state information should be directed to the NCHS website for “Where to Write for Vital Records” at: [www.cdc.gov/nchswww](http://www.cdc.gov/nchswww)