## 1998 Linked Birth/Infant Death Birth Cohort Data Set

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#### Introduction

This documentation is for the 1998 birth cohort linked birth/infant death data set (linked file). Previous birth cohort linked files were released for data years 1983-91. Beginning with 1995 data, the linked file was released in two different formats — period data and birth cohort data.

*Period data* — The numerator for the 1998 period linked file consists of all infant deaths occurring in 1998 linked to their corresponding birth certificates, whether the birth occurred in 1998 or 1997. The denominator file for this data set is the 1998 natality file, that is, all births occurring in 1998. Beginning in 1995, the period linked files form the basis for all official NCHS linked file statistics (except for special cohort studies).

*Birth cohort data* — The numerator of the 1998 birth cohort linked file consists of deaths to infants born in 1998 linked to their corresponding birth certificates, whether the death occurred in 1998 or 1999. The denominator file is the 1998 natality file, that is, all births occurring in 1998.

The release of linked file data in two different formats allows NCHS to meet customer demands for more timely linked file data while still meeting the needs of data users who prefer the birth cohort format. For most general purposes, differences between the birth cohort and period linked files are negligible. However, birth cohort files are preferred for multivariate and some other types of detailed analysis because they follow a given cohort of births for an entire year to ascertain their mortality experience. This is generally considered to be a more robust methodology than the period file, which is essentially cross-sectional in nature.

The 1998 birth cohort linked file includes several separate data files. The first file includes linked birth and death certificate data for all US infants born in 1998 who died before their first birthday - referred to as the numerator file. The second file contains information from the death certificate for all US infant death records which could not be linked to their corresponding birth certificates - referred to as the unlinked death file. The third file is the 1998 NCHS natality file for the US with a few minor modifications - referred to as the denominator-plus file. These same three data files are also available for Puerto Rico, the Virgin Islands, and Guam.

For the denominator-plus file, selected variables from the numerator file have been added to the denominator file to facilitate processing. These variables include age at death (and recodes), underlying cause of death (and the 61-cause recode), place of accident, and record weight. These variables are the most widely used variables from the numerator file. With the previous file format it was sometimes necessary to combine the numerator and denominator files when performing certain multivariate statistical techniques. Now, when the number of variables required from the numerator file is limited, the denominator-plus file may be used by itself for

ease of programming. Infant death identification numbers are also included, so that the same infant can be uniquely identified and matched between the numerator and denominator-plus files.

#### Weighting

In part to correct for known biases in the data, changes were made to the linked file beginning with the 1995 data year. These changes include the addition of a record weight and an imputation for not-stated birthweight. In the 1998 birth cohort linked file, 98.3% of infant death records were linked to their corresponding birth certificates. Overall, 1.7% of infant death records could not be linked because the matching birth certificate could not be found; however this percent varied considerably by State and other characteristics (see section on *Percent of records linked* below). Beginning with 1995 data, a record weight was added to the infant death records to correct in part for biases in percent of records linked by major characteristics. The number of infant deaths in the linked file are weighted to equal the sum of the linked plus unlinked infant deaths by age at death and state. The formula for computing the weights is as follows:

## <u>number of linked infant deaths + number of unlinked infant deaths</u> number of linked infant deaths.

A separate weight is computed for each State of residence of birth and each age at death category (<1 day, 1-27 days, 28 days-1 year). Thus, weights are 1.0 for states which link all of their infant deaths. These weights have been added to all linked infant death records in the numerator file, and in the denominator-plus file. In the denominator-plus file, records for surviving infants have been assigned a weight of 1.0. This causes the denominator-plus file to weight up to about 478 (by residence) or 478 (by occurrence) more than the total number of live births (about 3.9 million), thus most runs on live birth data from the denominator-plus file should be run unweighted. Weights have not been computed for the Puerto Rico, Virgin Islands, and Guam files.

The addition of weighting to the file has greatly reduced bias, but has also created challenges for data analysis. The researcher should be aware that the use of the weights is appropriate for some, but not all applications. Weights should be used when computing the total number of infant deaths, or the number of infant deaths by characteristics, either from the numerator or the denominator-plus files. Weights should not be used when computing the total number of live births, or the number of live births by characteristics from the denominator-plus file, as the use of weights under these circumstances will yield a slight overestimate of the total number of US births. For multivariate analysis, the use of weights is generally recommended, however, a decision should be made on an individual basis, depending on the type of multivariate technique used, and the goals of the particular analysis.

### Imputed birthweight

An imputation for not-stated birthweight has been added to the data set, to reduce potential bias in the computation of birthweight-specific infant mortality rates. Basically, if birthweight is notstated and the period of gestation is known, birthweight is assigned the value from the previous record with the same period of gestation, race, sex, and plurality. Imputed values are flagged. The addition of this imputation reduced the percent of not-stated responses for birthweight, thus reducing (but not eliminating) the potential for underestimation when computing birthweightspecific infant mortality rates.

### Methodology

The methodology used to create the national file of linked birth and infant death records takes advantage of two existing data sources:

- 1. State linked files for the identification of linked birth and infant death certificates; and
- 2. NCHS natality and mortality computerized statistical files, the source of computer records for the two linked certificates.

Virtually all States routinely link infant death certificates to their corresponding birth certificates for legal and statistical purposes. When the birth and death of an infant occur in different States, copies of the records are exchanged by the State of death and State of birth in order to effect a link. In addition, if a third State is identified as the State of residence at the time of birth or death, that State is also sent a copy of the appropriate certificate by the State where the birth or death occurred.

The NCHS natality and mortality files, produced annually, include statistical data from birth and death certificates that are provided to NCHS by States under the Vital Statistics Cooperative Program (VSCP). The data have been coded according to uniform coding specifications, have passed rigid quality control standards, have been edited and reviewed, and are the basis for official U.S. birth and death statistics.

To initiate processing, NCHS obtained matching birth certificate numbers from States for all infant deaths that occurred in their jurisdiction. We used this information to extract final, edited mortality and natality data from the NCHS natality and mortality statistical files. Individual birth and death records were selected from their respective files and linked into a single statistical record, thereby establishing a national linked record file.

After the initial linkage, NCHS returned to the States where the death occurred computer lists of unlinked infant death certificates for follow up linking. If the birth

occurred in a State different from the State of death, the State of birth identified on the death certificate was contacted to obtain the linking birth certificate. State additions and corrections were incorporated, and a final, national linked file was produced. Characteristics of the natality and mortality data from which the linked file is constructed are described in detail in the Technical Appendices and Addenda included in this document.

#### Characteristics of Unlinked File

For the 1998 birth cohort linked file 478, or 1.7% of all infant death records could not be linked to their corresponding birth certificates. Unlinked records are included in a separate data file in this data set. The unlinked record file uses the same record layout as the numerator file of linked birth and infant death records. However, except as noted below, tape locations 1-210, reserved for information from the matching birth certificate, are blank since no matching birth certificate could be found for these records. The sex field (tape location 79) contains the sex of infant as reported on the death certificate, rather than the sex of infant from the birth certificate, which is not available. The race field (tape location 36-37) contains the race of the decedent as reported on the death certificate rather than the race of mother as reported on the birth certificate as is the case with the linked record file. The race of mother on the birth certificate is generally considered to be more accurate than the race information from the death certificate (see section on *Comparison of race data from birth and death certificates* in the Mortality Technical Appendix included in this documentation). Also, date of birth as reported on the death certificate is used to generate age at death. This information is used in place of date of birth from the birth certificate, which is not available.

Documentation table 6 shows counts of unlinked records by race and age at death for each State of residence. The user is cautioned in using table 6 that the race and residence items are based on information reported on the death certificate; whereas, tables 1-5 present data from the linked file in which the race and residence items are based on information reported on the birth certificate. (see section on *Comparison of race data from birth and death certificates* in the Mortality Technical Appendix included in this documentation).

### Percent of Records Linked

The 1998 birth cohort linked file includes 27,743 linked infant death records and 478 unlinked infant death records by place of occurrence. The linked file is weighted to the sum of linked plus unlinked records, thus the total number of weighted infant deaths by place of occurrence is 28,221. While the overall percent linked for infant deaths in the 1998 birth cohort linked file is 98.3%, there are differences in percent linked by certain variables. These differences have important implications for how the data is analyzed.

Table 1 shows the percent of infant deaths linked by State of residence. While most States link a high percentage of infant deaths, linkage rates for some States are well below the national average. When a high percentage of deaths remain unlinked, infant mortality rates computed for these States are underestimated. It is for this reason that weights were added to the linked files beginning with 1995 data, to correct for biases in the data due to poor data linkage for particular states.

### Geographic classification

Geographic codes in this data set have been updated to reflect the results of the 1990 census, and differ slightly from those used in previous linked files. Because of confidentiality concerns, only those counties and cities with a population size of 250,000 or more are separately identified in this data set. Users should refer to the geographic code outline in this document for the list of available areas and codes.

For events to be included in the linked file, both the birth and death must occur inside the 50 States and D.C. in the case of the 50 States and D.C. file; or in Puerto Rico, the Virgin Islands or Guam in the case of the Puerto Rico, Virgin Islands and Guam file. In tabulations of linked data and denominator data events occurring in each of the respective areas to nonresidents are <u>included</u> in tabulations that are by place of occurrence, and <u>excluded</u> from tabulations by place of residence. These exclusions are based on the usual place of residence of the mother. This item is contained in both the denominator file and the birth section of the numerator (linked) file. Nonresidents are identified by a code 4 in location 11 of these files.

Table 1. Percent of infant deaths linked by state of residence of birth: United States, 1998 birth cohort

United States	98.3%	Nebraska	100.0%
Alabama	99.8%	Nevada	95.9%
Alaska	98.5%	New Hampshire	100.0%
Arizona	98.1%	New Jersey	98.1%
Arkansas	97.3%	New Mexico	94.9%
California	96.3%	Upstate New York	98.0%
Colorado	99.8%	New York City	97.7%
Connecticut	99.0%	North Carolina	99.7%
Delaware	100.0%	North Dakota	100.0%
District of Columbia	98.9%	Ohio	95.1%
Florida	99.9%	Oklahoma	92.8%
Georgia	100.0%	Oregon	99.6%
Hawaii	100.0%	Pennsylvania	98.5%
Idaho	97.8%	Rhode Island	100.0%
Illinois	98.6%	South Carolina	100.0%
Indiana	98.3%	South Dakota	100.0%
Iowa	100.0%	Tennessee	100.0%
Kansas	98.9%	Texas	97.8%
Kentucky	98.0%	Utah	99.6%
Louisiana	98.1%	Vermont	100.0%
Maine	97.6%	Virginia	99.0%
Maryland	98.9%	Washington	99.1%
Massachusetts	97.9%	West Virginia	98.1%
Michigan	98.8%	Wisconsin	100.0%
Minnesota	100.0%	Wyoming	100.0%
Mississippi	99.5%		
Missouri	98.6%		
Montana	97.3%		

### Demographic and Medical Classification

The documents listed below describe in detail the procedures employed for demographic classification on both the birth and death records and medical classification on death records. While not absolutely essential to the proper interpretation of the data for a number of general applications, these documents should nevertheless be studied carefully prior to any detailed analysis of demographic or medical (especially multiple cause) data variables. In particular, there are a number of exceptions to the ICD rules in multiple cause-of-death coding which, if not treated properly, may result in faulty analysis of the data.

- A. Manual of the International Statistical Classification of Diseases, Injuries, and the Cause-of-Death, Ninth Revision (ICD-9) Volumes 1 and 2.
- B. NCHS Instruction Manual Data Preparation Part 2a, Vital Statistics Instructions for Classifying the Underlying Cause-of-Death. Published annually.
- C. NCHS Instruction Manual Data Preparation, Part 2b, Vital Statistics Instructions for Classifying Multiple Cause-of-Death. Published annually.
- D. NCHS Instruction Manual Data Preparation, Part 2c, Vital Statistics ICD-9 ACME Decision Tables for Classifying Underlying Causes-of-Death. Published annually.
- E. NCHS Instruction Manual Data Preparation, Part 2d, Vital Statistics NCHS Procedures for Mortality Medical Data System File Preparation and Maintenance, Effective 1985.
- F. NCHS Instruction Manual Data Tabulation, Part 2f, Vital Statistics ICD-9 TRANSAX Disease Reference Tables for Classifying Multiple Causes-of-Death, 1982-85.
- G. NCHS Instruction Manual Part 2g, Vital Statistics, Data Entry Instructions for the Mortality Medical Indexing, Classification, and Retrieval system (MICAR). Published annually.
- H. NCHS Instruction Manual Part 2h, Vital Statistics, Dictionary of Valid Terms for the Mortality Medical Indexing, Classification, and Retrieval System (MICAR). Published annually.
- I. NCHS Instruction Manual Data Preparation, Part 3a, Vital Statistics Classification and Coding Instructions for Live Birth Records. Published annually.

- J. NCHS Instruction Manual Data Preparation, Part 4, Vital Statistics Demographic Classification and Coding Instructions for Death Records. Published annually.
- K. NCHS Instruction Manual Tabulation, Part 11, Vital Statistics Computer Edits for Mortality Data, Effective 1990.

Copies of NCHS Instruction Manuals may be requested from the Chief, Data Preparation Branch, Division of Data Processing, National Center for Health Statistics, P.O. Box 12214, Research Triangle Park, North Carolina 27709.

In addition, the user should refer to the Technical Appendices of the <u>Vital Statistics of</u> <u>the United States</u> for information on the source of data, coding procedures, quality of the data, etc. The Technical Appendices for natality and mortality are part of this documentation package.

## Cause-of-Death Data

Mortality data are traditionally analyzed and published in terms of underlying cause-of-death. The underlying cause-of-death data are coded and classified as described in the Mortality Technical Appendices. NCHS has augmented underlying cause-of-death data with data on multiple causes reported on the death certificate. The linked file includes both underlying and multiple cause-of-death data.

The multiple cause of death codes were developed with two objectives in mind. First, to facilitate etiological studies of the relationships among conditions, it was necessary to reflect accurately in coded form each condition and its location on the death certificate in the exact manner given by the certifier. Secondly, coding needed to be carried out in a manner by which the underlying cause of death could be assigned through computer applications. The approach was to suspend the linkage provisions of the ICD for the purpose of condition coding and code each entity with minimum regard to other conditions present on the certification. This general approach is hereafter called entity coding.

Unfortunately, the set of multiple cause codes produced by entity coding is not conducive to a third objective -- the generation of person-based multiple cause statistics. Person-based analysis requires that each condition be coded within the context of every other condition on the same certificate and modified or linked to such conditions as provided by ICD-9. By definition, the entity data cannot meet this requirement since the linkage provisions distort the character and placement of the information originally recorded by the certifying physician.

Since the two objectives are incompatible, NCHS has chosen to create from the original set of entity codes a new code set called record axis multiple cause data. Essentially,

the axis of classification has been converted from an entity basis to a record (or person) basis. The record axis codes are assigned in terms of the set of codes that best describe the overall medical certification portion of the death certificate. This translation is accomplished by a computer system called TRANSAX (translation of axis) through selective use of traditional linkage and modification rules for mortality coding. Underlying cause linkages which simply prefer one code over another for purposes of underlying cause selection are not included. Each entity code on the record is examined and modified or deleted as necessary to create a set of codes which are free of contradictions and are the most precise within the constraints of ICD-9 and medical information on the record. Repetitive codes are deleted. The process may (1) combine two entity axis categories together to a new category thereby eliminating a contradiction or standardizing the data; or (2) eliminate one category in favor of another to promote specificity of the data or resolve contradictions. The following examples from ICD-9 illustrate the effect of this translation:

- Case 1: When reported on the same record as separate entities, cirrhosis of liver and alcoholism are coded to 5715 (cirrhosis of liver without mention of alcohol) and 303 (alcohol dependence syndrome). Tabulation of records with 5715 would on the surface falsely imply that such records had no mention of alcohol. A preferable codification would be 5712 (alcoholic cirrhosis of liver) in lieu of both 5715 and 303.
- Case 2: If "gastric ulcer" and "bleeding gastric ulcer" are reported on a record they are coded to 5319 (gastric ulcer, unspecified as acute or chronic, without mention of hemorrhage or perforation) and 5314 (gastric ulcer, chronic or unspecified, with hemorrhage). A more concise codification would be to code 5314 only since the 5314 shows both the gastric ulcer and the bleeding.

## Entity Axis Codes

The original conditions coded for selection of the underlying cause of death are reformatted and edited prior to creating the public-use tape. The following paragraphs describe the format and application of entity axis data.

*Format* — Each entity-axis code is displayed as an overall seven byte code with subcomponents as follows:

1. Line indicator: The first byte represents the line of the certificate on which the code appears. Six lines (1-6) are allowable with the fourth and fifth denoting one or two written in "due to"s beyond the three lines provided in Part I of the U.S. standard

death certificate. Line "6" represents Part II of the certificate.

Position indicator: The next byte indicates the position of the code on the line, i.e., it is the first (1), second (2), third (3),... eighth (8) code on the line.
 Cause category: The next four bytes represent the ICD-9 cause code.
 Nature of injury flag: ICD-9 uses the same series of numbers (800-999) to indicate nature of injury (N codes) and external cause codes (E codes). This flag distinguishes between the two with a one (1) representing nature of injury codes and a zero (0)

A maximum of 20 of these seven byte codes are captured on a record for multiplecause purposes. This may consist of a maximum of 8 codes on any given line with up to 20 codes distributed across three or more lines depending on where the subject conditions are located on the certificate. Codes may be omitted from one or more lines, e.g., line 1 with one or more codes, line 2 with no codes, line 3 with one or more codes.

representing all other cause codes.

In writing out these codes, they are ordered as follows: line 1 first code, line 1 second code, etc. ----- line 2 first code, line 2 second code, etc. ----- line 3 ----- line 4 ----- line 5 ----- line 6. Any space remaining in the field is left blank. The specifics of locations are contained in the record layout given later in this document.

*Edit* — The original conditions are edited to remove invalid codes, reverify the coding of certain rare causes of death, and assure age/cause and sex/cause compatibility. Detailed information relating to the edit criteria and the sets of cause codes which are valid to underlying cause coding and multiple cause coding are provided in Part 11 of the NCHS Vital Statistics Instruction Manual Series.

*Entity axis applications* — The entity axis multiple cause data is appropriate to analyses which require that each condition be coded as a stand alone entity without linkage to other conditions and/or require information on the placement of such conditions in the certificate. Within this framework, the entity data are appropriate to the examination of etiological relationships among conditions, accuracy of certification reporting, and the validity of traditional assumptions in underlying cause selection.

Additionally, the entity data provide in certain categories a more detailed code assignment which is linked out in the creation of record axis data. Where such detail is needed for a study, the user should selectively employ entity data. Finally, the

researcher may not wish to be bound by the assumptions used in the axis translation process preferring rather to investigate hypotheses of his own predilection.

By definition, the main limitation of entity axis data is that an entity code does not necessarily reflect the best code for a condition when considered within the context of the medical certification as a whole. As a result certain entity codes can be misleading or even contradict other codes in the record. For example, category 5750 is titled "Acute cholecystitis without mention of calculus". Within the framework of entity codes this is interpreted to mean that the codable entity itself contained no mention of calculus rather than that calculus was not mentioned anywhere on the record. Tabulation of records with a "5750" as a count of persons having acute cholecystitis without mention of calculus would therefore be erroneous. This illustrates the fact that under entity coding the ICD-9 titles cannot be taken literally. The user must study the rules for entity coding as they relate to his/her research prior to utilization of entity data. The user is further cautioned that the inclusion notes in ICD-9 which relate to modifying and combining categories are seldom applicable to entity coding (except where provided in Part 2b of the Vital Statistics Instruction Manual Series).

In tabulating the entity axis data, one may count codes with the resultant tabulation of an individual code representing the number of times the disease(s) represented by the code appears in the file. In this kind of tabulation of morbid condition prevalence, the counts among categories may be added together to produce counts for groups of codes. Alternatively, subject to the limitations given above, one may count persons having mention of the disease represented by a code or codes. In this instance it is not correct to add counts for individual codes to create person counts for groups of codes. Since more than one code in the researcher's interest may appear together on the certificate, totaling must account for higher order interactions among codes. Up to 20 codes may be assigned on a record; therefore, a 20-way interaction is theoretically possible. All totaling must be based on mention of one or more of the categories under investigation.

## **Record Axis Codes**

The following paragraphs describe the format and application of record-axis data. Part 2f of the Vital Statistics Instruction Manual Series describes the TRANSAX process for creating record axis data from entity axis data.

*Format* — Each record (or person) axis code is displayed in five bytes. Location information is not relevant. The Code consists of the following components:

1. Cause category: The first four bytes represent the ICD-9 cause code.

2. Nature of injury flag: The last byte contains a 0 or 1 with the 1 indicating that the cause is a nature of injury category.

Again, a maximum of 20 codes are captured on a record for multiple cause purposes. The codes are written in a 100-byte field in ascending code number (5 bytes) order with any unused bytes left blank.

*Edit* — The record axis codes are edited for rare causes and age/cause and sex/cause compatibility. Likewise, individual code validity is checked. The valid code set for record axis coding is the same as that for entity coding.

*Record axis applications* — The record axis multiple cause data set is the basis for NCHS core multiple cause tabulations. Location of codes is not relevant to this data set and conditions have been linked into the most meaningful categories for the certification. The most immediate consequence for the user is that the codes on the record already represent mention of a disease assignable to that particular ICD-9 category. This is in contrast to the entity code which is assigned each time such a disease is reported on two different lines of the certification. Secondly, the linkage implies that within the constraints of ICD-9 the most meaningful code has been assigned. The translation process creates for the user a data set which is edited for contradictions, duplicate codes, and imprecisions. In contrast to entity axis data, record axis data are classified in a manner comparable to underlying cause of death classification thereby facilitating joint analysis of these variables. Likewise, they are comparable to general morbidity coding where the linkage provisions of ICD-9 are usually utilized. A potential disadvantage of record axis data is that some detail is sacrificed in a number of the linkages.

The user can take the record axis codes as literally representing the information conveyed in ICD-9 category titles. While knowledge of the rules for combining and linking and coding conditions is useful, it is not a prerequisite to meaningful analysis of the data as long as one is willing to accept the assumptions of the axis translation process. The user is cautioned, however, that due to special rules in mortality coding, not all linkage notes in ICD-9 are utilized. (See Part 2f of the Vital Statistics Instruction Manual Series.)

The user should proceed with caution in using record axis data to count conditions as opposed to people with conditions since linkages have been invoked and duplicate codes have been eliminated. As with entity data, person based tabulations which combine individual cause categories must take into account the possible interaction of up to 20 codes on a single certificate.

In using the NCHS multiple cause data, the user is urged to review the information in this document and its references. The instructional material does change from year to

year and revision to revision. The user is cautioned that coding of specific ICD-9 categories should be checked in the appropriate instruction manual. What may appear on the surface to be the correct code by ICD-9 may in fact not be correct as given in the instruction manuals.

If on the surface it is not obvious whether entity axis or record axis data should be employed in a given application, detailed examination of Part 2f of the Vital Statistics Instruction Manual Series and its attachments will probably provide the necessary information to make a decision. It allows the user to determine the extent of the trade-offs between the two sets of data in terms of specific categories and the assumptions of axis translation. In certain situations, a combination of entity and record axis data may be the more appropriate alternative.

## Data File Characteristics:

The data were processed using the SAS language on an IBM 9672. Codes may be numeric, alphabetic, or blank.

# I. Denominator File:

<u>United States Data Set</u> A. File Organization: B. Record count: C. Record length: D. Data counts:	One file 3,945,192 230 a. By occurrence: 3,9 b. By residence: 3,9 c. To foreign residents:	41,553
Territories Data Set		
A. File Organization:	One file	
B. Record count:	66,761	
C. Record length:	230	
Puerto Rico		
Data counts:	a. By occurrence:	60,518
	b. By occurrence and residence:	
	c. To foreign residents:	106
Virgin Islands		
Data counts:	a. By occurrence:	1,915
	b. By occurrence and residence:	1,800
	c. To foreign residents:	115
Guam		
Data counts:	a. By occurrence:	4,328
	b. By occurrence and residence	4,318
	c. To foreign residents:	10

# II. Numerator File:

United States Data Set A. File Organization: B. Record count: C. Record length: D. Data counts:	One file 27,743 535 a. By occurrence: 27,743 b. By residence: 27,720 c. To foreign residents: 23	
Territories Data Set		
A. File Organization:	One file	
B. Record count:	692	
C. Record length:	535	
Puerto Rico Data counts:	<ul><li>a. By occurrence:</li><li>b. By occurrence and residence:</li><li>c. To foreign residents:</li></ul>	640 638 2
Virgin Islands		
Data counts:	a. By occurrence:	17
	b. By occurrence and residence:	17
	c. To foreign residents:	0
Guam		
Data counts:	a. By occurrence:	35
	b. By occurrence and residence:	35
	c. To foreign residents:	0

<ul> <li>III. Unlinked File:</li> <li><u>United States Data Set</u></li> <li>A. File Organization:</li> <li>B. Record count:</li> <li>C. Record length:</li> <li>D. Data counts:</li> </ul>	One file 478 535 a. By occurrence: 478 b. By residence: 478 c. To foreign residents: 0	
<u>Territories Data Set</u> A. File Organization: B. Record count: C. Record length:	One file 7 535	
Puerto Rico		
Data counts:	a. By occurrence:	5
	b. By occurrence and residence: c. To foreign residents:	4 1
Virgin Islands	-	
Data counts:	a. By occurrence:	2
	b. By occurrence and residence:	2
Guam	c. To foreign residents:	0
		0
Data counts:	a. By occurrence: b. By occurrence and residence:	0
	c. To foreign residents:	0
	0	-

# Linked Birth/Infant Death Data Set - 1998 Birth Cohort Data List of Data Elements and Locations

Dat	a Items	Denominator- <u>Plus File</u>	Numerator I <u>Birth</u>	File <u>Death</u>	Unlinked <u>File</u>
a. 1 b. 1 c. 7 d. 7 e.	General Match status Infant death number Year of birth Year of death Resident status Record weight	1 2-6 7-10  11 223-230	1 2-6- 7-10  11	  524-527 505 223-230	1  524-527 505 
	Occurrence FIPS state FIPS county	14-15 16-18	14-15 16-18	508-509 510-512	508-509 510-512
3. a. b. c. d.	Residence FIPS state FIPS county FIPS place NCHS state	19-20 21-23 24-28 12-13	19-20 21-23 24-28 12-13	513-514 515-517 518-522 506-507	513-514 515-517 518-522 506-507
4. a. b. c. d. e. f. g. h.	Infant Age Race Sex Gestation Birthweight Plurality Apgar score Day of week of birth/death	211-214  78-79 70-77 80-87 88-89 90-91 209	 78-79 70-77 80-87 88-89 90-91 209	211-214     532	211-214+ 35-38* 78-79*   532
i. 5. a. b. c. d. e. f.	Month of birth/death Mother Age Race Education Marital status Place of birth Hispanic origin	205-206 29-32 35-38 39-41 42-43 44-46 33-34	205-206 29-32 35-38 39-41 42-43 44-46 33-34	528-529     	528-529     
б. а. b. с.	Father Age Race Hispanic origin	60-62 65-66 63-64	60-62 65-66 63-64	 	

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<u>Data</u>	a Items	Denominator- <u>Plus File</u>	Numerator Fi <u>Birth</u>	le <u>Death</u>	Unlinked <u>File</u>
7.	Pregnancy items				
a.	Month prenatal care began	51-53	51-53		
b.	Number of prenatal visits	54-55	54-55		
c.	Adequacy of care recode	56	56		
d.	Total birth order	47-48	47-48		
e.	Live birth order	49-50	49-50		
8.	Medical and Health Data				
a.	Method of delivery	92-99	92-99		
b.	Medical risk factors	100-117	100-117		
c.	Other risk factors				
	Tobacco	118-121	118-121		
	Alcohol	122-125	122-125		
	Weight gain during pregnancy	126-128	126-128		
d.	Obstetric procedures	129-136	129-136		
e.	Complications of labor and/or				
	delivery	137-153	137-153		
f.	Abnormal conditions of the				
	newborn	154-163	154-163		
g.	Congenital anomalies	164-186	164-186		
h.	Underlying cause of death			216-219	216-219
i.	61 Infant cause recode			220-222	220-222
j.	Multiple conditions			261-504	261-504
9.	Other items				
a.	Place of delivery	67	67		
b.	Attendant at birth	68	68		
c.	Hospital and patient status			523	523
e.	Place of accident			215	215
f.	Residence reporting flags	187-203	187-203		

+ For the unlinked file, date of birth as reported on the death certificate is used to generate age at death. See section on <u>Changes Beginning with 1995 Data</u> for explanation.

\* For the unlinked file, these items are from the death certificate. See section on <u>Changes</u> <u>Beginning with 1995 Data</u> for explanation.

Item LocationLength	Item	Item and	Variable Name, d Code Outline	
1	1		<u>MATCHS</u> <u>Match Status</u>	
			$\begin{array}{cccccccccccccccccccccccccccccccccccc$	Matched Birth/Infant Death Record Surviving infant record Unmatched infant death record Note: This code is used in the unlinked file only.
2-6	5		<u>IDNUMBER</u> Infant Death N	umber

This number uniquely identifies the same infant in the numerator and denominator-plus files.

Locations 7-210 of the linked file contain data from the Birth Certificate. Locations 211-222, 261-535 of linked file contain data from the Death Certificate.

Residence items in the Denominator Record and in the natality section of the Numerator (linked) Record refer to the usual place of residence of the <u>Mother</u>; whereas in the mortality section of the Numerator (Linked) Record, these items refer to the residence of the <u>Decedent</u>.

7-10	4	<u>BIRYR</u> Year of Birth	
		1998	Born in 1998
11	1	<u>RESSTATB</u> <u>Resident Status</u>	- Birth
		United States O	ocurrence
		1	RESIDENTS: State and county of occurrence and residence are the same.
		2	INTRASTATE NONRESIDENTS: State of occurrence
		3	and residence are the same, but county is different. INTERSTATE NONRESIDENTS: State of occurrence and residence are different, but both are in the 50 States and D.C.
		4	FOREIGN RESIDENTS: State of occurrence is one of the 50 States or the District of Columbia, but place of residence of mother is outside of the 50 States and D.C.
		Puerto Rico Oc	currence
		<u>1</u>	RESIDENTS: State and county of occurrence
		±	and residence are the same.
		2	INTRASTATE NONRESIDENTS: State of occurrence
		4	and residence are the same, but county is different. FOREIGN RESIDENTS: Occurred in Puerto Rico to a resident of any other place.

Item LocationLength	Item	Varia Item and Code	able Name, <u>e Outline</u>	
11	1	<u>Virg</u> 1 2 4	in Islands (  	Occurrence RESIDENTS: State and county of occurrence and residence are the same. INTRASTATE NONRESIDENTS: State of occurrence and residence are the same, but county is different. FOREIGN RESIDENTS: Occurred in the Virgin Islands to a resident of any other place.
		Guar	m Occurre	nce
		1		RESIDENTS: Occurred in Guam to a resident of Guam or to a resident of the U.S.
		4		FOREIGN RESIDENTS: Occurred in Guam to a resident of any place other than Guam or the U.S.

12-13

2

### **<u>BRSTATE</u>** Expanded State of Residence - NCHS Codes - Birth

This item is designed to separately identify New York City records from other New York State records.

### **United States Occurrence**

	$\frac{0}{01}$		Alabama
02	01	 Alaska	Aldoallia
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

Item LocationLength	Item	Item and	Variable N l Code Outl				
12-13	2		BRSTATE Expanded	_	of Resid	lence - NCHS Codes - Birth (Cond't)	
			This item other Nev			separately identify New York City records from cords.	
			United St	tates O	ccurrer	nce	
			27		Montan		
			28		Nebrasl		
			29		Nevada		
			30			ampshire	
			31		New Je		
			32		New M		
			33		New Yo		
			34		New Yo		
			35		North C		
			36		North D	Dakota	
			37		Ohio		
			38		Oklaho	ma	
			20				
			40		Pennsyl	vania	
						Rhode Island	
		42		South C			
			43		South D		
			44		Tenness		
			45		Texas		
			46		Utah		
			47		Vermor	nt	
			48		Virginia		
			49		Washin		
			50		West V		
			51		Wiscon	-	
			52		Wyomi		
			53-58,60			Foreign Residents	
			53 50,00			Puerto Rico	
			55 54		•••	Virgin Islands	
			55		•••	Guam	
			56		•••	Canada	
			50 57		•••	Cuba	
			58		•••	Mexico	
			60		····	Remainder of the World	
			Puerto Rio	co Occi	urrence		
			53			Puerto Rico	
			01-52,54-	58,60		Foreign Residents: Refer to U.S. for specific code structure.	
			Virgin Isla	nds O	ccurren		
			54			Virgin Islands	
			01 50 55	50.00			

01-53,55-58,60 ... Foreign Residents: Refer to U.S. for specific code structure.

Item LocationLength	Item <u>Item an</u>	Variable Name, d Code Outline		
12-13	2	<u>BRSTATE</u> Expanded State	of Resid	lence - NCHS Codes - Birth (Cond't)
		This item is des other New York		separately identify New York City records from cords.
		Guam Occurren 55 01-52 53,54,58,60	<u>nce</u>  	Guam U.S. resident is also considered a resident of Guam. Foreign Residents: Refer to U.S. for specific code structure.
14-18	5			ocessing Standards es (Occurrence) - Birth
		detailed list of ar	eas and o various	Code Outline further back in this document for a codes. For an explanation of FIPS codes, reference s National Institute of Standards and Technology
14-15	2	<u>STOCCFIPB</u> State of Occurre	ence (FII	PS) - Birth
		<b>United States</b>		
		01		Alabama
		02		Alaska
		04		Arizona
		05		Arkansas
		06		California
		08		Colorado
		09		Connecticut
		10		Delaware
		11		District of Columbia
		12		Florida
		13		Georgia
		15		Hawaii
		16		Idaho
		17		Illinois
		18		Indiana
		19		Iowa
		20		Kansas
		21		Kentucky
		22		Louisiana
		23		Maine
		24		Maryland
		25		Massachusetts
		26		Michigan
		27		Minnesota
		28		Mississippi
		29		Missouri
		30		Montana
		31		Nebraska
		32		Nevada

Item LocationLength	Item	Variable Name, Item and Code Outline		
14-15	2	<u>STOCCFIPB</u> State of Occurre	ence (F	IPS) - Birth (Cond't)
		United States 33 34 35 36 37 38 39 40 41 42 44 45 46 47 48 49 50		New Hampshire New Jersey New Mexico New York North Carolina North Dakota Ohio Oklahoma Oregon Pennsylvania Rhode Island South Carolina South Dakota Tennessee Texas Utah
		50 51 53 54 55 56 <b><u>Puerto Rico</u></b> 72	··· ··· ··· ···	Vermont Virginia Washington West Virginia Wisconsin Wyoming Puerto Rico
16 19	2	<u>Virgin Islands</u> 78 <u>Guam</u> 66		Virgin Islands Guam
16-18	3	<u>CNTOCFIPB</u> <u>County of Occu</u> 001-nnn	rrence	(FIPS) - Birth Counties and county equivalents (independent and coextensive cities) are numbered alphabetically within each State. (Note: To uniquely identify a county, both the State and county codes must be used.)

999 ... County with less than 250,000 population

Item LocationLength	Item <u>Item an</u>	Variable Name, d Code Outline		
19-23	5	(Residence) - Bi	<u>rth</u>	cessing Standards (FIPS) Geographic Codes
		detailed list of a	areas and to variou	Code Outline further back in this document for a codes. For an explanation of FIPS codes, reference as National Institute of Standards and Technology
19-20	2	<u>STRESFIPB</u> State of Resider	nce (FIPS	5) - Birth
		<b>United States O</b>	ccurrenc	<u>e</u>
		00		Foreign residents
		01		Alabama
		02		Alaska
		04		Arizona
		05		Arkansas
		06		California
		08		Colorado
		09		Connecticut
		10		Delaware
		11		District of Columbia
		12		Florida
		13		Georgia
		15		Hawaii
		16		Idaho
		17		Illinois
		18		Indiana
		19		Iowa
		20		Kansas
		21		Kentucky
		22		Louisiana
		23		Maine
		24		Maryland
		25		Massachusetts
		26		Michigan
		27		Minnesota
		28		Mississippi
		29		Missouri
		30		Montana
		31		Nebraska
		32	•••	Nevada
		33	•••	New Hampshire
		34		New Jersey
		35		New Mexico
		36		New York
		37	•••	North Carolina
		38		North Dakota
		39		Ohio
		40		Oklahoma
		40	•••	Oregon
		41 42		
				Pennsylvania Bhada Island
		44	•••	Rhode Island

Item LocationLength	Item	Variable Name Item and Code Outline	·,	
19-20	2	<u>STRESFIPB</u> State of Reside	ence (FIP	'S) - Birth Cond't)
		United States	Occurren	ice
		45		South Carolina
		46		South Dakota
		47		Tennessee
		48		Texas
		49		Utah
		50		Vermont
		51		Virginia
		53		Washington
		54		West Virginia
		55		Wisconsin
		56		Wyoming
		Puerto Rico O	ccurrenc	<u>e</u>
		00-56,66,78		Foreign Residents: Refer to U.S. for specific code
				structure
		72		Puerto Rico
		Virgin Islands	Occurre	nce
		00-56,66,72		Foreign Residents: Refer to U.S. for specific code
				structure
		78		Virgin Islands
		Guam Occurr	ence	
		00,72,78		Foreign Residents: Refer to U.S. for specific code structure
		01-56		U.S. Resident is also considered a resident of Guam. Refer to U.S. for specific code structure
		66		Guam
21-23	3	<b>CNTYRFPB</b>		
		County of Res	idence (F	<u> IPS) - Birth</u>
		000		Foreign residents
		001-nnn		Counties and county equivalents (independent and
				coextensive cities) are numbered alphabetically
				within each State (Note: To uniquely identify a
				county, both the State and county codes must be
				used.)
		999		County with less than 250,000 population
24-28	5	<u>PLRES</u> <u>Place (City) of</u>	Residen	ce (FIPS)
		A complete lis back in this do		s is shown in the Geographic Code Outline further
		00000		Foreign residents
		00001-nnnnn		Code range
		00000		Balance of county: or city loss than

00000	•••	roreign residents
00001-nnnnn		Code range
99999		Balance of county; or city less than
	250,0	00 population

Item LocationLength	Item	Variable Nam Item and Code Outline		
29	1	<u>MAGEFLG</u> <u>Age of Moth</u>	er Flag	
		is used. The	e reported a	I whenever age is imputed or the mother's reported age age is used, if valid, when computed age derived from available or when it is outside the 10-49 code range.
		Blank 1 2	  	Not imputed and reported age is not used Reported age is used Age is imputed
30-31	2	<u>DMAGE</u> Age of Moth	<u>er</u>	
				ed using dates of birth of mother and of delivery; ated. This is the age item used in NCHS publications.
		10-54		Age in single years
32	1	<u>MAGER8</u> <u>Age of Moth</u>	er Recode	<u>8</u>
		1 2 3 4 5 6 7 8	···· ··· ··· ··· ···	Under 15 years 15 - 19 years 20 - 24 years 25 - 29 years 30 - 34 years 35 - 39 years 40 - 44 years 45 - 54 years
33	1	<u>ORMOTH</u> Hispanic Ori	igin of Mo	<u>ther</u>
		Hispanic ori	gin is repo	rted for all areas except Puerto Rico.
		0 1 2 3 4 5 9	···· ··· ··· ···	Non-Hispanic Mexican Puerto Rican Cuban Central or South American Other and unknown Hispanic Origin unknown or not stated

Item LocationLength	Item	Variable Name Item and Code Outline	,	
34	1	<u>ORRACEM</u> <u>Hispanic Orig</u>	in and R	ace of Mother Recode
		Hispanic origi	in is repo	ted for all areas except Puerto Rico.
		1		Mexican
		2		Puerto Rican
		2 3		Cuban
		4		Central or South American
		5		Other and unknown Hispanic
		6		Non-Hispanic White
		7		Non-Hispanic Black
		8		Non-Hispanic other races
		9		Origin unknown or not stated
35	1	MRACEIMP		
		Race of Mothe	er Imputa	ntion Flag
		Blank		Race is not imputed
		1		Race is imputed
		2		All other races, formerly code 09, is imputed
36-37	2	<u>MRACE</u> <u>Race of Mothe</u> <u>from Death Re</u>		Record or for Unlinked Records Race of Decedent

Beginning with 1992 data, some areas started reporting additional Asian or Pacific Islander codes for race. Codes 18-68 replace old code 08 for these areas. Code 78 replaces old code 08 for all other areas. For consistency with Census race code 09 (all other races) used prior to 1992 has been imputed.

#### **United States Occurrence**

01	 White
02	 Black
03	 American Indian (includes Aleuts and Eskimos)
04	 Chinese
05	 Japanese
06	 Hawaiian (includes part-Hawaiian)
07	 Filipino
18	 Asian Indian
28	 Korean
38	 Samoan
48	 Vietnamese
58	 Guamanian
68	 Other Asian or Pacific Islander in areas reporting
	codes 18-58
78	 Combined other Asian or Pacific Islander, includes
	codes 18-68 for areas that do not report them
	separately

## 1998

Item LocationLength	Item	Variable Name Item and Code Outline	<u>,</u>	
36-37	2	<u>MRACE</u> <u>Race of Mothe</u> <u>from Death R</u>		<u>Record or for Unlinked Records Race of Decedent</u> nd't)
		<b>Puerto Rico C</b>	lecurrence	
		$\frac{1}{00}$		Other races
		01		White
		02		Black
		Virgin Islands	o Occurren	
		01		White
		02		Black
		03		American Indian (includes Aleuts and Eskimos)
		04		Chinese
		05		Japanese
		06		Hawaiian (includes part-Hawaiian)
		07		Filipino
		08		Other Asian or Pacific Islander
		Guam Occurr	ence	
		01		White
		02		Black
		03		American Indian (includes Aleuts and Eskimos)
		04		Chinese
		05		Japanese
		06		Hawaiian (includes part-Hawaiian)
		07		Filipino
		08		Other Asian or Pacific Islander
		58		Guamanian
38	1	<u>MRACE3</u> <u>Race of Mothe</u>	er Recode	
		1		White
		2		Races other than White or Black
		2 3		Black
		5	•••	Diuch

Item LocationLength	Item	Variable Name, Item and Code Outline		
39-40	2	<u>DMEDUC</u> Education of M	other D	etail
		All areas report	educati	on of mother.
		00 01-08		No formal education
		09		Years of elementary school
		10		1 year of high school 2 years of high school
		10		3 years of high school
		11 12	•••	4 years of high school
		12	•••	1 year of college
		13	•••	2 years of college
		14		3 years of college
		16		4 years of college
		17		5 or more years of college
		99	···· ···	Not stated
41	1	MEDUC6		
		Education of M	other R	<u>ecode</u>
		1		0 - 8 years
		2		9 - 11 years
		3		12 years
		4		13 - 15 years
		5		16 years and over
		6		Not stated
42	1	DMARIMP		
		<u>Marital Status</u>	of Moth	er Imputation Flag
		Blank		Marital status is not imputed
		1		Marital status is imputed
43	1	<u>DMAR</u> <u>Marital Status (</u>	of Moth	<u>er</u>
		Marital status i	s not rep	orted by all areas. See reporting flags.
		United States/V	irgin Is	ands/Guam Occurrence
		1		Married
		2		Unmarried
		9		Unknown or not stated
		<u>Puerto Rico Oc</u>	currenc	
		1		Married
		2		Unmarried parents living together
		3		Unmarried parents not living together
		9		Unknown or not stated

Item LocationLength	Item	Variable Name, Item and Code Outline		
44-45	2	<u>MPLBIR</u> <u>Place of Birth of</u>	f Mother	
		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

Item <u>LocationLen</u>	Item <u>gth</u>	Variable Name, Item and Code Outline
44-45	2	<u>MPLBIR</u> <u>Place of Birth of Mother (Cond't)</u>
		50Wisconsin51Wyoming52Puerto Rico53Virgin Islands54Guam55Canada56Cuba57Mexico59Remainder of the World
46	1	99Not ClassifiableMPLBIRRPlace of Birth of Mother Recode
		United States Occurrence1Born in the 50 States and D.C.2Born outside the 50 States and DC3Unknown or not stated
		Puerto Rico/Virgin Island/ Guam OccurrenceBlankThis item not recorded
47-48	2	DTOTORD Detail Total Birth Order
		Sum of live birth order and other terminations of pregnancy. If either item is unknown, this item is made unknown.
		01-40Total number of live births and other terminations of pregnancy99Unknown
49-50	2	DLIVORD Detail Live Birth Order
		Sum of live births now living and now dead plus one. If either item is

Sum of live births now living and now dead plus one. If either item is unknown, this item is made unknown.

00-31	 Number of children born alive to mother
99	 Unknown

Item LocationLength	Item	Variable Name, Item and Code Outline		
51-52	2	<u>MONPRE</u> Detail Month of Pr	<u>MONPRE</u> Detail Month of Pregnancy Prenatal Care Began	
		$\begin{array}{cccccccccccccccccccccccccccccccccccc$	1st month 2nd month 3rd month 4th month 5th month 6th month	
		09 99	9th month	
53	1		<u>MPRE5</u> <u>Month Prenatal Care Began Recode 5</u>	
54-55	2	1 2 3 4 5 <u>NPREVIST</u>	2nd Trimester (4th-6th month) 3rd Trimester (7th-9th month) No prenatal care	
		Total Number of P	No monotol visito	
		01-48 49 99	Stated number of visits 49 or more visits	
56	1	<u>ADEQUACY</u> <u>Adequacy of Care</u>	ADEQUACY Adequacy of Care Recode (Kessner Index)	
			on a modified Kessner criterion. Month Prenatal Care Prenatal Visits, and Gestation are the items used to	
		$ \begin{array}{cccccccccccccccccccccccccccccccccccc$	Adequate Intermediate Inadequate Unknown	
57-59	3	<u>R1</u> <u>Reserved Positions</u>		

Item LocationLength	Item	Variable Name, (tem and Code Outline		
60	1	<u>FAGERFLG</u> <u>Reported Age of Father Used Flag</u>		
		This position is flagged whenever the Father's reported age in years is used. The reported age is used, if valid, when age derived from date of birth is not available or when it is less than 10.		
		BlankReported age is not used1Reported age is used		
61-62	2	DFAGE Age of Father		
		This item is either computed from date of birth of father and of child or is the reported age. This is the age item used in NCHS publications.		
		10-98Age in single years99Unknown or not stated		
63	1	<u>ORFATH</u> <u>Hispanic Origin of Father</u>		
		Hispanic origin is reported for all areas except Puerto Rico.		
		0Non-Hispanic1Mexican2Puerto Rican3Cuban4Central or South American5Other and unknown Hispanic9Origin unknown or not stated		
64	1	<u>ORRACEF</u> <u>Hispanic Origin and Race of Father Recode</u>		
		Hispanic origin is reported for all areas except Puerto Rico.		
		1Mexican2Puerto Rican3Cuban4Central or South American5Other and unknown Hispanic6Non-Hispanic White7Non-Hispanic Black8Non-Hispanic other or unknown race9Origin unknown or not stated		

Item LocationLength	Item	Item and	Variable Name, <u>l Code Outline</u>			
65-66	2		<u>FRACE</u> Race of Father			
		Beginning with 1992 data, some areas started reporting additional Asian or Pacific Islander codes for race. See reporting flags. Codes 18-68 replace old code 08 for these areas. Code 78 replaces old code 08 for all other areas. Code 09 (all other races) has been changed to 99.				
			United States	Occurre	nce	
			01		White	
			02		Black	
			03		American Indian (includes Aleuts and Eskimos)	
			04		Chinese	
			05		Japanese	
			06		Hawaiian (includes part-Hawaiian)	
			07		Filipino	
			18		Asian Indian	
			28		Korean	
			38		Samoan	
			48		Vietnamese	
			58		Guamanian	
			68		Other Asian or Pacific Islander	
					in areas reporting codes 18-58	
			78		Combined other Asian or Pacific Islander, includes codes 18-68 for areas that do not report them	
					separately	
			99		Unknown or not stated	
		Puerto Rico O				
			$\frac{1}{00}$		Other races	
			01		White	
			02		Black	
			99		Unknown or not stated	
	Virgin Islands Occurrence				nce	
			01		White	
			02		Black	
			03		American Indian (includes Aleuts and Eskimos)	
			04		Chinese	
			05		Japanese	
			06		Hawaiian (includes part-Hawaiian)	
			07		Filipino	
			08		Other Asian or Pacific Islander	
			99		Unknown or not stated	

Item LocationLength	Item	Variable Name, Item and Code Outline		
65-66	2	<u>FRACE</u> <u>Race of Father (Cond</u>	<u>'t)</u>	
		Guam Occurrence           01            02            03            04            05            06            07            08	White Black American Indian (includes Aleuts and Eskimos) Chinese Japanese Hawaiian (includes part-Hawaiian) Filipino Other Asian or Pacific Islander	
		58 99	Guamanian Unknown or not stated	
67	1	<u>PLDEL</u> Place or Facility of De		
		$ \begin{array}{cccccccccccccccccccccccccccccccccccc$	Hospital Freestanding Birthing Center Clinic or Doctor's Office A Residence Other Unknown or Not Stated	
68	1	<u>BIRATTND</u> <u>Attendant at Delivery</u>		
		$ \begin{array}{cccccccccccccccccccccccccccccccccccc$	Doctor of Medicine (M.D.) Doctor of Osteopathy (D.O.) Certified Nurse Midwife (C.N.M.) Other Midwife Other Unknown or not stated	
69	1	<u>R2</u> Reserved position		
70	1	This position is flagged is used when gestation	GESTESTM Clinical Estimate of Gestation Used Flag This position is flagged whenever the clinical estimate of gestation is used. It is used when gestation could not be computed or when the computed gestation is outside the 17-47 code range.	
		Dlagl	Clinical Estimate is not used	

Blank	 Clinical Estimate is not used
1	 Clinical Estimate is used

Item LocationLength	Item	Item and	Variable Name, d Code Outline		
71-72	2		<u>CLINGEST</u> <u>Clinical Estimat</u>	te of Ges	tation
			Clinical estimat See reporting fl		eported by all areas.
			17-47 99	 	Estimated gestation in weeks Unknown or not stated
73	1		<u>GESTIMP</u> Gestation Imput	tation Fl	ag
			Blank 1	 	Gestation is not imputed Gestation is imputed
74-75	2		<u>GESTAT</u> Gestation - Deta	il in We	<u>eks</u>
			menses; b) impo when there is in	uted from sufficien	l using dates of birth of child and last normal a LMP date; c) the clinical estimate; or d) unknown t data to impute or no valid clinical estimate. This is n NCHS publications.
			17-47 99	 	17th through 47th week of gestation Unknown
76-77	2		<u>GESTAT 10</u> GESTATION R	ECODE	<u>2 10</u>
			01 02 03 04 05 06 07 08 09 10	··· ··· ··· ··· ···	Under 20 weeks 20 - 27 weeks 28 - 31 weeks 32 - 35 weeks 36 weeks 37 - 39 weeks 40 weeks 41 weeks 42 weeks and over Not stated
78	1		<u>CSEXIMP</u> Sex Imputation	Flag	
			Blank 1	 	Sex is not imputed Sex is imputed
79	1		<u>CSEX</u> <u>Sex</u>		
			1 2	···· ···	Male Female

Item LocationLength	Item	Variable I Item and Code Ou		
80-87	8	BIRTHV	VEIGHT	
		reduce p 1995 dat imputati	ootential bias in the intra- ta year in the intr on flag can be us	nputation for not-stated birthweight was added to he data (see section on Changes beginning with the roductory text to this documentation). The following sed to delete imputed values for those researchers rted birthweight data.
80	1	<u>BWIF</u> <u>Birth We</u>	eight Imputation	<u>ı Flag</u>
		Blank		Birthweight is not imputed
		1		Birthweight is imputed
81-84	4	DBIRW	<u>r</u>	
		<u>Birth We</u>	eight Detail in G	rams (Imputed)
		0227-81	65	Number of grams
		9999		Not stated birth weight
				Not stated birth weight
85-86	2	BIRWT1		
		<u>Birth We</u>	eight Recode 12	(Imputed)
		01		499 grams or less
		02		500-999 grams
		03		1000-1499 grams
		04		1500-1999 grams
		05		2000-2499 grams
		06		2500-2999 grams
		07		3000-3499 grams
		08		3500-3999 grams
		09		4000-4499 grams
		10		4500-4999 grams
		11		5000-8165 grams
		12		Unknown or not stated
87 1		<b>BIRWT4</b>		
07 1			eight Recode 4 (	Imputed)
		1		1499 grams or less
		2		1500-2499 grams
		3		2500 grams or more
		4		Unknown or not stated
88	1	PLURIM	IP	
			<u>Imputation Fla</u>	g
		Blank		Plurality is not imputed
		1		Plurality is imputed

Item LocationLength	Item	Variable Name, Item and Code Outline
89	1	DPLURAL Plurality
		1Single2Twin3Triplet4Quadruplet5Quintuplet or higher
90-91	2	<u>FMAPS</u> <u>Five-Minute Apgar Score</u>
		Apgar score is not reported by all areas. See reporting flags.
		00-10          A score of 0-10           99          Unknown or not stated
92-186 95		<u>MEDINFO</u> <u>Medical and Health Data</u>
		Some States do not report an entire item while other States do not report all of the categories within an item. If an item is not reported, it is indicated by code zero in the appropriate reporting flag. If a category within an item is not reported it is indicated by code 8 in the position for that category.
92-99	8	DELMETH Method of Delivery
		Each method is assigned a separate position, and the code structure for each method (position) is:
		1 The method was used
		2The method was not used8Method not on certificate
		9 Method not on certificate 9 Method unknown or not stated
92	1	<u>VAGINAL</u> <u>Vaginal</u>
93	1	<u>VBAC</u> Vaginal Birth After Previous C-Section
94	1	PRIMAC Primary C-Section
95	1	REPEAC Repeat C-Section
96	1	FORCEP Forceps

Item LocationLength	Item	Item and	Variable Name, d Code Outline		
97	1		<u>VACUUM</u> Vacuum		
98	1		<u>R3</u> <u>Reserved Position</u>	<u>n</u>	
99	1		<u>DELMETH5</u> <u>Method of Delive</u>	ery Reco	ode
			2 3 4	··· ··· ···	Vaginal (excludes Vaginal after previous C-section) Vaginal birth after previous C section Primary C-section Repeat C-Section Not stated
100-117 18		<u>MEDR</u>	<u>ISK</u> Medical Risk Fac	<u>ctors</u>	
			Each risk factor i each risk factor (		ned a separate position, and the code structure for n) is:
			2 8	  	Factor reported Factor not reported Factor not on certificate Factor not classifiable
100	1		<u>MRFLAG</u> <u>No Medical Risk</u>	Factors	s Reported Flag
			2		One or more medical risk factors coded, one, eight, or nine No medical risk factors reported. Each factor is
101	1		<u>ANEMIA</u> Anemia (Hct.<30	)/Hgb.<	coded a two. <b>10</b> )
102	1		<u>CARDIAC</u> Cardiac disease		
103	1		<u>LUNG</u> Acute or chronic	lung di	isease
104	1		<u>DIABETES</u> <u>Diabetes</u>		
105	1		<u>HERPES</u> Genital herpes		
106	1		<u>HYDRA</u> Hydramnios/Olig	gohydra	amnios

Item LocationLengt	100111	Variable Name, Item and Code Outline
107	1	<u>HEMO</u> Hemoglobinopathy
108	1	<u>CHYPER</u> <u>Hypertension, chronic</u>
109	1	<u>PHYPER</u> Hypertension, pregnancy-associated
110	1	ECLAMP Eclampsia
111	1	INCERVIX Incompetent cervix
112	1	<u>PRE4000</u> <u>Previous infant 4000+ grams</u>
113	1	<u>PRETERM</u> <u>Previous preterm or small-for-gestational-age infant</u>
114	1	<u>RENAL</u> <u>Renal disease</u>
115	1	<u>RH</u> <u>Rh sensitization</u>
116	1	<u>UTERINE</u> Uterine bleeding
117	1	OTHERMR Other Medical Risk Factors
118-128	11	OTHERRSK Other Risk Factors for this Pregnancy
118-121	4	<u>TOBACRSK</u> <u>Tobacco Risks</u>
118	1	<u>TOBACCO</u> <u>Tobacco Use During Pregnancy</u>
		1Yes2No9Unknown or not stated
119-120	2	<u>CIGAR</u> <u>Average Number of Cigarettes Per Day</u>
		00-97As stated9898 or more cigarettes per day99Unknown or not stated

Item LocationLength	Item <u>1</u>	Variable Nam Item and Code Outline	e,	
121	1	<u>CIGAR6</u> <u>Average Nun</u>	ber of Cigare	ttes Per Day Recode
		0 1 2 3 4 5 6	1- 6- 11 21 41	on-smoker 5 cigarettes per day 10 cigarettes per day -20 cigarettes per day -40 cigarettes per day or more cigarettes per day nknown or not stated
122-125	4	<u>ALCOHRSK</u> <u>Alcohol</u>		
122	1	<u>ALCOHOL</u> <u>Alcohol Use I</u>	During Pregna	ncy
		1 2 9	Yo No Ut	
123-124	2	<u>DRINK</u> <u>Average Nun</u>	ber of Drinks	Per Week
		00-97 98 99	98	s stated 8 or more drinks per week nknown or not stated
125	1	<u>DRINK5</u> <u>Average Nun</u>	ber of Drinks	<u>Per Week Recode</u>
		0 1 2 3 4 5	1 c 2 c 3- 5 c	on-drinker drink per week drinks per week 4 drinks per week or more drinks per week nknown or not stated
126-128	3	WTGANRSE Weight Gain	During Pregn	ancy
126-127	2	<u>WTGAIN</u> Weight Gain		
		00-97 98 99	98	ated number of pounds pounds or more nknown or not stated

1998
Denominator Record and Natality Section of Numerator (Linked) Record

Item LocationLength	Item	Variable Name, Item and Code Outline	
128	1	<u>WTGAIN9</u> Weight Gain Recoo	de
		$ \begin{array}{cccccccccccccccccccccccccccccccccccc$	16-20 pounds 21-25 pounds 26-30 pounds 31-35 pounds 36-40 pounds 41-45 pounds 46 or more pounds
129-136	8	<u>OBSTETRC</u> <u>Obstetric Procedur</u>	res
		Each procedure is a each procedure (po	assigned a separate position, and the code structure for osition) is:
		$     \begin{array}{ccccccccccccccccccccccccccccccccc$	Procedure not reported Procedure not on certificate Procedure not alogsificable
129	1	<u>OBFLAG</u> Obstetric Flag	
		Blank 2	or nine No obstatria proceduras reported. Each factor is
130	1	<u>AMNIO</u> <u>Amniocentesis</u>	
131	1	<u>MONITOR</u> Electronic fetal mo	onitoring
132	1	<u>INDUCT</u> Induction of labor	
133	1	<u>STIMULA</u> Stimulation of labo	<u>)r</u>
134	1	<u>TOCOL</u> <u>Tocolysis</u>	
135	1	<u>ULTRAS</u> <u>Ultrasound</u>	
136	1	<u>OTHEROB</u> Other Obstetric Pr	<u>rocedures</u>

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Denominator Record and Natality Section of Numerator (Linked) Record

Item LocationLength	Item	Variable Name, (tem and Code Outline
137-153	17	LABOR Complications of Labor and/or Delivery
		Each complication is assigned a separate position, and the code structure for each complication (position) is:
		1Complication reported2Complication not reported8Complication not on certificate9Complication not classifiable
137	1	FBFLAG Labor Flag
		BlankOne or more labor and/or delivery complications coded, one, eight, or nine2No labor and/or delivery complication reported. Each factor is coded a two.
138	1	<u>FEBRILE</u> Febrile (>100 degrees F. or 38 degrees C.)
139	1	<u>MECONIUM</u> <u>Meconium, moderate/heavy</u>
140	1	<u>RUPTURE</u> <u>Premature rupture of membrane (&gt;12 hours)</u>
141	1	ABRUPTIO Abruptio placenta
142	1	<u>PREPLACE</u> <u>Placenta previa</u>
143	1	EXCEBLD Other excessive bleeding
144	1	<u>SEIZURE</u> Seizures during labor
145	1	<u>PRECIP</u> <u>Precipitous labor (&lt;3 hours)</u>
146	1	<u>PROLONG</u> <u>Prolonged labor (&gt;20 hours)</u>
147	1	DYSFUNC Dysfunctional labor
148	1	BREECH Breech/Malpresentation

Item LocationLengt	Item th	Variable Name, Item and Code Outline
149	1	<u>CEPHALO</u> Cephalopelvic disproportion
150	1	<u>CORD</u> <u>Cord prolapse</u>
151	1	ANESTHE Anesthetic complications
152	1	DISTRESS Fetal distress
153	1	OTHERLB Other Complications of Labor and/or Delivery
154-163	10	<u>NEWBORN</u> Abnormal conditions of the Newborn
		Each condition is assigned a separate position, and the code structure for each condition (position)is:
		1Condition reported2Condition not reported8Condition not on certificate9Condition not classifiable
154	1	<u>NBFLAG</u> Newborn Flag
		BlankOne or more abnormal conditions of the newborn coded, one, eight, or nine2No abnormal condition of the newborn reported. Each factor is coded a two.
155	1	<u>NANEMIA</u> <u>Anemia Hct.&gt;39/Hgb.&lt;13)</u>
156	1	<u>INJURY</u> <u>Birth injury</u>
157	1	<u>ALCOSYN</u> <u>Fetal alcohol syndrome</u>
158	1	<u>HYALINE</u> <u>Hyaline membrane disease</u>
159	1	MECONSYN Meconium aspiration syndrome
160	1	<u>VENL30</u> Assisted ventilation, less than 30 minutes

Item LocationLength	Item	Variable Name, I Code Outline
161	1	<u>VEN30M</u> Assisted ventilation, 30 minutes or more
162	1	<u>NSEIZ</u> <u>Seizures</u>
163	1	OTHERAB Other Abnormal Conditions of the Newborn
164-186	23	CONGENIT Congenital Anomalies
		Each anomaly is assigned a separate position, and the code structure for each anomaly (position) is:
		1Anomaly reported2Anomaly not reported8Anomaly not on certificate9Anomaly not classifiable
164	1	CGFLAG Congenital Flag
		BlankOne or more congenital anomalies coded, one, eight, or nine2No congenital anomaly is reported. Each factor is coded a two.
165	1	ANEN Anencephalus
166	1	<u>SPINA</u> <u>Spina bifida/Meningocele</u>
167	1	HYDRO Hydrocephalus
168	1	MICROCE Microcephalus
169	1	<u>NERVOUS</u> Other central nervous system anomalies
170	1	HEART Heart malformations
171	1	<u>CIRCUL</u> <u>Other circulatory/respiratory anomalies</u>
172	1	RECTAL Rectal atresia/stenosis

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Denominator Record and Natality Section of Numerator (Linked) Record

Item LocationLength	Item	Item and	Variable Name, d Code Outline
173	1		<u>TRACHEO</u> Tracheo-esophageal fistula/Esophageal atresia
174	1		<u>OMPHALO</u> Omphalocele/Gastroschisis
175	1		<u>GASTRO</u> Other gastrointestinal anomalies
176	1		<u>GENITAL</u> Malformed genitalia
177	1		<u>RENALAGE</u> Renal agenesis
178	1		<u>UROGEN</u> Other urogenital anomalies
179	1		<u>CLEFTLP</u> <u>Cleft lip/palate</u>
180	1		<u>ADACTYLY</u> Polydactyly/Syndactyly/Adactyly
181	1		CLUBFOOT Club foot
182	1		<u>HERNIA</u> Diaphragmatic hernia
183	1		<u>MUSCULO</u> Other musculoskeletal/integumental anomalies
184	1		<u>DOWNS</u> Down's syndrome
185	1		<u>CHROMO</u> Other chromosomal anomalies
186	1		<u>OTHERCON</u> Other congenital anomalies
187-203	17		<u>FLRES</u> Reporting Flags for Place of Residence
			These positions contain flags to indicate whether or not the included on the birth certificate of the State of residence of residence.

the specified item is or of the SMSA of residence. The code structure of each flag (position) is:

0	 The item is not reported
1	 The item is reported or partially reported.

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Denominator Record and Natality Section of Numerator (Linked) Record

Item LocationLength	Item	Variable Name, Item and Code Outline
187	1	ORIGM Origin of mother
188	1	<u>ORIGF</u> <u>Origin of father</u>
189	1	<u>EDUCM</u> Education of mother
190	1	<u>R4</u> <u>Reserved Position</u>
191	1	<u>GESTE</u> <u>Clinical estimate of gestation</u>
192	1	<u>R5</u> <u>Reserved position</u>
193	1	<u>FMAPSRF</u> 5-minute Apgar score
194	1	DELMETRF Method of delivery
195	1	<u>MEDRSK</u> <u>Medical risk factors</u>
196	1	<u>TOBUSE</u> <u>Tobacco use</u>
197	1	ALCUSE Alcohol use
198	1	<u>WTGN</u> Weight gain
199	1	<u>OBSTRC</u> <u>Obstetric procedures</u>
200	1	<u>CLABOR</u> <u>Complications of labor and/or delivery</u>
201	1	ABNML Abnormal conditions of newborn
202	1	<u>CONGAN</u> Congenital anomalies
203	1	<u>API flag</u> <u>Race codes 18-68 reported (beginning with 1992 data)</u>

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Denominator Record and Natality Section of Numerator (Linked) Record

Item LocationLength	Item	Variable Name, Item and Code Outline		
204	1	<u>CDOBMIMP</u> Month of Birth of Child Imputation Flag		Imputation Flag
		Blank 1	····	Month is not imputed Month is imputed
205-206	2	<u>BIRMON</u> <u>Month of Birth</u>		
		01 02 03 04 05 06 07 08 09 10 11 12		January February March April May June July August September October November December
207-208	2	<u>R6</u> <u>Reserved Positi</u>	<u>on</u>	
209	1	<u>WEEKDAYB</u> Day of Week C	hild Bori	<u>n</u>
		1 2 3 4 5 6 7	··· ··· ··· ···	Sunday Monday Tuesday Wednesday Thursday Friday Saturday
210	1	<u>R7</u> <u>Reserved Positi</u>	<u>on</u>	

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#### Denominator Record and Mortality Section of Numerator (Linked) Record

Locations 211-535 contain data from the Death Certificate. Data in locations 211-222 are included on both the numerator and denominator-plus files. Data in locations 223-535 are include in the numerator file only. Residence items in the Denominator Record and in the natality section of the Numerator (Linked) Record refer to the usual place of residence of the Mother; whereas in the mortality section of the Numerator (Linked) Record, these items refer to the place of residence of the Decedent.

Item LocationLengtl	Item h	Variable Nar Item and Code Outlin		
211-213	3	<u>AGED</u> <u>Age at Deat</u> l	<u>h in Days</u>	
		death certifi reported ag	icate minus e of death i	eath in days is calculated from the date of death on the the date of birth on the birth certificate unless the s less than 2 days, then the reported age is used. If the /or death is unknown, the age is imputed.
		000-364		Number of days
214	1	<u>AGER5</u> Infant Age I	Recode 5	
		1 2 3 4 5	  	Under 1 hour 1-23 hours 1-6 days 7-27 days (late neonatal) 28 days and over (postneonatal)
215	1	<u>ACCIDPL</u> <u>Place of Acc</u>	ident for (	Causes E850-E869 and E880-E928
		Blank		Causes other than E850-E869 and E880-E928
		0		Home
		1		Farm
		2		Mine and quarry
		3		Industrial place and premises
		4		Place for recreation and sport
		5		Street and highway
		6		Public building
		7		Resident institution
		8		Other specified places
		9		Place of accident not specified
216-219	4	<u>UCOD</u>		

#### UCOD

#### ICD Code (9th Revision)

See the International Classification of Diseases, 1975 Revision, Volume 1. For injuries and poisoning, the external cause is coded (E800-E999) rather than the Nature of Injury (800-999). These positions do not include the letter E for the external cause of injury. For those causes that do not have a 4th digit, location 219 is blank.

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Denominator Record and Mortality Section of Numerator (Linked) Record

Item LocationLength	Item	Variable Name, <u>Item and Code Outline</u>
220-222 3		<u>UCODR61</u> <u>61 Infant Cause Recode</u>
		A recode of the ICD cause code into 61 groups for NCHS publications. Further back in this document is a complete list of recodes and the causes included.
		010-680 Code range (not inclusive)
223-230	8	<u>RECWT</u> <u>Record weight</u>
		Beginning in 1995, a record weight was added to the linked file to adjust for the approximately 2-3% of infant death records each year which cannot be linked to their corresponding birth certificates. Weights are generally slightly greater than 1.0 for infant death records, and are set at 1.0 for surviving live birth records. Weights are appropriate for us in some circumstances, but not others — please see <u>Introduction</u> for further details. The weights were used to produce all NCHS linked file tables, including Documentation tables 1-5 included in this tape documentation. The general format for the record weight is the number one followed by a decimal point and six decimal places as follows:
		1.XXXXXX

Here ends the Denominator file. Documentation for the Mortality Section of the Numerator (Linked) file begins with multiple conditions in positions 261-504.

			umerator (Linked) Record
Item LocationLength	Item	Variable Name Item and Code Outline	,
261-504	244		national Classification of Diseases", 1975 Revision, Volume 1. y-axis and record-axis conditions are coded according to this
261-262	2	<u>EANUM</u> <u>Number of En</u>	tity-Axis Conditions
		00-20	Code range
263-402	140	<u>ENTITY</u> ENTITY - AX	IS CONDITIONS
		-	n provided for a maximum of 20 conditions. Each condition ons in the record. Records that do not have 20 conditions are nused area.
		Position 1:	Part/line number on certificate
		1 2 3 4 5 6	Part I, line 1 (a)          Part I, line 2 (b)          Part I, line 3 (c)          Part I, line 4 (d)          Part I, line 5 (e)          Part II,
		Position 2:	Sequence of condition within part/line
		1-7	Code range
		Position 3 - 6:	Condition code (ICD 9th Revision)
		Position 7:	Nature of Injury Flag
		1 0	<ul><li>Indicates that the code in positions 3-6 is a Nature of Injury code</li><li>All other codes</li></ul>
263-269	7	1st Condition	
270-276	7	2nd Condition	
277-283 284-290	7 7	3rd Condition 4th Condition	
291-297	7	5th Condition	

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Item LocationLength	Item	Variable Name, Item and Code Outline	
298-304	7	6th Condition	
305-311	7	7th Condition	
312-318	7	8th Condition	
319-325	7	9th Condition	
326-332	7	10th Condition	
333-339	7	11th Condition	
340-346	7	12th Condition	
347-353	7	13th Condition	
354-360	7	14th Condition	
361-367	7	15th Condition	
368-374	7	16th Condition	
375-381	7	17th Condition	
382-388	7	18th Condition	
389-395	7	19th Condition	
396-402	7	20th Condition	
403-404	2	<u>RANUM</u> <u>Number of Rece</u>	ord-Axis Conditions
		00-20	Code range
405-504	100	<u>RECORD</u> RECORD - AX	IS CONDITIONS
			provided for a maximum of 20 conditions. Each condition in the record. Records that do not have 20 conditions are sed area.
		Positions 1-4: Position 5:	Condition code (ICD 9th Revision) Nature of Injury Flag
		1	Indicates that the code in positions 1-4 is a Nature of Injury code
		0	All other codes

Item LocationLength	Item	Variable Name, Item and Code Outline
405-409	5	1st Condition
410-414	5	2nd Condition
415-419	5	3rd Condition
420-424	5	4th Condition
425-429	5	5th Condition
430-434	5	6th Condition
435-439	5	7th Condition
440-444	5	8th Condition
445-449	5	9th Condition
450-454	5	10th Condition
455-459	5	11th Condition
460-464	5	12th Condition
465-469	5	13th Condition
470-474	5	14th Condition
475-479	5	15th Condition
480-484	5	16th Condition
485-489	5	17th Condition
490-494	5	18th Condition
495-499	5	19th Condition
500-504	5	20th Condition
505	1	RESSTATD Resident Status D

Resi	dent Statu	is - Death
Unit	ted States	Occurrence
1		RESIDENTS: State and county of occurrence and residence are the same.
2		INTRASTATE NONRESIDENTS: State of occurrence and residence are the same, but county is different.
3		INTERSTATE NONRESIDENTS: State of occurrence and residence are different, but both are in the 50 States and D.C.
4		FOREIGN RESIDENTS: State of occurrence is one of the 50 States or the District of Columbia, but place of residence is outside of the 50 States and D.C.

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## Mortality Section of Numerator (Linked) Record

Item LocationLength	Item	Variable I Item and Code Out		
505	1	<u>RESSTA</u> <u>Resident</u>	<u>TD</u> Status - Death	(Cond't)
		1 . 2 .	are the INTRA resider FORE	DENTS: State and county of occurrence and residence
		Virgin Is	lands Occurre	nce
		1		RESIDENTS: State and county of occurrence and
		2		residence are the same. INTRASTATE NONRESIDENTS: State of occurrence and residence are the same, but county is different.
		4		FOREIGN RESIDENTS: Occurred in the Virgin Islands to a resident of any other place.
		Guam Oo	<u>ccurrence</u>	
		1		RESIDENTS: Occurred in Guam to a resident of Guam or to a resident of the U.S.
		4		FOREIGN RESIDENTS: Occurred in Guam to a resident of any place other than Guam or the U.S.
506-507	2	This iten	d State of Resi	dence - NCHS Codes - Deaths o separately identify New York City records from ecords.
			States Occurre	
		01 02	•••	Alabama
		02 03		Alaska Arizona
		03		Arkansas
		05		California
		06		Colorado
		07		Connecticut
		08		Delaware
		09		District of Columbia
		10		Florida
		11		Georgia
		12		Hawaii Idaho
		14		10300

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Idaho

Illinois

Indiana

Kansas

Maine

Kentucky

Louisiana

Iowa

13

14

15

16

17

18

19

20

Item LocationLength	Item	Item and	Variable Name, d Code Outline		
506-507	2		DRSTATE	of Resid	ence - NCHS Codes - Deaths (Cond't)
			United States C	Jeeurran	-
			21		Maryland
			22	•••	Massachusetts
			22	•••	Michigan
			23	•••	Minnesota
			25	•••	Mississippi
			26	•••	Mississippi
			20	•••	Montana
			28	•••	Nebraska
			29	•••	Nevada
			30	•••	New Hampshire
			31	•••	New Jersey
			31	•••	New Mexico
			33	•••	New York
			34	•••	New York City
			35	•••	North Carolina
			36	•••	North Dakota
				•••	Ohio
			37	•••	
			38	•••	Oklahoma
			39		Oregon
			40	•••	Pennsylvania
			41	•••	Rhode Island
			42		South Carolina
			43	•••	South Dakota
			44	•••	Tennessee
			45		Texas
			46		Utah
			47		Vermont
			48		Virginia
			49		Washington
			50		West Virginia
			51		Wisconsin
			52		Wyoming
			53-58,60		Foreign Residents
			53		Puerto Rico
			54		Virgin Islands
			55		Guam
			56		Canada
			57		Cuba
			58		Mexico
			60		Remainder of the World
			Puerto Rico Occ	urrence	
			53		Puerto Rico
			01-52,54-58,60		Foreign Residents: Refer to U.S. for specific code
					structure.

Item LocationLength	Item	Variable Name Item and Code Outline	,	
506-507	2	<u>DRSTATE</u> Expanded Stat	te of Resi	dence - NCHS Codes - Deaths (Cond't)
		<u>Virgin Islands</u> 54 01-53,55-58,6 <u>Guam Occurr</u> 55 01-52 53,54,58,60	 i0	nce Virgin Islands Foreign Residents: Refer to U.S. for specific code structure. Guam U.S. resident is also considered a resident of Guam. Foreign Residents: Refer to U.S. for specific code structure.
508-512 5				ocessing Standards les (Occurrence) - Death
		detailed list of	f areas and le to vario	c Code Outline further back in this document for a d codes. For an explanation of FIPS codes, reference ous National Institute of Standards and Technology
508-509	2	STOCCFIPD State of Occur	rence (FI	PS) - Death
		$\begin{array}{c} \mbox{United States}\\ 01\\ 02\\ 04\\ 05\\ 06\\ 08\\ 09\\ 10\\ 11\\ 12\\ 13\\ 15\\ 16\\ 17\\ 18\\ 19\\ 20\\ 21\\ 22\\ 23\\ 24\\ 25\\ 26\\ 27\\ 28\\ 29\\ 30\\ \end{array}$		Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware District of Columbia Florida Georgia Hawaii Idaho Illinois Indiana Iowa Kansas Kentucky Louisiana Maine Maryland Massachusetts Michigan Minnesota Mississippi Missouri Montana

Item LocationLength	Item	Variable Name, Item and Code Outline		
508-509	2	<u>STOCCFIPD</u> State of Occurre	ence (FI	PS) - Death (Cond't)
		<b>United States</b>		
		31		Nebraska
		32		Nevada
		33		New Hampshire
		34		New Jersey
		35		New Mexico
		36	•••	New York
		37		North Carolina
		38		North Dakota
		39		Ohio
		40		Oklahoma
		41		Oregon
		42	•••	Pennsylvania
		44	•••	Rhode Island
		45		South Carolina
		46	•••	South Dakota
		47		Tennessee
		48		Texas
		49		Utah
		50		Vermont
		51		Virginia
		53		Washington
		54		West Virginia
		55		Wisconsin
		56		Wyoming
		<b>Puerto Rico</b>		
		72		Puerto Rico
		Virgin Islands		
		78		Virgin Islands
		<u>Guam</u>		
		66		Guam
510-512	3	<u>CNTOCFIPD</u> County of Occur	rrence (	FIPS) - Death
		001-nnn		Counties and county equivalents (independent and coextensive cities) are numbered alphabetically within each State. (Note: To uniquely identify a county, both the State and county codes must be used.)

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used.)

County with less than 250,000 population

Item LocationLength	Item	Variab Item and Code	le Name, <u>Outline</u>	
513-517 5		(Resid	ence) - Death	rocessing Standards (FIPS) Geographic Codes
		detail shoul	ed list of areas ar	ic Code Outline further back in this document for a ad codes. For an explanation of FIPS codes, reference tous National Institute of Standards and Technology
513-514	2		<u>SFIPD</u> of Residence (FII	PS) - Death
		Unite	ed States Occurr	
		00		Foreign residents
		01		Alabama
		02		Alaska
		04		Arizona
		05		Arkansas
		06		California
		08		Colorado
		09		Connecticut
		10		Delaware
		11		District of Columbia
		12		Florida
		13		Georgia
		15		Hawaii
		16		Idaho
		17		Illinois
		18		Indiana
		19		Iowa
		20	•••	Kansas
		20	•••	Kentucky
		21 22		Louisiana
		22		Maine
		23		Maryland
		24		Massachusetts
		26		Michigan
		20		Minnesota
		27 28	•••	Mississippi
		28 29	•••	**
		29 30		Missouri
				Montana
		31		Nebraska
		32		Nevada
		33		New Hampshire
		34		New Jersey
		35	•••	New Mexico
		36		New York
		37		North Carolina
		38		North Dakota
		39		Ohio
		40		Oklahoma

Item LocationLength	Item	Variable Name, Item and Code Outline		
513-514	2	<u>STRESFIPD</u> State of Reside	nce (FIP)	S) - Death (Cond't)
		<b>United States</b>	Occurre	
		41		Oregon
		42		Pennsylvania
		44	•••	Rhode Island
		45	•••	South Carolina
		46		South Dakota
		47		Tennessee
		48		Texas
		49		Utah
		50		Vermont
		51		Virginia
		53		Washington
		54		West Virginia
		55		Wisconsin
		56		Wyoming
		<b>Puerto Rico C</b>	lecurren	ra
		<u>72</u>		Puerto Rico
		00-56, 66,78		Foreign resident: Refer to U.S. for specific code
		00 50, 00,70		structure.
		Virgin Islands	6 Occurr	ence
		78		Virgin Islands
		00-56, 66,72		Foreign resident: Refer to U.S. for specific code
				structure.
		Guam Occurr	ence	
		66		Guam
		01-56,		ouun
		00,72,78		Foreign resident: Refer to U.S. for specific code
				structure.
515-517	3	CNTYRFPD		
010 017	C	County of Resid	dence (F	IPS) - Death
		000		Province and Insta
		000 001 nnn	•••	Foreign residents
		001-nnn	•••	Counties and county equivalents (independent and
				coextensive cities) are numbered alphabetically
				within each State (Note: To uniquely identify a
				county, both the State and county codes must be
				used.) A complete list of counties is shown in the
				Geographic Code Outline further back in this

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document.

County with less than 250,000 population

		Moltanty Section of INU	merator	(Liliked) Recold
Item LocationLength	Item	Variable Name, Item and Code Outline		
518-522	5	<u>PLRES</u> Place (City) of F	Residen	ice (FIPS)
		A complete list in this documen		s is shown in the Geographic code outline further back
		00000 00001-nnnnn 99999	 	Foreign residents Code range Balance of county; or city less than 250,000 population
523	1	<u>HOSPD</u> <u>Hospital and Pa</u>	tient S	tatus
		1 2 3	 	Hospital, Clinic or Medical Center - Inpatient Hospital, Clinic or Medical Center - Outpatient or admitted to Emergency Room Hospital, Clinic or Medical Center - Dead on
		4		arrival Hospital, Clinic or Medical Center - Patient status unknown Nursing home
524 527	4	6 7 9	 	Residence Other Place of death unknown
524-527	4	<u>DTHYR</u> <u>Year of Death</u>		
		1998 1999	 	Death occurred in 1998 Death occurred in 1999
528-529	2	<u>DTHMON</u> <u>Month of Death</u>		
		01 02 03 04 05 06 07 08 09 10 11 12	··· ··· ··· ··· ··· ···	January February March April May June July August September October November December
530-531	2	<u>R8</u> <u>Reserved Positio</u>	<u>on</u>	

Item LocationLength	Item		ariable Name, ode Outline		
532	1		<u>EEKDAYD</u> ay of Week of 1	Death	
		1			Sunday
		2			Monday
		3	3		Tuesday
		4	ŀ		Wednesday
		5	5		Thursday
		6	5		Friday
		7	7		Saturday
		9	)		Unknown
533-535	3	<u>R</u>	<u>9</u> eserved positio	o <u>ns</u>	

## 1998 Linked Birth/Infant Death Data Set — Birth Cohort

## Geographic Code Outline

The following pages show the geographic codes used by the Division of Vital Statistics in the processing of vital event data occurring in the United States. For the linked data set, counties and cities with a population of 250,000 or more are identified.

<u>Federal Information Processing Standards (FIPS) State, County, and City/Place Codes:</u> For the 1998 birth cohort linked file, the county and city/place codes and the State code immediately preceding them are FIPS codes. These codes were effective with the 1994 data year and are based on the results of the 1990 Census. County and county equivalents (independent and coextensive cities) are numbered alphabetically within each State. When an event occurs to a nonresident of the United States, residence data are coded only to the "State" level, or to the remainder of the world. For an explanation of FIPS codes, reference should be made to various National Bureau of Standards (NBS) publications.

### Listing of Counties Identified in the Linked Data Set

- State County State and County Name 01 Alabama 073 Jefferson 097 Mobile 02 Alaska 04 Arizona 013 Maricopa 019 Pima 05 Arkansas 119 Pulaski 06 California 001 Alameda 013 Contra Costa 019 Fresno 029 Kern 037 Los Angeles 053 Monterey 059 Orange Riverside 065 067 Sacramento 071 San Bernardino 073 San Diego 075 San Francisco, coext. with San Francisco city 077 San Joaquin 081 San Mateo 083 Santa Barbara 085 Santa Clara 095 Solano Sonoma 097 099 Stanislaus Tulare 107
  - 111 Ventura

# Listing of Counties Identified in the Linked Data Set

State	County	State and County Name
08		Colorado
00	001	Adams
	005	Arapahoe
	031	Denver, coext. with Denver city
		•
	041	El Paso
	059	Jefferson
09		Connecticut
07	001	Fairfield
	001	Hartford
	009	New Haven
	011	New London
	011	
10		Delaware
	003	New Castle
11		District of Columbia
11	001	District of Columbia
	001	District of Columbia
12		Florida
	009	Brevard
	011	Broward
	025	Dade
	031	Duval
	033	Escambia
	057	Hillsborough
	071	Lee
	095	Orange
	099	Palm Beach
	101	Pasco
	103	Pinellas
	105	Polk
	115	Sarasota
	117	Seminole
	127	Volusia
13		Georgia
	067	Cobb

089	De Kalb
121	Fulton
135	Gwinnett
Listi	ng of Counties Identified in the Linked Data Set

State	County	State and County Name
15		Hawaii
	003	Honolulu
16		Idaho
17		Illinois
	031	Cook
	043	Du Page
	089	Kane
	097	Lake
	163	St. Clair
	197	Will
	201	Winnebago
18		Indiana
	003	Allen
	089	Lake
	097	Marion
19		Iowa
	153	Polk
20		Kansas
	091	Johnson
	173	Sedgwick
21		Kentucky
	111	Jefferson
22		Louisiana
	033	East Baton Rouge
	051	Jefferson
	071	Orleans, coext. with New Orleans city
23		Maine
24		Maryland

- 005 Baltimore
- 510 Baltimore city
- 031 Montgomery

County

State

Listing of Counties Identified in the Linked Data Set

State and County Name

Stute	county	State and County
24		Maryland
24	033	Prince George's
	055	Finice George's
25		Massachusetts
	005	Bristol
	009	Essex
	013	Hampden
	017	Middlesex
	021	Norfolk
	023	Plymouth
	025	Suffolk
	027	Worcester
26		Michigan
26	049	Michigan Genesee
	049	
	003	Ingham Kent
	081	Macomb
	125	Oakland
	123	Washtenaw
	161	Wayne
	105	wayne
27		Minnesota
	037	Dakota
	053	Hennepin
	123	Ramsey
28		Mississippi
20	049	Hinds
	047	Timus
29		Missouri
	095	Jackson
	189	St. Louis
	510	St. Louis city
30		Montana

31		Nebraska
	055	Douglas

## Listing of Counties Identified in the Linked Data Set

State	County	State and County Name
32		Nevada
	003	Clark
	031	Washoe
33		New Hampshire
55	011	Hillsborough
	011	Imisorougn
34		New Jersey
	003	Bergen
	005	Burlington
	007	Camden
	013	Essex
	017	Hudson
	021	Mercer
	023	Middlesex
	025	Monmouth
	027	Morris
	029	Ocean
	031	Passaic
	039	Union
35	ז	New Mexico
50	001	Bernalillo
	001	
36		New York
	001	Albany
	027	Dutchess
	029	Erie
	055	Monroe
	059	Nassau
	085	Staten Island borough, Richmond county
	081	Queens borough, Queens county
	061	Manhattan borough, New York county
	047	Brooklyn borough, Kings county
	005	Bronx borough, Bronx county

- 065 Oneida
- 067 Onondaga
- 071 Orange
- 087 Rockland
- 103 Suffolk
- 119 Westchester

Listing of Counties Identified in the Linked Data Set

State	County	State and County Name
37		North Carolina

- 051 Cumberland
- 067 Forsyth
- 081 Guilford
- 119 Mecklenburg
- 183 Wake
- 38 North Dakota

39		Ohio
	017	Butler
	035	Cuyahoga
	049	Franklin
	061	Hamilton
	093	Lorain
	095	Lucas
	099	Mahoning
	113	Montgomery
	151	Stark
	153	Summit
40		Oklahoma
	109	Oklahoma
	143	Tulsa
41		Oregon
	005	Clackamas
	039	Lane
	051	Multnomah
	067	Washington
		C

42		Pennsylvania
	003	Allegheny
	011	Berks

017	Bucks
029	Chester
045	Delaware
049	Erie
071	Lancaster
077	Lehigh
079	Luzerne
	Listing of Counties Identified in the Linked Data Set

State	County	State and County Name
42		Pennsylvania
	091	Montgomery
	101	Philadelphia, coext. with Philadelphia city
	129	Westmoreland
	133	York
44		Rhode Island
	007	Providence
45		South Carolina
	019	Charleston
	045	Greenville
	079	Richland
46		South Dakota
47		Tennessee
	037	Davidson
	065	Hamilton
	093	Knox
	157	Shelby
48		Texas
	029	Bexar
	061	Cameron
	085	Collin
	113	Dallas
	121	Denton
	141	El Paso
	201	Harris
	215	Hidalgo
	355	Nueces
	439	Tarrant

49		Utah
	035	Salt Lake
	049	Utah

Travis

453

50 Vermont

## Listing of Counties Identified in the Linked Data Set

Vital Statistics Geographic Code Outline Effective With 1998 Data Page 8

State	County	State and County Name
51		Virginia
	059	Fairfax
	710	Norfolk city
	810	Virginia Beach city
53		Washington
	033	King
	053	Pierce
	061	Snohomish
	063	Spokane
54		West Virginia
55		Wisconsin
	025	Dane
	079	Milwaukee
	133	Waukesha

56 Wyoming

#### Listing of Counties Identified in the Linked Data Set Vital Statistics Geographic Code Outline Effective With 1998 Data Page 9 State County State and County Name 72 Puerto Rico 127 San Juan Virgin Islands 78 Guam 66 010 Canada 00 000 00 000 Cuba 00 Mexico 000 Remainder of World 00 000

	Listing	g of Cities/Places Identified in the Linked Data Set		
V	Vital Stat	istics Geographic Code Outline Effective With 1998 Data P	age	1
State	City/P	PS Codes Place Place and City/Place Name		
01	07000	Alabama Birmingham		
02		Alaska		
04	46000 55000 77000	Arizona Mesa Phoenix Tucson		
05		Arkansas		
06	02000 27000 43000 44000 53000 64000 66000 67000 68000 69000	California Anaheim Fresno Long Beach Los Angeles Oakland Sacramento San Diego San Francisco San Jose Santa Ana		
08	16000 20000	Colorado Colorado Springs Denver		
09		Connecticut		
10		Delaware		
11	50000	District of Columbia Washington		

	Listing of Cities/Places Identified in the Linked Data Set					
١	/ital Stat	tistics Geographic Code Outline Effective With 1998 Data	Page	2		
State	City/P	PS Codes Place tate and City/Place Name				
12	35000 45000 71000					
13	04000	Georgia Atlanta				
15	17000	Hawaii Honolulu				
16		Idaho				
17	14000	Illinois Chicago				
18	36000	Indiana Indianapolis				
19		Iowa				
20	79000	Kansas Wichita				
21	48000	Kentucky Louisville				
22	55000	Louisiana New Orleans				
23		Maine				
24	04000	Maryland Baltimore				
25	07000	Massachusetts Boston				

	Listing	g of Cities/Places Identified in the Linked Data Set		
V	ital Stat	istics Geographic Code Outline Effective With 1998 Data	Page	3
State	City/P	S Codes lace ate and City/Place Name		
26	22000	Michigan Detroit		
27	43000 58000	Minnesota Minneapolis St. Paul		
28		Mississippi		
29	38000 65000	Missouri Kansas City St. Louis		
30		Montana		
31	37000	Nebraska Omaha		
32	40000	Nevada Las Vegas		
33		New Hampshire		
34	51000	New Jersey Newark		
35	02000	New Mexico Albuquerque		
36	51000 11000 51000 51000 5100	Manhattan borough, New York county Queens borough, Queens county		

	Listing	g of Cities/Places Identified	d in the Linked Data Set		
V	/ital Stati	stics Geographic Code Ou	utline Effective With 1998 Data	Page	4
State	City/P	S Codes lace ate and City/Place Name			
37	12000	North Carolina Charlotte			
38		North Dakota			
39	15000 16000 18000 77000	Ohio Cincinnati Cleveland Columbus Toledo			
40	55000 75000	Oklahoma Oklahoma City Tulsa			
41	59000	Oregon Portland			
42	60000 61000	Pennsylvania Philadelphia Pittsburgh			
44		Rhode Island			
45		South Carolina			
46		South Dakota			
47	48000 52010	Tennessee Memphis Nashville-Davidson			
48	04000 05000 17000 19000 24000	Texas Arlington Austin Corpus Christi Dallas El Paso			

	Listing	g of Cities/Places Identified in the Linked Data Set	
,	Vital Stati	stics Geographic Code Outline Effective With 1998 Data	Page
State	City/Pl	S Codes lace ate and City/Place Name	
48	27000 35000 65000	Texas Fort Worth Houston San Antonio	
49		Utah	
50		Vermont	
51	57000 82000	Virginia Norfolk Virginia Beach	
53	63000	Washington Seattle	
54		West Virginia	
55	53000	Wisconsin Milwaukee	
56		Wyoming	

5

Listing of Cities/Places Identified in the Linked Data Set

Vital Statistic	cs Geographic Code	e Outline Effective	With 1998 Data	Page 6

FIPS Codes State City/Place State and City/Place Name					
72	00000	Puerto Rico			
78	00000	Virgin Islands			
66	00000	Guam			
00	00000	Canada			
00	00000	Cuba			
00	00000	Mexico			
00	00000	Remainder of World			

Length		Chapter 5 on 61 Causes of Death Adapted for use by DVS total Limited: Sex: 1 = Males; 2 = Females e Age: 1 = 5 & Over; 2 = 10-54; 3 = 28 Days & Over
	**** Cause	Subtotals are not Identified in this File *****
61	S Limited Len-	
Recode	T Sex Age gth	Cause Title And ICD-9 Codes Included
010	039	Certain intestinal infections (008-009)
020	020	Whooping cough (033)
030	029	Meningococcal infection (036)
040	3 016	Septicemia (038)
050	024	Viral diseases (045-079)
060	025	Congenital syphilis (090)
070	110	Remainder of infectious and parasitic
		diseases (001-007,010-032,034-035,037,039-041, *042-*044,080-088,091-139)
080	089	Malignant neoplasms, including neoplasms of lymphatic and hematopoietic tissues (140-208)
090	108	Benign neoplasms, carcinoma in situ, and neoplasms of
000	100	uncertain behavior and of unspecified nature (210-239)
100	030	Diseases of thymus gland (254)
110	023	Cystic fibrosis (277.0)
120	052	Diseases of blood and blood-forming organs (280-289)
130	020	Meningitis (320-322)
140	059	Other diseases of nervous system and sense organs (323-389)
150	044	Acute upper respiratory infections (460-465)
160	042	Bronchitis and bronchiolitis (466,490-491)
170	1 033	Pneumonia and influenza (480-487)
180	021	Pneumonia (480-486)
190	017	Influenza (487)
200	061	Remainder of diseases of respiratory system (470-478, 492-519)
210	093	Hernia of abdominal cavity and intestinal obstruction without mention of hernia (550-553,560)
220	075	Gastritis, duodenitis, and noninfective enteritis and colitis (535,555-558)
230	067	Remainder of diseases of digestive system (520-534,536-543,562-579)
240	1 030	Congenital anomalies (740-759)
250	042	Anencephalus and similar anomalies (740)

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260		020	Spina bifida (741)
270		034	Congenital hydrocephalus (742.3)
280		092	Other congenital anomalies of central nervous system and eye (742.0-742.2,742.4-742.9,743)
290		041	Congenital anomalies of heart (745-746)
300		056	Other congenital anomalies of circulatory system (747)
310		050	Congenital anomalies of respiratory system (748)
320		052	Congenital anomalies of digestive system (749-751)
330		056	Congenital anomalies of genitourinary system (752-753)
340		058	Congenital anomalies of musculoskeletal system (754-756)
350		025	Down's syndrome (758.0)
360		043	Other chromosomal anomalies (758.1-758.9)
370		062	All other and unspecified congenital anomalies (744,757,759)
380	1	064	Certain conditions originating in the perinatal period (760-779)
390		091	Newborn affected by maternal conditions which may be unrelated to present pregnancy (760)
400		063	Newborn affected by maternal complications of pregnancy (761)
410		074	Newborn affected by complications of placenta, cord, and membranes (762)
420		069	Newborn affected by other complications of labor and delivery (763)
430		048	Slow fetal growth and fetal malnutrition (764)
440		077	Disorders relating to short gestation and unspecified low birthweight (765)
450		065	Disorders relating to long gestation and high birthweight (766)
460		020	Birth trauma (767)
470	1	047	Intrauterine hypoxia and birth asphyxia (768)
480		051	Fetal distress in liveborn infant (768.2-768.4)
490		032	Birth asphyxia (768.5-768.9)
500		037	Respiratory distress syndrome (769)
510		047	Other respiratory conditions of newborn (770)
520		051	Infections specific to the perinatal period (771)
530		027	Neonatal hemorrhage (772)
540		094	Hemolytic disease of newborn, due to
			isoimmunization, and other perinatal jaundice (773-774)
550		088	Syndrome of "infant of a diabetic mother" and neonatal diabetes mellitus (775.0-775.1)
560		040	Hemorrhagic disease of newborn (776.0)
570		098	All other and ill-defined conditions originating in the perinatal period (775.2-775.9,776.1-779)

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580 590 600	1	053 038 075	<pre>Symptoms, signs, and ill-defined conditions (780-799) Sudden infant death syndrome (798.0) Symptoms, signs, and all other ill-defined conditions (780-797,798.1-799)</pre>
610	1	041	Accidents and adverse effects (E800-E949)
620		118	Inhalation and ingestion of food or other object causing obstruction of respiratory tract or suffocation (E911-E912)
630		042	Accidental mechanical suffocation (E913)
640		067	Other accidental causes and adverse effects (E800-E910,E914-E949)
650	1	020	Homicide (E960-E969)
660		047	Child battering and other maltreatment (E967)
670		038	Other homicide (E960-E966,E968-E969)
680		027	All other causes (Residual)

LIVE BIRTHS AND INFANT DEATHS BY STATE OF OCCURRENCE AND BY STATE OF RESIDENCE AT BIRTH UNITED STATES, PUERTO RICO, VIRGIN ISLANDS, AND GUAM - 1998 LINK BIRTH COHORT DATA

(RESIDENCE OF BIRTH IS OF THE MOTHER)								
	BIRTHS	I INFANT DEATHS						
			UNWEIGHTED   WEIGHTED 1/					
STATE	Occurrence	Residence	•	Residence		Residence		
UNITED STATES 2/	3,945,192	3,941,553	27,743	27,720	28,221	28,198		
ALABAMA	61,209	62,074	617	615	619	616		
ALASKA	9,832	9,926	63	66	63	67		
ARIZONAARKANSAS	78,076 35,763	78,243 36,865	566 302	558 326	573 310	569 335		
CALIFORNIA	522,290	521,661	2,905	2,901	3,024	3,012		
	522,250	521,001	2,505	2,501	5,024	5,012		
COLORADO	59,816	59,577	422	408	423	409		
CONNECTICUT	43,669	43,820	299	295	301	298		
DELAWARE	11,023	10,578	104	98	104	98		
DISTRICT OF COLUMBIA	15,138	7,686	181	91	183	92		
FLORIDA	195,734	195,637	1,429	1,426	1,432	1,428		
650D674	422.262	422.260	4 037	4	4	4 0 2 0		
GEORGIA	123,262	122,368	1,027	1,028	1,028	1,028		
HAWAII	17,619	17,583	119	117	119 123	117		
	18,959	19,391 182,588	118	131		134 1,536		
ILLINOIS INDIANA	179,462 85,176	85,122	1,455 640	1,514 649	1,472 651	660		
INDIANA	05,170	05,122	040	049	051	000		
IOWA	37,433	37,282	219	237	219	237		
KANSAS	37,450	38,422	254	271	254	274		
KENTUCKY	52,880	54,329	353	391	362	399		
LOUISIANA	67,100	66,888	604	604	617	616		
MAINE	13,530	13,733	77	82	79	84		
	67 400		<b>F 2 2</b>	C 1 2	5.20	620		
MARYLAND	67,408 82,216	71,972 81,411	532 410	613 413	538 419	620 422		
MICHIGAN	132,443	133,666	1,066	1,071	1,079	1,084		
MINNESOTA	65,094	65,202	394	388	394	388		
MISSISSIPPI	41,942	42,939	397	420	400	422		
MISSOURI	77,701	75,358	624	558	638	566		
MONTANA	10,742	10,795	74	73	77	75		
NEBRASKA	23,915	23,534	199	182	199	182		
NEVADA	28,218	28,699	183	187	189	195		
NEW HAMPSHIRE	13,933	14,429	65	67	65	67		
NEW JERSEY	111,709	114,550	676	714	688	728		
NEW MEXICO	26,960	27,318	175	186	185	196		
NEW YORK STATE	135,408	138,296	783	792	806	808		
NEW YORK CITY	124,240	119,911	794	775	803	793		
NORTH CAROLINA	112,785	111,688	1,035	1,022	1,038	1,025		
NORTH DAKOTA	9,156	7,932	82	70	82	70		
OHIO	153,400	152,794	1,172	1,148	1,221	1,207		
	10 110	40 401	401	401	4 7 7	<b>۲</b> ۲ ۸		
	48,449	49,461	401	401	433	432		
OREGON PENNSYLVANIA	46,278	45,273	254	235	256	236		
RHODE ISLAND	146,465 13,489	145,899 12,599	1,041 101	1,012 87	1,060 102	1,027 87		
SOUTH CAROLINA	51,701	53,877	496	525	496	525		
	21,701	,		525		525		
SOUTH DAKOTA	10,391	10,288	93	95	93	95		
TENNESSEE	82,412	77,396	722	632	723	632		
TEXAS	346,101	342,283	2,118	2,093	2,164	2,139		
UTAH	46,128	45,165	263	244	264	245		
VERMONT	6,257	6,582	49	53	49	53		

#### (RESIDENCE OF BIRTH IS OF THE MOTHER)

LIVE BIRTHS AND INFANT DEATHS BY STATE OF OCCURRENCE AND BY STATE OF RESIDENCE AT BIRTH UNITED STATES, PUERTO RICO, VIRGIN ISLANDS, AND GUAM - 1998 LINK BIRTH COHORT DATA

	LIVE	BIRTHS	INFANT DEATHS			
			UNWEI	GHTED	WEI	IGHTED 1/
STATE	Occurrence	Residence	Occurrence	Residence	Occurrence	Residence
VIRGINIA	92.021	94.351	674	694	681	701
WASHINGTON	78,980	79,663	441	458	444	462
WEST VIRGINIA	21,574	20,747	164	154	168	157
WISCONSIN	66,421	67,450	487	503	487	503
WYOMING	5,834	6,252	24	47	24	47
FOREIGN RESIDENTS	-	3,637	-	23	-	23
PUERTO RICO 3/	60,518	60,412	640	638	-	-
VIRGIN ISLANDS 3/	1,915	1,800	17	17	-	-
GUAM 3/	4,328	4,318	35	35	-	-

#### (RESIDENCE OF BIRTH IS OF THE MOTHER)

1/ Figures are based on weighted data rounded to the nearest infant, so categories may not add to totals.

2/ Excludes data for Puerto Rico, Virgin Islands, and Guam occurrences. 3/ Data from the Puerto Rico, Virgin Islands, and Guam file.

# LIVE BIRTHS, INFANT DEATHS, AND INFANT MORTALITY RATES BY RACE OF MOTHER, SEX AND BIRTHWEIGHT OF CHILD: UNITED STATES, 1998 BIRTH COHORT DATA (INFANT DEATHS WEIGHTED)

## (RATES ARE PER 1000 LIVE BIRTHS)

RACE OF MOTHER AND   SEX   	TOTAL   	<500   GRAMS   	500-749   GRAMS   	750-999 GRAMS	1000-1249   GRAMS 	1250-1499   GRAMS 	1500-1999   GRAMS 	2000-2499   GRAMS 	2500 GRAMS    OR MORE   	NOT STATED
ALL RACES 1/										
BOTH SEXES										
LIVE BIRTHS	3,941,553	6,349	11,041	11,716	13,238	15,389	59,014	182,462	3,640,324	2,02
INFANT DEATHS	28,197	5,480	5,336	1,865	936		1,705	2,274		37
INF.MORT.RATE	7.2	863.1	483.3	159.2	70.7	49.1	28.9	12.5	2.6	185.
MALE										
LIVE BIRTHS		3,175	5,528	6,129	6,828		28,797	83,593		1,04
INFANT DEATHS	15,713	2,765	3,047	1,187	550	419	875	1,194		23
INF.MORT.RATE	7.8	870.7	551.1	193.7	80.5	54.1	30.4	14.3	2.9	221.
FEMALE										
LIVE BIRTHS		3,174	5,513	5,587	6,410		30,217	98,869		97
INFANT DEATHS	12,484	2,716	2,290	678	386		830	1,080	,	14
INF.MORT.RATE	6.5	855.6	415.3	121.4	60.3	44.0	27.5	10.9	2.3	145.
VHITE										
BOTH SEXES										
LIVE BIRTHS	3.118.727	3.502	6,510	7,360	8,670	10,252	40,802	126.790	2,913,643	1.19
INFANT DEATHS	18.460	3.049	3,231	1.222	613	507	1.171	1.593		20
INF.MORT.RATE	5.9	870.6	496.4	166.0	70.8	49.5	28.7	12.6	2.4	173.
MALE										
LIVE BIRTHS	1,596,704	1,723	3,280	3,891	4,555	5,262	20,136	58,313	1,498,930	61
INFANT DEATHS	10,300	1,506	1,845	772	362	283	598	819	3,988	12
INF.MORT.RATE	6.5	874.0	562.4	198.4	79.5	53.8	29.7	14.0	2.7	207.
FEMALE										
LIVE BIRTHS	1,522,023	1,779	3,230	3,469	4,115	4,990	20,666	68,477	1,414,713	58
INFANT DEATHS	8,160	1,543	1,387	450	251	224	573	773	2,878	8
INF.MORT.RATE	5.4	867.3	429.3	129.8	61.1	45.0	27.7	11.3	2.0	138.
BLACK										
BOTH SEXES										
LIVE BIRTHS	609.902	2,583	4,127	3,861	4,017	4,432	15,383	45,369	529,816	31
INFANT DEATHS	8.392	2,206	1,903	555	283	215	439	566	2.099	12
INF.MORT.RATE	13.8	854.1	461.0	143.6	70.3	48.4	28.5	12.5	,	410.
MALE										
LIVE BIRTHS	310.107	1.319	2.038	1.972	1,981	2,113	7,179	20,454	272.885	16
INFANT DEATHS	4,667	1,147	1,078	359	162		229	316	1,177	8
INF.MORT.RATE	15.1	869.6	528.7	182.2	81.7	55.4	31.9	15.5	4.3	497.
FEMALE										
LIVE BIRTHS	299,795	1,264	2,089	1,889	2,036	2,319	8,204	24,915	256,931	14
INFANT DEATHS	3,725	1,059	825	195	121		210	249		4
INF.MORT.RATE	12.4	837.9	394.9	103.4	59.3	42.0	25.6	10.0	3.6	313.

1/ INCLUDES RACES OTHER THAN WHITE AND BLACK

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# LIVE BIRTHS, INFANT DEATHS, AND INFANT MORTALITY RATES BY BIRTHWEIGHT, RACE OF MOTHER, AND GESTATIONAL AGE: UNITED STATES, 1998 BIRTH COHORT DATA

## (INFANT DEATHS WEIGHTED) (RATES ARE PER 1000 LIVE BIRTHS)

					GESTA	TION				
BIRTHWEIGHT       	TOTAL	<28   WEEKS   	28-31   WEEKS   	32-35   WEEKS   	36   WEEKS   	37-39   WEEKS   	40   WEEKS   	41   WEEKS	42 WEEKS   OR MORE   	NOT STATED
ALL RACES 1/										
-										
TOTAL LIVE BIRTHS INFANT DEATHS INF. MORT. RATE	3,941,553 28,197 7.2	29,037 11,836 407.6	47,486 2,207 46.5	212,210 2,533 11.9	163,542 1,063 6.5	1,859,198 5,628 3.0	853,416 1,914 2.2	443,502 1,162 2.6	292,766 921 3.1	40,396 932 23.1
LESS THAN 2,500 GRAMS LIVE BIRTHS INFANT DEATHS INF. MORT. RATE	299,209 18,352 61.3	27,959 11,815 422.6	35,733 2,120 59.3	99,134 1,882 19.0	33,588 525 15.6	75,882 1,110 14.6	11,455 207 18.1	5,354 146 27.2	6,393 141 22.1	3,711 406 109.5
LESS THAN 500 GRAMS LIVE BIRTHS INFANT DEATHS INF. MORT. RATE	6,349 5,480 863.1	5,921 5,197 877.7	218 139 636.9	12 11 936.5	3 2 675.3	13 7 552.1	3 1 333.3	- -	-	179 123 685.2
500-749 GRAMS LIVE BIRTHS INFANT DEATHS INF. MORT. RATE	11,041 5,336 483.3	9,333 4,784 512.6	1,307 372 284.8	126 41 323.7	19 11 585.6	13 2 158.1	- - -	2 - -	6 4 669.9	235 122 520.3
750-999 GRAMS LIVE BIRTHS INFANT DEATHS INF. MORT. RATE	11,716 1,865 159.2	7,042 1,351 191.8	3,751 388 103.4	501 61 122.0	42 6 146.5	113 8 72.5	48 6 127.2	19 3 158.5	17 3 182.0	183 39 214.1
1,000-1.249 GRAMS LIVE BIRTHS INFANT DEATHS INF. MORT. RATE	13,238 936 70.7	3,135 295 94.1	7,070 424 59.9	2,131 131 61.5	153 19 126.4	326 27 81.9	98 6 63.5	48 2 42.4	82 6 74.5	195 26 132.4
1,250-1.499 GRAMS LIVE BIRTHS INFANT DEATHS INF. MORT. RATE	15,389 756 49.1	861 84 97.3	8,051 317 39.3	4,797 230 47.9	408 32 77.5	662 53 79.9	146 5 35.0	77 6 78.9	142 11 78.6	245 19 76.3
1,500-1,999 GRAMS LIVE BIRTHS INFANT DEATHS INF. MORT. RATE	59,014 1,705 28.9	988 77 78.4	11,224 357 31.8	31,506 698 22.2	5,035 128 25.4	7,191 296 41.1	989 47 47.4	548 35 63.0	806 31 38.0	727 36 49.8

# LIVE BIRTHS, INFANT DEATHS, AND INFANT MORTALITY RATES BY BIRTHWEIGHT, RACE OF MOTHER, AND GESTATIONAL AGE: UNITED STATES, 1998 BIRTH COHORT DATA

## (INFANT DEATHS WEIGHTED) (RATES ARE PER 1000 LIVE BIRTHS)

	GESTATION										
BIRTHWEIGHT	TOTAL	<28   WEEKS   	28-31   WEEKS   	32-35   WEEKS	36   WEEKS   	37-39   WEEKS   	40   WEEKS   	41   WEEKS	42 WEEKS   OR MORE	NOT STATED	
ALL RACES 1/											
– 2,000-2,499 GRAMS LIVE BIRTHS INFANT DEATHS INF. MORT. RATE	182,462 2,274 12.5	679 27 39.1	4,112 123 30.0	60,061 710 11.8	27,928 326 11.7	67,564 717 10.6	10,171 142 14.0	4,660 100 21.4	5,340 86 16.2	1,947 41 21.3	
2,500-2,999 GRAMS LIVE BIRTHS INFANT DEATHS INF. MORT. RATE	650,006 3,090 4.8	1,078 21 19.9	4,251 41 9.6	53,704 375 7.0	59,439 299 5.0	362,599 1,564 4.3	88,982 361 4.1	38,929 207 5.3	34,772 178 5.1	6,252 44 7.1	
3,000-3,499 GRAMS LIVE BIRTHS INFANT DEATHS INF. MORT. RATE	1,458,017 3,684 2.5	- - -	4,955 34 6.8	37,738 193 5.1	47,946 168 3.5	772,992 1,832 2.4	321,158 676 2.1	152,255 389 2.6	106,987 340 3.2	13,986 53 3.8	
3,500-3,999 GRAMS LIVE BIRTHS INFANT DEATHS INF. MORT. RATE	1,136,056 1,993 1.8	- -	2,547 12 4.8	17,152 57 3.3	17,886 57 3.2	501,416 862 1.7	314,195 479 1.5	170,344 295 1.7	101,961 196 1.9	10,555 35 3.3	
4,000-4,499 GRAMS LIVE BIRTHS INFANT DEATHS INF. MORT. RATE	335,215 561 1.7	- -	- - -	3,796 21 5.6	3,902 8 2.1	125,268 211 1.7	100,003 154 1.5	63,771 102 1.6	35,268 53 1.5	3,207 11 3.5	
4,500-4,999 GRAMS LIVE BIRTHS INFANT DEATHS INF. MORT. RATE	54,827 114 2.1	- - -	- - -	586 1 1.8	679 6 8.9	18,689 37 2.0	16,010 32 2.0	11,661 21 1.8	6,637 10 1.5	565 6 11.0	
5,000 GRAMS OR MORE LIVE BIRTHS INFANT DEATHS INF. MORT. RATE	6,203 29 4.8	- -	- -	100 4 40.6	102 - -	2,352 13 5.6	1,613 5 3.1	1,188 2 1.7	748 2 2.7	100 3 31.1	
NOT STATED LIVE BIRTHS INFANT DEATHS INF. MORT. RATE	2,020 374 185.0	- -	- - -	- - -	- - -	- - -	- -	- - -	- -	2,020 374 185.0	

# LIVE BIRTHS, INFANT DEATHS, AND INFANT MORTALITY RATES BY BIRTHWEIGHT, RACE OF MOTHER, AND GESTATIONAL AGE: UNITED STATES, 1998 BIRTH COHORT DATA

## (INFANT DEATHS WEIGHTED) (RATES ARE PER 1000 LIVE BIRTHS)

					GESTA	TION				
BIRTHWEIGHT       	TOTAL	<28   WEEKS   	28-31   WEEKS   	32-35   WEEKS   	36   WEEKS   	37-39   WEEKS   	40   WEEKS   	41   WEEKS	42 WEEKS   OR MORE   	NOT STATED
WHITE										
TOTAL										
LIVE BIRTHS INFANT DEATHS INF. MORT. RATE	3,118,727 18,460 5.9	17,020 6,960 408.9	31,415 1,410 44.9	152,717 1,781 11.7	123,132 727 5.9	1,470,983 4,054 2.8	693,703 1,411 2.0	364,840 863 2.4	234,996 675 2.9	29,921 578 19.3
LESS THAN 2,500 GRAMS										
LIVE BIRTHS INFANT DEATHS INF. MORT. RATE	203,886 11,387 55.8	16,409 6,946 423.3	23,760 1,357 57.1	70,440 1,308 18.6	23,561 348 14.8	51,698 796 15.4	7,697 151 19.6	3,541 108 30.5	4,325 104 24.0	2,455 268 109.3
LESS THAN 500 GRAMS										
LIVE BIRTHS INFANT DEATHS INF. MORT. RATE	3,502 3,049 870.6	3,249 2,879 886.1	129 80 622.1	7 6 884.3	2 1 500.0	7 7 1025.3	2 - -	-	-	106 75 708.5
500-749 GRAMS										
LIVE BIRTHS INFANT DEATHS INF. MORT. RATE	6,510 3,231 496.4	5,414 2,890 533.8	821 215 261.3	90 33 362.4	7 5 727.8	10 1 105.6	-	2 - -	6 4 669.9	160 84 526.5
750-999 GRAMS										
LIVE BIRTHS	7,360 1,222	4,362 880	2,373 249	337 48	27	81 5	34	15 3	13 2	118 26
INF. MORT. RATE	166.0	201.7	105.1	142.3	151.7	63.2	149.6	200.7	156.9	218.4
1,000-1,249 GRAMS LIVE BIRTHS	8,670	1,934	4,680	1,438	108	227	60	32	53	138
INFANT DEATHS INF. MORT. RATE	613 70.8	189 97.6	272 58.2	90 62.4	15 141.3	21 90.8	5 87.1	2 63.5	3 57.5	17 120.3
1,250-1,499 GRAMS										
LIVE BIRTHS INFANT DEATHS	10,252 507	493 46	5,381 201	3,269 169	280 24	436 39	91 3	56 4	87 6	159 16
INF. MORT. RATE	49.5	93.7	37.4	51.6	84.0	88.7	33.6	72.8	70.3	98.2
1,500-1,999 GRAMS										
LIVE BIRTHS	40,802 1,171	548 46	7,804 247	22,135 481	3,472 87	4,849 209	654 32	343 25	521 22	476 23
INF. MORT. RATE	28.7	83.9	31.6	21.7	25.0	43.0	48.5	74.0	43.1	48.3

# LIVE BIRTHS, INFANT DEATHS, AND INFANT MORTALITY RATES BY BIRTHWEIGHT, RACE OF MOTHER, AND GESTATIONAL AGE: UNITED STATES, 1998 BIRTH COHORT DATA

## (INFANT DEATHS WEIGHTED) (RATES ARE PER 1000 LIVE BIRTHS)

	GESTATION										
BIRTHWEIGHT       	TOTAL	<28   WEEKS   	28-31   WEEKS   	32-35   WEEKS	36   WEEKS   	37-39   WEEKS   	40   WEEKS   	41   WEEKS   	42 WEEKS   OR MORE   	NOT STATED	
WHITE											
WHITE											
2,000-2,499 GRAMS	426 200				10 555		c			4 200	
LIVE BIRTHS	126,790 1,593	409 16	2,572 93	43,164 482	19,665 213	46,088 515	6,856 106	3,093 73	3,645 66	1,298 28	
INFANT DEATHS	1,593	39.9	36.1	482	10.8	11.2	15.4	23.8	18.2	28	
2,500-2,999 GRAMS											
LIVE BIRTHS	465,494	611	2,499	38,891	44,322	259,518	63,011	27,908	24,542	4,192	
INFANT DEATHS INF. MORT. RATE	2,109 4.5	14 23.4	23 9.1	264 6.8	209 4.7	1,058 4.1	257 4.1	143 5.1	115 4.7	26 6.1	
	4.5	23.4	5.1	0.0	4.7	4.1	4.1	5.1	4.7	0.1	
3,000-3,499 GRAMS											
LIVE BIRTHS	1,140,741	-	3,291	26,963	37,200	607,353	252,252	120,192	83,191	10,299	
INFANT DEATHS	2,676	-	20	145	116	1,352	476	277	255	36	
INF. MORT. RATE	2.3	-	6.2	5.4	3.1	2.2	1.9	2.3	3.1	3.5	
3,500-3,999 GRAMS											
LIVE BIRTHS	958,968	-	1,865	12,901	14,247	424,219	266,592	145,093	85,517	8,534	
INFANT DEATHS	1,524	-	10	47	42	644	368	240	150	24	
INF. MORT. RATE	1.6	-	5.4	3.6	2.9	1.5	1.4	1.7	1.8	2.8	
4,000-4,499 GRAMS											
LIVE BIRTHS	294,403	-	-	2,980	3,181	109,817	88,369	56,500	30,872	2,684	
INFANT DEATHS	442	-	-	14	6	167	126	77	43	9	
INF. MORT. RATE	1.5	-	-	4.8	1.9	1.5	1.4	1.4	1.4	3.4	
4,500-4,999 GRAMS											
LIVE BIRTHS	48.687	-	-	469	542	16,384	14,376	10,552	5,887	477	
INFANT DEATHS	90	-	-	-	6	29	28	10,552	5,007	4	
INF. MORT. RATE	1.9	-	-	-	11.2	1.7	2.0	1.5	1.2	8.9	
5,000 GRAMS OR MORE LIVE BIRTHS	5,350	_	_	73	79	1,994	1,406	1,054	662	82	
INFANT DEATHS	23	-	-	3		1,994	1,400	1,054	2	2	
INF. MORT. RATE	4.4	-	-	41.6	-	4.6	3.6	1.9	3.1	25.1	
NOT STATED											
NOT STATED LIVE BIRTHS	1.198	_	_	_	_	_	_	_	-	1,198	
INFANT DEATHS	208	-	-	-	-	_	-	-	-	208	
INF. MORT. RATE	173.8	-	-	-	-	-	-	-	-	173.8	

# LIVE BIRTHS, INFANT DEATHS, AND INFANT MORTALITY RATES BY BIRTHWEIGHT, RACE OF MOTHER, AND GESTATIONAL AGE: UNITED STATES, 1998 BIRTH COHORT DATA

## (INFANT DEATHS WEIGHTED) (RATES ARE PER 1000 LIVE BIRTHS)

					GESTAT	ION				
BIRTHWEIGHT	TOTAL	<28   WEEKS   	28-31   WEEKS   	32-35   WEEKS   	36   WEEKS   	37-39   WEEKS   	40   WEEKS   	41   WEEKS   	42 WEEKS   OR MORE	NOT STATED
BLACK										
TOTAL										
LIVE BIRTHS	609,902 8,392	10,899 4,400	13,988 693	48,954 640	31,932 278	282,824	114,888 398	57,500 231	43,931 205	4,986 275
INF. MORT. RATE	13.8	403.7	49.6	13.1	8.7	1,272 4.5	3.5	4.0	4.7	55.1
LESS THAN 2,500 GRAMS										
LIVE BIRTHS	79,772	10,477	10,501	24,093	8,138	19,342	3,140	1,486	1,759	836
INFANT DEATHS INF. MORT. RATE	6,165 77.3	4,393 419.3	669 63.7	487 20.2	140 17.2	263 13.6	43 13.9	27 18.4	31 17.9	110 131.6
LESS THAN 500 GRAMS										
LIVE BIRTHS	2,583	2,438	82	3	-	5	1	-	-	54
INFANT DEATHS INF. MORT. RATE	2,206 854.1	2,113 866.9	52 639.7	3 1009.4	-	-	1 1000.0	-	-	36 668.5
500-749 GRAMS										
LIVE BIRTHS	4,127	3,577	444	30	10	3	-	-	-	63
INFANT DEATHS	1,903	1,714	143	6	4	1	-	-	-	34
INF. MORT. RATE	461.0	479.2	323.1	203.2	400.6	333.3	-	-	-	538.5
750-999 GRAMS										
LIVE BIRTHS	3,861	2,406	1,225	127	13 1	26 3	12 1	4	4	44
INFANT DEATHS INF. MORT. RATE	555 143.6	407 169.1	119 97.3	11 87.7	78.7	118.1	85.2	-	263.9	11 256.7
1,000-1,249 GRAMS										
LIVE BIRTHS	4,017	1,076	2,107	598	38	84	35	15	25	39
INFANT DEATHS INF. MORT. RATE	283 70.3	94 87.4	130 61.6	39 65.8	4 107.2	5 60.5	1 28.6	-	2 81.7	7 183.0
1,250-1,499 GRAMS										
LIVE BIRTHS	4,432	332	2,355	1,279	105	192	44	17	49	59
INFANT DEATHS INF. MORT. RATE	215 48.4	32 97.7	104 44.2	51 39.6	6 57.9	12 63.5	2 46.6	1 58.8	4 82.6	2 34.3
1,500-1,999 GRAMS										
LIVE BIRTHS	15,383	400	2,937	7,960	1,264	1,953	298	170	240	161
INFANT DEATHS	439	23	95	178	33	72	13	47 0	6	9 56.7
INF. MORT. RATE	28.5	58.2	32.5	22.4	26.4	36.8	44.1	47.9	25.5	. 00. /

# LIVE BIRTHS, INFANT DEATHS, AND INFANT MORTALITY RATES BY BIRTHWEIGHT, RACE OF MOTHER, AND GESTATIONAL AGE: UNITED STATES, 1998 BIRTH COHORT DATA

## (INFANT DEATHS WEIGHTED) (RATES ARE PER 1000 LIVE BIRTHS)

	GESTATION										
BIRTHWEIGHT	TOTAL	<28   WEEKS   	28-31   WEEKS   	32-35   WEEKS   	36   WEEKS   	37-39   WEEKS   	40   WEEKS   	41 WEEKS	42 WEEKS   OR MORE   	NOT STATED	
BLACK											
2,000-2,499 GRAMS LIVE BIRTHS INFANT DEATHS	45,369 566	248 9	1,351 24	14,096 199	6,708 91	17,079 170	2,750	1,280 18	1,441 18	416 10	
INF. MORT. RATE	12.5	36.9	18.1	14.1	13.6	10.0	9.2	14.2	12.6	25.0	
2,500-2,999 GRAMS LIVE BIRTHS	141,146	422	1,514	12,093	11,927	77,695	19,564	8,533	8,304	1,094	
INFANT DEATHS INF. MORT. RATE	805 5.7	7 17.0	14 9.4	95 7.9	76 6.4	409 5.3	86 4.4	49 5.7	56 6.7	13 12.2	
3,000-3,499 GRAMS											
LIVE BIRTHS	230,937 815	-	1,421 9	8,688 39	8,410 46	119,135 389	49,680 157	23,724 90	18,267 72	1,612 12	
INFANT DEATHS	3.5	-	6.5	4.5	5.4	3.3	3.2	3.8	3.9	7.6	
3,500-3,999 GRAMS											
LIVE BIRTHS	125,007	-	552	3,337	2,838	54,158	33,319	17,886	12,050	867	
INFANT DEATHS INF. MORT. RATE	371 3.0	-	1 1.8	9 2.7	14 5.0	173 3.2	84 2.5	44 2.4	38 3.1	8 9.4	
4,000-4,499 GRAMS											
LIVE BIRTHS	27,972	-	-	628	509	10,633	7,929	5,059	2,993	221	
INFANT DEATHS INF. MORT. RATE	84 3.0	-	-	7 11.2	2 4.0	28 2.7	23 3.0	17 3.4	6 2.0	-	
4,500-4,999 GRAMS											
LIVE BIRTHS	4,170 18	-	-	96 1	91	1,613 6	1,109 4	721 4	507 2	33 1	
INF. MORT. RATE	4.4	-	-	10.7	-	3.8	3.7	5.7	4.0	30.3	
5,000 GRAMS OR MORE											
LIVE BIRTHS	584	-	-	19	19	248	147	91	51	9	
INFANT DEATHS INF. MORT. RATE	5 8.7	-	-	1 53.7	-	3 12.2	-	-	-	1 117.3	
NOT STATED											
LIVE BIRTHS	314	-	-	-	-	-	-	-	-	314	
INFANT DEATHS INF. MORT. RATE	129 410.7	-	-	-	-	-	-	-	-	129 410.7	

1/ INCLUDES RACES OTHER THAN WHITE AND BLACK

- DATA NOT AVAILABLE.

#### LIVE BIRTHS, INFANT DEATHS, AND INFANT MORTALITY RATES BY BIRTHWEIGHT, RACE OF MOTHER, AND AGE AT DEATH: UNITED STATES, 1998 BIRTH COHORT DATA (INFANT DEATHS WEIGHTED)

# (INFANT DEATHS ARE UNDER 1 YEAR. NEONATAL DEATHS ARE UNDER 28 DAYS; EARLY NEONATAL, 0-6 DAYS; LATE NEONATAL, 7-27 DAYS; AND POSTNEONATAL, 28 DAYS THROUGH 11 MONTHS)

BIRTHWEIGHT AND RACE OF MOTHER	LIVE BIRTHS     	INFANT	TOTAL   NEONATAL   	EARLY NEONATAL	LATE NEONATAL	POST- NEONATAL
ALL RACES1/						
- OTAL (ALL BIRTHWEIGHTS)NUMBER RATE	3,941,553	28,197 7.2	18,874 4.8	15,039 3.8	3,836 1.0	9,323 2.4
.ESS THAN 2,500 GRAMSNUMBER	299,209	18,352	15,066	12,622	2,444	3,286
RATE		61.3	50.4	42.2	8.2	11.0
LESS THAN 500 GRAMSNUMBER	6,349	5,480	5,397	5,236	161	83
RATE		863.1	850.0	824.7	25.4	13.1
500-749 GRAMSNUMBER	11,041	5,336	4,671	3,821	851	665
RATE		483.3	423.1	346.1	77.0	60.2
750-999 GRAMSNUMBER	11,716	1,865	1,438	972	466	428
RATE		159.2	122.7	83.0	39.7	36.5
1,000-1,249 GRAMSNUMBER	13,238	936	686	497	189	250
RATE		70.7	51.8	37.5	14.3	18.9
1,250-1,499 GRAMSNUMBER	15,389	756	553	407	146	202
RATE		49.1	36.0	26.5	9.5	13.1
1,500-1,999 GRAMSNUMBER	59,014	1,705	1,099	827	272	606
RATE		28.9	18.6	14.0	4.6	10.3
2,000-2,499 GRAMSNUMBER	182,462	2,274	1,223	862	360	1,051
RATE		12.5	6.7	4.7	2.0	5.8
,500-2,999 GRAMSNUMBER	650,006	3,090	1,198	721	476	1,893
RATE		4.8	1.8	1.1	.7	2.9
,000-3,499 GRAMSNUMBER	1,458,017	3,684	1,269	732	537	2,415
RATE		2.5	.9	.5	.4	1.7
,500-3,999 GRAMSNUMBER RATE	1,136,056	1,993 1.8	694 .6	422	272	1,299 1.1

#### LIVE BIRTHS, INFANT DEATHS, AND INFANT MORTALITY RATES BY BIRTHWEIGHT, RACE OF MOTHER, AND AGE AT DEATH: UNITED STATES, 1998 BIRTH COHORT DATA (INFANT DEATHS WEIGHTED)

# (INFANT DEATHS ARE UNDER 1 YEAR. NEONATAL DEATHS ARE UNDER 28 DAYS; EARLY NEONATAL, 0-6 DAYS; LATE NEONATAL, 7-27 DAYS; AND POSTNEONATAL, 28 DAYS THROUGH 11 MONTHS)

BIRTHWEIGHT AND RACE OF MOTHER	 LIVE BIRTHS     	INFANT	TOTAL NEONATAL	EARLY   NEONATAL	LATE NEONATAL	POST- NEONATAL
ALL RACES1/						
4,000-4,499 GRAMSNUMBER	335,215	561	213	130	83	348
RATE		1.7	.6	.4	. 2	1.0
4,500-4,999 GRAMSNUMBER	54,827	114	64	54	10	50
RATE		2.1	1.2	1.0	.2	.9
5,000 GRAMS OR MORENUMBER	6,203	29	20	17	3	9
RATE		4.8	3.3	2.8	. 5	1.5
NOT STATEDNUMBER	2,020	374	350	340	10	23
RATE		185.0	173.5	168.5	5.0	11.6

#### LIVE BIRTHS, INFANT DEATHS, AND INFANT MORTALITY RATES BY BIRTHWEIGHT, RACE OF MOTHER, AND AGE AT DEATH: UNITED STATES, 1998 BIRTH COHORT DATA (INFANT DEATHS WEIGHTED)

# (INFANT DEATHS ARE UNDER 1 YEAR. NEONATAL DEATHS ARE UNDER 28 DAYS; EARLY NEONATAL, 0-6 DAYS; LATE NEONATAL, 7-27 DAYS; AND POSTNEONATAL, 28 DAYS THROUGH 11 MONTHS)

BIRTHWEIGHT AND RACE OF MOTHER	 LIVE BIRTHS     	INFANT   	TOTAL   NEONATAL   	EARLY   NEONATAL   	LATE   NEONATAL   	POST- NEONATAL
WHITE						
TOTAL (ALL BIRTHWEIGHTS)NUMBER	3,118,727	18,460	12,328	9,724	2,604	6,132
RATE		5.9	4.0	3.1	.8	2.0
LESS THAN 2,500 GRAMSNUMBER	203,886	11,387	9,479	7,921	1,559	1,907
RATE		55.8	46.5	38.8	7.6	9.4
LESS THAN 500 GRAMSNUMBER	3,502	3,049	3,005	2,913	92	44
RATE		870.6	858.1	831.9	26.2	12.4
500-749 GRAMSNUMBER	6,510	3,231	2,889	2,403	486	342
RATE		496.4	443.8	369.1	74.6	52.6
750-999 GRAMSNUMBER	7,360	1,222	988	673	314	234
RATE		166.0	134.2	91.5	42.7	31.8
1,000-1,249 GRAMSNUMBER	8,670	613	479	352	127	134
RATE		70.8	55.3	40.6	14.7	15.5
1,250-1,499 GRAMSNUMBER	10,252	507	389	297	92	118
RATE		49.5	38.0	29.0	9.0	11.5
1,500-1,999 GRAMSNUMBER	40,802	1,171	805	621	184	367
RATE		28.7	19.7	15.2	4.5	9.0
2,000-2,499 GRAMSNUMBER	126,790	1,593	924	661	264	668
RATE		12.6	7.3	5.2	2.1	5.3
2,500-2,999 GRAMSNUMBER	465,494	2,109	869	544	325	1,239
RATE		4.5	1.9	1.2	.7	2.7
3,000-3,499 GRAMSNUMBER	1,140,741	2,676	977	568	409	1,699
RATE		2.3	.9	.5	.4	1.5
3,500-3,999 GRAMSNUMBER RATE	958,968	1,524 1.6	568 .6	344 .4	224	956 1.0

#### LIVE BIRTHS, INFANT DEATHS, AND INFANT MORTALITY RATES BY BIRTHWEIGHT, RACE OF MOTHER, AND AGE AT DEATH: UNITED STATES, 1998 BIRTH COHORT DATA (INFANT DEATHS WEIGHTED)

# (INFANT DEATHS ARE UNDER 1 YEAR. NEONATAL DEATHS ARE UNDER 28 DAYS; EARLY NEONATAL, 0-6 DAYS; LATE NEONATAL, 7-27 DAYS; AND POSTNEONATAL, 28 DAYS THROUGH 11 MONTHS)

BIRTHWEIGHT AND RACE OF MOTHER	  LIVE BIRTHS     	   INFANT   	 TOTAL   NEONATAL   	EARLY   NEONATAL   	LATE   NEONATAL   	POST- NEONATAL
WHITE						
4,000-4,499 GRAMSNUMBER	294,403	442	177	106	71	265
RATE		1.5	.6	.4	.2	.9
4,500-4,999 GRAMSNUMBER	48,687	90	47	39	8	43
RATE		1.9	1.0	.8	. 2	.9
5,000 GRAMS OR MORENUMBER	5,350	23	15	12	3	8
RATE		4.4	2.9	2.3	. 6	1.5
NOT STATEDNUMBER	1,198	208	195	190	5	13
RATE		173.8	162.8	158.6	4.2	11.0

#### LIVE BIRTHS, INFANT DEATHS, AND INFANT MORTALITY RATES BY BIRTHWEIGHT, RACE OF MOTHER, AND AGE AT DEATH: UNITED STATES, 1998 BIRTH COHORT DATA (INFANT DEATHS WEIGHTED)

# (INFANT DEATHS ARE UNDER 1 YEAR. NEONATAL DEATHS ARE UNDER 28 DAYS; EARLY NEONATAL, 0-6 DAYS; LATE NEONATAL, 7-27 DAYS; AND POSTNEONATAL, 28 DAYS THROUGH 11 MONTHS)

BIRTHWEIGHT AND RACE OF MOTHER	LIVE BIRTHS     	INFANT	TOTAL NEONATAL	EARLY NEONATAL	LATE NEONATAL	POST- NEONATAL
BLACK						
TOTAL (ALL BIRTHWEIGHTS)NUMBER	609,902	8,392	5,677	4,629	1,048	2,715
RATE		13.8	9.3	7.6	1.7	4.5
LESS THAN 2,500 GRAMSNUMBER	79,772	6,165	4,934	4,148	785	1,231
RATE		77.3	61.8	52.0	9.8	15.4
LESS THAN 500 GRAMSNUMBER	2,583	2,206	2,172	2,106	65	34
RATE		854.1	840.7	815.4	25.3	13.3
500-749 GRAMSNUMBER	4,127	1,903	1,606	1,271	335	296
RATE		461.0	389.3	308.0	81.2	71.8
750-999 GRAMSNUMBER	3,861	555	378	249	129	176
RATE		143.6	98.0	64.6	33.4	45.7
1,000-1,249 GRAMSNUMBER	4,017	283	172	118	54	110
RATE		70.3	42.9	29.3	13.6	27.5
1,250-1,499 GRAMSNUMBER	4,432	215	141	90	50	74
RATE		48.4	31.7	20.4	11.3	16.7
1,500-1,999 GRAMSNUMBER	15,383	439	229	156	73	210
RATE		28.5	14.9	10.1	4.7	13.7
2,000-2,499 GRAMSNUMBER	45,369	566	236	157	79	330
RATE		12.5	5.2	3.5	1.7	7.3
2,500-2,999 GRAMSNUMBER	141,146	805	250	140	110	555
RATE		5.7	1.8	1.0	.8	3.9
3,000-3,499 GRAMSNUMBER	230,937	815	228	121	107	587
RATE		3.5	1.0	.5	.5	2.5
3,500-3,999 GRAMSNUMBER	125,007	371	97	60	37	274
RATE		3.0	.8	. 5	.3	2.2

#### LIVE BIRTHS, INFANT DEATHS, AND INFANT MORTALITY RATES BY BIRTHWEIGHT, RACE OF MOTHER, AND AGE AT DEATH: UNITED STATES, 1998 BIRTH COHORT DATA (INFANT DEATHS WEIGHTED)

# (INFANT DEATHS ARE UNDER 1 YEAR. NEONATAL DEATHS ARE UNDER 28 DAYS; EARLY NEONATAL, 0-6 DAYS; LATE NEONATAL, 7-27 DAYS; AND POSTNEONATAL, 28 DAYS THROUGH 11 MONTHS)

#### (RATES ARE PER 1000 LIVE BIRTHS)-Continued

BIRTHWEIGHT AND RACE OF MOTHER	  LIVE BIRTHS     	   INFANT   	TOTAL   NEONATAL   	EARLY NEONATAL	LATE NEONATAL	POST- NEONATAL
BLACK						
4,000-4,499 GRAMSNUMBER RATE		84 3.0	25 .9	17 .6	8 . 3	59 2.1
4,500-4,999 GRAMSNUMBER RATE		18 4.4	14 3.4	13 3.2	1 . 2	4 1.0
5,000 GRAMS OR MORENUMBER RATE		5 8.7	5 8.7	5 8.7	-	-
NOT STATEDNUMBER RATE		129 410.7	124 394.3	124 394.3	-	5 16.3

1/ INCLUDES RACES OTHER THAN WHITE AND BLACK

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LIVE BIRTHS BY BIRTHWEIGHT AND RACE OF MOTHER AND INFANT DEATHS AND INFANT MORTALITY RATES BY AGE AT DEATH, BIRTHWEIGHT, AND RACE OF MOTHER FOR 10 MAJOR CAUSES OF INFANT DEATH: UNITED STATES, 1998 BIRTH COHORT DATA

(INFANT DEATHS WEIGHTED) (INFANT DEATHS ARE UNDER 1 YEAR. NEONATAL DEATHS ARE UNDER 28 DAYS; EARLY NEONATAL, 0-6 DAYS; LATE NEONATAL, 7-27 DAYS; AND POSTNEONATAL, 28 DAYS THROUGH 11 MONTHS)

CAUSE OF DEATH, BIRTHWEIGHT, AND RACE OF MOTHER	LIVE   BIRTHS   	INFANT DEATHS	TOTAL   NEONATAL 	EARLY NEONATAL	LATE NEONATAL	   POST-   NEONATAL 
ALL RACES 1/,						
ALL BIRTHWEIGHTS						
ALL CAUSESNUMBER	3,941,553	28,197	18,874	15,039	3,836	9,323
RATE		715.4	478.9	381.5	97.3	236.5
CONGENITAL ANOMALIES (740-759)NUMBER		6,134	4,538	3,469	1,069	1,597
RATE		155.6	115.1	88.0	27.1	40.5
PREMATURITY (765)NUMBER		4,070	4,018	3,930	88	52
RATE		103.3	101.9	99.7	2.2	1.3
SUDDEN INFANT DEATH SYNDROME (798.0)NUMBER		2,081	176	21	154	1,905
RATE		52.8	4.5	.5	3.9	48.3
MATERNAL COMPLICATIONS (761)NUMBER		1,340	1,334	1,318	16	6
RATE		34.0	33.8	33.4	.4	. 2
RESPIRATORY DISTRESS SYNDROME (769)NUMBER		1,313	1,226	961	264	87
RATE		33.3	31.1	24.4	6.7	2.2
COMPLICATIONS OF PLACENTA,ETC. (762)NUMBER		955	940	907	33	15
RATE		24.2	23.8	23.0	.8	.4
INFECTIONS (771)NUMBER		811	764	345	418	48
RATE		20.6	19.4	8.8	10.6	1.2
ACCIDENTS (E800-E949)NUMBER		713	81	39	42	632
RATE		18.1	2.1	1.0	1.1	16.0
HYPOXIA AND ASPHYXIA (768)NUMBER		459	418	349	69	41
RATE		11.6	10.6	8.9	1.8	1.0
PNEUMONIA AND INFLUENZA (480-487)NUMBER		428	88	26	63	340
RATE		10.9	2.2	.7	1.6	8.6
ALL OTHER CAUSESRATE		9,893 251.0	5,292 134.3	3,674 93.2	1,618 41.0	4,601 116.7

LIVE BIRTHS BY BIRTHWEIGHT AND RACE OF MOTHER AND INFANT DEATHS AND INFANT MORTALITY RATES BY AGE AT DEATH, BIRTHWEIGHT, AND RACE OF MOTHER FOR 10 MAJOR CAUSES OF INFANT DEATH: UNITED STATES, 1998 BIRTH COHORT DATA

(INFANT DEATHS WEIGHTED) (INFANT DEATHS ARE UNDER 1 YEAR. NEONATAL DEATHS ARE UNDER 28 DAYS; EARLY NEONATAL, 0-6 DAYS; LATE NEONATAL, 7-27 DAYS; AND POSTNEONATAL, 28 DAYS THROUGH 11 MONTHS)

CAUSE OF DEATH, BIRTHWEIGHT, AND RACE OF MOTHER	LIVE   BIRTHS   	INFANT DEATHS	   TOTAL   NEONATAL 	   EARLY   NEONATAL 	   LATE   NEONATAL 	   POST-   NEONATAL 
ALL RACES 1/,						
LESS THAN 2,500 GRAMS						
ALL CAUSESNUMBER	299,209	18,352	15,066	12,622	2,444	3,286
RATE		6,133.5	5,035.4	4,218.4	817.0	1,098.2
CONGENITAL ANOMALIES (740-759)NUMBER		3,546	2,936	2,440	496	610
RATE		1,185.2	981.3	815.6	165.8	203.8
PREMATURITY (765)NUMBER		3,892	3,844	3,757	87	49
RATE		1,300.8	1,284.6	1,255.5	29.0	16.3
SUDDEN INFANT DEATH SYNDROME (798.0)NUMBER		408	34	3	31	374
RATE		136.3	11.5	1.0	10.5	124.8
MATERNAL COMPLICATIONS (761)NUMBER		1,250	1,245	1,231	14	5
RATE		417.7	416.0	411.3	4.7	1.7
RESPIRATORY DISTRESS SYNDROME (769)NUMBER		1,239	1,176	926	250	63
RATE		414.2	393.1	309.5	83.7	21.0
COMPLICATIONS OF PLACENTA,ETC. (762)NUMBER		811	799	774	25	11
RATE		270.9	267.2	258.7	8.4	3.8
INFECTIONS (771)NUMBER		676	644	293	351	31
RATE		225.8	215.3	98.0	117.3	10.5
ACCIDENTS (E800-E949)NUMBER		133	24	14	10	108
RATE		44.3	8.1	4.8	3.4	36.2
HYPOXIA AND ASPHYXIA (768)NUMBER		218	209	188	21	9
RATE		72.9	69.8	62.7	7.1	3.1
PNEUMONIA AND INFLUENZA (480-487)NUMBER		192	54	20	34	138
RATE		64.1	18.0	6.5	11.5	46.1
ALL OTHER CAUSESRATE		5,988 2,001.3	4,101 1,370.5	2,976 994.7	1,124 375.7	1,887 630.8

LIVE BIRTHS BY BIRTHWEIGHT AND RACE OF MOTHER AND INFANT DEATHS AND INFANT MORTALITY RATES BY AGE AT DEATH, BIRTHWEIGHT, AND RACE OF MOTHER FOR 10 MAJOR CAUSES OF INFANT DEATH: UNITED STATES, 1998 BIRTH COHORT DATA

(INFANT DEATHS WEIGHTED) (INFANT DEATHS ARE UNDER 1 YEAR. NEONATAL DEATHS ARE UNDER 28 DAYS; EARLY NEONATAL, 0-6 DAYS; LATE NEONATAL, 7-27 DAYS; AND POSTNEONATAL, 28 DAYS THROUGH 11 MONTHS)

CAUSE OF DEATH, BIRTHWEIGHT, AND RACE OF MOTHER	LIVE   BIRTHS   	INFANT DEATHS	   TOTAL   NEONATAL 	   EARLY   NEONATAL 	LATE   NEONATAL 	   POST-   NEONATAL 
ALL RACES 1/,						
2,500 GRAMS OR MORE						
ALL CAUSESNUMBER	3,640,324	9,472	3,458	2,076	1,381	6,014
RATE		260.2	95.0	57.0	37.9	165.2
CONGENITAL ANOMALIES (740-759)NUMBER		2,549	1,567	996	571	982
RATE		70.0	43.1	27.4	15.7	27.0
PREMATURITY (765)NUMBER RATE		55 1.5	55 1.5	54 1.5	1 .0	-
SUDDEN INFANT DEATH SYNDROME (798.0)NUMBER RATE		1,672 45.9	140 3.9	17 .5	123 3.4	1,532 42.1
MATERNAL COMPLICATIONS (761)NUMBER		32	31	29	2	1
RATE		.9	.8	.8	.1	.0
RESPIRATORY DISTRESS SYNDROME (769)NUMBER		67	42	28	14	24
RATE		1.8	1.2	.8	.4	.7
COMPLICATIONS OF PLACENTA,ETC. (762)NUMBER		105	101	92	8	4
RATE		2.9	2.8	2.5	. 2	.1
INFECTIONS (771)NUMBER		133	116	51	65	16
RATE		3.6	3.2	1.4	1.8	.4
ACCIDENTS (E800-E949)NUMBER		580	57	24	32	523
RATE		15.9	1.6	.7	.9	14.4
HYPOXIA AND ASPHYXIA (768)NUMBER		230	200	152	48	29
RATE		6.3	5.5	4.2	1.3	.8
PNEUMONIA AND INFLUENZA (480-487)NUMBER		235	34	6	28	201
RATE		6.5	.9	. 2	.8	5.5
ALL OTHER CAUSESRATE		3,814 104.8	1,113 30.6	625 17.2	488 13.4	2,701 74.2

LIVE BIRTHS BY BIRTHWEIGHT AND RACE OF MOTHER AND INFANT DEATHS AND INFANT MORTALITY RATES BY AGE AT DEATH, BIRTHWEIGHT, AND RACE OF MOTHER FOR 10 MAJOR CAUSES OF INFANT DEATH: UNITED STATES, 1998 BIRTH COHORT DATA

(INFANT DEATHS WEIGHTED) (INFANT DEATHS ARE UNDER 1 YEAR. NEONATAL DEATHS ARE UNDER 28 DAYS; EARLY NEONATAL, 0-6 DAYS; LATE NEONATAL, 7-27 DAYS; AND POSTNEONATAL, 28 DAYS THROUGH 11 MONTHS)

CAUSE OF DEATH, BIRTHWEIGHT, AND RACE OF MOTHER	LIVE   BIRTHS   	INFANT DEATHS	TOTAL   NEONATAL 	EARLY   NEONATAL 	LATE   NEONATAL 	POST-   NEONATAL 
ALL RACES 1/,						
NOT STATED BIRTHWEIGHT						
ALL CAUSESNUMBER RATE	2,020		350 17,348.3	340 16,849.9	10 498.4	23 1,155.8
CONGENITAL ANOMALIES (740-759)NUMBER RATE		39 1,944.1	34 1,694.9	32 1,595.9	2 99.0	5 249.1
PREMATURITY (765)NUMBER RATE		122 6,045.3	119 5,894.3	119 5,894.3	-	3 151.1
SUDDEN INFANT DEATH SYNDROME (798.0)NUMBER RATE		1 51.1	1 51.1	1 51.1	-	-
MATERNAL COMPLICATIONS (761)NUMBER RATE		58 2,881.9	58 2,881.9	58 2,881.9	-	-
RESPIRATORY DISTRESS SYNDROME (769)NUMBER RATE		7 350.6	7 350.6	7 350.6	-	-
COMPLICATIONS OF PLACENTA,ETC. (762)NUMBER RATE		40 1,980.8	40 1,980.8	40 1,980.8	-	-
INFECTIONS (771)NUMBER RATE		3 148.7	3 148.7	1 49.7	2 99.0	-
ACCIDENTS (E800-E949)NUMBER RATE		-	- -	-	- -	-
HYPOXIA AND ASPHYXIA (768)NUMBER RATE		11 554.0	9 453.4	9 453.4	-	2 100.6
PNEUMONIA AND INFLUENZA (480-487)NUMBER RATE		1 50.8	- -	-	-	1 50.8
ALL OTHER CAUSESRATE		91 4,496.8	79 3,892.6	73 3,592.2	6 300.4	12 604.2

LIVE BIRTHS BY BIRTHWEIGHT AND RACE OF MOTHER AND INFANT DEATHS AND INFANT MORTALITY RATES BY AGE AT DEATH, BIRTHWEIGHT, AND RACE OF MOTHER FOR 10 MAJOR CAUSES OF INFANT DEATH: UNITED STATES, 1998 BIRTH COHORT DATA

(INFANT DEATHS WEIGHTED) (INFANT DEATHS ARE UNDER 1 YEAR. NEONATAL DEATHS ARE UNDER 28 DAYS; EARLY NEONATAL, 0-6 DAYS; LATE NEONATAL, 7-27 DAYS; AND POSTNEONATAL, 28 DAYS THROUGH 11 MONTHS)

 CAUSE OF DEATH, BIRTHWEIGHT, AND RACE OF MOTHER     	LIVE   BIRTHS   	INFANT DEATHS	   TOTAL   NEONATAL 	   EARLY   NEONATAL 	   LATE   NEONATAL 	   POST-   NEONATAL 
WHITE, ALL BIRTHWEIGHTS						
ALL CAUSESNUMBER	3,118,727	18,460	12,328	9,724	2,604	6,132
RATE		591.9	395.3	311.8	83.5	196.6
CONGENITAL ANOMALIES (740-759)NUMBER		4,715	3,530	2,726	803	1,186
RATE		151.2	113.2	87.4	25.8	38.0
PREMATURITY (765)NUMBER		2,207	2,179	2,126	53	28
RATE		70.8	69.9	68.2	1.7	.9
SUDDEN INFANT DEATH SYNDROME (798.0)NUMBER		1,372	124	13	111	1,248
RATE		44.0	4.0	.4	3.6	40.0
MATERNAL COMPLICATIONS (761)NUMBER		835	830	821	9	5
RATE		26.8	26.6	26.3	. 3	. 2
RESPIRATORY DISTRESS SYNDROME (769)NUMBER		830	778	610	169	52
RATE		26.6	25.0	19.5	5.4	1.7
COMPLICATIONS OF PLACENTA,ETC. (762)NUMBER		624	614	590	23	10
RATE		20.0	19.7	18.9	.7	.3
INFECTIONS (771)RATE		529 17.0	498 16.0	230 7.4	268 8.6	30 1.0
ACCIDENTS (E800-E949)NUMBER		475	66	31	35	409
RATE		15.2	2.1	1.0	1.1	13.1
HYPOXIA AND ASPHYXIA (768)NUMBER		321	292	241	51	28
RATE		10.3	9.4	7.7	1.6	.9
PNEUMONIA AND INFLUENZA (480-487)NUMBER		261	62	20	42	199
RATE		8.4	2.0	.6	1.4	6.4
ALL OTHER CAUSESRATE		6,291 201.7	3,355 107.6	2,317 74.3	1,039 33.3	2,936 94.1

LIVE BIRTHS BY BIRTHWEIGHT AND RACE OF MOTHER AND INFANT DEATHS AND INFANT MORTALITY RATES BY AGE AT DEATH, BIRTHWEIGHT, AND RACE OF MOTHER FOR 10 MAJOR CAUSES OF INFANT DEATH: UNITED STATES, 1998 BIRTH COHORT DATA

(INFANT DEATHS WEIGHTED) (INFANT DEATHS ARE UNDER 1 YEAR. NEONATAL DEATHS ARE UNDER 28 DAYS; EARLY NEONATAL, 0-6 DAYS; LATE NEONATAL, 7-27 DAYS; AND POSTNEONATAL, 28 DAYS THROUGH 11 MONTHS)

 CAUSE OF DEATH, BIRTHWEIGHT, AND RACE OF MOTHER     	LIVE   BIRTHS   	INFANT DEATHS	   TOTAL   NEONATAL 	   EARLY   NEONATAL 	   LATE   NEONATAL 	   POST-   NEONATAL 
WHITE, LESS THAN 2,500 GRAMS						
ALL CAUSESNUMBER	203,886	11,387	9,479	7,921	1,559	1,907
RATE		5,584.9	4,649.4	3,884.8	764.6	935.5
CONGENITAL ANOMALIES (740-759)NUMBER		2,684	2,269	1,910	359	415
RATE		1,316.4	1,112.8	936.8	175.9	203.6
PREMATURITY (765)NUMBER		2,101	2,074	2,022	53	26
RATE		1,030.4	1,017.5	991.7	25.8	12.9
SUDDEN INFANT DEATH SYNDROME (798.0)NUMBER		229	26	-	26	203
RATE		112.4	12.9	-	12.9	99.5
MATERNAL COMPLICATIONS (761)NUMBER		785	780	772	8	5
RATE		385.3	382.8	378.9	3.9	2.5
RESPIRATORY DISTRESS SYNDROME (769)NUMBER		776	740	583	158	36
RATE		380.5	363.1	285.8	77.3	17.4
COMPLICATIONS OF PLACENTA,ETC. (762)NUMBER		514	508	489	18	6
RATE		252.0	249.0	240.0	8.9	3.0
INFECTIONS (771)NUMBER		424	405	186	219	18
RATE		207.7	198.7	91.3	107.4	9.0
ACCIDENTS (E800-E949)NUMBER		83	19	11	8	64
RATE		40.7	9.5	5.5	3.9	31.2
HYPOXIA AND ASPHYXIA (768)NUMBER		133	129	116	13	4
RATE		65.2	63.2	56.7	6.4	2.0
PNEUMONIA AND INFLUENZA (480-487)NUMBER		110	37	14	22	73
RATE		53.8	18.0	7.1	10.9	35.8
ALL OTHER CAUSESRATE		3,549 1,740.6	2,492 1,222.1	1,817 891.0	675 331.2	1,057 518.4

LIVE BIRTHS BY BIRTHWEIGHT AND RACE OF MOTHER AND INFANT DEATHS AND INFANT MORTALITY RATES BY AGE AT DEATH, BIRTHWEIGHT, AND RACE OF MOTHER FOR 10 MAJOR CAUSES OF INFANT DEATH: UNITED STATES, 1998 BIRTH COHORT DATA

(INFANT DEATHS WEIGHTED) (INFANT DEATHS ARE UNDER 1 YEAR. NEONATAL DEATHS ARE UNDER 28 DAYS; EARLY NEONATAL, 0-6 DAYS; LATE NEONATAL, 7-27 DAYS; AND POSTNEONATAL, 28 DAYS THROUGH 11 MONTHS)

 CAUSE OF DEATH, BIRTHWEIGHT, AND RACE OF MOTHER     	LIVE   BIRTHS   	INFANT DEATHS	   TOTAL   NEONATAL 	   EARLY   NEONATAL 	   LATE   NEONATAL 	   POST-   NEONATAL 
WHITE, 2,500 GRAMS OR MORE						
ALL CAUSESNUMBER	2,913,643	6,865	2,654	1,614	1,040	4,211
RATE		235.6	91.1	55.4	35.7	144.5
CONGENITAL ANOMALIES (740-759)NUMBER		2,002	1,235	791	444	767
RATE		68.7	42.4	27.2	15.2	26.3
PREMATURITY (765)NUMBER RATE		38 1.3	38 1.3	38 1.3	-	-
SUDDEN INFANT DEATH SYNDROME (798.0)NUMBER		1,143	98	13	85	1,045
RATE		39.2	3.4	.5	2.9	35.9
MATERNAL COMPLICATIONS (761)NUMBER RATE		22 .7	22 .7	21 .7	1 .0	-
RESPIRATORY DISTRESS SYNDROME (769)NUMBER		51	35	24	11	16
RATE		1.8	1.2	.8	.4	.6
COMPLICATIONS OF PLACENTA,ETC. (762)NUMBER		83	79	74	5	4
RATE		2.9	2.7	2.5	. 2	.1
INFECTIONS (771)RATE		104 3.6	92 3.2	43 1.5	49 1.7	12 .4
ACCIDENTS (E800-E949)NUMBER		392	47	19	27	345
RATE		13.4	1.6	.7	.9	11.8
HYPOXIA AND ASPHYXIA (768)NUMBER		180	157	118	38	23
RATE		6.2	5.4	4.1	1.3	.8
PNEUMONIA AND INFLUENZA (480-487)NUMBER		150	25	5	20	125
RATE		5.2	.9	. 2	.7	4.3
ALL OTHER CAUSESRATE		2,700 92.7	827 28.4	467 16.0	360 12.3	1,873 64.3

LIVE BIRTHS BY BIRTHWEIGHT AND RACE OF MOTHER AND INFANT DEATHS AND INFANT MORTALITY RATES BY AGE AT DEATH, BIRTHWEIGHT, AND RACE OF MOTHER FOR 10 MAJOR CAUSES OF INFANT DEATH: UNITED STATES, 1998 BIRTH COHORT DATA

(INFANT DEATHS WEIGHTED) (INFANT DEATHS ARE UNDER 1 YEAR. NEONATAL DEATHS ARE UNDER 28 DAYS; EARLY NEONATAL, 0-6 DAYS; LATE NEONATAL, 7-27 DAYS; AND POSTNEONATAL, 28 DAYS THROUGH 11 MONTHS)

CAUSE OF DEATH, BIRTHWEIGHT, AND RACE OF MOTHER	LIVE   BIRTHS   	INFANT DEATHS	   TOTAL   NEONATAL 	   EARLY   NEONATAL 	LATE   NEONATAL 	   POST-   NEONATAL 
WHITE, NOT STATED BIRTHWEIGHT						
ALL CAUSESNUMBER RATE			195 16,278.9	190 15,859.1	5 419.8	13 1,101.0
CONGENITAL ANOMALIES (740-759)NUMBER RATE		29 2,434.8	26 2,182.2	25 2,098.7	1 83.5	3 252.6
PREMATURITY (765)NUMBER RATE		68 5,711.9	66 5,543.4	66 5,543.4	- -	2 168.5
SUDDEN INFANT DEATH SYNDROME (798.0)NUMBER RATE		-	-	-	-	-
MATERNAL COMPLICATIONS (761)NUMBER RATE		28 2,304.0	28 2,304.0	28 2,304.0	-	-
RESPIRATORY DISTRESS SYNDROME (769)NUMBER RATE		3 255.2	3 255.2	3 255.2	-	-
COMPLICATIONS OF PLACENTA,ETC. (762)NUMBER RATE		27 2,243.8	27 2,243.8	27 2,243.8	-	-
INFECTIONS (771)NUMBER RATE		1 83.7	1 83.7	1 83.7	-	-
ACCIDENTS (E800-E949)NUMBER RATE		-	-	-	-	-
HYPOXIA AND ASPHYXIA (768)NUMBER RATE		8 678.1	7 594.6	7 594.6	-	1 83.5
PNEUMONIA AND INFLUENZA (480-487)NUMBER RATE		1 85.7	-	-	-	1 85.7
ALL OTHER CAUSESRATE		43 3,582.5	37 3,071.9	33 2,735.6	4 336.3	6 510.6

LIVE BIRTHS BY BIRTHWEIGHT AND RACE OF MOTHER AND INFANT DEATHS AND INFANT MORTALITY RATES BY AGE AT DEATH, BIRTHWEIGHT, AND RACE OF MOTHER FOR 10 MAJOR CAUSES OF INFANT DEATH: UNITED STATES, 1998 BIRTH COHORT DATA

(INFANT DEATHS WEIGHTED) (INFANT DEATHS ARE UNDER 1 YEAR. NEONATAL DEATHS ARE UNDER 28 DAYS; EARLY NEONATAL, 0-6 DAYS; LATE NEONATAL, 7-27 DAYS; AND POSTNEONATAL, 28 DAYS THROUGH 11 MONTHS)

CAUSE OF DEATH, BIRTHWEIGHT, AND RACE OF MOTHER	LIVE   BIRTHS   	INFANT DEATHS	   TOTAL   NEONATAL 	   EARLY   NEONATAL 	   LATE   NEONATAL 	   POST-   NEONATAL 
BLACK, ALL BIRTHWEIGHTS						
ALL CAUSESNUMBER	609,902	8,392	5,677	4,629	1,048	2,715
RATE		1,376.0	930.8	759.0	171.9	445.2
CONGENITAL ANOMALIES (740-759)NUMBER		1,091	766	567	198	326
RATE		178.9	125.6	93.0	32.5	53.4
PREMATURITY (765)NUMBER		1,686	1,662	1,630	32	23
RATE		276.4	272.5	267.2	5.3	3.8
SUDDEN INFANT DEATH SYNDROME (798.0)NUMBER		613	39	6	33	574
RATE		100.6	6.4	1.0	5.4	94.1
MATERNAL COMPLICATIONS (761)NUMBER		444	443	438	5	1
RATE		72.7	72.6	71.8	. 8	. 2
RESPIRATORY DISTRESS SYNDROME (769)NUMBER		436	402	315	88	33
RATE		71.5	66.0	51.6	14.4	5.5
COMPLICATIONS OF PLACENTA,ETC. (762)NUMBER		299	294	285	9	5
RATE		49.0	48.1	46.7	1.5	. 8
INFECTIONS (771)NUMBER		248	231	101	131	16
RATE		40.6	38.0	16.5	21.5	2.7
ACCIDENTS (E800-E949)NUMBER		209	11	7	4	198
RATE		34.2	1.8	1.2	. 7	32.4
HYPOXIA AND ASPHYXIA (768)NUMBER		113	103	86	17	10
RATE		18.6	16.9	14.1	2.8	1.7
PNEUMONIA AND INFLUENZA (480-487)NUMBER		132	22	5	17	109
RATE		21.6	3.6	. 8	2.8	18.0
ALL OTHER CAUSESRATE		3,122 511.9	1,703 279.3	1,190 195.1	513 84.2	1,419 232.6

LIVE BIRTHS BY BIRTHWEIGHT AND RACE OF MOTHER AND INFANT DEATHS AND INFANT MORTALITY RATES BY AGE AT DEATH, BIRTHWEIGHT, AND RACE OF MOTHER FOR 10 MAJOR CAUSES OF INFANT DEATH: UNITED STATES, 1998 BIRTH COHORT DATA

(INFANT DEATHS WEIGHTED) (INFANT DEATHS ARE UNDER 1 YEAR. NEONATAL DEATHS ARE UNDER 28 DAYS; EARLY NEONATAL, 0-6 DAYS; LATE NEONATAL, 7-27 DAYS; AND POSTNEONATAL, 28 DAYS THROUGH 11 MONTHS)

 CAUSE OF DEATH, BIRTHWEIGHT, AND RACE OF MOTHER       	LIVE   BIRTHS   	INFANT DEATHS	   TOTAL   NEONATAL 	   EARLY   NEONATAL 	   LATE   NEONATAL 	   POST-   NEONATAL 
BLACK, LESS THAN 2,500 GRAMS						
ALL CAUSESNUMBER RATE	79,772	6,165 7,728.0		4,148 5,200.0	785 984.6	1,231 1,543.4
CONGENITAL ANOMALIES (740-759)NUMBER		677	519	407	112	158
RATE		848.4	650.1	509.9	140.2	198.3
PREMATURITY (765)NUMBER RATE		1,629 2,041.6		1,574 1,973.2	32 40.4	22 28.0
SUDDEN INFANT DEATH SYNDROME (798.0)NUMBER		171	7	2	5	164
RATE		213.9	8.9	2.6	6.3	205.0
MATERNAL COMPLICATIONS (761)NUMBER RATE		411 515.3	411 515.3	407 510.2	4 5.0	-
RESPIRATORY DISTRESS SYNDROME (769)NUMBER		417	391	306	85	25
RATE		522.1	490.3	384.1	106.2	31.8
COMPLICATIONS OF PLACENTA,ETC. (762)NUMBER		271	266	259	7	5
RATE		340.1	333.7	324.9	8.9	6.4
INFECTIONS (771)NUMBER		225	212	95	118	12
RATE		281.5	266.2	118.5	147.7	15.2
ACCIDENTS (E800-E949)NUMBER		47	4	3	1	43
RATE		58.4	5.1	3.8	1.3	53.3
HYPOXIA AND ASPHYXIA (768)NUMBER		69	65	57	8	4
RATE		86.4	81.3	71.2	10.1	5.1
PNEUMONIA AND INFLUENZA (480-487)NUMBER		68	14	4	10	54
RATE		85.2	17.8	5.2	12.6	67.3
ALL OTHER CAUSESRATE		2,182 2,735.3		1,034 1,296.5	404 505.9	744 932.9

LIVE BIRTHS BY BIRTHWEIGHT AND RACE OF MOTHER AND INFANT DEATHS AND INFANT MORTALITY RATES BY AGE AT DEATH, BIRTHWEIGHT, AND RACE OF MOTHER FOR 10 MAJOR CAUSES OF INFANT DEATH: UNITED STATES, 1998 BIRTH COHORT DATA

(INFANT DEATHS WEIGHTED) (INFANT DEATHS ARE UNDER 1 YEAR. NEONATAL DEATHS ARE UNDER 28 DAYS; EARLY NEONATAL, 0-6 DAYS; LATE NEONATAL, 7-27 DAYS; AND POSTNEONATAL, 28 DAYS THROUGH 11 MONTHS)

 CAUSE OF DEATH, BIRTHWEIGHT, AND RACE OF MOTHER     	LIVE   BIRTHS   	INFANT DEATHS	   TOTAL   NEONATAL 	   EARLY   NEONATAL 	   LATE   NEONATAL 	   POST-   NEONATAL 
BLACK, 2,500 GRAMS OR MORE						
ALL CAUSESNUMBER	529,816	2,099	620	357	263	1,479
RATE		396.1	117.0	67.4	49.6	279.1
CONGENITAL ANOMALIES (740-759)NUMBER		410	243	157	87	166
RATE		77.3	45.9	29.5	16.3	31.4
PREMATURITY (765)NUMBER RATE		11 2.2	11 2.2	11 2.2	- -	-
SUDDEN INFANT DEATH SYNDROME (798.0)NUMBER		442	31	3	28	411
RATE		83.4	5.9	. 6	5.3	77.5
MATERNAL COMPLICATIONS (761)NUMBER		7	6	5	1	1
RATE		1.3	1.2	1.0	. 2	.2
RESPIRATORY DISTRESS SYNDROME (769)NUMBER		15	7	4	3	8
RATE		2.9	1.4	. 8	. 6	1.5
COMPLICATIONS OF PLACENTA,ETC. (762)NUMBER RATE		15 2.9	15 2.9	13 2.5	2 . 4	-
INFECTIONS (771)NUMBER		23	19	6	13	4
RATE		4.4	3.6	1.1	2.5	. 8
ACCIDENTS (E800-E949)NUMBER		162	7	4	3	155
RATE		30.6	1.3	. 8	. 6	29.3
HYPOXIA AND ASPHYXIA (768)NUMBER		41	36	27	9	5
RATE		7.8	6.9	5.2	1.7	1.0
PNEUMONIA AND INFLUENZA (480-487)NUMBER		64	8	1	7	56
RATE		12.0	1.5	. 2	1.3	10.5
ALL OTHER CAUSESRATE		908 171.3	235 44.4	125 23.6	110 20.7	673 126.9

LIVE BIRTHS BY BIRTHWEIGHT AND RACE OF MOTHER AND INFANT DEATHS AND INFANT MORTALITY RATES BY AGE AT DEATH, BIRTHWEIGHT, AND RACE OF MOTHER FOR 10 MAJOR CAUSES OF INFANT DEATH: UNITED STATES, 1998 BIRTH COHORT DATA

(INFANT DEATHS WEIGHTED) (INFANT DEATHS ARE UNDER 1 YEAR. NEONATAL DEATHS ARE UNDER 28 DAYS; EARLY NEONATAL, 0-6 DAYS; LATE NEONATAL, 7-27 DAYS; AND POSTNEONATAL, 28 DAYS THROUGH 11 MONTHS)

(RATES ARE PER 100,000 LIVE BIRTHS)

CAUSE OF DEATH, BIRTHWEIGHT, AND RACE OF MOTHER	LIVE   BIRTHS   	INFANT DEATHS	   TOTAL   NEONATAL 	   EARLY   NEONATAL 	LATE   NEONATAL 	   POST-   NEONATAL 
BLACK, NOT STATED BIRTHWEIGHT						
ALL CAUSESNUMBER RATE	314	129 41,065.1		124 39,431.2	-	5 1,633.9
CONGENITAL ANOMALIES (740-759)NUMBER RATE		5 1,613.2	4 1,292.7	4 1,292.7	-	1 320.4
PREMATURITY (765)NUMBER RATE		46 14,502.4	45 14,173.7	45 14,173.7	- -	1 328.7
SUDDEN INFANT DEATH SYNDROME (798.0)NUMBER RATE		1 328.5	1 328.5	1 328.5	-	-
MATERNAL COMPLICATIONS (761)NUMBER RATE		26 8,133.5	26 8,133.5	26 8,133.5	- -	-
RESPIRATORY DISTRESS SYNDROME (769)NUMBER RATE		4 1,282.0	4 1,282.0	4 1,282.0	-	-
COMPLICATIONS OF PLACENTA,ETC. (762)NUMBER RATE		12 3,857.2	12 3,857.2	12 3,857.2	- -	-
INFECTIONS (771)NUMBER RATE		-	-	-	-	-
ACCIDENTS (E800-E949)NUMBER RATE		-	-	-	-	-
HYPOXIA AND ASPHYXIA (768)NUMBER RATE		3 976.7	2 648.1	2 648.1	-	1 328.7
PNEUMONIA AND INFLUENZA (480-487)NUMBER RATE		-	-	-	-	-
ALL OTHER CAUSESRATE		33 10,371.5	31 9,715.5	31 9,715.5	-	2 656.0

1/ INCLUDES RACES OTHER THAN WHITE AND BLACK

UNLINKED INFANT DEATHS BY RACE, AGE AT DEATH, AND STATE OF RESIDENCE: UNITED STATES, PUERTO RICO, VIRGIN ISLANDS, GUAM -- 1998 BIRTH COHORT DATA

(INFANT DEATHS ARE UNDER 1 YEAR. NEONATAL DEATHS ARE UNDER 28 DAYS; EARLY NEONATAL, 0-6 DAYS; LATE NEONATAL, 7-27 DAYS; AND POSTNEONATAL, 28 DAYS THROUGH 11 MONTHS)

#### (DATA IN THIS TABLE IS FOR INFANT DEATHS IN 1998 THAT ARE NOT INCLUDED IN THE LINKED FILE BECAUSE THEY WERE NOT LINKED WITH THEIR CORRESPONDING BIRTH CERTIFICATES. SEE METHODOLOGY SECTION. RESIDENCE IS OF INFANT DECEDENT; RACE IS FROM DEATH CERTIFICATE.)

Area and Race of Child 1/	Infant	Total NeoNatal	Early NeoNatal	Late NeoNatal	Post- NeoNatal
United States 2/	478	342	306	36	136
WHITE	326	228	206	22	98
BLACK	133	101	88	13	32
Alabama	1	1	-	1	-
WHITE	1	1	-	1	-
BLACK	-	-	-	-	-
Alaska	1	-	-	-	1
WHITE	1	-	-	-	1
BLACK	-	-	-	-	-
Arizona	11	4	4	-	7
WHITE	9	4	4	-	5
BLACK	1	- 5	- 4	- 1	1 4
Arkansas WHITE	9	5	4	1	4
BLACK	-	-	4	-	4
California	111	97	85	12	14
WHITE	79	67	56	11	12
BLACK	26	24	24	-	2
Colorado	1		-	-	1
WHITE	1	-	-	-	1
BLACK	-	-	-	-	-
Connecticut	3	1	1	-	2
WHITE	3	1	1	-	2
BLACK	-	-	-	-	-
Delaware	-	-	-	-	-
WHITE	-	-	-	-	-
BLACK	- 1	-	-	-	-
District of Columbia WHITE	1	-	-	-	1
BLACK	1	-	-	-	- 1
Florida	2	_	_	_	2
WHITE	1	-	-	-	1
BLACK	1	-	-	-	1
Georgia	-	-	-	-	-
WHITE	-	-	-	-	-
BLACK	-	-	-	-	-
Hawaii	-	-	-	-	-
WHITE	-	-	-	-	-
BLACK	-	-	-	-	-
Idaho	3	1	1	-	2
WHITE	3	1	1	-	2
BLACK	- 22	- 1 2	- 9	- 4	- 9
Illinois WHITE	11	13 7	9	4 1	9
BLACK	9	5	2	3	4
Indiana	11	10	8	2	1
WHITE	6	5	5	-	1
BLACK	4	4	2	2	-
Iowa	-	-	-	-	-
WHITE	-	-	-	-	-
BLACK	-	-	-	-	-

UNLINKED INFANT DEATHS BY RACE, AGE AT DEATH, AND STATE OF RESIDENCE: UNITED STATES, PUERTO RICO, VIRGIN ISLANDS, GUAM -- 1998 BIRTH COHORT DATA

(INFANT DEATHS ARE UNDER 1 YEAR. NEONATAL DEATHS ARE UNDER 28 DAYS; EARLY NEONATAL, 0-6 DAYS; LATE NEONATAL, 7-27 DAYS; AND POSTNEONATAL, 28 DAYS THROUGH 11 MONTHS)

# (DATA IN THIS TABLE IS FOR INFANT DEATHS IN 1998 THAT ARE NOT INCLUDED IN THE LINKED FILE BECAUSE THEY WERE NOT LINKED WITH THEIR CORRESPONDING BIRTH CERTIFICATES. SEE METHODOLOGY SECTION. RESIDENCE IS OF INFANT DECEDENT; RACE IS FROM DEATH CERTIFICATE.)

Area and Race of Child 1/	Infant	Total NeoNatal	Early NeoNatal	Late NeoNatal	Post- NeoNatal
Kansas	3	1	1	-	2
WHITE	3	1	1	-	2
BLACK	-	-	-	-	-
Kentucky	8	7	7	-	1
WHITE	6	5	5	-	1
BLACK	2	2	2	-	-
Louisiana	12	7	7	-	5
WHITE	4	2	2	-	2
BLACK	_8	_5	5	-	3
Maine	2	2	2	-	-
WHITE	2	2	2	-	-
BLACK	- 7	- 2	- 2	-	- 5
Maryland WHITE	3	-	2 -	-	3
BLACK	3 4	- 2	- 2	-	2
Massachusetts	9	2 8	7	-	1
WHITE	6	6	5	1	-
BLACK.	3	2	2	-	1
Michigan	13	10	9	1	3
WHITE	5	2	2	-	3
BLACK	8	8	7	1	-
Minnesota	-	-	-	-	-
WHITE	-	-	-	-	-
BLACK	-	-	-	-	-
Mississippi	2	-	-	-	2
WHITE	2	-	-	-	2
BLACK	-	-	-	-	-
Missouri	8	8	8	-	-
WHITE	3	3	3	-	-
BLACK	5	5	5	-	-
Montana	2	-	-	-	2
WHITE	2	-	-	-	2
BLACK	-	-	-	-	-
Nebraska	-	-	-	-	-
WHITE	-	-	-	-	-
BLACK Nevada	- 8	- 4	- 3	- 1	- 4
WHITE	o 7	4	3	1	4
BLACK	1	-	-	-	1
New Hampshire	-	-	-	_	-
WHITE	-	-	-	-	-
BLACK	_	-	-	_	-
New Jersey	14	11	11	-	3
WHITE	7	6	6	-	1
BLACK	7	5	5	-	2
New Mexico	10	8	7	1	2
WHITE	5	4	3	1	1
BLACK	2	2	2	-	-

UNLINKED INFANT DEATHS BY RACE, AGE AT DEATH, AND STATE OF RESIDENCE: UNITED STATES, PUERTO RICO, VIRGIN ISLANDS, GUAM -- 1998 BIRTH COHORT DATA

(INFANT DEATHS ARE UNDER 1 YEAR. NEONATAL DEATHS ARE UNDER 28 DAYS; EARLY NEONATAL, 0-6 DAYS; LATE NEONATAL, 7-27 DAYS; AND POSTNEONATAL, 28 DAYS THROUGH 11 MONTHS)

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Area and Race of Child 1/	Infant	Total NeoNatal	Early NeoNatal	Late NeoNatal	Post- NeoNatal
New York State	16	7	6	1	9
WHITE	12	5	5	-	7
BLACK	4	2	1	1	2
New York City	-	-	-	-	-
WHITE	-	-	-	-	-
BLACK	-	-	-	-	-
North Carolina	18	8	8	-	10
WHITE	8	5	5	-	3
BLACK	10	3	3	-	7
North Dakota	3	-	-	-	3
WHITE	2	-	-	-	2
BLACK	-	-	-	-	-
Ohio	-	-	-	-	-
WHITE	-	-	-	-	-
BLACK	-	-	-	-	-
Oklahoma	59	43	40	3	16
WHITE	45	31	29	2	14
BLACK	14	12	11	1	2
Oregon	31	26	23	3	5
WHITEBLACK	21 6	18 6	17 4	1 2	3
Pennsylvania	1	0	4	2	- 1
WHITE	1				1
BLACK.	-	_	_	_	-
Rhode Island	15	12	11	1	3
WHITE	8		6	-	2
BLACK	6	5	4	1	1
South Carolina	-	-	-	-	-
WHITE	-	-	-	-	-
BLACK	-	-	-	-	-
South Dakota	-	-	-	-	-
WHITE	-	-	-	-	-
BLACK	-	-	-	-	-
Tennessee	-	-	-	-	-
WHITE	-	-	-	-	-
BLACK	-	-	-	-	-
Texas	-	-	-	-	-
WHITE BLACK	-	-	-	-	-
Utah	46	36	32	4	10
WHITE	37	29	27	2	8
BLACK	9	7	5	2	2
Vermont	1	1	1	-	-
WHITE	1	1	1	-	-
BLACK	-	-	-	-	-
Virginia	-	-	-	-	-
WHITE	-	-	-	-	-
BLACK	-	-	-	-	-

UNLINKED INFANT DEATHS BY RACE, AGE AT DEATH, AND STATE OF RESIDENCE: UNITED STATES, PUERTO RICO, VIRGIN ISLANDS, GUAM -- 1998 BIRTH COHORT DATA

(INFANT DEATHS ARE UNDER 1 YEAR. NEONATAL DEATHS ARE UNDER 28 DAYS; EARLY NEONATAL, 0-6 DAYS; LATE NEONATAL, 7-27 DAYS; AND POSTNEONATAL, 28 DAYS THROUGH 11 MONTHS)

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Area and Race of Child 1/	Infant	Total NeoNatal	Early NeoNatal	Late NeoNatal	Post- NeoNatal
Washington		5	5		
WHITE	5	3	3	-	2
BLACK	2	2	2	-	-
West Virginia	4	3	3	-	1
WHITE	4	3	3	-	1
BLACK	-	-	-	-	-
Wisconsin	3	1	1	-	2
WHITE	3	1	1	-	2
BLACK	-	-	-	-	-
Wyoming	-	-	-	-	-
WHITE	-	-	-	-	-
BLACK	-	-	-	-	-
Puerto Rico 3/	-	-	-	-	-
WHITE	-	-	-	-	-
BLACK	-	-	-	-	-
Virgin Islands 3/	4	4	4	-	-
WHITE	4	4	4	-	-
BLACK	-	-	-	-	-
Guam 3/	3	1	1	-	2
WHITE	1	-	-	-	1
BLACK	2	1	1	-	1

/1 Totals for geographic areas include races other than white and black.

/2 Excludes data for Foreign Residents, Puerto Rico, Virgin Islands, and Guam.

/3 Data from the Puerto Rico, Virgin Islands, and Guam file.

**TECHNICAL APPENDIX FROM** 

# VITAL STATISTICS OF THE UNITED STATES

# **1998**

NATALITY

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

CENTERS FOR DISEASE CONTROL AND PREVENTION NATIONAL CENTER FOR HEALTH STATISTICS

Hyattsville, Maryland: March 2000

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A copy of the technical appendix may be obtained by contacting the National Center for Health Statistics, Reproductive Statistics Branch at 301-458-4111.

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# **Definition of live birth**

Every product of conception that gives a sign of life after birth, regardless of the length of the pregnancy, is considered a live birth. This concept is included in the definition set forth by the World Health Organization (1):

Live birth is the complete expulsion or extraction from its mother of a product of conception, irrespective of the duration of pregnancy, which, after such separation, breathes or shows any other evidence of life, such as beating of the heart, pulsation of the umbilical cord, or definite movement of voluntary muscles, whether or not the umbilical cord has been cut or the placenta is attached; each product of such a birth is considered liveborn.

This definition distinguishes in precise terms a live birth from a fetal death (see the section on fetal deaths in the Technical Appendix of volume II, *Vital Statistics of the United States*). In the interest of comparable natality statistics, both the Statistical Commission of the United Nations and the National Center for Health Statistics (NCHS) have adopted this definition (2,3).

# History of birth-registration area

The national birth-registration area was proposed in 1850 and established in 1915. By 1933 all 48 States and the District of Columbia were participating in the registration system. The organized territories of Hawaii and Alaska were admitted in 1929 and 1950, respectively; data from these areas were prepared separately until they became States--Alaska in 1959 and Hawaii in 1960. Currently the birth-registration system of the United States covers the 50 States, the District of Columbia, the independent registration area of New York City, Puerto Rico, the U.S. Virgin Islands, Guam, American Samoa, and the Commonwealth of the Northern Mariana Islands. However, in the statistical tabulations, "United States" refers only to the aggregate of the 50 States (including New York City) and the District of Columbia.

The original birth-registration area of 1915 consisted of 10 States and the District of Columbia. The growth of this area is indicated in table 4-1. This table also presents for each year through 1932 the estimated midyear population of the United States and of those States included in the registration system.

Because of the growth of the area for which data have been collected and tabulated, a national series of geographically comparable data before 1933 can be obtained only by estimation. Annual estimates of births have been prepared by P. K. Whelpton for 1909-34 (4). These estimates include adjustments for underregistration and for States that were not part of the birth-registration area before 1933.

# Sources of data

#### **Natality statistics**

Since 1985 natality statistics for all States and the District of Columbia have been based on information from the total file of records. The information is received on computer data tapes coded by the States and provided to NCHS through the Vital Statistics Cooperative Program. NCHS receives these tapes from the registration offices of all States, the District of Columbia, and New York City. Information for Puerto Rico is also received on computer tapes through the Vital Statistics Cooperative Program. Information for the Virgin Islands and Guam is obtained from microfilm copies of original birth certificates and is based on the total file of records for all years. Data from American Samoa first became available in 1997. Data from the Commonwealth of the Northern Mariana Islands (referred to as Northern Marianas) first became available in 1998. Similar to data from the Virgin Islands and Guam, the data are obtained from microfilm copies of original birth certificates and are based on the total file of records.

Birth statistics for years prior to 1951 and for 1955 are based on the total file of birth records. Statistics for 1951-54, 1956-66, and 1968-71 are based on 50-percent samples except for data for Guam and the Virgin Islands, which are based on all records filed. During the processing of the 1967 data the sampling rate was reduced from 50 percent to 20 percent. For details of this procedure and its consequences for the 1967 data see pages 3-9 to 3-11 in volume I of *Vital Statistics of the United States*, 1967. From 1972 to 1984 statistics are based on all records filed in the States submitting computer tapes and on a 50-percent sample of records in all other States.

Information for years prior to 1970 for Puerto Rico, the Virgin Islands, and Guam is published in the annual vital statistics reports of the Department of Health of the Commonwealth of Puerto Rico, the Department of Public Health of the Virgin Islands, the Department of Public Health and Social Services of the Government of Guam, and in selected *Vital Statistics of the United States* annual reports.

U.S. natality data are limited to births occurring within the United States, including those occurring to U.S. residents and nonresidents. Births to nonresidents of the United States have been excluded from all tabulations by place of residence beginning in 1970 (for further discussion see "Classification by occurrence and residence"). Births occurring to U.S. citizens outside the United States are not included in any tabulations in this report. Similarly the data for Puerto Rico, the Virgin Islands, Guam, and American Samoa are limited to births registered in these areas.

# **Standard Certificate of Live Birth**

The U.S. Standard Certificate of Live Birth, issued by the Public Health Service, has served for many years as the principal means of attaining uniformity in the content of the documents used to collect information on births in the United States. It has been modified in each State to the extent required by the particular State's needs or by special provisions of the State's vital statistics law. However, most State certificates conform closely in content to the standard certificate.

The first standard certificate of birth was developed in 1900. Since then, it has been revised periodically by the national vital statistics agency through consultation with State health officers and registrars; Federal agencies concerned with vital statistics; national, State, and county medical societies; and others working in public health, social welfare, demography, and insurance. This procedure has assured careful evaluation of each item for its current and future usefulness for legal, medical, demographic, and research purposes. New items have been added when necessary, and old

items have been modified to ensure better reporting or, in some cases, dropped when their usefulness appeared to be limited.

1989 revision--Effective January 1, 1989, a revised U.S. Standard Certificate of Live Birth (figure 4-A) replaced the 1978 revision. This revision provided a wide variety of new information on maternal and infant health characteristics, representing a significant departure from previous versions in both content and format. The most significant format change was the use of check boxes to obtain detailed medical and health information about the mother and child. It has been demonstrated that this format produces higher quality and more complete information than do open-ended items.

The reformatted items included "Medical Risk Factors for This Pregnancy," which combines the former items "Complications of Pregnancy" and "Concurrent Illnesses or Conditions Affecting the Pregnancy." "Complications of Labor and/or Delivery" and "Congenital Anomalies of Child" also have been revised from the open-ended format. For each of these items at least 15 specific conditions have been identified.

Several new items were added to the revised certificate. Included are items to obtain information on tobacco and alcohol use during pregnancy, weight gain during pregnancy, obstetric procedures, method of delivery, and abnormal conditions of the newborn. These items can be used to monitor the health practices of the mother that can affect pregnancy and the use of technology in childbirth, and to identify babies with specific abnormal conditions. When combined with other socioeconomic and health data, these items provide a wealth of information relevant to the etiology of low birth weight and other adverse pregnancy outcomes.

Another modification was the addition of a Hispanic identifier for the mother and father. Although NCHS had recommended that States add items to identify the Hispanic or ethnic origin of the newborn's parents, concurrent with the 1978 revision of the U.S. Standard Certificate of Live Birth and reported data from the cooperating States since that year, the item was new to the U.S. Standard Certificate for 1989.

The 1989 revised certificate also provided more detail than previously requested on the birth attendant and place of birth. This permits a more in-depth analysis of the number and characteristics of births by attendant and type of facility and a comparison of differences in outcome. For further discussion see individual sections for each item.

# **Classification of data**

One of the principal values of vital statistics data is realized through the presentation of rates that are computed by relating the vital events of a class to the population of a similarly defined class. Vital statistics and population statistics, therefore, must be classified according to similarly defined systems and tabulated in comparable groups. Even when the variables common to both, such as geographic area, age, race, and sex, have been similarly classified and tabulated, differences between the enumeration method of obtaining population data and the registration method of obtaining vital statistics data may result in significant discrepancies.

The general rules used to classify geographic and personal items for live births are set forth in "Vital Statistics Classification and Coding Instructions for Live Birth Records, 1998," *NCHS Instruction Manual*, Part 3a. The classification of certain important items is discussed in the following pages. See table A for a listing of items and the percent of records that were not stated for each State, Puerto Rico, Virgin Islands, Guam, American Samoa, and the Northern Marianas.

#### **Classification by occurrence and residence**

Births to U.S. residents occurring outside this country are not reallocated to the United States. In tabulations by place of residence, births occurring within the United States to U.S. citizens and to resident aliens are allocated to the usual place of residence of the mother in the United States, as reported on the birth certificate. Beginning in 1970 births to nonresidents of the United States occurring in the United States are excluded from these tabulations. From 1966 to 1969 births occurring in the United States to mothers who were nonresidents of the United States were considered as births to residents of the exact place of occurrence; in 1964 and 1965 all such births were allocated to "balance of county" of

occurrence even if the birth occurred in a city. The change in coding beginning in 1970 to exclude births to nonresidents of the United States from residence data significantly affects the comparability of data with years before 1970 only for Texas.

For the total United States the tabulations by place of residence and by place of occurrence are not identical. Births to nonresidents of the United States are included in data by place of occurrence but excluded from data by place of residence, as previously indicated. See table B for the number of births by residence and occurrence for the 50 States and the District of Columbia for 1998.

Residence error--A nationwide test of birth-registration completeness in 1950 provided measures of residence error for natality statistics. According to this test, errors in residence reporting for the country as a whole tend to overstate the number of births to residents of urban areas and to understate the number of births to residents of other areas. This tendency has assumed special importance because of a concomitant development--the increased utilization of hospitals in cities by residents of nearby places--with the result that a number of births are erroneously reported as having occurred to residents of urban areas. Another factor that contributes to this overstatement of urban births is the customary procedure of using "city" addresses for persons living outside the city limits.

*Incomplete residence--*Beginning in 1973 where only the State of residence is reported with no city or county specified and the State named is different from the State of occurrence, the birth is allocated to the largest city of the State of residence. Before 1973 such births were allocated to the exact place of occurrence.

# **Geographic classification**

The rules followed in the classification of geographic areas for live births are contained in the instruction manual mentioned previously. The geographic code structure for 1998 is given in another manual, "Vital Records Geographic Classification, 1994," *NCHS Instruction Manual*, Part 8.

*United States*--In the statistical tabulations, "United States" refers only to the aggregate of the 50 States and the District of Columbia. Alaska has been included in the U.S. tabulations since 1959 and Hawaii since 1960.

*Metropolitan statistical areas*--The metropolitan statistical areas and primary metropolitan statistical areas (MSA's and PMSA's) used in this report are those established by the U.S. Office of Management and Budget as of April 1, 1990, and used by the U.S. Bureau of the Census (5) except in the New England States.

Except in the New England States, an MSA has either a city with a population of at least 50,000, or a Bureau of the Census urbanized area of at least 50,000 and a total MSA population of at least 100,000. A PMSA consists of a large urbanized county, or cluster of counties, that demonstrates very strong internal economic and social links and has a population over 1 million. When PMSA's are defined, the large area of which they are component parts is designated a Consolidated Metropolitan Statistical Area (CMSA) (6).

In the New England States the U.S. Office of Management and Budget uses towns and cities rather than counties as geographic components of MSA's and PMSA's. NCHS cannot, however, use this classification for these States because its data are not coded to identify all towns. Instead, the New England County Metropolitan Areas (NECMA's) are used. These areas are established by the U.S. Office of Management and Budget (7) and are made up of county units.

*Metropolitan and nonmetropolitan counties*— Independent cities and counties included in MSA's and PMSA's or NECMA's are included in data for metropolitan counties; all other counties are classified as nonmetropolitan.

*Population-size groups--*Beginning in 1994 vital statistics data for cities and certain other urban places have been classified according to the population enumerated in the 1990 Census of Population. Data are available for individual cities and other urban places of 100,000 or more population. Data for the remaining areas not separately identified are shown in the tables under the heading "Balance of area" or "Balance of county." Classification of areas for 1982-93 was determined by the population enumerated in the 1980 Census of Population. As a result of changes in the enumerated population between 1980 and 1990, some urban places identified in previous reports are no longer included, and a number of other urban places have been added.

Urban places other than incorporated cities for which vital statistics data are shown in this report include the following:

- <sup>c</sup> Each town in New England, New York, and Wisconsin and each township in Michigan, New Jersey, and Pennsylvania that had no incorporated municipality as a subdivision and had either 25,000 inhabitants or more, or a population of 10,000 to 25,000 and a density of 1,000 persons or more per square mile.
- C Each county in States other than those indicated above that had no incorporated municipality within its boundary and had a density of 1,000 persons or more per square mile. (Arlington County, Virginia, is the only county classified as urban under this rule.)
- C Each place in Hawaii with 10,000 or more population. (There are no incorporated cities in Hawaii.)

#### **Race or national origin**

Beginning with the 1989 data year birth data are tabulated primarily by race of mother. In 1988 and prior years the race or national origin shown in tabulations was that of the newborn child. However, beginning with the 1992 issue of *Vital Statistics of the United States, Volume I, Natality*, trend data for years beginning with 1980 have been retabulated by race of mother. The race of the child was determined for statistical purposes by an algorithm based on the race of the mother and father as reported on the birth certificate. When the parents were of the same race, the race of the child was assigned to the race of the other parent. When the parents were of different races and one parent was white, the child was assigned to the race of the father, with one exception--if either parent was Hawaiian, the child was assigned to Hawaiian. If race was missing for one parent, the child was assigned the race of the parent for whom it was reported. When information on race was missing for both parents, the race of the child was considered not stated and the birth was allocated according to rules discussed on page 4 of the Technical Appendix, volume I, *Vital Statistics of the United States*, 1988. In 1989 the criteria for reporting the race of the parents did not change and continues to reflect the response of the informant (usually the mother).

The most important factor influencing the decision to tabulate births by race of the mother was the decennial revision of the U.S. Standard Certificate of Live Birth in 1989. This revision included many more health questions that are directly associated with the mother, including alcohol and tobacco use, weight gain during pregnancy, medical risk factors, obstetric procedures, complications of labor and/or delivery, and method of delivery. Additionally, many of the other items that have been on the birth certificate for more than two decades also relate directly to the mother, for example, marital status, education level, and receipt of prenatal care. It is more appropriate to use the race of the mother than the race of the child in tabulating these items.

A second factor has been the increasing incidence of interracial parentage. In 1998, 5.3 percent of births were to parents of different races, more than double the percent in 1977 (2.0 percent). More than half of these births were to white mothers and fathers of another race (55 percent in 1998). There have been two major consequences of the increasing interracial parentage. One is the effect on birth rates by race. The number of white births under the former procedures has been arbitrarily limited to infants whose parents were both white (or one parent if the race of only one parent was reported). At the same time, the number of births of other races has been arbitrarily increased to include all births to white mothers and fathers of other races. Thus, prior to 1989, if race of mother had been used, birth rates per 1,000 white women in a given age group would have been higher, while comparable rates for black women and women of other races would have been lower. The other consequence of increasing interracial parentage is the impact on the racial differential in various characteristics of births, particularly in cases where there is generally a large racial disparity, such as the incidence of low birthweight. In this instance, the racial differential is larger when the data are tabulated by race of mother rather than by race of child. The same effect has been noted for characteristics such as nonmarital childbearing, preterm births, late or no prenatal care, and low educational attainment of mother.

The third factor influencing the change is the growing proportion of births with race of father not stated, 14 percent in 1998. Although this proportion has stabilized and declined slightly in the 1990's, it is still higher than in 1978, 11

percent. The high proportion of records with the father's race not reported reflects the increase in the proportion of births to unmarried women; in many cases no information is reported on the father. These births were already assigned the race of the mother because there is no alternative. Tabulating births by race of mother provides a more uniform approach, rather than a necessarily arbitrary combination of parental races.

The change in the tabulation of births by race presents some problems when analyzing birth data by race, particularly trend data. The problem is likely to be acute for races other than white and black.

The categories for race or national origin are "White," "Black," "American Indian" (including Aleuts and Eskimos), "Chinese," "Japanese," "Hawaiian," "Filipino," and "Other Asian or Pacific Islander" (including Asian Indian). Before 1992 there was also an "other" category, which is now combined with the "Not stated" category. Before 1978 the category "Other Asian or Pacific Islander" was not identified separately but included with "Other" races. The separation of this category from "other" allows identification of the category "Asian or Pacific Islander" by combining the new category "Other Asian or Pacific Islander" with Chinese, Japanese, Hawaiian, and Filipino.

Beginning in 1992, NCHS contracted with seven States with the highest API populations to code births to additional API subgroups. The API subgroups include births to Vietnamese, Asian Indian, Korean, Samoan, Guamanian, and other API women. The seven States included in this reporting area are: California, Hawaii, Illinois, New Jersey, New York, Texas, and Washington. At least two-thirds of the U.S. population of each of these additional API groups lived in the seven-State reporting area(8). The data are available on the detailed natality tapes and CD-ROMs beginning with the 1992 data year. An analytic report based on the 1992 data year is also available upon request(9). In 1996, Minnesota became the eighth State to provide this information and in 1998, Virginia became the ninth State.

The category "White" comprises births reported as white and births where race is reported as Hispanic. Before 1964 all births for which race or national origin was not stated were classified as white. Beginning in 1964 changes in the procedures for allocating race when race or national origin is not stated have changed the composition of this category. (See discussion on "Race or national origin not stated.")

If the race or national origin of an Asian parent is ill-defined or not clearly identifiable with one of the categories used in the classification (for example, if "Oriental" is entered), an attempt is made to determine the specific race or national origin from the entry for place of birth. If the birthplace is China, Japan, or the Philippines, the race of the parent is assigned to that category. When race cannot be determined from birthplace, it is assigned to the category "Other Asian or Pacific Islander."

*Race or national origin not stated*--If the race of the mother is not defined or not identifiable with one of the categories used in the classification (0.8 percent of births in 1998) and the race of the father is known, the race of the father is assigned to the mother. Where information for both parents is missing, the race of the mother is allocated electronically according to the specific race of the mother on the preceding record with a known race of mother. Data for both parents were missing for only 0.4 percent of birth certificates for 1998. Nearly all statistics by race or national origin for the United States as a whole in 1962 and 1963 are affected by a lack of information for New Jersey, which did not report the race of the parents in those years. Birth rates by race for those years are computed on a population base that excluded New Jersey. For the method of estimating the U.S. population by age, sex, and race excluding New Jersey in 1962 and 1963, see page 4-8 in the Technical Appendix of volume I, *Vital Statistics of the United States*, 1963.

# Age of mother

Beginning in 1989 an item on the birth certificate asks for "Date of Birth." In previous years, "Age (at time of this birth)" was requested. Not all States have revised this item for 1989, and therefore the age of mother either is derived from the reported month and year of birth or coded as stated on the certificate. In 1998 the mother's age was reported directly by five States (Kentucky, Nevada, North Dakota, Virginia, and Wyoming) and American Samoa. From 1964 to 1996, the age of mother was edited for 10-49 years. When the age of mother was computed to be under 10 years or 50 years or over, it was considered not stated and was assigned as described below. Beginning in 1997, age of mother is edited for ages 10-54 years. When the age of mother 10 years or 55 years or over, it is considered not stated and was assigned to be under 10 years or 55 years or over, it is considered not stated and was assigned to be under 10 years or 55 years or over, it was assigned as described below. A review and verification of unedited birth data for 1996 showed that the vast majority

of births reported as occurring to women aged 50 years and older were to women aged 50-54 years. The numbers of births to women 50-54 years are too small for computing age-specific birth rates. These births have been included with births to women 45-49 for computing birth rates.

Age-specific birth rates are based on populations of women by age, prepared by the U.S. Bureau of the Census. In census years the decennial census counts are used. In intercensal years, estimates of the population of women by age are published by the U.S. Bureau of the Census in *Current Population Reports*.

The 1990 Census of Population derived age in completed years as of April 1, 1990, from the responses to questions on age at last birthday and month and year of birth, with the latter given preference. In the 1960, 1970, and the 1980 Census of Population, age was also derived from month and year of birth. "Age in completed years" was asked in censuses before 1960. This was nearly the equivalent of the former birth certificate question, which the 1950 test of matched birth and census records confirms by showing a high degree of consistency in reporting age in these two sources (10).

*Median age of mother--*Median age is the value that divides an age distribution into two equal parts, one-half of the values being less and one-half being greater. Median ages of mothers for 1960 to the present have been computed from birth rates for 5-year age groups rather than from birth frequencies. This method eliminates the effects of changes in the age composition of the childbearing population over time. Changes in the median ages from year to year can thus be attributed solely to changes in the age-specific birth rates.

Not stated date of birth of mother– In 1998 age of mother was not reported on 0.02 percent of the records. Beginning in 1964 birth records with date of birth of mother and/or age of mother not stated have had age imputed according to the age of mother from the previous birth record of the same race and total-birth order (total of fetal deaths and live births). (See "Computer Edits for Natality Data, Effective 1993" NCHS Instruction Manual , Part 12, page 9.) In 1963 birth records with age not stated were allocated according to the age appearing on the record previously processed for a mother of identical race and parity (number of live births). For 1960-62 not stated ages were distributed in proportion to the known ages for each racial group. Before 1960 this was done for age-specific birth rates but not for the birth frequency tables, which showed a separate category for age not stated.

# Age of father

Age of father is derived from the reported date of birth or coded as stated on the birth certificate. If the age is under 10 years, it is considered not stated and grouped with those cases for which age is not stated on the certificate. Information on age of father is often missing on birth certificates of children born to unmarried mothers, greatly inflating the number of "not stated" in all tabulations by age of father. In computing birth rates by age of father, births tabulated as age of father not stated are distributed in the same proportions as births with known age within each 5-year-age classification of the mother. This procedure is followed because, while father's age is missing in 15 percent of the birth certificates in 1998, one third of these were on records where the mother is a teenager. This distribution procedure is done separately by race. The resulting distributions are summed to form a composite frequency distribution that is the basis for computing birth rates by age of father. This procedure avoids the distortion in rates that would result if the relationship between age of mother and age of father were disregarded.

# Live-birth order and parity

Live-birth order and parity classifications refer to the total number of live births the mother has had including the 1998 birth. Fetal deaths are excluded.

Live-birth order indicates what number the present birth represents; for example, a baby born to a mother who has had two previous live births (even if one or both are not now living) has a live-birth order of three. Parity indicates how many live births a mother has had. Before delivery a mother having her first baby has a parity of zero and a mother having her third baby has a parity of two. After delivery the mother of a baby who is a first live birth has a parity of one and the mother of a baby who is a third live birth has a parity of three.

Live-birth order and parity are determined from two items on the birth certificate, "Live births now living" and "Live births now dead."

*Not stated birth order*--Before 1969 if both of these items were blank, the birth was considered a first birth. Beginning in 1969, births for which the pregnancy history items were not completed have been tabulated as live-birth order not stated. As a result of this revised procedure, 22,686 births in 1969 that would have been assigned to the "First birth order" category under the old rules were assigned to the "Not stated" category.

All births tabulated in the "Not stated birth order" category are excluded from the computation of percents. In computing birth rates by live-birth order, births tabulated as birth order not stated are distributed in the same proportion as births of known live-birth order.

# Date of last live birth

The date of last live birth was added to the U.S. Standard Certificate of Live Birth in 1968 for the purpose of providing information on child spacing. The interval since the last live birth is the difference between the date of last live birth and the date of present birth. For an interval to be computed, both the month and year of the last live birth must be valid. This interval is computed only for events to mothers who have had at least one previous live birth. Births for which the interval since last live birth is not stated are excluded from the computation of percents and means.

Zero interval--An interval of zero months since the last live birth indicates the second born of a set of twins, the second or third born of a set of triplets, and so forth. Births with an interval of zero months are excluded from the computation of mean intervals.

Beginning in 1995, NCHS ceased to collect information on the date of last live birth and thus the information on interval is only available from birth certificate data from 1968-94.

# **Educational attainment**

Data on the educational attainment of both parents were collected beginning in 1968 and tabulated for publication in 1969 for the first time.

The educational attainment of either parent is defined as "the number of years of school completed." Only those years completed in "regular" schools are counted, that is, a formal educational system of public schools or the equivalent in accredited private or parochial schools. Business or trade schools, such as beauty and barber schools, are not considered "regular" schools for the purposes of this item. No attempt has been made to convert years of school completed in foreign school systems, ungraded school systems, and so forth, to equivalent grades in the American school system. Such entries are included in the category "not stated."

Persons who have completed only a partial year in high school or college are tabulated as having completed the highest preceding grade. For those certificates on which a specific degree is stated, years of school completed is coded to the level at which the degree is most commonly attained; for example, persons reporting B.A., A.B., or B.S. degrees are considered to have completed 16 years of school.

*Education not stated*--The category "Not stated" includes all records in reporting areas for which there is no information on years of school completed as well as all records for which the information provided is not compatible with coding specifications.

Births tabulated as education not stated are excluded from the computations of percents.

Beginning in 1995, NCHS ceased to collect information on the educational attainment of the father and thus the information is available from birth certificate data only for 1969-94.

# **Marital status**

National estimates of births to unmarried women are based on two methods of determining marital status. For 1994 through 1996, birth certificates in 45 states and the District of Columbia included a question about the mother's marital status. Beginning in 1997, California added a direct question to their birth certificate; thus **by** 1997, all but four States (Connecticut, Michigan, Nevada, and New York) included a direct question on their birth certificates. Nevada asks for the mother's marital status through the electronic birth registration process but this item is not included on certified or paper copies of the birth certificate. Beginning June 15, 1998, Connecticut discontinued inferring the mother's marital status and added a direct question on mother's birth certificate.

In the two States (Michigan and New York) which used inferential procedures to compile birth statistics by marital status in 1998, a birth is inferred as nonmarital if either of these factors is present: a paternity acknowledgment was received or the father's name is missing. In recent years, a number of States have extended their efforts to identify the fathers when the parents are not married in order to enforce child support obligations. The presence of a paternity acknowledgment therefore is the most reliable indicator that the birth is nonmarital in the States not reporting this information directly; this is now the key indicator in the nonreporting States. The inferential procedures in effect since 1980 represent a substantial departure from the method used before 1980 to prepare national estimates of births to unmarried women, which assumed that the incidence of births to unmarried women in States with no direct question on marital status was the same as the incidence in reporting States in the same geographic division (12). Inferential procedures in current use, however, are quite different from those in use during the 1980's, when there was heavy reliance on a comparison of the surnames of the parents and the child to infer the mother's marital status. The procedures now in use depend, as noted above, on very reliable indicators, namely a paternity affidavit or missing information on the father.

A review of Connecticut's birth data for 1998 indicates that during the first 6 months of 1998, when the inferential procedures were still in use, the proportion of births to unmarried women was somewhat higher (33 percent) than in the last 6 months when marital status was based on a direct question (29 percent). The inferential procedures in effect in Connecticut relied principally on a comparison of the surnames of the parents and child. It appears that the inferential procedures resulted in some overestimation of the number of births to unmarried women. It is estimated that if the Connecticut reporting procedures had not changed, the number of nonmarital births would have been about 1,000 higher. Because Connecticut accounts for about 1 percent of U.S. births, the reporting changes had no impact on data for the Nation.

The procedures for reporting marital status in California, Nevada, New York City changed beginning January 1, 1997. The methods used to determine marital status and the impact of the procedures on the data were discussed in detail in a previous report (13).

The use of inferential marital status data together with information from a direct question represents an attempt to use related information on the birth certificate to improve the quality of national data as well as to provide data for the individual nonreporting States. An evaluation of this method and its validity for California (the largest nonreporting State until 1997) has been published (14). Because of the continued substantial increases in nonmarital childbearing throughout the 1980's, the data have been intensively evaluated by the Division of Vital Statistics, NCHS. The results of this evaluation show that trends in birth rates for unmarried women for rates computed on the basis of estimated data and on the basis of inferred data are essentially the same.

The mother's marital status was not reported in 1998 on 0.04 percent of the birth records. Marital status was imputed as "married" for these records.

When births to unmarried women are reported as second or higher order births, it is not known whether the mother was married or unmarried when the previous deliveries occurred, because her marital status at the time of these earlier births is not available from the birth record.

Rates for 1940 and 1950 are based on decennial census counts. Rates for 1955-97 are based on a smoothed series of population estimates (12). Because of sampling error, the original U.S. Bureau of the Census population estimates by marital status fluctuate erratically from year to year; therefore, they have been smoothed so that the rates do not show

similar variations. These rates differ from those published in volumes of *Vital Statistics of the United States* before 1969, which were based on the original estimates provided annually by the U.S. Bureau of the Census. Birth rates by marital status for 1971-79 have been revised and differ from rates published before 1980 in volumes of *Vital Statistics of the United States* (see ``Computation of rates and other measures").

#### Place of delivery and attendant at birth

The 1989 revision of the U.S. Standard Certificate of Live Birth included separate categories for freestanding birthing centers, the mother's residence, and clinic or doctor's office as the place of birth. Prior to 1989, place of birth was classified simply as either "In hospital" or "Not in hospital." Births occurring in hospitals, institutions, clinics, centers, or homes were included in the category "In hospital." In this context the word "homes" does not refer to the mother's residence but to an institution, such as a home for unmarried women. Birthing centers were included in either category, depending on each State's assessment of the facility. Beginning in 1989 births occurring in clinics and in birthing centers not attached to a hospital are classified as "Not in hospital." This change in classification may account in part for the lower proportion of "In hospital" births compared with previous years. (The change in classification of clinics should have minor impact because comparatively few births occur in these facilities, but the effect of any change in classification of freestanding birthing centers is unknown.)

Beginning in 1975 the attendant at birth and place of delivery items were coded independently, primarily to permit the identification of the person in attendance at hospital deliveries. The 1989 certificate includes separate classifications for doctor of medicine (MD), doctor of osteopathy (DO), certified nurse midwife (CNM), other midwife, and other attendants. In earlier certificates births attended by certified nurse midwives were grouped with those attended by lay midwives. The new certificate also facilitates the identification of home births, births in freestanding birthing centers, and births in clinics or physician offices.

Data for the "In hospital" category for 1975-88 include all births in clinics or maternity centers, regardless of the attendant. Data for 1975-77 published before 1980 included clinic and center births in the category "In hospital" only when the attendant was a physician. Data shown for 1975-77 published after 1980 will, therefore, differ from data published before 1980. As a result of this change, for 1975 an additional 12,352 births are now classified as occurring in hospitals, raising the percent of births occurring in hospitals from 98.7 to 99.1. Similarly, for 1976 the number of births occurring in hospitals raised from 98.6 to 99.1; for 1977 the increase is 15,937 and the percent in hospitals raised from 98.5 to 99.0. For 1974 and earlier the "In hospital" category includes all births in hospitals or institutions and births in clinics, centers, or maternity homes only when attended by physicians.

The "Not in hospital" category includes births for which no information is reported on place of birth. Before 1975 births for which the stated place of birth was a "doctor's office" and delivery was by a physician were included in the category ``In hospital." Beginning in 1975 these births were tabulated as "Not in hospital" and included with births delivered by physicians in this category. Although the actual number of such births is unknown, the effect of the change is minimal. In 1974, 0.3 percent of all births were delivered by physicians outside of hospitals; in 1975 this proportion was 0.4 percent.

Babies born on the way to or on arrival at the hospital are classified as having been born in the hospital. This may account for some of the hospital births not delivered by physicians or midwives.

Beginning in 1993, all in-hospital births occurring in Illinois where the attendant was classified as an "other" midwife were changed to certified nurse-midwife. This was necessary because almost all of these births were delivered by midwives certified by the American College of Nurse Midwives but because Illinois does not certify midwives, many of these births were classified as "other" midwives.

# Birthweight

Birthweight is reported in some areas in pounds and ounces rather than in grams. However, the metric system has been used in tabulating and presenting the statistics to facilitate comparison with data published by other groups. The

categories for birthweight were changed in 1979 to be consistent with the recommendations in the *Ninth Revision of the International Classification of Diseases* (ICD-9). The categories in gram intervals and their equivalents in pounds and ounces are as follows:

Less than 500 grams = 1 lb 1 oz or less 500-999 grams = 1 lb 2 oz-2 lb 3 oz 1,000-1,499 grams = 2 lb 4 oz-3 lb 4 oz 1,500-1,999 grams = 3 lb 5 oz-4 lb 6 oz 2,000-2,499 grams = 4 lb 7 oz-5 lb 8 oz 2,500-2,999 grams = 5 lb 9 oz-6 lb 9 oz 3,000-3,499 grams = 6 lb 10 oz-7 lb 11 oz 3,500-3,999 grams = 7 lb 12 oz-8 lb 13 oz 4,000-4,499 grams = 8 lb 14 oz-9 lb 14 oz 4,500-4,999 grams = 9 lb 15 oz-11 lb 0 oz 5,000 grams or more = 11 lb l oz or more

The ICD-9 defines low birthweight as less than 2,500 grams. This is a shift of 1 gram from the previous criterion of 2,500 grams or less, which was recommended by the American Academy of Pediatrics in 1935 and adopted in 1948 by the World Health Organization in the *Sixth Revision of the International Lists of Diseases and Causes of Death*.

After data classified by pounds and ounces are converted to grams, median weights are computed and rounded before publication. To establish the continuity of class intervals needed to convert pounds and ounces to grams, the end points of these intervals are assumed to be half an ounce less at the lower end and half an ounce more at the upper end. For example, 2 lb 4 oz-3 lb 4 oz is interpreted as 2 lb 3 ½ oz-3 lb 4 ½ oz.

Births for which birthweight is not reported are excluded from the computation of percents and medians.

# **Period of gestation**

The period of gestation is defined as beginning with the first day of the last normal menstrual period (LMP) and ending with the day of the birth. The LMP is used as the initial date because it can be more accurately determined than the date of conception, which usually occurs 2 weeks after the LMP.

Births occurring before 37 completed weeks of gestation are considered to be "preterm" or "premature" for purposes of classification. At 37-41 weeks gestation, births are considered to be "term," and at 42 completed weeks and over, "postterm." These distinctions are according to the ICD-9 definitions.

The 1989 revision of the U.S. Standard Certificate of Live Birth included a new item, "clinical estimate of gestation," that is being compared with length of gestation computed from the LMP date when the latter appears to be inconsistent with birthweight. This is done for normal weight births of apparently short gestations and very low

birthweight births reported to be full term. The clinical estimate also was used if the date of the LMP was not reported. The period of gestation for 5.1 percent of the births in 1998 was based on the clinical estimate of gestation. For 97 percent of these records the clinical estimate was used because the LMP date was not reported. For the remaining 3 percent the clinical estimate was used because it was compatible with the reported birth weight, whereas the LMP-computed gestation was not. In cases where the reported birthweight was inconsistent with both the LMP-computed gestation and the clinical estimate and birth weight was reclassified as "not stated." This was necessary for about 350 births, less than 0.01 percent of all birth records in 1998. If the reported birthweight was inconsistent with both the LMP-computed gestation and the clinical estimate of gestation, gestation and birthweight were classified as "not stated." This was necessary for about 350 births, less than 0.01 percent of all birth records in 1998. If the reported birthweight were classified as "not stated" if the LMP-computed gestation was not within 5 weeks of the clinical estimate of gestation, gestation and birthweight were classified as "not stated" if the LMP-computed gestation was not within 5 weeks of the clinical estimate. These changes result in only a very small discontinuity in the data. For further information on the use of the clinical estimate of gestation see "Computer Edits for Natality Data, Effective 1993," *NCHS Instruction Manual*, Part 12, pages 34-36.

Before 1981 the period of gestation was computed only when there was a valid month, day, and year of LMP. However, length of gestation could not be determined from a substantial number of live-birth certificates each year because the day of LMP was missing. Beginning in 1981 weeks of gestation have been imputed for records with missing day of LMP when there is a valid month and year. Each such record is assigned the gestational period in weeks of the preceding record that has a complete LMP date with the same computed months of gestation and the same 500-gram birthweight interval. The effect of the imputation procedure is to increase slightly the proportion of preterm births and to lower the proportion of births at 39, 40, 41, and 42 weeks of gestation. A more complete discussion of this procedure and its implications is presented in a previous report (15).

Because of postconception bleeding or menstrual irregularities, the presumed date of LMP may be in error. In these instances the computed gestational period may be longer or shorter than the true gestational period, but the extent of such errors is unknown.

#### Month of pregnancy prenatal care began

For those records in which the name of the month is entered for this item, instead of first, second, third, and so forth, the month of pregnancy in which prenatal care began is determined from the month named and the month last normal menses began. For these births, if the item "Date last normal menses began" is not stated, the month of pregnancy in which prenatal care began is tabulated as not stated.

## Number of prenatal visits

Tabulations of the number of prenatal visits were presented for the first time in 1972. Beginning in 1989 these data were collected from the birth certificates of all States. Percent distributions and the median number of prenatal visits exclude births to mothers who had no prenatal care.

#### Apgar score

The 1- and 5-minute Apgar scores were added to the U.S. Standard Certificate of Live Birth in 1978 to evaluate the condition of the newborn infant at 1 and 5 minutes after birth. The Apgar score is a useful measure of the need for resuscitation and a predictor of the infant's chances of surviving the first year of life. It is a summary measure of the infant's condition based on heart rate, respiratory effort, muscle tone, reflex irritability, and color. Each of these factors is given a score of 0, 1, or 2; the sum of these 5 values is the Apgar score, which ranges from 0 to 10. A score of 10 is optimum, and a low score raises some doubts about the survival and subsequent health of the infant. Beginning in 1995, NCHS only collected information on the 5-minute Apgar score. In 1998 the reporting area for the 5-minute Apgar score was comprised of 48 States and the District of Columbia, accounting for 78 percent of all births in the United States. California and Texas did not have information on Apgar scores on their birth certificate.

# Tobacco and alcohol use during pregnancy

The checkbox format allows for classification of a mother as a smoker or drinker during pregnancy and for reporting the average number of cigarettes smoked per day or drinks consumed per week. When smoking and/or drinking status is not reported or is inconsistent with the quantity of cigarettes or drinks reported, the status is changed to be consistent with the amount reported. For example, if the drinking status is reported as "no" but one or more average drinks a week are reported, the mother is classified as a drinker. If the number of cigarettes smoked per day is reported as one or more, the mother is considered a smoker. When one (or a fraction of one) drink a week is recorded, the mother is classified as a drinker. For records on which the number of drinks or number of cigarettes is reported as a span, for example, 10-15, the

lower number is used. The number of drinkers and number of drinks reported on birth certificates are believed to underestimate actual alcohol use.

Data on tobacco use were collected by 46 States, the District of Columbia, and New York City in 1998. This reporting area accounted for 81 percent of all births in the U.S. in 1998. Information was not available for California, Indiana, South Dakota, and the remainder of New York State. Information on alcohol use was included on the certificates of 48 States and the District of Columbia, accounting for 87 percent of all U.S. births in 1998. California and South Dakota did not include items on alcohol use on their birth certificates.

# Weight gained during pregnancy

Weight gain is reported in pounds. A loss of weight is reported as zero gain. Computations of median weight gain were based on ungrouped data. This item was included on the certificates of 49 States and the District of Columbia; California did not report this information. This reporting area excluding California accounted for 87 percent of all births in the United States in 1998.

# Medical risk factors for this pregnancy

In 1998 an item on medical risk factors was included on the birth certificates of all States and the District of Columbia, but 2 States did not report all of the 16 risk factors. Texas did not report genital herpes or uterine bleeding, and Kansas did not report Rh sensitization.

The format allows for the designation of more than one risk factor and includes a choice of "None." Accordingly, if the item is not completed, it is classified as "Not stated."

The following definitions are adapted and abbreviated from a set of definitions compiled by a committee of Federal and State health statistics officials for the Association for Vital Records and Health Statistics (16).

# **Definitions of medical terms**

Anemia--Hemoglobin level of less than 10.0 g/dL during pregnancy or a hematocrit of less than 30 percent during pregnancy.

*Cardiac disease*--Disease of the heart.

Acute or chronic lung disease--Disease of the lungs during pregnancy.

*Diabetes*--Metabolic disorder characterized by excessive discharge of urine and persistent thirst; includes juvenile onset, adult onset, and gestational diabetes during pregnancy.

Genital herpes--Infection of the skin of the genital area by herpes simplex virus.

*Hydramnios/oligohydramnios--*Any noticeable excess (hydramnios) or lack (oligohydramnios) of amniotic fluid. *Hemoglobinopathy--*A blood disorder caused by alteration in the genetically determined molecular structure of hemoglobin (for example, sickle cell anemia).

*Hypertension, chronic*--Blood pressure persistently greater than 140/90, diagnosed prior to onset of pregnancy or before the 20th week of gestation.

*Hypertension, pregnancy-associated--*An increase in blood pressure of at least 30 mm Hg systolic or 15 mm Hg diastolic on two measurements taken 6 hours apart after the 20th week of gestation.

*Eclampsia*--The occurrence of convulsions and/or coma unrelated to other cerebral conditions in women with signs and symptoms of pre-eclampsia.

Incompetent cervix--Characterized by painless dilation of the cervix in the second trimester or early in the third trimester of pregnancy, with prolapse of membranes through the cervix and ballooning

of the membranes into the vagina, followed by rupture of membranes and subsequent expulsion of the fetus.

*Previous infant 4,000+ grams*--The birthweight of a previous live-born child was over 4,000 grams (8 lbs 13 oz). Previous preterm or small-for-gestational-age infant--Previous birth of an infant prior to term (before 37 completed weeks of gestation) or of an infant weighing less than the 10th percentile for gestational age using a standard weight-for-age chart.

Renal disease--Kidney disease.

*Rh sensitization*--The process or state of becoming sensitized to the Rh factor as when an Rh-negative woman is pregnant with an Rh-positive fetus.

*Uterine bleeding*--Any clinically significant bleeding during the pregnancy, taking into consideration the stage of pregnancy; any second or third trimester bleeding of the uterus prior to the onset of labor.

#### **Obstetric procedures**

This item includes six specific obstetric procedures. Birth records with "Obstetric procedures" left blank are considered "not stated." Data on obstetric procedures were reported by all States and the District of Columbia in 1998.

The following definitions are adapted and abbreviated from a set of definitions compiled by a committee of Federal and State health statistics officials for the National Association for Public Health Statistics and Information Systems (NAPHSIS), formerly the Association for Vital Records and Health Statistics (16).

# **Definitions of medical terms**

*Amniocentesis*--Surgical transabdominal perforation of the uterus to obtain amniotic fluid to be used in the detection of genetic disorders, fetal abnormalities, and fetal lung maturity.

*Electronic fetal monitoring--*Monitoring with external devices applied to the maternal abdomen or with internal devices with an electrode attached to the fetal scalp and a catheter through the cervix into the uterus, to detect and record fetal heart tones and uterine contractions.

*Induction of labor*--The initiation of uterine contractions before the spontaneous onset of labor by medical and/or surgical means for the purpose of delivery.

Stimulation of labor--Augmentation of previously established labor by use of oxytocin.

*Tocolysis*--Use of medications to inhibit preterm uterine contractions to extend the length of pregnancy and therefore avoid a preterm birth.

Ultrasound--Visualization of the fetus and placenta by means of sound waves.

#### **Complications of labor and/or delivery**

The checkbox format allows for the selection of 15 specific complications and for the designation of more than 1 complication where appropriate. A choice of "None" is also included. Accordingly, if the item is not completed, it is classified as "not stated."

All States and the District of Columbia included this item on their birth certificates in 1998. However, Texas did not report all of the complications. Texas did not report anesthetic complications or fetal distress.

The following definitions are adapted and abbreviated from a set of definitions compiled by a committee of Federal and State health statistics officials (16).

#### **Definitions of medical terms**

*Febrile--*A fever greater than 100 degrees F. or 38 C. occurring during labor and/or delivery. *Meconium, moderate/heavy--*Meconium consists of undigested debris from swallowed amniotic fluid, various

products of secretion, excretion, and shedding by the gastrointestinal tract; moderate to heavy amounts of meconium in the amniotic fluid noted during labor and/or delivery.

Premature rupture of membranes (more than 12 hours)--Rupture of the membranes at any time during pregnancy and more than 12 hours before the onset of labor.

Abruptio placenta--Premature separation of a normally implanted placenta from the uterus.

Placenta previa--Implantation of the placenta over or near the internal opening of the cervix.

Other excessive bleeding--The loss of a significant amount of blood from conditions other than abruptio placenta or placenta previa.

Seizures during labor--Maternal seizures occurring during labor from any cause.

Precipitous labor (less than 3 hours)--Extremely rapid labor and delivery lasting less than 3 hours.

Prolonged labor (more than 20 hours)--Abnormally slow progress of labor lasting more than 20 hours.

Dysfunctional labor--Failure to progress in a normal pattern of labor.

*Breech/malpresentation--*At birth, the presentation of the fetal buttocks rather than the head, or other malpresentation.

*Cephalopelvic disproportion*--The relationship of the size, presentation, and position of the fetal head to the maternal pelvis prevents dilation of the cervix and/or descent of the fetal head.

Cord prolapse--Premature expulsion of the umbilical cord in labor before the fetus is delivered.

Anesthetic complications--Any complication during labor and/or delivery brought on by an anesthetic agent or agents.

Fetal distress--Signs indicating fetal hypoxia (deficiency in amount of oxygen reaching fetal tissues).

# Abnormal conditions of the newborn

This item provides information on eight specific abnormal conditions. More than one abnormal condition may be reported for a given birth or ``None" may be selected. If the item is not completed it is tabulated as ``not stated." This item was included on the birth certificates of all States and the District of Columbia in 1998. However, four areas did not include all conditions. Nebraska and Texas did not report birth injury, New York City did not report assisted ventilation less than 30 minutes or assisted ventilation of 30 minutes or more, and Wisconsin did not report fetal alcohol syndrome.

The following definitions are adapted and abbreviated from a set of definitions compiled by a committee of Federal and State health statistics (16).

# **Definitions of medical terms**

Anemia--Hemoglobin level of less than 13.0 g/dL or a hematocrit of less than 39 percent.

*Birth injury*--Impairment of the infant's body function or structure due to adverse influences that occurred at birth. *Fetal alcohol syndrome*--A syndrome of altered prenatal growth and development occurring in infants born of women who consumed excessive amounts of alcohol during pregnancy.

Hyaline membrane disease/RDS--A disorder primarily of prematurity, manifested clinically by respiratory distress and pathologically by pulmonary hyaline membranes and incomplete expansion

of the lungs at birth.

*Meconium aspiration syndrome--*Aspiration of meconium by the fetus or newborn, affecting the lower respiratory system.

Assisted ventilation (less than 30 minutes)--A mechanical method of assisting respiration for newborns with respiratory failure.

Assisted ventilation (30 minutes or more)--Newborn placed on assisted ventilation for 30 minutes or longer. Seizures--A seizure of any etiology.

# Congenital anomalies of child

The data provided in this item relate to 21 specific anomalies or anomaly groups. It is well documented that congenital anomalies, except for the most visible and most severe, are incompletely reported on birth certificates. The completeness of reporting specific anomalies depends on how easily they are recognized in the short time between birth and birth-registration. Forty-nine States and the District of Columbia included this item on their birth certificates (New Mexico did not). This reporting area included **99** percent of all births in the United States in 1998. The format allows for the identification of more than one anomaly including a choice of "None" should no anomalies be evident. The category "not stated" includes birth records for which the item is not completed.

The following definitions are adapted and abbreviated from a set of definitions compiled by a committee of Federal and State health statistics officials (16).

# **Definitions of medical terms**

Anencephalus--Absence of the cerebral hemispheres.

*Spina bifida/meningocele--*Developmental anomaly characterized by defective closure of the bony encasement of the spinal cord, through which the cord and meninges may or may not protrude.

*Hydrocephalus*--Excessive accumulation of cerebrospinal fluid within the ventricles of the brain with consequent enlargement of the cranium.

Microcephalus--A significantly small head.

*Other central nervous system anomalies*--Other specified anomalies of the brain, spinal cord, and nervous system. *Heart malformations*--Congenital anomalies of the heart.

Other circulatory/respiratory anomalies--Other specified anomalies of the circulatory and respiratory systems.

Rectal atresia/stenosis--Congenital absence, closure, or narrowing of the rectum.

*Tracheo-esophageal fistula/Esophageal atresia*--An abnormal passage between the trachea and the esophagus; esophageal atresia is the congenital absence or closure of the esophagus.

*Omphalocele/gastroschisis*--An omphalocele is a protrusion of variable amounts of abdominal viscera from a midline defect at the base of the umbilicus. In gastroschisis, the abdominal viscera protrude through an abdominal wall defect, usually on the right side of the umbilical cord insertion.

Other gastrointestinal anomalies-Other specified congenital anomalies of the gastrointestinal system.

Malformed genitalia--Congenital anomalies of the reproductive organs.

Renal agenesis--One or both kidneys are completely absent.

Other urogenital anomalies--Other specified congenital anomalies of the organs concerned in the production and excretion of urine, together with organs of reproduction.

*Cleft lip/palate--*Cleft lip is a fissure of elongated opening of the lip; cleft palate is a fissure in the roof of the mouth. These are failures of embryonic development.

*Polydactyly/syndactyly/adactyly-*Polydactyly is the presence of more than five digits on either hands and/or feet; syndactyly is having fused or webbed fingers and/or toes; adactyly is the absence of fingers and/or toes.

Club foot--Deformities of the foot, which is twisted out of shape or position.

*Diaphragmatic hernia*-- Herniation of the abdominal contents through the diaphragm into the thoracic cavity usually resulting in respiratory distress.

Other musculoskeletal/integumental anomalies--Other specified congenital anomalies of the muscles, skeleton, or skin.

*Down's syndrome*--The most common chromosomal defect with most cases resulting from an extra chromosome (trisomy 21).

Other chromosomal anomalies--All other chromosomal aberrations.

# Method of delivery

The birth certificate contains a checkbox item on method of delivery. The choices include vaginal delivery, with the additional options of forceps, vacuum, and vaginal birth after previous cesarean section (VBAC), as well as a choice of primary or repeat cesarean. When only forceps, vacuum, or VBAC is checked, a vaginal birth is assumed. In 1998 this information was collected from the birth certificates of all States and the District of Columbia.

Several rates are computed for method of delivery. The overall cesarean section rate or total cesarean rate is computed as the proportion of all births that were delivered by cesarean section. The primary cesarean rate is a measure that relates the number of women having a primary cesarean birth to all women giving birth who have never had a cesarean delivery. The denominator for this rate is the sum of women with a vaginal birth excluding VBACs and women with a primary cesarean birth. The rate for vaginal birth after previous cesarean (VBAC) delivery is computed by relating all VBAC deliveries to the sum of VBAC and repeat cesarean deliveries, that is, to women with a previous cesarean section. VBAC rates for first births exist because the rates are computed on the basis of previous pregnancies, not just live births.

#### **Hispanic parentage**

The 1989 revision of the U.S. Standard Certificate of Live Births includes items to identify the Hispanic origin of the parents. Concurrent with the 1978 revision of the U.S. Certificate of Live Birth, NCHS recommended that items to identify the Hispanic or ethnic origin of the newborn's parents be included on birth certificates and has tabulated and evaluated these data from the reporting States. All 50 States and the District of Columbia reported Hispanic origin of the parents for 1998. In 1989 Louisiana, New Hampshire, and Oklahoma did not report this information; in 1990 New Hampshire and Oklahoma did not report Hispanic origin.

In computing birth and fertility rates for the Hispanic population, births with origin of mother not stated are included with non-Hispanic births rather than being distributed. Thus, rates for the Hispanic population are underestimates of the true rates to the extent that the births with origin of mother not stated (1.2 percent in 1998) were actually to Hispanic mothers. The population with origin not stated was imputed. The effect on the rates is believed to be small.

# Quality of data

Although vital statistics data are useful for a variety of administrative and scientific purposes, they cannot be correctly interpreted unless various qualifying factors and methods of classification are taken into account. The factors to be considered depend on the specific purposes for which the data are to be used. It is not feasible to discuss all the pertinent factors in the use of vital statistics tabulations, but some of the more important ones should be mentioned.

Most of the factors limiting the use of data arise from imperfections in the original records or from the impracticability of tabulating these data in very detailed categories. These limitations should not be ignored, but their existence does not lessen the value of the data for most general purposes.

#### **Completeness of registration**

An estimated 99 percent of all births occurring in the United States in 1998 were registered; for white births registration was 99.4 percent complete and for all other births, 98.6 percent complete. These estimates are based on the results of the 1964-68 test of birth-registration completeness according to place of delivery (in or out of hospital) and race and on the 1989 proportions of births in these categories. The primary purpose of the test was to obtain current measures of registration completeness for births in and out of hospital by race on a national basis. Data for States were not available

as they had been from the previous birth-registration tests in 1940 and 1950. A detailed discussion of the method and results of the 1964-68 birth-registration test is available (17).

The 1964-68 test has provided an opportunity to revise the estimates of birth-registration completeness for the years since the previous test in 1950 to reflect the improvement in registration. This has been done using registration completeness figures from the two tests by place of delivery and race. Estimates of registration completeness for four groups (based on place of delivery and race) for 1951-65 were computed by interpolation between the test results. (It was assumed that the data from the more recent test are for 1966, the midpoint of the test period.) The results of the 1964-68 test are assumed to prevail for 1966 and later years. These estimates were used with the proportions of births registered in these categories to obtain revised numbers of births adjusted for underregistration for each year. The overall percent of birth-registration completeness by race was then computed. Data adjusted for underregistration for 1951-59 have been revised to be consistent with the 1964-68 test results and differ slightly from data shown in annual reports for years before 1969. For these years the published number of births and birth rates for both racial groups have been revised slightly downward because the 1964-68 test indicated that previous adjustments to registered births were slightly inflated. Because registration completeness figures by age of mother and by live-birth order are not available from the 1964-68 test, it must be assumed that the relationships among these variables have not changed since 1950.

Discontinuation of adjustment for underregistration, 1960--Adjustment for underregistration of births was discontinued in 1960 when birth registration for the United States was estimated to be 99.1 percent complete. This removed a bias introduced into age-specific rates when adjusted births classified by age were used. Age-specific rates are calculated by dividing the number of births to an age group of mothers by the population of women in that age group. Tests have shown that population figures are likely to be understated through census undercounts; these errors compensate for underregistration of births. Adjustment for underregistration of births, therefore, removes the compensating effect of under enumeration, biasing the age-specific rates more than when uncorrected birth and population data are used. (For further details see page 4-11 in the Technical Appendix of volume I, Vital Statistics of the United States, 1963.)

The age-specific rates used in the cohort fertility tables are an exception to the above statement. These rates are computed from births corrected for underregistration and population estimates adjusted for under enumeration and misstatement of age. Adjusted birth and population estimates are used for the cohort rates because they are an integral part of a series of rates, estimated with a consistent methodology. It was considered desirable to maintain

consistency with respect to the cohort rates, even though it means that they will not be precisely comparable with other rates shown for 5-year age groups.

# **Completeness of reporting**

Interpretation of these data must include evaluation of item completeness. The percent "not stated" is one measure of the quality of the data. Completeness of reporting varies among items and States. See table A for the percent of birth records on which specified items were not stated.

#### **Quality control procedures**

States in the Vital Statistics Cooperative Program are required to have an error rate of less than 2.0 percent for each item for 3 consecutive data months during the initial qualifying period. Once a State is qualified, NCHS monitors the quality of data received. This was achieved through independent verification of a sample of records for some States as well as comparing the State data with data from previous years. In addition, there is verification at the State level before NCHS is sent the data.

After the coding is completed, counts of the taped records are balanced against control totals for each shipment of records from a registration area. Impossible codes are eliminated during the editing processes on the computer and corrected on the basis of reference to the source record or adjusted by arbitrary code assignment. All subsequent operations involved in tabulation and table preparation are verified during computer processing or by statistical clerks.

# Random variation and significance testing for natality data

The number of births reported for an area is essentially a complete count, since more than 99% of all births are registered. While this number is not subject to sampling error, it may be affected by nonsampling errors such as mistakes in recording the mother's residence or age during the registration process.

When the number of births is used for analytic purposes the number of events that <u>actually</u> occurred can be thought of as one in a large series of possible results that <u>could have</u> occurred under the same circumstances. When considered in this way, the number of births is subject to random variation. The probable range of values may be estimated from the actual figures according to certain statistical assumptions.

The confidence interval is the range of values for the number of births, birth rates, or percent of births that you could expect in 95 out of 100 cases. The confidence limits are the end points of this range of values (the highest and lowest values). Confidence limits tell you how much the number of events or rates could vary under similar circumstances.

Confidence limits for numbers, rates, and percents can be estimated from the actual number of events. Procedures differ for rates and percents and also differ depending on the number of births on which these statistics are based. Below are detailed procedures and examples for each type of case.

# 95-percent confidence limits for numbers less than 100

When the number of births is less than 100 and the rate is small, the data are assumed to follow a Poisson probability distribution. Confidence limits are estimated using the following formulas:

$$Lower \ limit = B \ x \ L$$
$$Upper \ limit = B \ x \ U$$

where:

B =the number of births L =the value in Table C that corresponds to the number B U =the value in Table C that corresponds to the number B

#### Example

Suppose the number of first births to American Indian women 40-44 years of age was 47. The confidence limits for this number would be:

Lower limit =  $B \ge L$ = 47 \times 0.73476 = 35 Upper limit =  $B \ge U$ = 47 \times 1.32979 = 63

This means that the chances are 95 out of 100 that the actual number of first births to American Indian women 40-44 years of age would lie between 35 and 63.

# 95-percent confidence limits for numbers of 100 or more

When the number of events is greater than 100, the data are assumed to be approximately normally distributed. Formulas for 95-percent confidence limits are:

Lower limit = B ! (1.96 x / B)Upper limit = B + (1.96 x / B)where: B = the number of births

# Example

Suppose the number of first births to white women 40-44 years of age was 14,108. The 95-percent confidence limits for this number would be:

Lower limit =  $14,108 - [1.96 \times /14,108]$ = 14,108 - 233= 13,875Upper limit =  $14,108 + [1.96 \times /14,108]$ = 14,108 + 233= 14,341

This means that the chances are 95 out of 100 that the actual number of first births to white women 40-44 years of age would lie between 13,875 and 14,341.

# **Computing confidence intervals for rates**

The same statistical assumptions can be used to estimate the variability in birth rates. Again, one formula is used for rates based on numbers of events less than 100, and another formula for rates based on numbers of 100 or greater. For our purposes, assume that the denominators of these rates (the population estimates) have no error. While this assumption is technically correct <u>only</u> for denominators based on the census which occurs every 10 years, the error in intercensal population estimates is usually small, difficult to measure, and therefore not considered.

# 95-percent confidence limits for rates based on less than 100 events

When the number of events in the numerator is less than 20, an asterisk is shown in place of the rate because there were too few births to compute a statistically reliable rate. When the number of events in the numerator is greater than 20 but less than 100, the confidence interval for a rate can be estimated using the two formulas which follow and the values in Table IV.

```
Lower limit = R \times L
Upper limit = R \times U
where:
R = the birth rate
L = the value in Table C that corresponds to the number B in the numerator of the rate
U = the value in Table C that corresponds to the number B in the numerator of the rate
```

### Example

Suppose that the first birth rate for American Indian women 40-44 years of age was 0.54 per thousand, based on 47 births in the numerator. Using Table C:

Lower limit =  $0.54 \times 0.73476$ = .40 Upper limit =  $0.54 \times 1.32979$ = .72

This means that the chances are 95 out of 100 that the actual first birth rate for American Indian women 40-44 year of age lies between .40 and .72.

#### 95-percent confidence limits for rates when the numerator is 100 or more

In this case, use the following formula for the birth rate R based on the number of births B:

Lower limit =  $R ! [1.96 x \otimes //B)]$ Upper limit =  $R + [1.96 x \otimes //B)]$ 

where:

 $\begin{array}{rcl} R & = & \mbox{the birth rate} \\ B & = & \mbox{the number of births} \end{array}$ 

# Example

Suppose the first birth rate for white women 40-44 years of age was 1.55 per thousand, based on 14,108 births in the numerator. Therefore, the 95-percent confidence interval would be:

Lower limit =  $1.55 - [1.96 \times (1.55 / / 14, 108)]$ = 1.55 - .026= 1.52Upper limit =  $1.55 + [1.96 \times (1.55 / / 14, 108)]$ = 1.55 + .026= 1.58

This means that the chances are 95 out of 100 that the actual first birth rate for white women 40-44 years of age lies between 1.52 and 1.58.

# **Computing 95-percent confidence intervals for percents**

In many instances we need to compute the confidence intervals for percents. Percents derive from a binomial distribution. As with birth rates, an asterisk will be shown for any percent which is based on fewer than 20 births in the numerator. We easily compute a 95-percent confidence interval for a percent when the following conditions are met:

 $B x p \ge 5$  and  $B x q \ge 5$ where: B = number of births in the denominator p = percent divided by 100 q = 1 - p

For natality data, these conditions will be met except for very rare events in small subgroups. If the conditions are *not* met, the variation in the percent will be so large as to render the confidence intervals meaningless. When these conditions are met the 95-percent confidence interval can be computed using the normal approximation of the binomial. The 95-percent confidence intervals are computed by the following formulas:

Lower limit = p ! [1.96 x (/p x q/B)]Upper limit = p + [1.96 x (/p x q/B)]

where:

B = number of births in the denominator p = percent divided by 100 q = 1- p

## Example

Suppose the percent of births to Hispanic women in Alabama that were to unmarried women was 23.0 percent. This was based on 310 births in the numerator and 1,345 births in the denominator. First we test to make sure we can use the normal approximation of the binomial:

1,345 x .230 = 309 1,345 x (1 - .230)= 1,345 x .770 = 1,036

Both 309 and 1,036 are greater than 5 so we can proceed. The 95-percent confidence interval would be:

Lower limit = .23 !  $[1.96 \times (/.23 \times .77/1,345)]$ = .23 - .022 = .208 or 20.8 percent Upper limit = .23 +  $[1.96 \times (/.23 \times .77/1,345)]$ = .23 + .022 = .252 or 25.2 percent

This means that the chances are 95 out of 100 that the actual percent of births in Alabama to Hispanic women that are to unmarried women lies between 20.8 and 25.2 percent.

# Significance testing

# One of the rates is based on fewer than 100 cases

To compare two rates, when one or both of those rates are based on less than 100 cases, you first compute the confidence intervals for both rates. Then you check to see if those intervals overlap. If they **do** overlap, the difference is not statistically significant at the 95-percent level. If they **do** not overlap, the difference is indeed "statistically significant."

# Example

Is the first birth rate for American Indian women 40-44 years of age (.54 per 1,000) significantly lower than the comparable rate for white women (1.55)? The rate for American Indian women is based on 47 events whereas the rate for white women is based on 14,108 events. The rate for American Indian women is based on less than 100 events; therefore, the first step is to compute the confidence intervals for both rates.

	Lower Limit	Upper Limit
American Indian women	0.40	0.72
White women	1.52	1.58

These two confidence intervals do not overlap. Therefore, the first birth rate for American women 40-44 is significantly lower (at the 95-percent confidence level) than the comparable rate for white women.

# Both rates are based on 100 or more events

When both rates are based on 100 or more events, the difference between the two rates is considered statistically significant if it exceeds the statistic in the formula below. This statistic equals 1.96 times the standard error for the difference between two rates.

$$1.96 \sqrt{\frac{R_1^2}{N_1} \% \frac{R_2^2}{N_2}}$$

where:

 $\begin{array}{rcl} R_1 &=& \text{the first rate} \\ R_2 &=& \text{the second rate} \\ N_1 &=& \text{the first number of births} \\ N_2 &=& \text{the second number of births} \end{array}$ 

If the difference is greater than this statistic, then the difference would occur by chance less than 5 times out of 100. If the difference is less than this statistic, the difference might occur by chance more than 5 times out of 100. We say that the difference is not statistically significant at the 95-percent confidence level.

#### Example

Is the first birth rate for black women 40-44 years of age (1.08 per 1,000) significantly lower than the comparable rate for white women (1.55)? Both rates are based on more than 100 births (1,535 for black women and 14,108 for white women). The difference between the rates is 1.55 - 1.08 = .47. The statistic is then calculated as follows:

$$1.96 \sqrt{\frac{1.08^2}{1,535} \% \frac{1.55^2}{14,108}}$$
  
= 1.96 x /[(1.166/1,535 + 2.403/14,108)]  
= 1.96 x /(.00076+0.00017)  
= 1.96 x /.00093  
= 1.96 x .03  
= .06

The difference between the rates (.47) is greater than this statistic (.06). Therefore, the difference is statistically significant at the 95-percent confidence level.

# Testing differences between two percents

When testing the difference between two percents, both percents must meet the following conditions:

B x p >=5 and B x q >=5where: B = number of births in the denominator p = percent divided by 100 q = 1 - p

When both percents meet these conditions then the difference between the two percents is considered statistically significant if it exceeds the statistic in the formula below. This statistic equals 1.96 times the standard error for the difference between two percents.

1.96 
$$\sqrt{p (1\&p) (\frac{1}{B_1} \% \frac{1}{B_2})}$$

where:

 $B_1 =$  the number of births in the denominator for the first percent  $B_2 =$  the number of births in the denominator for the second percent p =

$$\frac{B_1 \ p_1 \% B_2 \ p_2}{B_1 \% B_2}$$

 $p_1$  = the first percent divided by 100

 $p_2 =$  the second percent divided by 100

# Example

Is the percent of births to Hispanic women that were to unmarried women higher in Alaska (28.8 percent) than in Alabama (23.0). The number in the denominator was 1,345 in Alabama and 593 in Alaska. The necessary conditions are met for both percents (calculations not shown). The difference between the two percents is .288 - .230 = .058. The statistic is then calculated as follows:

$$1.96 \sqrt{(.2477) (.7523) (.0024)}$$
  
= 1.96 x /.000447  
= 1.96 x .021  
= .042

The difference between the percents (.058) is greater than this statistic (.042). Therefore, the difference is statistically significant at the 95-percent confidence level.

# **Computation of rates and other measures**

# **Population bases**

The rates shown in this report were computed on the basis of population statistics prepared by the U.S. Bureau of the Census. Rates for 1940, 1950, 1960, 1970, 1980, and 1990 are based on the population enumerated as of April 1 in the censuses of those years. Rates for all other years are based on the estimated midyear (July 1) population for the respective years. Birth rates for the United States, individual States, and metropolitan areas are based on the total resident populations of the respective areas. Except as noted these populations exclude the Armed Forces abroad but include the Armed Forces stationed in each area. The resident population of the birth- and death-registration States for 1900-32 and for the United States for 1900-98 is shown in table 4-1. In addition, the population including Armed Forces abroad is shown for the United States. Table D shows the sources for these populations.

In both the 1980 and 1990 censuses, a substantial number of persons did not specify a racial group that could be classified as any of the White, Black, American Indian, Eskimo, Aleut, Asian, or Pacific Islander categories on the census form (18). In 1980 the number of persons of "other" race was 6,758,319; in 1990 it was 9,804,847. In both censuses, the large majority of these persons were of Hispanic origin (based on response to a separate question on the form), and many wrote in their Hispanic origin, or Hispanic origin type (for example, Mexican, Puerto Rican) as their race. In both 1980 and 1990, persons of unspecified race were allocated to one of the four tabulated racial groups (white, black, American Indian, Asian or Pacific Islander), based on their response to the Hispanic origin question. These four race categories conform with the 1979 edition of OMB Directive 15 which mandates that race data must

contain at least these 4 categories. These categories are also more consistent with the race categories in vital statistics.

In the allocation of unspecified race was carried out using cross-tabulations of age, sex, race, type of Hispanic origin, and county of residence. Persons of Hispanic origin and unspecified race were allocated to either white or black, based on their Hispanic origin type. Persons of "other" race and Mexican origin were categorically assumed to be white, while persons in other Hispanic categories were distributed to white and black pro rata within the county-age-sex group. For "other-not-specified" persons who were not Hispanic, race was allocated to white, black, or Asian and Pacific Islander, based on proportions gleaned from sample data. The 20-percent sample (respondents who were enumerated on the longer census form) provided a highly detailed coding of race, which allowed identification of otherwise unidentifiable responses with a specified race category. Allocation proportions were thus established at the State level, which were used to distribute the non-Hispanic persons of "other" race in the 100-percent tabulations.

In 1990 the race modification procedure was carried out using individual census records. Persons whose race could not be specified were assigned to a racial category using a pool of "race donors," which was derived from persons of specified race and the identical response to the Hispanic origin question within the auspices of the same Census District Office. As in 1980, the underlying assumption was that the Hispanic origin response was the major criterion for allocating race. Unlike 1980, persons of Hispanic origin, including Mexican, could be assigned to any racial group, rather than white or black only, and the non-Hispanic component of "other" race was allocated primarily on the basis of geography (District Office), rather than detailed characteristic.

The means by which respondent's age was determined were fundamentally different in the two censuses; therefore, the problems that necessitated the modification were different. In 1980 respondents reported year of birth and quarter of birth (within year) on the census form. When census results were tabulated, persons born in the first quarter of the year (before April 1) had age equal to 1980 minus year of birth, while persons born in the last three quarters had age equal to 1979 minus year of birth.

In 1990 the quarter year of birth was not reported on the census form, so that direct determination of age from year of birth was impossible. In 1990 census publications age is based on respondents' direct reports of age at last birthday. This definition proved inadequate for postcensal estimates, because it was apparent that many respondents had reported their age at time of either completion of the census form or interview by an enumerator, which could occur several months after the April 1 reference data. As a result, age was biased upward. Modification was based on a respecification of age, for most individual respondents, by year of birth, with allocation to first quarter (persons aged 1990 minus year of birth) and last three quarters (aged 1989 minus year of birth) based on a historical series of registered births by month. This process partially restored the 1980 logic for assignment of age. It was not considered necessary to correct for age overstatement and heaping in 1990, because the availability of age and year of birth on the census form provided elimination of spurious year-of-birth reports in the census data before modification occurred.

*Populations for 1998--*The population of the United States by age, sex, race, and Hispanic origin is shown in the Census Bureau report United States population estimates, by age, sex, race, and Hispanic origin: 1990 to 1998. Washington, DC: U.S. Bureau of the Census, http://www.census.gov/population/www/estimates/uspop.html Internet release, June 4, 1999.

*Populations for 1997--*The population of the United States by age, sex, race, and Hispanic origin is shown in the Census Bureau report United States population estimates, by age, sex, race, and Hispanic origin: 1990 to 1997. PPL-91R.U.S. Bureau of the Census. Rounded populations are consistent with U.S. Bureau of the Census file NESTV97. Washington: U.S. Department of Commerce. 1998.

*Populations for 1996--*The population of the United States by age, sex, race, and Hispanic origin is shown in the Census Bureau report, United States population estimates by age, sex, race and Hispanic origin: 1990 to 1996. U.S. Bureau of the Census. PPL-57. Washington: U.S. Department of Commerce. 1997.

*Populations for 1995--*The population of the United States by age, sex, race, and Hispanic origin is shown in the Census Bureau report, United States population estimates by age, sex, race and Hispanic origin: 1990 to 1995. U.S. Bureau of the Census. Census file RESDO795, PPL-41. Washington: U.S. Department of Commerce. 1996.

*Populations for 1994*--The population of the United States by age, sex, race, and Hispanic origin is shown in the Census Bureau report, United States population estimates by age, sex, race and Hispanic origin: 1990 to 1994. U.S. Bureau of the Census. PPL-21. Washington: U.S. Department of Commerce. 1995.

*Populations for 1993*--The population of the United States by age, sex, race and Hispanic origin is tabulated from Census file RESO793.

*Populations for 1992*--The population of the United States by age, sex, race and Hispanic origin is tabulated from census file RESPO792.

**Populations for 1991**--The population of the United States by age, race, and sex is shown in *Current Population Reports*, Series P-25, Number 1095. Monthly population figures were published in *Current Population Reports*, Series P-25, Number 1097.

**Populations for 1990**--The population of the United States by age, race, and sex, and the population for each State is shown *in Current Population Reports*, Series P-25, Number 1095. The figures have been modified as described above. Monthly population figures were published in *Current Population Reports*, Series P-25, Number 1094.

**Population estimates for 1981-89**--Birth rates for 1981-89 (except those for cohorts of women) have been revised, based on revised population estimates that are consistent with the 1990 census levels, and thus may differ from rates published in volumes of *Vital Statistics of the United States* for these years. The 1990 census counted approximately 1.5 million fewer persons than had earlier been estimated for April 1, 1990. The revised estimates for the United States by age, race, and sex were published by the U.S. Bureau of the Census in *Current Population Reports*, Series P-25, Number 1095. Population estimates by month are based on data published in *Current Population Reports*, Series P-25, Number 1094 and unpublished data. Unpublished revised estimates for States were obtained from the U.S. Bureau of the Census.

**Populations for 1980**--The population of the United States by age, race, and sex, and the population for each State are shown in tables 4-2 and 4-3 of volume I, *Vital Statistics of the United States*, 1980. The figures by race have been modified as described above. Monthly population figures were published in *Current Population Reports*, Series P-25, Number 899.

**Population estimates for 1971-79**--Birth rates for 1971-79 (except those for cohorts of women) have been revised, based on revised population estimates that are consistent with the 1980 census levels, and thus may differ from rates published in volumes of *Vital Statistics of the United States* for these years. The 1980 census counted approximately 5.5 million more persons than had earlier been estimated for April 1, 1980 (19). The revised estimates for the United States by age, race, and sex were published by the U.S. Bureau of the Census in *Current Population Reports*, Series P-25, Number 917. Population estimates by month are based on data published in *Current Population Reports*, Series P-25, Number 899. Unpublished revised estimates for States were obtained from the U.S. Bureau of the Census.

**Population estimates for 1961-69**--Birth rates for 1961-69 are based on revised estimates of the population and thus may differ slightly from rates published before 1976. The revised estimates used in computing these rates were published in *Current Population Reports*, Series P-25, Number 519. The rates for 1961-64 are based on revised estimates of the population published in *Current Population Reports*, Series P-25, Number 519. The rates for 1961-64 are based on revised estimates of the population published in *Current Population Reports*, Series P-25, Number 519. The rates for 1961-64 are based on revised estimates of the population published in *Current Population Reports*, Series P-25, Number 519. The rates for 1961-64 are based on revised estimates of the population published in *Current Population Reports*, Series P-25, Number 519.

**Population estimates for 1951-59**--Final intercensal estimates of the population by age, race, and sex and total population by State for 1951-59 are shown in tables 4-4 and 4-5 of volume I, *Vital Statistics of the United States*, 1966. Beginning with 1963 these final estimates have been used to compute birth rates for 1951-59 in all issues of *Vital Statistics of the United States*.

# Net census undercounts and overcounts

The U.S. Bureau of the Census has conducted extensive research to evaluate the coverage of the U.S. population (including undercount, overcount, and misstatement of age, race, and sex) in the last five decennial censuses 1950, 1960, 1970, 1980, and 1990. These studies provide estimates of the national population, that were not enumerated or over enumerated in the respective censuses, by age, race, and sex (19-21). The report for 1990 (22) includes estimates of net under enumeration and over enumeration for age, sex, and racial subgroups of the national population, modified for race consistency with previous population counts as described in the section ``Population bases."

These studies indicate that there are differential coverages in the censuses among the population subgroups; that is, some age, race, and sex groups are more completely enumerated than others. To the extent that these estimates of overcounts or undercounts are valid, that they are substantial, and that they vary among subgroups and geographic areas, census miscounts can have consequences for vital statistics measures (20). However, the effects of undercounts in the census are reduced to the extent that there is underregistration of births. If these two factors are of equal magnitude, rates based on unadjusted populations are more accurate than those based on adjusted populations because the births have not been adjusted for underregistration.

The impact of net census miscounts on vital statistics measures includes the effects on levels of the rates and effects on differentials among groups.

If adjustments were made for persons who were not counted in the census of population, the size of the denominators would generally increase and the rates would be smaller than without an adjustment. Adjusted rates for 1990 can be computed by multiplying the reported rates by ratios of the 1990 census-level population adjusted for the estimated net census miscounts, which are shown in table E. A ratio of less than 1.0 indicates a net census undercount and would result in a corresponding decrease in the rate. A ratio in excess of 1.0 indicates a net census overcount and would result in a corresponding increase in the rate.

Enumeration of white females in the childbearing ages was at least 97 percent complete for all ages. Among black women, the undercount ranged up to 5 percent. Generally, females in the childbearing ages were more completely enumerated than males for similar race-age groups.

If vital statistics measures were calculated with adjustments for net census miscounts for each of these subgroups, the resulting rates would have been differentially changed from their original levels; that is, rates for those groups with the greatest estimated overcounts or undercounts would show the greatest relative changes due to these adjustments. Thus the racial differential in fertility between the white and the ``All other" population can be affected by such adjustments.

### **Cohort fertility tables**

The various fertility measures shown for cohorts of women are computed from births adjusted for underregistration and population estimates corrected for under enumeration and misstatement of age. Data published after 1974 use revised population estimates prepared by the U.S. Bureau of the Census and have been expanded to include data for the two major racial groups. Heuser has prepared a detailed description of the methods used in deriving these measures as well as more detailed data for earlier years (23).

*Parity distribution--*The percent distribution of women by parity (number of children ever born alive to mother) is derived from cumulative birth rates by order of birth. The percent of zero-parity women is found by subtracting the cumulative first birth rate from 1,000 and dividing by 10. The proportions of women at parities one through six are found from the following formula:

Percent at N parity =( (cum. rate, order N) - (cum. rate, order N + 1))/10

The percent of women at seventh and higher parities is found by dividing the cumulative rate for seventh-order births by 10.

*Birth probabilities*--birth probabilities indicate the likelihood that a woman of a certain parity and age at the beginning of the year will have a child during the year. Birth probabilities differ from central birth rates in that the denominator for birth probabilities is specific for parity as well as for age.

# Age-sex-adjusted birth rates

The age-sex-adjusted birth rates are computed by the direct method. The age distribution of women aged 10-49 years as enumerated in 1940 and the total population of the United States for that year are used as the standard populations. The age-sex-adjusted birth rates show differences in the level of fertility independent of differences in the age and sex composition of the population. It is important not to confuse these adjusted rates with the crude rates shown in other tables.

## **Total fertility rate**

The total fertility rate is the sum of the birth rates by age of mother (in 5-year age groups) multiplied by 5. It is an age-adjusted rate because it is based on the assumption that there are the same number of women in each age group. The rate of 2,058.5 in 1998, for example, means that if a hypothetical group of 1,000 women were to have the same birth rates in each age group that were observed in the actual childbearing population in 1998, they would have a total of 2,058.5 children by the time they reached the end of the reproductive period (taken here to be age 55 years), assuming that all of the women survived to that age.

# **Intrinsic vital rates**

The intrinsic vital rates are calculated from a stable population. A stable population is that hypothetical population, closed to external migration, that would become fixed in age-sex structure after repeated applications of a constant set of age-sex specific birth and death rates. For the mathematical derivation of intrinsic vital rates, see pages 4-13 and 4-14 in the Technical Appendix of volume I, Vital Statistics of the United States, 1962. The technique of calculating intrinsic vital rates is described by Barclay (24).

### Seasonal adjustment of rates

The seasonally adjusted birth and fertility rates are computed from the X-11 variant of Census Method II (25). This method of seasonal adjustment used since 1964 differs slightly from the U.S. Bureau of Labor Statistics (BLS) Seasonal Factor Method, which was used for Vital Statistics of the United States, 1964. The fundamental technique is the same in that it is an adaptation of the ratio-to-moving-average method. Before 1964 the method of seasonal adjustment was based on the X-9 variant and other variants of Census Method II. A comparison of the Census Method II with the BLS Seasonal Factor Method shows the differences in the seasonal patterns of births to be negligible.

# Computation of percents, medians, and means

Percent distributions, medians, and means are computed using only events for which the characteristic is reported. The "Not stated" category is subtracted from the total before computation of these measures. The asterisk (\*) indicates that the numerator and/or denominator number is less than 20.

# References

- 1. World Health Organization. Official records; no 28 (Third World Health Assembly 3.6). Geneva: World Health Organization, 16-17. 1950.
- 2. National Office of Vital Statistics. International recommendations on definitions of live birth and fetal deaths. Washington: Public Health Service. 1950.
- Statistical Office of the United Nations. Principles for vital statistics system: Recommendations for the improvement and standardization of vital statistics. Doc. ST/STAT/SER.M/19. New York: United Nations. 1953.
- 4. National Office of Vital Statistics. Births and birth rates in the entire United States, 1909 to 1948. Vital Statistics--Special reports; vol 33 no 8. Washington: Public Health Service. 1950.
- 5. U.S. Bureau of the Census. Population of metropolitan areas and component geography: 1990 and 1980 (6-30-90 definitions). 1990 CPH-L-10. Washington: U.S. Department of Commerce. 1991.
- 6. U.S. Department of Commerce. Metropolitan statistical area classification. Federal Register; vol 45 no 2. Washington: U.S. Government Printing Office, 956-62. 1980.
- U.S. Office of Management and Budget. Standard metropolitan statistical areas. Rev. ed. Washington: U.S. Government Printing Office, 89-90. 1975.
- 8. U.S. Bureau of the Census. 1990 Census of Population. General population characteristics; (1990 CP-1-1). Washington: U.S. Department of Commerce. 1992.
- 9. Martin JA. Birth characteristics for Asian or Pacific Islander subgroups, 1992. Monthly vital statistics report; vol 43 no 10, suppl. Hyattsville, Maryland: National Center for Health Statistics. 1995.
- 10. Schachter J. Matched record comparison of birth certificate and census information in the United States, 1950. Vital statistics--Special Reports; vol 47 no12. Washington: Public Health Service. 1962.
- 11. Ventura SJ, Martin JA, Curtin SC, Mathews TJ. Report of final natality statistics, 1996. Monthly vital statistics report; vol 46 no 11, supp. Hyattsville, Maryland: National Center for Health Statistics. 1998.
- 12. Ventura SJ. Births to unmarried mothers, United States, 1980-92. National Center for Health Statistics. Vital Health Stat 21(53). 1995.

13. Ventura SJ, Martin JA, Curtin SC, Mathews TJ. Births: Final data for 1997. National vital statistics reports; vol

- 47 no 18. Hyattsville, Maryland: National Center for Health Statistics. 1999.
- 14. Berkov B. An evaluation of California's inferred birth statistics for unmarried women. National Center for Health Statistics. Vital Health Stat 2(97). 1985.
- 15. Taffel S, Johnson D, Heuser R. A method for imputing length of gestation on birth certificates. National Center for Health Statistics. Vital Health Stat 2(93). 1982.
- 16. Brockert JE, Stockbauer JW, Senner JW, et al. Recommended standard medical definitions for the U.S. Standard Certificate of Live Birth, 1989 revision. Paper presented at annual meeting of the Association for the Vital Record and Health Statistics. June 1990.
- 17. U.S. Bureau of the Census. Test of birth-registration completeness, 1964 to 1968. 1970 census of population and housing; PHC (E)-2. Evaluation and Research Program. Washington: U.S. Department of Commerce. 1973.
- 18. U.S. Bureau of the Census. U.S. population estimates, by age, sex, race, and Hispanic origin, 1980-91. Current population reports; series P-25, no 1095. Washington: U.S. Department of Commerce. 1993.
- U.S. Bureau of the Census. Coverage of the national population in the 1980 census by age, sex, and race. Preliminary estimates by demographic analysis. Current population reports; series P-23, no 115. Washington: U.S. Department of Commerce. 1982.
- U.S. Bureau of the Census. Estimates of coverage of the population by sex, race, and age--Demographic analysis. 1970 census of population and housing; PHC (E)-4. Evaluation and Research Program. Washington: U.S. Department of Commerce. 1974.
- 21. U.S. Bureau of the Census. Developmental estimates of the coverage of the population of States in the 1970 census-demographic analysis. Current population reports; series P-23, no 65. Washington: U.S. Department of

Commerce. 1977.

- 22. Robinson JG, Ahmed B, Das Gupta P, et al. Estimation of population coverage in the 1990 United States census based on demographic analysis. JASA 88(423):1061-71. 1993.
- 23. Heuser R. Fertility tables for birth cohorts by color: United States, 1917-73. Washington: National Center for Health Statistics. 1976.
- 24. Barclay GW. Techniques of population analysis. New York: John Wiley & Sons, Inc., 216-22. 1958.
- 25. U.S. Bureau of the Census. The X-11 variant of the Census Method II Seasonal Adjustment Program. Technical paper; no 15, 1967 rev. Washington: U.S. Department of Commerce. 1967.

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		🗆 Clinic/Do	ctor's Office	Residence										
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	 25a.	□ No	) Yes		26a.								-12)1 Ca	llege (1-4 or 5 +
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38a. MEDICAL RISK FACTORS FOR THIS PREGNANCY (Check all that apply)	<ol> <li>COMPLICATIONS OF LABOR AND/OR DELIVERY (Check all that apply)</li> </ol>	43. CONGENITAL ANOMALIES OF CHILD (Check all that apply)
Anemia (Hct. < 30/Hgb. <10)	Febrile ( > 100 °F. or 38 °C.)       01         Meconium, moderate/heavy       02         Premature rupture of membrane ( > 12 hours)       03         Abruptio placenta       04         Placenta previa       05         Other excessive bleeding       06         Seizures during labor       07         Precipitous labor ( < 3 hours)	Anencephalus       01         Spina bifida/Meningocele       02         Hydrocephalus       03         Microcephalus       04         Other central nervous system anomalies       05 <i>(Specify)</i> 05         Heart malformations       06         Other circulatory/respiratory anomalies       07         Rectal atresia/stenosis       08         Tracheo-esophageal fistula/ Esophageal atresia       09         Omphalocele/ Gastroschisis       10         Other gastrointestinal anomalies       (Specify)         11       11
Uterine bleeding	Other 16  16  17  17  18 1	Malformed genitalia
38b. OTHER RISK FACTORS FOR THIS PREGNANCY (Complete all items)	Vaginal       01         Vaginal birth after previous C-section       02         Primary C-section       03	Other urogenital anomalies (Specify)14 Cleft lip/palate15
Tobacco use during pregnancy	Repeat C-section         04           Forceps         05           Vacuum         06	Polydactyly/Syndactyly/Adactyly
Weight gained during pregnancy lbs.	42. ABNORMAL CONDITIONS OF THE NEWBORN (Check all that apply)	(Specify)19
<b>39.</b> OBSTETRIC PROCEDURES (Check all that apply)	Anemia (Hct. < 39/Hgb. < 13) 01 □ Birth injury	Down's syndrome       20         Other chromosomal anomalies       (Specify)        21
Amniocentesis       01         Electronic fetal monitoring       02         Induction of labor       03         Stimulation of labor       04         Tocolysis       05         Ultrasound       06         None       00         Other       07	Fetal alcohol syndrome       03         Hyaline membrane disease/RDS       04         Meconium aspiration syndrome       05         Assisted ventilation < 30 min	None
(Specify)	(Specify)	

# Table A. Percent of birth records on which specified items were not stated: United States each State, and Territory, 1998 (Page 1 of 2) [By place of residence]

	[By piat	ce of res	ldencej										
Area	Number of	Place of	Attendant at	Mother's birth-	Father's	Father's	Hispani	ic Origin	Educational	Live- birth	Length of	Month prenatal care	Number of prenatal
	births	birth	birth	place	age	race	Mother	Father	Mother	order	Gestation	began	visits
Total of													
reporting areas 1/	3,941,553	0.0	0.0	0.3	14.4	14.8	1.2	15.3	1.5	0.7	1.0	2.8	3.6
Alabama	62,074	-	-	0.0	23.8	23.8	.0	23.8	0.3	0.0	0.1	0.3	0.3
Alaska	9,926	.0	.0	. 2	12.9	14.7	. 5	13.7	2.0	. 2	.3	1.7	1.5
Arizona	78,243	-	.0	.3	21.5	23.3	1.3	23.6	2.0	. 4	. 2	2.1	3.6
Arkansas	36,865	.0	.0	.4	20.6	21.8	.1	21.0	.9	. 2	.3	2.4	3.3
California	521,661	.0	.1	.3	7.4	6.8	.7	6.3	1.7	.1	2/ 5.4	1.6	2.9
Colorado	59,577	-		. 2	9.6	10.2	.0	10.3	1.4	.0	.0	.7	.9
Connecticut	43,820	.0	.0	. 4	9.4	10.2	5.3	14.4	3.9	8.3	.1	5.4	9.0
Delaware	10,578	.0	.0	.3	30.7	31.6	.3	30.7	.7	.3	.1	.9	1.1
District of Columbia	7,686	-	-	.0	44.9	51.3	. 5	44.7	9.0	. 2	.4	15.3	18.6
Florida	195,637	.0	-	.2	17.6	17.7	.1	19.1	. 4	.0	.1	. 8	1.7
Georgia Hawaii	122,368	.0	.0	.2	18.0 8.4	18.4	.8	18.6	2.0	.3	.1 10.4	2.9	2.7
Idaho	19,391	- 0	.0	.1	8.6	11.2	1.5	11.4	4.2	1.3	.6	2.2	2.6
Illinois	182,588	.0	.0	.1	15.5	16.8	.0	16.8	.8	.2	.2	1.8	2.0
Indiana	85,122	.3	.1	.2	13.5	13.7	. 4	13.7	.9	. 4	.1	1.5	2.6
											1		
Iowa	37,282	.0	.0	. 4	12.1	14.2	1.1	15.0	1.5	.1	.1	1.3	3.9
Kansas	38,422	.0	.0	.1	10.6	10.7	1.0	12.1	. 4	.0	.1	.6	.8
Kentucky	54,329	.0	.1	.0	22.0	22.7	.1	23.7	.2	.1	.1	1.1	1.3
Louisiana Maine	66,888 13,733		.0	.0	22.3 10.0	22.5 15.0	.2 4.3	22.5 18.7	.1	.0 .3	.0	.3	.5
Maine	13,733	-		-	10.0	15.0	4.5	10.7				. 5	
Maryland	71,972	.0	.0	.7	8.4	10.1	.6	6.8	2.0	1.6	.5	4.7	8.2
Massachusetts	81,411	.0	.0	.0	7.8	7.6	. 4	6.8	.3	. 2	.2	.9	. 3
Michigan	133,666	.0	. 2	.1	16.0	18.0	5.4	22.5	1.4	.6	.1	3.9	5.4
Minnesota	65,202	.0	.0	.0	8.9	11.3	5.2	15.4	2.2	.5	1.0	5.6	5.0
Mississippi	42,939	.0	.0	.1	24.2	24.0	.1	24.3	. 2	.1	. 2	.6	1.1
Missouri	75,358	.0	.0	.2	18.3	18.3	.1	18.5	.8	. 3	.2	1.4	2.0
Montana	10,795	.0	.1	-	10.2	11.5	2.0	13.4	.4	.0	.1	.5	.5
Nebraska	23,534	.0	.0	.0	12.2	12.8	2.2	14.4	.1	.0	.0	.3	.6
Nevada	28,699	-	.0	.8	22.4	23.3	.7	22.0	3.2	1.1	1.1	6.2	10.0
New Hampshire	14,429	-	-	.0	7.2	9.1	3.5	11.6	.8	2.8	.2	1.7	1.8
N T	114,550	,			8.9	11.1		9.4	2.3	2	_	5.0	6.0
New Jersey New Mexico	27,318	.1	.1	.2	27.5	26.8	.4	26.8	5.1	.2	.2 .7	5.7	5.5
New York	258,207	.1	.1	. 4	15.7	16.1	6.2	20.8	1.7	.1	.2	10.0	6.7
North Carolina	111,688	.0	.0	.0	17.2	17.2	.0	17.1	.2	. 0	.1	.5	.5
North Dakota	7,932	-	-	.0	7.9	9.4	3.1	12.3	.2	-	.1	.6	. 3
Ohio Oklahoma	152,794 49,461	.0	.0	.2	15.2	16.0 18.9	.4	15.8 18.8	.5	.2	.0	.5 10.9	1.5
Oregon	49,481 45,273	.0	.1	.1	11.6	4.6	.2	4.9	1.2	.1	.0	.4	.5
Pennsylvania	145,899	.0	.0	.8	5.7	4.3	.6	3.8	2.3	.4	.2	3.2	4.8
Rhode Island	12,599	-	-	.3	13.6	14.2	12.8	23.1	2.9	2.2	2.6	8.8	9.8
											1		
South Carolina	53,877	-	.0	.3	28.8	28.9	.1	28.8	4.6	.1	. 2	1.5	1.6
South Dakota	10,288	.0	-	.0	11.8	12.1	.1	13.3	.2	-	.0	. 4	. 4
Tennessee Texas	77,396	.0	.0	.0	16.1 15.3	16.2 15.4	.0	16.3 15.4	.2	.0 1.2	.2	1.1 2.0	.9 5.2
Texas Utah	342,283 45,165	.0	.0	.4	9.7	10.8	.3	9.3	1.3	.2	.6	2.0	3.0
~**	15,105		1.0			1-0.0		1	1		1		
Vermont	6,582	.0	-	.1	9.1	15.3	2.6	16.4	2.5	. 4	. 2	3.6	1.2
Virginia	94,351	.0	.1	.1	17.8	18.6	.1	18.5	.5	1.1	.3	.6	1.2
Washington	79,663	.0	.0	.8	11.8	12.0	3.2	12.3	10.6	4.5	1.0	9.7	13.1
West Virgin	20,747	.1	.0	.1	13.3	14.2	. 2	14.6	.5	.2	.5	4.3	3.2
Wisconsin Wyoming	67,450 6,252	.0	-	.0	28.4 13.6	28.4 14.0	.0	28.4 13.9	.1 .4	.0 .0	.0	.2	.3
wyoming	0,252	.0	-		10.0	1-4.0	. 1	1-3.9	. 4		· <sup>1</sup>	. 5	
Puerto Rico	60,412	-	.1	-	2.9	3.4			.2	.0	.1	. 2	.1
Virgin Islands	1,800	.1	.6	-	21.6	24.3	3.2	26.4	1.7	.9	.8	.6	1.7
Guam	4,318	.1	.5	.1	23.6	24.9	. 4	23.3	.6	.6	. 2	.8	1.2
American Samoa	1,688	.1	-	5.9	34.2	34.8				-			
Northern Marianas	1,462	. 2	1.0	0.3	9.6	24.4			25.0	23.1	26.3	56.5	25.0
See footnotes at end of table.													

# Table A. Percent of birth records on which specified items were not stated: United States each State, and Territory, 1998

(Page 2 of 2) [By place of residence]

Area	Number of births	Birth weight	5-minute Apgar score *	Medical risk factors	Tobacco use	Alcohol use	Weight gain	Obstetric procedures	Complica- tions of labor and/ or delivery	* Method of delivery	Abnormal condi- tions of newborn	Congenital anomalies
Total of reporting areas 1/	3,941,553	0.1	0.6	1.4	1.5	1.5	8.3	0.9	1.2	0.9	2.4	1.7
Alabama	62,074	0.0	0.2	3/ 0.0	0.0	0.1	3.1	0.0	0.0	0.3	0.0	0.1
Alaska Arizona	9,926 78,243	.2	.6	.3	.6 1.8	.6 2.0	1.6	.3	.3	.4 .2	.4	.3
Arizona Arkansas	36,865	.1	3.6	.5	.9	1.0	9.5	.4	.5	.2	.4	.4
California	521,661	.0		.0				.0	.0	.0	.0	.0
				1								
Colorado Connecticut	59,577 43,820	.0	.3	.0 11.8	.1 8.1	.1	3.4 18.6	.0	.0 12.2	.0 4.5	.0 18.9	.1 20.1
Delaware	10,578	.0	.4	.0	.2	.2	1.9	.0	.0	.0	.1	.1
District of Columbia	7,686	.1	1.1	.0	.1	.1	16.4	.0	.0	.0	.0	.0
Florida	195,637	.1	.2	.0	.1	.1	4.4	.0	.0	.6	.0	. 0
Georgia	122,368	.0	.5	. 4	. 4	. 4	5.6	.0	.0	. 3	.0	.0
Hawaii	17,583	2.8	7.2	16.2	.1	.1	13.8	9.7	7.3	16.5	17.2	18.9
Idaho	19,391	. 3	.6	1.0	.7	1.0	10.2	.9	.9	.3	.7	.7
Illinois	182,588	.1	.3	.1	1.0	.2	3.9	.0	.1	. 4	.1	.1
Indiana	85,122	.5	.5	.1	••••	. 4	3.2	.1	.2	. 4	.6	.6
Iowa	37,282	.1	.3	.2	3.3	3.8	6.9	.1	.3	. 4	.3	. 4
Kansas	38,422	.0	.4	3/ .5	.5	.5	.7	.4	.4	2.9	.4	.4
Kentucky Louisiana	54,329 66,888	.1	.4	6.1 .0	4.5	4.5	8.6 6.8	3.9	6.5 .1	4.1	.1	10.3
Maine	13,733	.1	.3	.0	1.1	1.4	1.8	.0	.1	. 2	.1	.0
Maryland Massachusetts	71,972 81,411	.1	.5	.0 .6	.5	.7 .3	8.3	.0	.0 .6	.2 .4	.0 1.0	.0 1.0
Massachusetts Michigan	81,411 133,666	.2	. 3	.6	1.8	1.5	9.4	.6	.6	.4 .6	.1	.1
Minnesota	65,202	.1	.8	8.3	7.2	7.3	18.1	6.5	7.6	4.5	8.2	8.5
Mississippi	42,939	.0	. 4	.1	. 2	.2	4.6	.1	.1	. 2	.1	.1
Missouri	75,358	.0	.5	.1	. 4	.4	3.0	.1	.1	.7	.1	.1
Montana	10,795	.0	.4	.1	.8	1.5	1.4	.1	.1	.5	.2	.1
Nebraska	23,534	.0	.2	.0	.9	.9	1.3	.0	.0	. 2	6/ .0	.0
Nevada	28,699	.1	1.7	10.7	2.2	2.5	11.8	.5	6.6	1.5	12.4	12.5
New Hampshire	14,429	.1	.3	.0	. 2	.3	5.5	.0	.0	. 2	.1	.1
New Jersey	114,550	.1	.2	2.3	1.0	1.0	6.1	.1	1.6	.5	26.2	1.7
New Mexico	27,318	1.6	4.0	.1	2.0	2.1	11.3	.0	.0	. 4	.1	
New York	258,207	.1	.2	1.1	4/4.3	.2	9.6 2.3	.2	.4	.3	7/ 0.9	1.0
North Carolina North Dakota	111,688 7,932	.0	. 4	.0 .1	.1 .6	.1 .7	1.3	.1	.0 .1	.4 1.0	.0 .1	.4
					_							_
Ohio Oklahoma	152,794 49,461	.1 .6	.2	.0 34.0	.3 23.9	.1 24.2	2.6 34.6	.0 30.2	.0 33.0	.4 26.9	.0 39.5	.0 40.3
Oregon	45,273	.0	.4	.5	.7	.7	3.0	.0	.0	.2	.0	.0
Pennsylvania	145,899	.1	.3	.1	.9	.6	8.3	.0	.1	.1	.6	. 5
Rhode Island	12,599	.4	.7	8.4	2.7	2.9	12.0	8.3	8.4	.7	18.9	19.3
South Carolina	53,877	.0	.4	.0	.1	.1	2.6	.0	.0	.5	.0	. 0
South Dakota	10,288	.0	.3	.0			1.4	.0	.0	. 2	.0	.0
Tennessee	77,396	.0	.3	.0	. 2	.2	6.1	.0	.1	. 4	.1	.0
Texas Utah	342,283 45,165	.1		5/ 1.3 .1	.4	.5	19.6 4.1	.1	8/.1	.7 .0	6/.2	.3
						1						
Vermont Virginia	6,582 94,351	.2	.2	.1	.9	.5	2.0 4.8	.1	.1	.0	.2	.2
Virginia Washington	94,351 79,663	.3	.4	5.5	.1 5.2	15.1	4.8 23.7	7.1	9.3	.4	.1	10.4
West Virginia	20,747	.1	.2	.0	.8	2.4	9.0	.0	.0	.2	.0	.0
Wisconsin	67,450	.0	. 4	.1	.1	.1	1.6	.0	.1	.0	9/ .1	.1
Wyoming	6,252	.0	.4	.0	1.1	1.1	2.1	.0	.0	. 2	.0	.0
Puerto Rico	60,412	.0	.2	.0	.0	.0	.1	.0	.1	.0	.1	.1
Virgin Islands	1,800	.1	2.9	6.4	2.3	2.3	9.8	2.5	7.4	3.0	8.7	6.8
Guam American Samoa	4,318	.1	1.3	5.4	1.1	1.3	4.0	1.9	2.9	1.3	5.7	5.5
American Samoa Northern Marianas	1,688	- 12.3	21.5							43.6		
0.0 Quantity more than 2ero but less that —Data not available. 1/ Excludes data for Puerto Rico, Virgin I 2/ California reports data last normal mer not report clinical estimate de gestation 3/ Kansas does not report Rh sensitizatit 4/ New York dity (but not New York Stat 5/ Texas does not report pentil herpes z 6/ Nebraska and Texas do not report bit 7/ New York dity does not report assister	slands, Guam, Ame sees began but does on. e) reports tobacco u e) reports tobacco u e) no d uterine bleeding. h injury. I ventilation less tha	se.	and the Commonwe	alth of the Norther	n Marianas.							
8/ Texas does not report anesthetic com 9/ Wisconsin does not report fetal alcoho	plications and fetal of	distress.										

#### Table B. Births by State of Occurrence and Residence for Births Occurring in the 50 States and the District of Columbia, 1998

Area	Occurrence	Residence
United States	3,945,192	3,941,553
Alabama	61,209	62,074
Alaska	9,832	9,926
Arizona	78,076	78,243
Arkansas	35,763	36,865
California	522,290	521,661
Colorado Connecticut	59,816 43,669	59,577 43,820
Delaware	11,023	10,578
District of Columbia	15,138	7,686
Florida	195,734	195,637
Georgia Hawaii	123,262 17,619	122,368 17,583
Idaho	18,959	19,391
Illinois	179,462	182,588
Indiana	85,176	85,122
lowa	37,433	37,282
Kansas	37,450	38,422
Kentucky	52,880 67,100	54,329
Louisiana Maine	67,100 13,530	66,888 13,733
Maryland	67,408	71,972
Massachusetts	82,216	81,411
Michigan	132,443	133,666
Minnesota	65,094	65,202
Mississippi	41,942	42,939
Missouri	77,701	75,358
Montana Nebraska	10,742 23,915	10,795 23,534
Nevada	28,218	28,699
New Hampshire	13,933	14,429
New Jersey	111,709	114,550
New Mexico	26,960	27,318
New York State only	135,408	138,296
New York City only North Carolina	124,240 112,785	119,911 111,688
North Dakota	9,156	7,932
Ohio	153,400	152,794
Oklahoma	48,449	49,461
Oregon	46,278	45,273
Pennsylvania	146,465	145,899
Rhode Island South Carolina	13,489 51,701	12,599 53,877
South Dakota	10,391	10,288
Tennessee	82,412	77,396
Texas	346,101	342,283
Utah	46,128	45,165
Vermont	6,257	6,582
Virginia Washington	92,021 78,980	94,351 79.663
Washington West Virginia	21,574	79,663 20,747
Wisconsin Wyoming	66,421 5,834	67,450 6,252
Foreign Residents		3,639
Puerto Rico		21
Virgin Islands	-	19
Guam	-	4
American Samoa	-	-
Northern Marianas Canada		- 111
Cuba		2
Mexico		2,818
Remainder of world	I .	664

Number of births	L	U	Number of births	L	U
1	0.02532	5.57164	51	0.74457	1.31482
2	0.12110	3.61234	52	0.74685	1.31137
3	0.20622	2.92242	53	0.74907	1.30802
4	0.27247	2.56040	54	0.75123	1.30478
5	0.32470	2.33367	55	0.75334	1.30164
6	0.36698	2.17658	56	0.75539	1.29858
7	0.40205	2.06038	57	0.75739	1.29562
8	0.43173	1.97040	58	0.75934	1.29273
9	0.45726	1.89831	59	0.76125	1.28993
10	0.47954	1.83904	60	0.76311	1.28720
11	0.49920	1.78928	61	0.76492	1.28454
12	0.51671	1.74680	62	0.76669	1.28195
13	0.53246	1.71003	63	0.76843	1.27943
14	0.54671	1.67783	64	0.77012	1.27698
15	0.55969	1.64935	65	0.77178	1.27458
16	0.57159	1.62394	66	0.77340	1.27225
17	0.58254	1.60110	67	0.77499	1.26996
18	0.59266	1.58043	68	0.77654	1.26774
19	0.60207	1.56162	69	0.77806	1.26556
20	0.61083	1.54442	70	0.77955	1.26344
20 21	0.61902	1.52861	70	0.78101	1.26136
21	0.62669	1.52001	72	0.78244	1.25933
22	0.63391	1.50049	72	0.78384	1.25735
23	0.64072	1.48792	73	0.78522	1.25735
24 25	0.64715	1.47620	74 75	0.78656	1.25351
25	0.65323	1.46523	75	0.78789	1.25351
20 27	0.65901	1.45495	70 77	0.78918	1.24983
28	0.66449	1.44528	78	0.79046	1.24985
28	0.66972	1.43617	78 79	0.79171	1.24803
29 30		1.43017	79 80	0.79294	1.24650
31	0.67470		80 81		
31	0.67945 0.68400	1.41942 1.41170	81 82	0.79414 0.79533	1.24291 1.24126
33	0.68835	1.40437	83	0.79649	1.23965
34	0.69253	1.39740	84	0.79764	1.23807
35	0.69654	1.39076	85	0.79876	1.23652
36	0.70039	1.38442	86	0.79987	1.23499
37	0.70409	1.37837	87	0.80096	1.23350
38	0.70766	1.37258	88	0.80203	1.23203
39	0.71110	1.36703	89	0.80308	1.23059
40	0.71441	1.36172	90	0.80412	1.22917
41	0.71762	1.35661	91	0.80514	1.22778
42	0.72071	1.35171	92	0.80614	1.22641
43	0.72370	1.34699	93	0.80713	1.22507
44	0.72660	1.34245	94	0.80810	1.22375
45	0.72941	1.33808	95	0.80906	1.22245
46	0.73213	1.33386	96	0.81000	1.22117
47	0.73476	1.32979	97	0.81093	1.21992
48	0.73732	1.32585	98	0.81185	1.21868
49	0.73981	1.32205	99	0.81275	1.21746
50	0.74222	1.31838			

Table C. Lower and upper 95 percent confidence limit factors for a birth rate based on a Poisson variable of 1-99 births

Table D. Sources for resident population and population including Armed Forces abroad: Birth- and death-registration States, 1900-1932, and United States, 1900-1998.

Year	Source
998	U.S. Bureau of the Census, United States population estimates, by age, sex, race, and Hispanic origin: 1990 to 1998. Washington: U.S. Bureau of the Census. Internet release, June 4, 1999.
97	<pre>Http://www.census.gov/population/www/estimates/uspop.html. U.S. Bureau of the Census, United States population estimates, by age, sex, race, and Hispanic origin: 1990 to 1997. PPL-91R. Rounded populations consistent with U.S. Bureau of the Census file NESTV97. Washington:U.S. Department of Commerce. 1998.</pre>
96	U.S. Bureau of the Census, United States population estimates, by age, sex, race, and Hispanic origin: 1990 to 1996. PPL-57. Washington: U.S. Department of Commerce. 1997.
95	U.S. Bureau of the Census, United States population estimates, by age, sex, race, and Hispanic origin: 1990 to 1995. Census file RESD0795, PPL-41. Washington:U.S. Department of Commerce. 1996.
94	U.S. Bureau of the Census, United States population estimates, by age, sex, race, and Hispanic origin: 1990 to 1994. PPL-21. Washington: U.S. Department of Commerce. 1995.
93	U.S. Bureau of the Census, United States population estimates, by age, sex, race, and Hispanic origin: 1993. Census file RESO793. Washington:U.S. Department of Commerce. 1995.
992	U.S. Bureau of the Census, United States population estimates, by age, sex, race, and Hispanic origin: 1992. Census file RESP0792. Washington:U.S. Department of Commerce. 1994.
991	U.S. Bureau of the Census, Unpublished data consistant with Current Population Reports, Series P-25, No. 1095,
90	Feb. 1993. U.S. Bureau of the Census, Unpublished data from the 1990 census. 1990 CPH-L-74 and unpublished data consistent
89	with Current Population Reports, Series P-25, No. 1095, Feb. 1993.
88	U.S. Bureau of the Census, Current Population Reports, Series P-25, No. 1057, Mar. 1990.
86-87	U.S. Bureau of the Census, Current Population Reports, Series P-25, No. 1045, Jan. 1990.
85	U.S. Bureau of the Census, Current Population Reports, Series P-25, No. 1022, Mar. 1988.
84	U.S. Bureau of the Census, Current Population Reports, Series P-25, No. 1000, Feb. 1987.
83	U.S. Bureau of the Census, Current Population Reports, Series P-25, No. 985, Apr. 1986.
82	U.S. Bureau of the Census, Current Population Reports, Series P-25, No. 965, Mar. 1985.
81	U.S. Bureau of the Census, Current Population Reports, Series P-25, No. 949, May 1984.
80	U.S. Bureau of the Census, Current Population Reports, Series P-25, No. 929, May 1983.
	U.S. Bureau of the Census, U.S. Census of Population: 1980, Number of Inhabitants, PC80-1-A1, United States
71-79	Summary, 1983.
970	U.S. Bureau of the Census, Current Population Reports, Series P-25, No. 917, July 1982.
	U.S. Bureau of the Census, U.S. Census of Population: 1970, Number of Inhabitants, Final Report PC(1)-A1,
61-69	United States Summary, 1971.
60	U.S. Bureau of the Census, Current Population Reports, Series P-25, No. 519, April 1974.
51-59	U.S. Bureau of the Census, U.S. Census of Population: 1960, Number of Inhabitants, PC(1)-A1, United States
40-50	Summary, 1964.
30-39	U.S. Bureau of the Census, Current Population Reports, Series P-25, No. 310, June 30, 1965.
	U.S. Bureau of the Census, Current Population Reports, Series P-25, No. 499, May 1973.
20-29	U.S. Bureau of the Census, Current Population Reports, Series P-25, No. 499, May 1973, and National Office of
	Vital Statistics, Vital Statistics Rates in the United States, 1900-1940, 1947.
917-19	National Office of Vital Statistics, Vital Statistics Rates in the United States,
00-1916	1900-1940, 1947.
	Same as for 1930-39.
	Same as for 1920-29.

		Total			White			Black	
Age	Both sexes	Male	Female	Both sexes	Male	Female	Both sexes	Male	Female
All ages	0.9815	0.9721	0.9906	0.9802	0.9728	0.9873	0.9432	0.9151	0.9699
10-14	0.9882	0.9891	0.9873	0.9830	0.9841	0.9818	0.9591	0.9586	0.9595
15-19	1.0166	1.0198	1.0133	1.0094	1.0128	1.0059	0.9988	1.0016	0.9959
20-24	1.0002	0.9987	1.0017	0.9975	0.9985	0.9966	0.9593	0.9432	0.9753
25-29	0.9591	0.9439	0.9748	0.9558	0.9441	0.9681	0.9123	0.8732	0.9510
30-34	0.9687	0.9487	0.9892	0.9669	0.9518	0.9828	0.9129	0.8599	0.9651
35-39	0.9790	0.9628	0.9954	0.9764	0.9643	0.9888	0.9303	0.8808	0.9778
40-44	0.9901	0.9758	1.0044	0.9875	0.9764	0.9988	0.9410	0.8943	0.9850
45-49	0.9775	0.9633	0.9916	0.9762	0.9648	0.9877	0.9302	0.8807	0.9762
50-54		0.9623			0.9651			0.8802	
55 years and over		0.9758			0.9783			0.9294	
15-44			0.9954			0.9890			0.9739
15-54		0.9710			0.9710			0.9046	

# Table E. Ratio of census-level resident population to resident population adjusted for estimated net census undercount by age, sex, and race: April 1, 1990

... Category not applicable.

Table 4-1. Population of Birth- and Death-Registration States, 1990-1932, and United States, 1900-1998

		Unite	ed States/1	, spatation entitle	rated as of April 1 for 194 United S			ation States	Death-regist	ration States
		Population			Population		Dirar region		Doutiningiot	
	Year	including	Population	Year	including	Population	Number	Population	Number	Population
		Armed Forces	residing		Armed Forces	residing	of	residing	of	residing
		abroad	in area		abroad	in area	States/2	in area	States/2	in area
1998		270,509,187	270,298,524	1950	151,132,000	150,697,361				
1997		267,901,000	267,636,061	1949	149,188,000	148,665,000				
1996		265,556,890	265,283,783	1948	146,631,000	146,093,000				
1995		263,033,968	262,755,270	1947	144,126,000	143,446,000				
1994		260,659,690	260,340,990	1946	141,389,000	140,054,000				
1993		258,119,768	257,783,004	1945	139,928,000	132,481,000				
1992		255,457,501	255,077,536	1944	138,397,000	132,885,000				
1991		252,688,000	252,177,000	1943	136,739,000	134,245,000				
1990		249,225,000	248,709,873	1942	134,860,000	133,920,000				
1989		247,342,000	246,819,000	1941	133,402,000	133,121,000				
1988		245,021,000	244,499,000	1940	131,820,000	131,669,275				
1987		242,804,000	242,289,000	1939	131,028,000	130,879,718				
1986		240,651,000	240,133,000	1938	129,969,000	129,824,939				
1985		238,466,000	237,924,000	1937	128,961,000	128,824,829				
1984		236,348,000	235,825,000	1936	128,181,000	128,053,180				
1983		234,307,000	233,792,000	1935	127,362,000	127,250,232				
1982		232,188,000	231,664,000	1934	126,485,000	126,373,773				
1981		229,966,000	229,466,000	1933	125,690,000	125,578,763				
1980		227,061,000	226,545,805	1932	124,949,000	124,840,471	47	118,903,899	47	118,903,899
1979		225,055,000	224,567,000	1931	124,149,000	124,039,648	46	117,455,229	47	118,148,987
1978		222,585,000	222,095,000	1930	123,188,000	123,076,741	46	116,544,946	47	117,238,278
1977		220,239,000	219,760,000	1929		121,769,939	46	115,317,450	46	115,317,450
1976		218,035,000	217,563,000	1928		120,501,115	44	113,636,160	44	113,636,160
1975		215,973,000	215,465,000	1927		119,038,062	40	104,320,830	42	107,084,532
1974		213,854,000	213,342,000	1926		117,399,225	35	90,400,590	41	103,822,683
1973		211,909,000	211,357,000	1925		115,831,963	33	88,294,564	40	102,031,555
1972		209,896,000	209,284,000	1924		114,113,463	33	87,000,295	39	99,318,098
1971		207,661,000	206,827,000	1923		111,949,945	30	81,072,123	38	96,788,197
1970		204,270,000	203,211,926	1922		110,054,778	30	79,560,746	37	92,702,901
1969		202,677,000	201,385,000	1921		108,541,489	27	70,807,090	34	87,814,447
1968		200,706,000	199,399,000	1920		106,466,420	23	63,597,307	34	86,079,263
1967		198,712,000	197,457,000	1919	105,063,000	104,512,110	22	61,212,076	33	83,157,982
1966		196,560,000	195,576,000	1918	104,550,000	103,202,801	20	55,153,782	30	79,008,412
1965		194,303,000	193,526,000	1917	103,414,000	103,265,913	20	55,197,952	27	70,234,775
1964		191,889,000	191,141,000	1916		101,965,984	11	32,944,013	26	66,971,177
1963		189,242,000	188,483,000	1915		100,549,013	10	31,096,697	24	61,894,847
1962		186,538,000	185,771,000	1914		99,117,567			24	60,963,309
1961		183,691,000	182,992,000	1913		97,226,814			23	58,156,740
1960		179,933,000	179,323,175	1912		95,331,300			22	54,847,700
1959		177,264,000	176,513,000	1911		93,867,814			22	53,929,644
1958		174,141,000	173,320,000	1910		92,406,536			20	47,470,437
1957		171,274,000	170,371,000	1909		90,491,525			18	44,223,513
1956		168,221,000	167,306,000	1908		88,708,976			17	38,634,759
1955		165,275,000	164,308,000	1907		87,000,271			15	34,552,837
1954		162,391,000	161,164,000	1906		85,436,556			15	33,782,288
1953		159,565,000	158,242,000	1905		83,819,666			10	21,767,980
1952		156,954,000	155,687,000	1904		82,164,974			10	21,332,076
1951		154,287,000	153,310,000	1903		80,632,152			10	20,943,222
				1902		79,160,196			10	20,582,907
				1901		77,585,128			10	20,237,453
				1900		76,094,134			10	19,965,446

... Category not applicable

1/Alaska included beginning 1959 and Hawaii, 1960.

2/The District of Columbia is not included in "Number of States," but it is represented in all data shown for each year.

SOURCE: Published and unpublished data from the U.S. Bureau of the Census; see text.

#### Table 4-2. Estimated Population of the United States, by Age, Race, and Sex: July 1, 1998

	-	All races			White			Black			American	Indian	Asian	or Pacific Is	lander
Age	Both sexes	Male	Female	Both sexes	Male	Female	Both sexes	Male	Female	Both sexes	Male	Female	Both sexes	Male	Female
All ages	270,298,524	132,046,327	138,252,197	223,000,729	109,489,380	113,511,349	47,297,795	22,556,947	24,740,848	34,430,569	16,340,144	18,090,425	2,359,946	1,168,063	1,191,883
Under 1	3,776,389	1,929,312	1,847,077	2,993,441	1,532,601	1,460,840	782,948	396,711	386,237	560,713	284,257	276,456	40,887	20,523	20,364
1-4 years	15,189,749	7,766,906	7,422,843	12,058,700	6,179,436	5,879,264	3,131,049	1,587,470	1,543,579	2,266,865	1,149,017	1,117,848	158,834	80,347	78,487
5-9 years	19,920,862	10,195,027	9,725,835	15,686,897	8,038,094	7,648,803	4,233,965	2,156,933	2,077,032	3,170,130	1,609,577	1,560,553	224,191	113,894	110,297
10-14 years	19,241,808	9,854,788	9,387,020	15,202,008	7,799,351	7,402,657	4,039,800	2,055,437	1,984,363	2,992,945	1,520,299	1,472,646	243,014	123,463	119,551
15-19 years	19,539,327	10,045,566	9,493,761	15,492,233	7,991,575	7,500,658	4,047,094	2,053,991	1,993,103	3,024,366	1,537,293	1,487,073	228,853	115,032	113,821
15-17 years	11,743,251	6,049,165	5,694,086	9,301,764	4,803,090	4,498,674	2,441,487	1,246,075	1,195,412	1,803,798	922,334	881,464	143,997	72,700	71,297
18-19 years	7,796,076	3,996,401	3,799,675	6,190,469	3,188,485	3,001,984	1,605,607	807,916	797,691	1,220,568	614,959	605,609	84,856	42,332	42,524
20-24 years	17,674,134	8,996,110	8,678,024	14,093,581	7,224,785	6,868,796	3,580,553	1,771,325	1,809,228	2,633,203	1,300,285	1,332,918	188,975	95,301	93,674
25-29 years	18,588,114	9,246,888	9,341,226	14,867,714	7,473,057	7,394,657	3,720,400	1,773,831	1,946,569	2,622,710	1,253,815	1,368,895	192,668	99,429	93,239
30-34 years	20,186,296	10,006,893	10,179,403	16,347,087	8,201,666	8,145,421	3,839,209	1,805,227	2,033,982	2,727,967	1,279,155	1,448,812	181,362	91,972	89,390
35-39 years	22,625,784	11,256,018	11,369,766	18,626,277	9,364,283	9,261,994	3,999,507	1,891,735	2,107,772	2,883,922	1,354,291	1,529,631	184,914	92,388	92,526
40-44 years	21,894,075	10,844,698	11,049,377	18,177,682	9,098,379	9,079,303	3,716,393	1,746,319	1,970,074	2,676,120	1,251,755	1,424,365	169,796	82,912	86,884
45-49 years	18,859,365	9,252,354	9,607,011	15,830,743	7,858,712	7,972,031	3,028,622	1,393,642	1,634,980	2,153,894	984,132	1,169,762	138,416	67,158	71,258
50-54 years	15,725,519	7,647,607	8,077,912	13,473,817	6,624,094	6,849,723	2,251,702	1,023,513	1,228,189	1,587,413	711,774	875,639	108,289	52,080	56,209
55-59 years	12,406,909	5,956,213	6,450,696	10,672,553	5,180,801	5,491,752	1,734,356	775,412	958,944	1,249,295	546,840	702,455	80,560	38,082	42,478
60-64 years	10,269,061	4,849,497	5,419,564	8,853,308	4,231,745	4,621,563	1,415,753	617,752	798,001	1,028,261	439,816	588,445	62,606	29,241	33,365
65-69 years	9,593,497	4,392,568	5,200,929	8,340,929	3,857,225	4,483,704	1,252,568	535,343	717,225	936,144	400,002	536,142	49,192	22,202	26,990
70-74 years	8,801,796	3,857,005	4,944,791	7,821,943	3,452,264	4,369,679	979,853	404,741	575,112	729,672	299,327	430,345	39,937	17,868	22,069
75-79 years	7,218,007	2,997,107	4,220,900	6,487,580	2,705,650	3,781,930	730,427	291,457	438,970	553,805	216,180	337,625	30,116	12,799	17,317
80-84 years	4,734,182	1,764,311	2,969,871	4,308,395	1,609,889	2,698,506	425,787	154,422	271,365	326,973	112,476	214,497	18,396	7,374	11,022
85 years +	4,053,650	1,187,459	2,866,191	3,665,841	1,065,773	2,600,068	387,809	121,686	266,123	306,171	89,853	216,318	18,940	5,998	12,942

SOURCE: Published and unpublished data from the U.S. Bureau of the Census; see text.

Table 4-3. Estimated Total Population and Female Population Aged 15-44 Years: United States,Each Division and State, Puerto Rico, Virgin Islands, Guam, American Samoa, and the Northern Marianas: July 1, 1998

[Figures include Armed Forces stationed in each area and exclude those stationed outside the United States.]

		Female			Female
Area	Total	15-44 years	Area	Total	15-44 years
United States	270298524	60111557			
			South Atlantic		
Geographic divisions:			Delaware	743,603	172,819
			Maryland	5,134,808	1,196,880
New England	13,429,862	3,012,806	District of Columbia	523,124	126,420
Middle Atlantic	38,291,763	8,382,361	Virginia	6,791,345	1,597,037
East North Central	44,194,756	9,863,754	West Virginia	1,811,156	386,340
West North Central	18,694,626	4,088,137	North Carolina	7,546,493	1,677,166
South Atlantic	48,944,678	10,864,320	South Carolina	3,835,962	879,477
East South Central	16,471,211	3,718,882	Georgia	7,642,207	1,820,73
West South Central	30,013,597	6,755,599	Florida	14,915,980	3,007,43
Mountain	16,813,233	3,681,878			
Pacific	43,444,798	9,743,820	East South Central		
			Kentucky	3,936,499	882,559
New England			Tennessee	5,430,621	1,225,736
Maine	1,244,250	276,187	Alabama	4,351,999	981,633
New Hampshire	1,185,048	275,914	Mississippi	2,752,092	628,954
Vermont	590,883	133,989			
Massachusetts	6,147,132	1,392,583	West South Central		
Rhode Island	988,480	218,934	Arkansas	2,538,303	545,749
Connecticut	3,274,069	715,199	Louisiana	4,368,967	1,002,566
			Oklahoma	3,346,713	717,052
Middle Atlantic			Texas	19,759,614	4,490,232
New York	18,175,301	4,038,534			
New Jersey	8,115,011	1,781,092	Mountain		
Pennsylvania	12,001,451	2,562,735	Montana	880,453	182,845
			Idaho	1,228,684	268,122
East North Central			Wyoming	480,907	102,643
Ohio	11,209,493	2,497,235	Colorado	3,970,971	886,746
Indiana	5,899,195	1,324,439	New Mexico	1,736,931	378,533
Illinois	12,045,326	2,675,096	Arizona	4,668,631	1,000,352
Michigan	9,817,242	2,213,708	Utah	2,099,758	494,186
Wisconsin	5,223,500	1,153,276	Nevada	1,746,898	368,451
West North Central			Pacific		
Minnesota	4,725,419	1,054,458	Washington	5,689,263	1,279,008
Iowa	2,862,447	607,088	Oregon	3,281,974	699,329
Missouri	5,438,559	1,198,407	California	32,666,550	7,377,208
North Dakota	638,244	136,091	Alaska	614,010	135,809
South Dakota	738,171	158,153	Hawaii	1,193,001	252,466
Nebraska	1,662,719	361,056			
Kansas	2,629,067	572,884	Territories		
			Puerto Rico	3,857,070	904,668
			Virgin Islands	118,382	29,31
			Guam	149,101	31,057
			American Samoa	62,093	13,54
			Northern Marianas	66,611	22,483

Source: Published and unpublished data from the Bureau of the Census; see text.

# 1997 ADDENDUM TO "TECHNICAL APPENDIX" OF VITAL STATISTICS OF THE UNITED STATES: MORTALITY, 1995

To assist the users of the mortality public-use data tapes and CD-ROMs, provided is a copy of the "Technical Appendix" of the Vital Statistics of the United States: Mortality, 1995. This technical appendix provides certain qualifications that are essential to using, analyzing, and interpreting the data on those tapes and CD-ROMs. Certain modifications to the technical appendix are essential to make it applicable to the mortality file for the 1997 data year. Those modifications include the following:

# I. Sources of data

State-coded medical data

1996 Utah

For 1997, of the States in the VSCP, 42 States submitted precoded medical data for all death certificates in the form of electronic data files. Of these 42 States, Maine, Montana, and North Dakota contracted with a private company to provide NCHS with precoded medical data. The remaining eight VSCP States, New York City, and the District of Columbia submitted copies of the original certificates from which NCHS coded the medical data.

For 1997, approximately 29 percent of the Nation's death records were multiple-cause coded using SuperMICAR and 71 percent using MICAR. This represents data from 22 States which was coded by SuperMICAR and data from 28 States, the District of Columbia, and New York City which was coded by MICAR.

All States submitted precoded demographic data for all death certificates in the form of electronic data files in 1997.

Data for Puerto Rico, the Virgin Islands, and Guam have been included on the mortality public-use data tapes since 1994. Data for American Samoa are included for the first time for 1997.

# II. Classification of data

# A. Race

Death certificates for some States have a checkbox for "multi-racial".

Some States are mandated by law to code "multi-racial" as a separate category. For these States, death records with an entry of "multi-racial" but without a specified racial entry or entries were assigned to the specified race of the previous record. States not mandated to code "multi- racial" may code "multi-racial" in the same way as mandated States or may code "multi- racial" to "Other entries." For death records where race is coded to "Other entries", if origin is Hispanic and the place of birth is Puerto Rico, Cuba or Mexico, the race is assigned as White. Otherwise, except for Puerto Rico, death records with race coded to "Other entries" were assigned to the specified race of the previous record with known race. For Puerto Rico, if race is coded to "Other entries", race is assigned to "Other races."

# B. Hispanic origin

For 1997, data by Hispanic origin include, for the first time, all 50 States and the District of Columbia .

Infant mortality--Infant mortality data by Hispanic origin are based on deaths to residents of the entire United States.

Infant mortality rates by Hispanic origin are biased because of inconsistencies in reporting Hispanic or ethnic origin between the birth and death certificates for the same infant. Estimates of reporting bias may be made by comparing rates based on the linked file of infant deaths and live births 1/ with those where the Hispanic or ethnic origin of infant death is based on information from the death certificate 2/. Infant mortality rates by Hispanic origin are less subject to reporting bias when based on linked files of infant deaths and live births(1).

## C. Educational attainment

Deaths by educational attainment have been included on the public-use data tapes since 1989. It is recommended for 1997 that analyses of educational attainment data include deaths to residents of 46 States and the District of Columbia whose data were approximately 80 percent or more complete on a place-of-occurrence basis. Although data for Kentucky are included on the data tape, they would be excluded from analyses because more than 20 percent of their death certificates were classified to "unknown educational attainment." Data for Georgia, Rhode Island, and South Dakota were excluded from the data tape because their death certificates did not include an educational attainment item. Death rates for educational attainment are based on population estimates derived from the U.S. Bureau of the Census' Current Population Survey (CPS) and adjusted to resident population control totals. As a result, the rates are subject to the variability of the denominator as well as the numerator. Computation of the relative standard errors, 95-percent confidence intervals, and statistical tests are discussed in the Technical notes of the National Vital Statistics Reports(2).

Death rates for educational attainment may be biased for the following three reasons: 1) because of inconsistencies in reporting between the death certificates and the CPS for decedents; 2) because of a change in the basic item used to collect data about education in the CPS; and 3) because of possible under-enumeration of the population estimates (there have been no studies evaluating this potential bias).

In the National Longitudinal Mortality Survey (NLMS) a total of 9,257 death certificates were compared with responses to educational attainment questions from a total of 12 CPS's conducted by the U.S. Bureau of the Census for data year 1989 3/. Based on the results of this study and after proportionally allocating the "unknown education" on the death certificate, the ratio of CPS deaths having reported less than a high school education (grades 0-11) to death certificate deaths having reported less than high school education was about 1.37. This indicates that the number of deaths and death rates for decedents having less than high school education are biased downward in the vital statistics data by about 37 percent. Similarly, the corresponding ratios for having completed high school (grade 12) and having completed more than high school (grades 13 and more) are 0.70 and 0.87 respectively.

In the CPS, the item used to collect education information was changed in 1992 from:

23a) What is the highest grade or year of regular school ... has ever attended?;

23b) Did ... complete that grade (year?); Yes, No

## to:

23) What is the highest level of school ... has completed or the highest degree ... has received?

Based on a Bureau of the Census study 4/, the ratio of population estimates derived from the "old" educational attainment definition for less than a high school education (grades 0-11) to population estimates derived from the "new" definition for less than high school education was about 0.99. This indicates that the death rates for decedents having less than high school education are biased upward in the vital statistics data by about 1 percent. Similarly, the corresponding ratios for having completed high school (grade 12) and having completed more than high school (grades 13 and more) were 1.15 and 0.93 respectively.

Accounting for both the inconsistency in reporting between the death certificates and the CPS for decedents and the change in the definition of education population estimates may be accomplished simultaneously by combining the above ratios. The combined ratio for less than high school is about 1.36 (1.37 x .99), for high school about 0.81 (0.70 x 1.15), and for more than high school about 0.81 (0.87 x .93). These ratios may vary by age, sex, race/Hispanic origin, cause of death, and geographic area.

# D. Occupation and industry

For 1997, the occupation and industry mortality data were included for the following 16 reporting States:

Colorado	North Carolina
Georgia	Ohio
Idaho	Rhode Island
Kansas	South Carolina
Kentucky	Utah
Nevada	Vermont
New Jersey	West Virginia
New Mexico	Wisconsin

# E. Quality of data

California death confirmations--Selected causes of death considered to be of public health concern are routinely confirmed by the States according to agreed upon procedures between the State vital statistics programs and the National Center for Health Statistics 5/,6/,7/. For 1997, the State of California did not confirm deaths from the following causes (number of deaths shown in parentheses after cause):

Giardiasis (1); Brucellosis (1); Leprosy (1); Whooping cough (1); Tetanus (1); Schistosomiasis (1); Other cestode infection (8); Congenital rubella (1).

# III. Population bases for computing rates

The population used for computing death rates (furnished by the U.S. Bureau of the Census) represents the population residing in the specified area. Population estimates used for computing rates by age, sex, race, Hispanic origin, and non-Hispanic origin for the United States for 1997 are based on population estimates as of July 1, 1997 8/ (available upon request). The estimates are based on demographic analysis and, therefore, are not subject to sampling variability.

Population estimates used for computing death rates by specified Hispanic origin, race for non-Hispanic origin, age, and sex for the United States are as of July 1, 1997 9/ (available upon request). The estimates for Mexicans, Puerto Ricans, Cubans, and Other Hispanics are based on the CPS adjusted to resident population control totals and, therefore, are subject to sampling error (see Technical Appendix from Vital Statistics of the United States: Mortality, 1995).

Population estimates used for computing death rates by marital status, age, race, and sex for the United States 9/ are as of July 1, 1997 and are available upon request. Population estimates used for computing death rates by marital status, age, Hispanic origin, race for non- Hispanic origin, and sex for the United States 9/ are as of July 1, 1997 and are also available upon request. The population estimates for never married, married, widowed, and divorced and for Mexicans, Puerto Ricans, Cubans, and Other Hispanics are based on the CPS adjusted to resident population control totals and, therefore, are subject to sampling error (see Technical Appendix from Vital Statistics of the United States: Mortality, 1995).

Population estimates used for computing death rates by educational attainment, age, and sex for the total of 46 States and the District of Columbia are presented in table IV of the Technical notes of the "Report of Final Mortality Statistics" 2/. These estimates are based on the CPS adjusted to resident population control for the 46 States and the District of Columbia.

Population estimates for each State, Puerto Rico, Virgin Islands, Guam, and American Samoa 10-14/ are presented in table V of the Technical notes of the "Report of Final Mortality Statistics" 2/. These estimates are based on demographic analysis, and therefore, are not subject to sampling variability.

All population estimates for 1997 are based on the 1990 census level counts that were modified by age, race, and sex to be consistent with the U.S. Office of Management and Budget categories and historical categories for death data 15/.

# References

1. MacDorman MF, Atkinson JO. Infant mortality statistics from the 1996 period linked birth/infant death data set. Monthly vital statistics report; vol 46 no 12, supp. Hyattsville, Maryland: National Center for Health Statistics. 1998.

2. Hoyert DL, Kochanek KD, Murphy SL. Deaths: Final data for 1997. National vital statistics reports; in press. Hyattsville, Maryland: National Center for Health Statistics.

3. Sorlie PD, Johnson NJ. Validity of education information on the death certificate. Epidemiology 7(4): 437-439. 1996.

4. Kominski R, Adams A. Educational attainment in the United States: March 1993 and 1992. U.S. Bureau of the Census. Current Population Reports: Series P20-476. Washington: U.S. Government Printing Office. 1994.

5. National Center for Health Statistics. Vital statistics, instructions for classifying the underlying cause of death. NCHS instruction manual; part 2a. Hyattsville, Maryland: Public Health Service. Published annually.

6. National Center for Health Statistics. Vital statistics, instructions for classifying multiple causes of death. NCHS instruction manual; part 2b. Hyattsville, Maryland: Public Health Service. Published annually.

7. National Center for Health Statistics. Vital statistics, nonindexed terms, standard abbreviations, and State geographic codes used in mortality data classification. NCHS instruction manual; part 2e. Hyattsville, Maryland: Public Health Service. Published annually.

8. U.S. Bureau of the Census. U.S. population estimates, by age, sex, race, and Hispanic origin: 1990 to 1997. PPL-91R. Washington, DC. 1998.

9. U.S. Bureau of the Census. Population estimates based on unpublished tabulations prepared by the Housing and Household Economics Statistics Division.

10. U.S. Bureau of the Census. Estimates of the population of states by age and sex: 1990 to 1997. PPL-109. Product Announcement CB98-122. Washington, DC. Released July 21, 1998.

11. U.S. Bureau of the Census. Unpublished Census file PRICO.WK4.

12. U.S. Bureau of the Census. Unpublished Census file USVI.WK4.

13. U.S. Bureau of the Census. Unpublished Census file GUAM.WK4.

14. U.S. Bureau of the Census. Unpublished Census file ASAMOA.WK4.

15. U.S. Bureau of the Census: Unpublished data from the 1990 census, by age, sex, race and Hispanic origin. 1990.

TECHNICAL APPENDIX FROM

# VITAL STATISTICS OF UNITED STATES

# 1995

# MORTALITY

# U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

# **PUBLIC HEALTH SERVICE**

CENTERS FOR DISEASE CONTROL AND PREVENTION NATIONAL CENTER FOR HEALTH STATISTICS

Hyattsville, Maryland: April 1999

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A copy of the technical appendix may be obtained by contacting the National Center for Health Statistics, Mortality Statistics Branch at 301-436-8884.

For a list of reports published by the National Center for Health Statistics contact:

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Sources of data       1         Death statistics       1         Standard certificate       3
History
Classification of data
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# Sources of data

# **Death statistics**

Mortality statistics for 1995 are, as for all previous years except 1972, based on information from records of all deaths occurring in the United States.

The death-registration system of the United States encompasses the 50 States, the District of Columbia, New York City (which is independent of New York State for the purpose of death registration), Puerto Rico, the Virgin Islands, Guam, American Samoa, and the Commonwealth of the Northern Mariana Islands. In statistical tabulations, United States refers only to the aggregate of the 50 States (including New York City) and the District of Columbia. Data for Guam, Puerto Rico, and the Virgin Islands are presented separately from data for the United States. No data are included for American Samoa or the Commonwealth of the Northern Marianas.

The Virgin Islands was admitted to the registration area for deaths in 1924; Puerto Rico, in 1932; and Guam, in 1970. Tabulations of death statistics for Puerto Rico and the Virgin Islands were regularly shown in Vital Statistics of the United States from the year of their admission through 1971 except for the years 1967-69, and tabulations for Guam were included for 1970 and 1971. Death statistics for Puerto Rico, the Virgin Islands, and Guam were not included in Vital Statistics of the United States for 1972 but have been included each year since 1973. Information for 1972 for these three areas was published in the respective annual vital statistics reports of the Department of Health of the Commonwealth of Puerto Rico, the Department of Health of the Virgin Islands, and the Department of Public Health and Social Services of the Government of Guam.

Procedures used by NCHS to collect death statistics have changed over the years. Before 1971 tabulations of deaths were based solely on information obtained by NCHS from copies of the original certificates. The information from these copies was edited, coded, and tabulated. For 1960-70 all mortality information taken from these records was transferred by NCHS to magnetic tape for computer processing.

Beginning with 1971 an increasing number of States have provided NCHS, via the Vital Statistics Cooperative Program (VSCP), with electronic files of data coded according to NCHS specifications. The year in which State-coded demographic data were first transmitted in electronic data files to NCHS is shown below for each of the States, New York City, the District of Columbia, Puerto Rico, and the Virgin Islands, all of which now furnish demographic or nonmedical data in electronic data files.

1971	1972	1973
Florida	Maine	Colorado
	Missouri	Michigan
	New Hampshire	New York (exc
	Rhode Island	City)
	Vermont	
1974	1975	1976
Illinois	Louisiana	Alabama
Iowa	Maryland	Kentucky
Kansas	North Carolina	Minnesota
Montana	Oklahoma	Nevada
Nebraska	Tennessee	Texas
Oregon	Virginia	West Virginia
South Carolina	Wisconsin	Ũ

except New York

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1977 Alaska Idaho Massachusetts New York City Ohio Puerto Rico	1978 Indiana Utah Washington	1979 Connecticut Hawaii Mississippi New Jersey Pennsylvania Wyoming
1980 Arkansas New Mexico South Dakota	1982 North Dakota	1985 Arizona California Delaware Georgia District of Columbia
1994		

Virgin Islands

For Guam, mortality statistics for 1995 are based on information obtained directly by NCHS from copies of the original certificates received from the registration office.

In 1974 States began coding medical (cause-of-death) data in electronic data files according to NCHS specifications. The year in which State-coded medical data were first transmitted to NCHS is shown below for the 41 States now furnishing such data. In 1995 Maine, Montana, North Dakota, and Wyoming contracted with a private company to provide precoded medical data to NCHS. Kansas provided the medical data for Alaska. The remaining 9 VSCP States, New York City, the District of Columbia, Puerto Rico, the Virgin Islands, and Guam submitted copies of the original certificates from which NCHS coded the medical data.

1974 Iowa Michigan	1975 Louisiana Nebraska North Carolina Virginia Wisconsin	1980 Colorado Kansas Massachusetts Mississippi New Hampshire Pennsylvania South Carolina
1981 Maine	1983 Minnesota	1984 Maryland New York (except New York City) Vermont
1986 California Florida Texas	1988 Alaska Delaware Idaho North Dakota Wyoming	1989 Georgia Indiana Washington

1991 Arkansas 1992 Montana 1993 Alabama Connecticut Hawaii Nevada Oregon South Dakota

1994 Oklahoma Rhode Island 1995 New Mexico

For 1995 and previous years except 1972, NCHS coded the medical information from copies of the original certificates received from the registration offices for all deaths occurring in those States that were not furnishing NCHS with medical data coded according to NCHS specifications. For 1981 and 1982, these procedures were modified because of a coding and processing backlog resulting from personnel and budgetary restrictions. To produce the mortality files on a timely basis with reduced resources, NCHS used State-coded underlying cause-of-death information supplied by 19 States for 50 percent of the records; for the other 50 percent of the records for these States as well as for 100 percent of the records for the remaining 21 registration areas, NCHS coded the medical information. Mortality statistics for 1972 were based on information obtained from a 50-percent sample of death records instead of from all records as in other years. The sample resulted from personnel and budgetary restrictions. Sampling variation associated with the 50-percent sample is described in "Estimates of errors arising from 50-percent sample for 1972" under "Quality control procedures".

## Standard certificate

For many years, the U.S. Standard Certificate of Death, issued by the Department of Health and Human Services, has been used as the principal means to attain uniformity in the contents of documents used to collect information on these events. It has been modified by each State to the extent required by the particular needs of the State or by special provisions of the State vital statistics law. However, the certificates of most States conform closely in content and arrangement to the standards.

The first issue of the U.S. Standard Certificate of Death appeared in 1900. Since then, it has been revised periodically by the national vital statistics agency through consultation with State health officers and registrars; Federal agencies concerned with vital statistics; national, State, and county medical societies; and others working in such fields as public health, social welfare, demography, and insurance. This revision procedure has ensured careful evaluation of each item in terms of its current and future usefulness for legal, medical and health, demographic, and research purposes. New items have been added when necessary, and old items have been modified to ensure better reporting; or in some cases, items have been dropped when their usefulness appeared to be limited.

The current version of the U.S. Standard Certificate of Death was recommended for State use beginning on January 1, 1989. The U.S. Standard Certificate of Death is shown in figure 7-A (1).

# History

The first death statistics published by the Federal Government concerned events in 1850 and were based on statistics collected during the decennial census of that year. In 1880 a national "registration area" was created for deaths. Originally, this area consisted of Massachusetts, New Jersey, the District of Columbia, and several large cities that had efficient systems for death registration. The death-registration area continued to expand until 1933,

when it included for the first time the entire United States. Tables showing data for death-registration States include the District of Columbia for all years; registration cities in nonregistration States are not included. For more details on the history of the death-registration area, see U.S. Vital Statistics System: Major Activities and Developments, 1950-95 (2).

# **Classification of data**

Vital statistics data is presented in terms of both frequencies and rates which are classified according to demographic variables such as geographic area, age, sex, and race. Since the calculation of rates requires population data, both vital statistics and population data must be classified and tabulated in comparable groups. The general rules used in the classification of geographic and personal items for deaths for 1995 are set forth in the NCHS instruction manual, Part 4 (3). A discussion of the classification of certain important items is presented below.

### Classification by occurrence and residence

Tabulations for the United States and specified geographic areas are classified by place of residence unless stated as by place of occurrence. Before 1970 resident mortality statistics for the United States included all deaths occurring in the States and the District of Columbia, with deaths of nonresidents assigned to place of death. For the United States (50 States and the District of Columbia), deaths of nonresidents refers to deaths that occur in the 50 States and the District of Columbia of nonresident aliens; nationals residing abroad; and residents of Puerto Rico, the Virgin Islands, Guam, and other territories of the United States. Similarly, for Puerto Rico and for the Virgin Islands, respectively. For Guam, however, deaths of nonresidents refers to deaths that occurred to a resident of any place other than Occurred to a resident of any place other than Guam or the United States. Beginning with 1970, deaths of nonresidents are not included in tables by place of residence.

Deaths by place of occurrence, on the other hand, include deaths of both residents and nonresidents of the United States. Consequently, for each year beginning with 1970, the total number of deaths in the United States by place of occurrence was somewhat greater than the total by place of residence. For 1995 this difference amounted to 3,119 deaths.

Before 1970, except for 1964 and 1965, deaths of nonresidents of the United States occurring in the United States were treated as deaths of residents of the exact place of occurrence, which in most instances was an urban area. In 1964 and 1965, deaths of nonresidents of the United States occurring in the United States were allocated as deaths of residents of the balance of the county in which they occurred.

*Residence error*--Results of a 1960 study showed that the classification of residence information on the death certificates corresponded closely to the residence classification of the census records for the decedents whose records were matched (4).

A recent review of infant mortality rates for major urban areas suggests that the problem of residence error persists in vital statistics data despite the presence of an item on the U.S. Standard certificates of birth and death that asks whether residence was inside or outside city limits. Full resolution of this problem may require the application of automated systems for assigning addresses to geopolitical units.

# **Geographic classification**

The rules followed in the classification of geographic areas for deaths are contained in NCHS instruction manual, Part 4 (3). The geographic codes assigned by NCHS on birth and death records are given in another instruction manual (5). Beginning with 1994 data, the geographic codes were modified to reflect results of the 1990 census. For 1982-93 codes are based on the results of the 1980 census and for 1970-81 on the 1970 census.

*Metropolitan statistical areas*--The Metropolitan statistical areas (MSA's) and Primary metropolitan statistical areas (PMSA's) are those established by the U.S. Office of Management and Budget as of April 1, 1990, and used by the U.S. Bureau of the Census (6), except in the New England States.

Outside the New England States, an MSA has either a city with a population of at least 50,000 or a U.S. Bureau of the Census urbanized area of at least 50,000 and a total MSA population of at least 100,000. A PMSA consists of a large urbanized county or cluster of counties that demonstrate very strong internal economic and social links and has a population over one million. When PMSA's are defined, the larger area of which they are component parts is designated a Consolidated Metropolitan Statistical Area (CMSA) (7).

In the New England States, the U.S. Office of Management and Budget uses towns and cities rather than counties as geographic components of MSA's and PMSA's. However, NCHS cannot use this classification for these States because its data are not coded to identify all towns. Instead, NCHS uses New England County Metropolitan Areas (NECMA's). Made up of county units, these areas are established by the U.S. Office of Management and Budget (8).

*Metropolitan and nonmetropolitan counties*--Independent cities and counties included in MSA's and PMSA's or in NECMA's are included in data for metropolitan counties; all other counties are classified as nonmetropolitan.

*Population-size groups--*Beginning with the 1994 data year, vital statistics data for cities and certain other urban places were classified according to the population enumerated in the 1990 Census of Population. Data are available for individual cities and other urban places of 10,000 or more population. As a result of changes in the enumerated population between 1980 and 1990, some urban places are no longer identified separately and other urban places have been added. Data for the remaining areas not separately identified appear under the heading "balance of area" or "balance of county." For the years 1982-93 classification of areas was determined by the population enumerated in the 1980 Census of Population and for the years 1970-81 in the 1970 Census of Population.

Urban places other than incorporated cities include the following:

- Each town in New England, New York, and Wisconsin and each township in Michigan, New Jersey, and Pennsylvania that had no incorporated municipality as a subdivision and had either 25,000 inhabitants or more, or a population of 10,000 to 25,000 and a density of 1,000 persons or more per square mile.
- Each county in States other than those indicated above that had no incorporated municipality within its boundary and had a density of 1,000 persons or more per square mile. (Arlington County, Virginia, is the only county classified as urban under this rule.)
- ! Each place in Hawaii with a population of 10,000 or more. (There are no incorporated cities in the State.)

Before 1964 places were classified as "urban" or "rural." Technical appendixes for earlier years discuss the previous classification system.

### State or country of birth

Mortality statistics by State or country of birth became available beginning with 1979. State or country of birth of a decedent is assigned to 1 of the 50 States or the District of Columbia; or to Puerto Rico, the Virgin Islands, or Guam--if specified on the death certificate. The place of birth is also tabulated for Canada, Cuba, Mexico, and for the remainder of the world. Deaths for which information on State or country of birth was unknown, not stated, or not classifiable accounted for a small proportion of all deaths in 1995, about 0.6 percent.

Early mortality reports published by the U.S. Bureau of the Census contained tables showing nativity of parents as well as nativity of decedent. Publication of these tables was discontinued in 1933. Mortality data showing nativity of decedent were again published in annual reports for 1939-41 and for 1950.

### Age

The age recorded on the death record is the age at last birthday, the same as the age classification used by the U.S. Bureau of the Census. For 1995 data, 463 resident death records (0.02 percent) contained not-stated age. For computation of age-specific and age-adjusted death rates, deaths with age not stated are excluded. For life table computation, deaths with age not stated are distributed proportionately.

#### Race

For vital statistics in the United States in 1995, deaths are classified by race--white, black, American Indian, Chinese, Hawaiian, Japanese, Filipino, and Other Asian or Pacific Islander. Beginning with 1992 data, an expanded code structure was used for seven States showing five additional Asian or Pacific Islander groups. These groups are Asian Indian, Korean, Samoan, Vietnamese, and Guamanian. These groups are coded only for deaths occurring in California, Hawaii, Illinois, New Jersey, New York, Texas, and Washington. In 1990, at least two-thirds of the U.S. population of each of these groups lived in this seven-State reporting area: Asian Indian, Korean, and Vietnamese, 63-66 percent; Guamanian, 74 percent; and Samoan, 84 percent (9). This additional race detail is available on the mortality public-use data tapes (10,11) and in tabular form. Beginning with 1992 data, all records coded as "other races" (0.02 percent of the total deaths in 1995) were assigned to the specified race of the previous record rather than to a separate category called "other races." Mortality data for Filipino and Other Asian or Pacific Islander were shown for the first time in 1979.

The white category includes, in addition to persons reported as white, those reported in the race item on the death certificate as Hispanic, Mexican, Puerto Rican, Cuban, and all other Caucasians. The American Indian category includes North, Central, and South American Indian, Eskimo, and Aleut. If the racial entry on the death certificate indicates a mixture of Hawaiian and any other race, the entry is coded to Hawaiian. If the race is given as a mixture of white and any other race, the entry is coded to the appropriate nonwhite race. If a mixture of races other than white is given (except Hawaiian), the entry is coded to the first race listed. This procedure for coding the first race listed has been used since 1969. Before 1969 if the entry for race was a mixture of black and any other race except Hawaiian, the entry was coded to black.

*Race not stated*--For 1995 the number of death records for which race was unknown, not stated, or not classifiable was 1,954 or 0.1 percent of the total deaths. Beginning in 1992 death records with race not stated were assigned to the specified race of the previous record with known race. From 1965 to 1991 death records with race entry not stated were assigned to a racial designation as follows: If the preceding record was coded white, the code assignment was made to white; if the code was other than white, the assignment was made to black. Before 1964 all records with race not stated were assigned to white except records of residents of New Jersey for 1962-64.

*New Jersey*, *1962-64--*New Jersey omitted the race item from its certificates of live birth and death in the beginning of 1962. The item was restored during the latter part of 1962. However, the certificate revision without the race item was used for most of 1962 as well as 1963. Therefore, figures by race for 1962 and 1963 exclude New Jersey. For 1964, 6.8 percent of the death records used for residents of New Jersey did not contain the race item.

Adjustments made in vital statistics to account for the omission of the race item in New Jersey for part of the certificates filed during 1962-64 are described in the Technical Appendix of *Vital Statistics of the United States* for each of those data years.

*Quality of race data--*A number of studies have been conducted on the reliability of race reported on the death certificate. These studies compare race reported on the death certificate with that reported on another data collection instrument such as the census or a survey. Race information on the death certificate is reported by the funeral director as provided by an informant, often the surviving next of kin, or, in the absence of an informant, on the basis of observation. In contrast, race on the census or the Current Population Survey (CPS) is self-reported or reported by a member of the household and, therefore, may be considered more valid. A high level of agreement between the death certificate and the census or survey report is essential to ensure unbiased death rates by race.

In one study a sample of approximately 340,000 death certificates was compared with census records for a 4-month period in 1960 (12). Percent agreement was 99.8 percent for white decedents, and 98.2 percent for black decedents; but less for the smaller minority groups (table A); the net difference in the number of deaths between the census records and death certificates can be expressed as a ratio of the census to the death certificate. A ratio of 1.0 for both white and black decedents (table A) indicates that the number of deaths for these race groups was essentially the same for these two sources. In another study, the National Longitudinal Mortality Study (NLMS), a total of 29,713 death certificates were compared with responses to the race questions from a total of 12 CPS's conducted by the U.S. Bureau of the Census for the years 1979-85 (13). The ratio between the two sources for white and black decedents was 1.0 as in the earlier study, however, the ratio for American Indian was 1.22 indicating that 22 percent more decedents were identified as American Indian in the census source as compared to the death certificate. The ratio for Asians was 1.12 (table A). In 1986 the National Mortality Followback Survey, conducted

by NCHS, listed a question about the race of decedents 25 years old and over. The total sample was 18,733 decedents (14). The rates of agreement were similar to those observed in the other studies.

All of these studies show that persons self-reported as American Indian or Asian on census and survey records (and by informants in the Followback Survey) were sometimes reported as white on the death certificate. The net effect of misclassification is an underestimation of deaths and death rates for the smaller minority races.

## **Hispanic deaths**

Mortality statistics for the Hispanic population are based on information for those States and the District of Columbia that included items on the death certificate to identify Hispanic or ethnic origin of decedents. Data for 1995 were obtained from the District of Columbia and all States except Oklahoma, which was excluded because its death certificate did not include an item to identify Hispanic or ethnic origin.

Hispanic mortality data were published for the first time in 1984. Generally, the reporting States used items similar to one of two basic formats recommended by NCHS. The first format is directed specifically toward the Hispanic population and appears on the U.S. Standard Certificate of Death as follows:

 WAS DECEDENT OF HISPANIC ORIGIN? (Specify No or Yes--If Yes, specify Cuban, Mexican, Puerto Rican, etc.)
 No \_\_\_\_ Pyes Specify:

The second format is a more general ancestry item and appears as follows:

! ANCESTRY--Mexican, Puerto Rican, Cuban, African, English, Irish, German, Hmong, etc., (specify)

*Death rates* --Death rates for the total Hispanic population and race for non-Hispanic origin utilize demographically-derived population estimates produced by the Bureau of the Census (15). By comparison, population estimates for Mexicans, Puerto Ricans, Cubans, and Other Hispanics are based in part on the Current Population Survey (15). Rates using the latter, therefore, are subject to sampling variation as well as random variation (see "Random variation and sampling errors").

The 49 States and the District of Columbia accounted for about 99.6 percent of the Hispanic population in the United States in 1990. This included about 99.5 percent of the Mexican population, 99.8 percent of the Puerto Rican population, 99.9 percent of the Cuban population, and 99.7 percent of the "Other Hispanic" population (9). For qualifications regarding infant mortality of the Hispanic-origin population, see "Infant deaths."

In 1994 New York City instituted the use of a revised death certificate where the race and ethnic items were to be completed by the funeral director. Previously these items were completed by the physician or medical examiner. In 1995 of the 70,752 deaths occurring in New York City, only 3 percent were coded to Unknown origin. Similarly, 4 percent were coded to unknown origin in 1994 whereas 23 percent were coded to Unknown origin in 1993. Between 1993 and 1994 the number of deaths occurring in New York City decreased 69 percent for Other and unknown Hispanic and 83 percent for Unknown origin. As a result of increased specificity in reporting ethnic origin, the number of deaths increased substantially in 1994 for Non-Hispanic and for each of the specified Hispanic subgroups.

*Quality of data on Hispanic deaths--*The NLMS examined the reliability of Hispanic origin reported on 43,520 death certificates with that reported on a total of 12 CPS's conducted by the U.S. Bureau of the Census for the years 1979-85 (13). The ratio of deaths for CPS divided by deaths for death certificate was 1.07 percent indicating net underreporting of Hispanic origin on death certificates as compared with self-reports on the surveys. The sample was too small to assess the reliability of specified Hispanic groups.

#### **Marital status**

Mortality statistics by marital status have been published annually since 1979. They were previously published in *Vital Statistics of the United States* for 1949-51 and 1959-61. Several reports analyzing mortality by marital

status have been published, including the special study based on 1959-61 data (16). Reference to earlier reports is given in the appendix of part B of the 1959-61 special study.

Mortality statistics by marital status are tabulated separately for never married, married, widowed, and divorced. Deaths for which the marriage is specified as being annulled are classified as never married. Marital status specified as separated or common-law marriage is classified as married. Of the 2,267,097 resident deaths 15 years of age and over in 1995, 9,705 certificates (0.4 percent) had marital status not stated.

*Death rates* -- Death rates for marital status use population estimates produced by the Bureau of the Census based on the Current Population Survey (15). Because these population estimates are subject to sampling variation, death rates based on them are subject to both sampling variation as well as random variation (see "Random variation and sampling errors").

## **Educational attainment**

Beginning with the 1989 data year, mortality data on educational attainment have been tabulated from information reported on the death certificate using the following item:

 DECEDENT'S EDUCATION (Specify only highest grade completed) Elementary/Secondary (0-12) College (1-4 or 5+)

For 1995, mortality data on educational attainment were reported by 46 States and the District of Columbia. Georgia, Oklahoma, Rhode Island, and South Dakota did not include an educational attainment item on their death certificate.

Selected mortality tables on educational attainment are based on deaths to residents of 45 States and the District of Columbia whose data were approximately 80 percent or more complete on a place-of-occurrence basis. In addition to the four States mentioned previously, data for Kentucky are excluded from these tables because more than 20 percent of their death certificates were classified to "unknown educational attainment."

## Injury at work

Deaths for "Injury at work" were included on the 1993 public-use data tapes for the first time. These data were obtained from the following item that appears on the U.S. Standard Certificate of Death:

! INJURY AT WORK? (Yes or no)

All States have this item on their death certificates.

#### **Occupation and industry**

Deaths by occupation and industry are included on the 1995 public-use data tapes and CD-ROM. These data have been included since 1985 and were obtained from the following items that appear on the U.S. Standard Certificate of Death:

- ! DECEDENT'S USUAL OCCUPATION (Give kind of work done during most of working life. Do <u>not</u> use retired.)
- ! KIND OF BUSINESS/INDUSTRY

For 1995, the occupation and industry mortality data were included for the following 19 reporting States:

Colorado	New Mexico
Georgia	North Carolina
Idaho	Ohio
Indiana	Rhode Island
Kansas	South Carolina
Kentucky	Utah
Maine	Vermont
Nevada	West Virginia
New Hampshire	Wisconsin
New Jersey	

Data for 1993-95 were coded using the revised NCHS Part 19 instruction manual (17) and the Bureau of the Census 1990 occupation and industry titles and three-digit codes, which are shown in the 1990 Census of Population and Housing (18).

Occupation and industry mortality data for 1984-92 were based on the 1980 Bureau of the Census occupation and industry classifications. For a listing of the changes between the 1980 and the 1990 classification systems, see Appendix D of the NCHS Part 19 instruction manual (17).

In addition to the codes shown in the Bureau of the Census publication (18), the following special codes were created:

914 Housewife/ 97	1 Own Home/At Home 0 Retired 0 Blank, Unknown, NA

## Place of death and status of decedent

Mortality statistics by type of place of death have been shown annually in *Vital Statistics of the United States* since 1979. Before that year they were published in 1958 (tables 1-30--1-32). In addition, mortality data also were available for the first time in 1979 for the status of decedent when death occurred in a hospital or medical center. The 1994 data were obtained from the following two items appearing on the revised U.S. Standard Certificate of Death (1):

! PLACE OF DEATH (check only one)

 HOSPITAL:
 □
 Inpatient
 □
 ER/Outpatient
 □
 DOA

 OTHER:
 □
 Nursing Home
 □
 Residence
 □
 Other (specify)

! FACILITY NAME (If not institution, give street and number)

Before the 1989 revision of the Standard Certificate of Death, information on place of death and status of decedent could be determined if hospital or institution indicated Inpatient, Outpatient, ER, or DOA, and if the name of the hospital or institution, which was used to determine the kind of facility, appeared on the certificate. The change to a checkbox format in many States for this item may affect the comparability of data for 1989 and subsequent years with data for years before 1989.

Except for Oklahoma, all of the States (including New York City) and the District of Columbia have this item (or its equivalent) on their certificates. For all reporting States and the District of Columbia in the VSCP, NCHS accepts the State definition, classification, or code for hospitals, medical centers, nursing homes, or other institutions.

Effective with data for 1980, the coding of place of death and status of decedent was modified. A new coding category was added: "Dead on arrival--hospital, clinic, or medical center." Had the 1979 coding categories been used, these deaths would have been coded to "Place unknown."

*California*--For the first 5 months of data year 1989, California coded "Place of death" to "other" rather than "residence".

## Mortality by month and date of death

Deaths by month have been tabulated regularly and are available for each year since 1900. Deaths from selected causes by date of death have been published each year since 1972 and are available for 1962.

Numbers of deaths by date of death are produced for the total number of deaths and for the numbers of deaths for the following three causes, for which the greatest interest in date of occurrence of death has been expressed: Motor vehicle accidents, Suicide, and Homicide and legal intervention.

These data show the frequency distribution of deaths for selected causes by day of week. They also make it possible to identify holidays with peak numbers of deaths from specified causes.

#### **Report of autopsy**

Beginning with the 1995 data year, mortality data on autopsy are no longer collected due to budgetary constraints.

## **Cause of death**

*Cause-of-death classification--*Since 1949 cause-of-death statistics have been based on the underlying cause of death, which is defined as "(a) the disease or injury which initiated the train of events leading directly to death, or (b) the circumstances of the accident or violence which produced the fatal injury" (19).

For each death the underlying cause is selected from an array of conditions reported in the medical certification section on the death certificate. This section provides a format for entering the cause of death sequentially. The conditions are translated into medical codes through use of the classification structure and the selection and modification rules contained in the applicable revision of the *International Classification of Diseases* (ICD), published by the World Health Organization (WHO). Selection rules provide guidance for systematically identifying the underlying cause of death. Modification rules are intended to improve the usefulness of mortality statistics by giving preference to certain classification categories over others and/or to consolidate two conditions or more on the certificate into one classification category.

As a statistical datum, underlying cause of death is a simple, one-dimensional statistic; it is conceptually easy to understand and a well-accepted measure of mortality. It identifies the initiating cause of death and is therefore most useful to public health officials in developing measures to prevent the onset of the chain of events leading to death. The rules for selecting the underlying cause of death are included in ICD as a means of standardizing classification, which contributes toward comparability and uniformity in mortality medical statistics among countries.

*Tabulation lists--*Beginning with data year 1979, the cause-of-death statistics published by NCHS have been classified according to the Ninth Revision of the *International Classification of Diseases* (ICD-9) (19).

Five lists of causes have been developed by NCHS for tabulation and publication of mortality data--the Each-Cause List, List of 282 Selected Causes of Death, List of 72 Selected Causes of Death, List of 61 Selected Causes of Infant Death, and List of 34 Selected Causes of Death. These lists were designed to be as comparable as possible with the NCHS lists used under the Eighth Revision. However, complete comparability could not always be achieved.

The Each-Cause List is made up of each three-digit category of the WHO Detailed List to which deaths may be validly assigned and most four-digit subcategories. This list is used for the tabulation of data for the entire United States. The Each-Cause table in *Vital Statistics of the United States* does not show the four-digit or special five-digit subcategories provided for Motor vehicle accidents (E810-E825). The four-digit subcategories that identify persons injured and the five-digit subcategories that identify place of accident for deaths from nontransport accidents are tabulated separately.

The List of 282 Selected Causes of Death is constructed to be compatible with the recommended WHO lists for tabulating mortality data in ICD-9. This list is used for tabulating both State and national mortality data.

The List of 72 Selected Causes of Death was, in part, constructed by combining titles in the List of 282 Selected Causes of Death. It is used in tabulating data for the entire United States and each State and for Metropolitan statistical areas and for ranking leading causes of death excluding infants. (See "Cause-of-death ranking".)

The List of 61 Selected Causes of Infant Death shows more detailed titles for Congenital anomalies and Certain conditions originating in the perinatal period than any other list except the Each-Cause List, and is used for ranking infant causes of death. (See "Cause-of-death ranking".)

The List of 34 Selected Causes of Death was created by combining titles in the List of 72 Selected Causes. This list is used for tabulating data by detailed geographic area.

Beginning with data for 1987, changes were made in these lists to accommodate the introduction in the United States of new categories \*042-\*044 for Human immunodeficiency virus (HIV) infection. The changes are described in the Technical Appendix from *Vital Statistics of the United States*, 1987. To facilitate data use, beginning with data for 1994, the categories for HIV infection (\*042-\*044) and Alzheimer's disease (ICD-9 No. 331.0) are included separately at the bottom of tables showing the List of 72 Selected Causes of Death and the List of 282 Selected Causes of Death. They are also subsumed in categories of the list.

*Effect of ICD revisions*--The International Classification of Diseases (ICD), used in the United States since 1900, has been revised approximately every 10 years so the disease classifications may be consistent with advances in medical science and with changes in diagnostic practice. Each revision of the ICD has produced some break in comparability of cause-of-death statistics. Cause-of-death statistics beginning with 1979 are classified by NCHS according to ICD-9 (19). For a discussion of each of the classifications used with death statistics since 1900, see *Vital Statistics of the United States*, 1979, Volume II, Mortality, Part A, section 7, pages 9-14.

Revisions of the ICD cause discontinuities in cause of death statistics because of changes in the classification or in the rules for selecting and modifying the underlying cause of death. To measure the discontinuity, dual coding studies have been carried out since the Fifth Revision of the ICD (1940). A dual coding study was undertaken between the Ninth and the Eighth Revisions (20). For additional information about these studies, see the Technical Appendix from *Vital Statistics of the United States*, 1979.

Significant coding changes under the Ninth Revision--Since the implementation of ICD-9 in the United States, effective with mortality data for 1979, several coding changes have been introduced that are described in detail in *Vital Statistics of the United States* for the years in which they were introduced. The more important changes are: In early 1983 a change that affected data from 1981 to 1986 was made in the coding of Acquired immunodeficiency syndrome and HIV infection. Also effective with data year 1981 was a coding change for Poliomyelitis. For data year 1982, the definition of child was changed (which affects the classification of deaths to a number of categories, including Child battering and other maltreatment), and guidelines for coding deaths to the category Child battering and other maltreatment (ICD-9 No. E967) were changed also. During the calendar year 1985, detailed instructions for coding Motor vehicle accidents involving all-terrain vehicles were implemented to ensure consistency in coding these accidents. Effective with data year 1986, "Primary" and "Invasive" tumors, unspecified, were classified as "Malignant"; these neoplasms had been classified to Neoplasms of unspecified nature (ICD-9 No. 239).

Beginning with data for 1987, NCHS introduced new category numbers \*042-\*044 for classifying and coding HIV infection, formerly referred to as Human T-cell lymphotropic virus-III/lymphadenopathy associated virus (HTLV-III/LAV) infection. The asterisks appearing before the categories indicate these codes are not part of ICD-9. Also changed effective with data year 1987 were coding rules for the conditions "Dehydration" and "Disseminated intravascular coagulopathy." Effective with data year 1988, minor content changes were made to the classification for HIV infection. Detailed discussion of these changes may be found in the Technical Appendix from *Vital Statistics of the United States*, 1988.

*Coding in 1995--*The rules and instructions used in coding 1995 mortality medical data remained essentially the same as those used for the 1994 data.

*Medical certification--*The use of a standard classification list, although essential for State, regional, and international comparison, does not ensure strict comparability of the tabulated figures. A high degree of comparability among areas could be attained only if all records of cause of death were reported with equal accuracy and completeness. The medical certification of cause of death can be made only by a qualified person, usually a physician, a medical examiner, or a coroner. Therefore, the reliability and accuracy of cause-of-death statistics are, to a large extent, governed by the ability of the certificate.

A number of studies have been undertaken on the quality of medical certification on the death certificate. In general, these have been for relatively small samples and for limited geographic areas. A bibliography prepared by NCHS (21), covering 128 references over 23 years, indicates no definitive conclusions have been reached about the quality of medical certification on the death certificate. No country has a well-defined program for systematically assessing the quality of medical certifications reported on death certificates or for measuring the error effects on the levels and trends of cause-of-death statistics.

One index of the quality of reporting causes of death is the proportion of death certificates coded to the Ninth Revision, Chapter XVI, Symptoms, signs, and ill-defined conditions (ICD-9 Nos. 780-799). Although deaths occur for which it is impossible to determine the underlying cause, this proportion indicates the care and consideration given to the certification by the medical certifier. This proportion also may be used as a rough measure of the specificity of the medical diagnoses made by the certifier in various areas. In 1995, 1.2 percent of all reported deaths in the United States were assigned to this category. The percent of deaths assigned to this category remained stable at 1.5 percent from 1981 to 1987, but has declined slightly since then.

Automated selection of underlying cause of death--Before data for 1968, mortality medical data were based on manual coding of an underlying cause of death for each certificate in accordance with WHO rules. Effective with data year 1968, NCHS converted to computerized coding of the underlying cause and manual coding of all causes (multiple causes) on the death certificate. In this system, called Automated Classification of Medical Entities (ACME) (22), the multiple cause codes serve as inputs to the computer software that employs WHO rules to select the underlying cause. The ACME system applies the same rules for selecting the underlying cause as would be applied manually by a nosologist; however, under this system, the computer consistently applies the same criteria, thus eliminating intercoder variation in this step of the process.

The ACME computer program requires the coding of all conditions shown on the medical certification. These codes are matched automatically against decision tables that consistently select the underlying cause of death for each record according to the international rules. The decision tables provide the comprehensive relationships among the conditions classified by ICD when applying the rules of selection and modification.

The decision tables were developed by NCHS staff on the basis of their experience in coding underlying causes of death under the earlier manual coding system and as a result of periodic independent validations. These tables periodically are updated to reflect additional new information on the relationship among medical conditions. For data year 1988, these tables were amended to incorporate minor changes to the previously mentioned classification for HIV infection (\*042-\*044) that originally had been implemented with data year 1987. Coding procedures for selecting the underlying cause of death by using the ACME computer program, as well as by using the ACME decision tables, are documented in NCHS instruction manuals (22,23,24).

Beginning with data year 1990, another computer system was implemented for automating cause-of-death coding. This system, called Mortality Medical Indexing, Classification, and Retrieval (MICAR) (25,26), automates coding multiple causes of death. Because MICAR automates multiple-cause coding rules, errors in recognizing terms, applying coding rules, and using the ICD index are eliminated. The use of the MICAR system ensures

consistent application of multiple-cause coding rules, which is especially important for rules that are complex and infrequently applied. In addition, MICAR can provide more detailed information on the conditions reported on death certificates than is available through the ICD category structure (27). In the first year of implementation, only about 5 percent of the Nation's death records were coded using MICAR with subsequent processing through ACME. This percentage increased from 26 percent in 1991 to 35 percent in 1992, 59 percent in 1993, 72 percent in 1994, and 74 percent in 1995. States whose data were coded by MICAR in 1995 included Alabama, Arizona, Arkansas, Delaware, District of Columbia, Florida, Georgia, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maryland, Massachusetts, Missouri, Nebraska, Nevada, New Jersey, New York (excluding New York City), New York City, North Carolina, Ohio, Pennsylvania, South Carolina, South Dakota, Tennessee, Texas, Utah, Vermont, Virginia, Washington, and West Virginia. For these States, MICAR processed about 88 percent of the mortality records with an average system error rate of 0.17 on an underlying cause basis, and a rate of 0.32 on a multiple-cause basis. Records that MICAR was unable to process were coded manually and then processed using ACME.

Beginning with data year 1993, another computer system was implemented for automating cause-of-death coding. This system, called SuperMICAR, is an enhancement of the MICAR system, which allows for total literal entry of the multiple cause-of-death text as reported by the certifier. This information is automatically coded by the MICAR and ACME computer systems. In the first year of implementation, about 9 percent of the Nation's death records were coded using SuperMICAR with subsequent processing through MICAR and ACME. This percentage increased from 9 percent in 1993 to 12 percent in 1994, and 14 percent in 1995. States using SuperMICAR in 1995 included Colorado, Connecticut, Hawaii, Idaho, Michigan, Minnesota, New Hampshire, New Mexico, Oklahoma, Oregon, Rhode Island, and Wisconsin. In 1995, for these States, SuperMICAR processed about 75 percent of the mortality records with an average system error rate of 0.59 on an underlying cause basis, and a rate of 1.17 on a multiple-cause basis. Records that SuperMICAR was unable to process were coded manually and then processed using ACME.

*Cause-of-death ranking-*-Cause-of-death ranking except for infants is based on numbers of deaths assigned to categories in the List of 72 Selected Causes of Death, Human immunodeficiency virus infection (\*042-\*044), and Alzheimer's disease (ICD-9 No. 331.0). Added to the list of rankable causes was HIV infection, effective with data year 1987 and Alzheimer's disease, effective with data year 1994. Cause-of-death ranking for infants is based on the List of 61 Selected Causes of Infant Death and HIV infection (added to the list of rankable causes of infant death effective with data year 1987).

The group titles Major cardiovascular diseases and Symptoms, signs, and ill-defined conditions from the List of 72 Selected Causes of Death are not ranked; Certain conditions originating in the perinatal period and Symptoms, signs, and ill-defined conditions from the List of 61 Selected Causes of Infant Death are not ranked. In addition, category titles beginning with the words "Other" or "All other" are not ranked to determine the leading causes of death. When one of the titles representing a subtotal is ranked (such as Tuberculosis), its component parts (in this case, Tuberculosis of respiratory system and Other tuberculosis) are not ranked.

#### Maternal deaths

Maternal deaths are those for which the certifying physician has designated a maternal condition as the underlying cause of death. Maternal conditions are those assigned to Complications of pregnancy, childbirth, and the puerperium (ICD-9 Nos. 630-676). In the Ninth Revision, WHO for the first time defined a maternal death as follows:

A maternal death is defined as the death of a woman while pregnant or within 42 days of termination of pregnancy, irrespective of the duration and the site of the pregnancy, from any cause related to or aggravated by the pregnancy or its management but not from accidental or incidental causes.

Under the Eighth Revision, maternal deaths were assigned to the category "Complications of pregnancy, childbirth, and the puerperium" (*Eighth Revision International Classification of Diseases, Adapted for Use in the United States* (ICDA-8) Nos. 630-678). Although WHO did not define maternal mortality, an NCHS classification rule existed that limited the definition of a maternal death to a death that occurred within a year after termination of pregnancy from any "maternal cause," that is, any cause within the range of ICDA-8 Nos. 630-678. This rule

applied only if a duration was given for the condition. If no duration was specified and the underlying cause of death was a maternal condition, the duration was assumed to be within a year and the death was coded by NCHS as a maternal death. The change from an under-1-year limitation for duration used in the Eighth Revision to an under-42-days limitation used in the Ninth Revision did not have much effect on the comparability of maternal mortality statistics. However, comparability was affected by the following classification change: Under the Ninth Revision, maternal causes of death have been expanded to include Indirect obstetric causes (ICD-9 Nos. 647-648). These causes include Infective and parasitic conditions as well as other conditions present in the mother and classifiable elsewhere but that complicate pregnancy, childbirth, and the puerperium, such as Syphilis, Tuberculosis, Diabetes mellitus, Drug dependence, and Congenital cardiovascular disorders.

Maternal mortality rates are computed on the basis of the number of live births. The maternal mortality rate indicates the likelihood of a pregnant woman dying of maternal causes. The number of live births used in the denominator is an approximation of the population of pregnant women who are at risk of a maternal death.

*Race*--Beginning with the 1989 data year, NCHS changed the method of tabulating live birth data by race from race of child, which was determined from the race of the parents, to race of mother. This resulted in a discontinuity in maternal mortality rates by race between 1989-95 and previous years; see "Change in tabulation of race data for live births," under "Infant deaths" in the Technical Appendix from *Vital Statistics of the United States*, 1990, or the series report, "Effect on Mortality Rates of the 1989 Change in Tabulating Race" (28).

## Infant deaths

*Age*--Infant death is defined as a death under 1 year of age. The term excludes fetal deaths. Infant deaths usually are divided into two categories according to age, neonatal and postneonatal. Neonatal deaths are those that occur during the first 27 days of life; postneonatal deaths are those that occur between 28 days and 1 year of age. Generally, it has been believed that different factors influencing the child's survival predominate in these two periods: Factors associated with prenatal development, heredity, and the birth process were considered dominant in the neonatal period; environmental factors, such as nutrition, hygiene, and accidents, were considered more important in the postneonatal period. Recently, however, the distinction between these two periods has blurred due in part to advances in neonatology, which have enabled more very small premature infants to survive the neonatal period.

*Rates*--Infant mortality rates are the most commonly-used indices for measuring the risk of dying during the first year of life; they are calculated by dividing the number of infant deaths in a calendar year by the number of live births registered for the same period and are presented as rates per 1,000 or per 100,000 live births. Infant mortality rates use the number of live births in the denominator to approximate the population at risk of dying before the first birthday. This measure is an approximation because some live births will not have been exposed to a full year's risk of dying and some of the infants who die during a year will have been born in the previous year. The error introduced in the infant mortality rate by this inexactness is usually small, especially when the birth rate is relatively constant from year to year (29,30). Other sources of error in the infant mortality rate have been attributed to differences in applying the definitions for infant death and fetal death when registering the event (31,32,33).

In contrast to infant mortality rates based on live births, infant death rates are based on the estimated population under 1 year of age. Infant death rates, which appear in tabulations of age-specific death rates, are calculated by dividing the number of infant deaths in a calendar year by the estimated midyear population of persons under 1 year of age and are presented as rates per 100,000 population in this age group. Patterns and trends in the infant death rate may differ somewhat from those of the more commonly used "infant mortality rate," mainly because of differences in the nature of the denominator and in the time reference. Whereas the population denominator for the infant death rate is estimated using data on births, infant deaths, and migration for the 12-month period of July-June, the denominator for the infant mortality rate is a count of births occurring during the 12 months of January-December. The difference in the time reference can result in different trends between the two indices during periods when birth rates are moving up or down markedly.

The infant death rate also is subject to greater imprecision than is the infant mortality rate because of problems of enumerating and estimating the population under 1 year of age (32).

*Change in tabulation of race data for live births*--Beginning with the 1989 data year, NCHS changed the method of tabulating live-birth data by race from race of child, which was determined from the race of the parents, to race of mother. As in previous years, race for infant and maternal deaths (the numerator of the rate) is tabulated by the race of the decedent. Because live births comprise the denominator of infant and maternal mortality rates, this change resulted in a discontinuity in rates between 1989-95 data, and that for previous years. For additional information, see the Technical Appendix from *Vital Statistics of the United States*, 1990, or the series report, "Effect on Mortality Rates of the 1989 Change in Tabulating Race" (28).

*Comparison of race data from birth and death certificates*--Regardless of whether vital events are tabulated by race of mother or by race of parents, studies in which race on the birth and death certificates for the same infant were compared find inconsistencies in reporting race between birth and death certificates (34).

These reporting inconsistencies can result in systematic biases in infant mortality rates by specified race, in particular, underestimates for specified races other than white or black. In the computation of race-specific infant mortality rates, the race item for the numerator comes from the death certificate, and for the denominator, from the birth certificate. Biases in the rates may arise because of possible inconsistencies in reporting race on these two vital records. Race of the mother and father is reported on the birth certificate by the mother at the time of delivery; whereas race of the deceased infant is reported on the death certificate by the funeral director based on observation or on information supplied by an informant, such as a parent. Previous studies have noted the race for an infant who died and was of a smaller minority race group is sometimes reported as white on the death certificate but is reported as the minority race group on the birth certificate, resulting, in the aggregate, in understatement of infant mortality for smaller race groups, for example, American Indian (34).

Estimates can be made of the degree of bias in race-specific infant mortality rates by comparing rates for which race is based on the death certificate of the infant with rates in which race is based on race of mother from the birth certificate. In table B these comparisons are made for the years 1995 and 1996 combined. A measure of reliability is the ratio of race reported on the linked file (race of mother from the birth certificate) to the race of the child reported on the death certificate. The ratio for white infants is 1.0; for black 0.97 indicating a good net correspondence in race from the two sources. However, for American Indians the ratio is 1.14 indicating that rates where race is based on the birth certificate are 14 percent higher than those based on the death certificate. Ratios among specific populations groups of Asian Americans varied greatly. Understatement was greatest for Japanese infants with a ratio of 2.04, indicating that infant mortality rates based on birth certificate information are over twice as high as those based on death certificates. The ratios for Filipinos were 1.68, and for Chinese, 1.21. The ratio for Hawaiians was 0.85, indicating a higher rate based on death certificates, possibly because on death records on which Hawaiian was reported in combination with another race, coding procedures always give preference to Hawaiian (35).

*Hispanic origin*--Infant mortality rates for the Hispanic-origin population are based on numbers of resident infant deaths reported to be of Hispanic origin (see "Hispanic origin") and numbers of resident live births by Hispanic origin of mother for the 49 States and the District of Columbia. Data for Oklahoma were excluded, because Oklahoma did not include an item on Hispanic origin on its death certificate. In computing infant mortality rates, deaths and live births of unknown origin are not distributed among the specified Hispanic and non-Hispanic groups. Because the percent of infant deaths of unknown origin for 1995 was 1.7 percent and the percent of live births of unknown origin was 1.5 percent, infant mortality rates by specified Hispanic origin and race for non-Hispanic origin may be slightly underestimated.

Small numbers of infant deaths for specific Hispanic-origin groups can result in infant mortality rates subject to relatively large random variation (see "Random variation and sampling errors").

Table C shows comparisons for infant mortality rates for Hispanic origin where Hispanic origin is based on death certificate identification of the infant or on birth certificate information on the Hispanic origin of the mother (the linked file) for 1996. For total Hispanic origin infants, the ratio was 1.05 indicating that rates are about 5 percent higher using the race of mother from the birth certificate (linked file). For Mexican and Cuban, the rates were about the same (ratios of 1.00 and 1.02, respectively), but rates for Puerto Rican infants were 12 percent higher when Hispanic origin was based on the birth certificate (35).

*Tabulation list*--Causes of death for infants are tabulated according to a list of causes that is different from the list of causes for the population of all ages, except for the Each Cause List. (See "Cause-of-death classification" under "Cause of death.")

# Quality of data

## **Completeness of registration**

All States have adopted laws requiring the registration of births and deaths. It is believed that more than 99 percent of the births and deaths occurring in this country are registered.

*Massachusetts data--*The 1964 statistics for deaths exclude approximately 6,000 deaths registered in Massachusetts, primarily to residents of that State. Microfilm copies of these records were not received by NCHS. Figures for the United States and the New England Division are affected also.

Amended records for Alaska--Numbers of deaths for selected causes occurring in Alaska for 1995 are in error because NCHS did not receive changes resulting from amended records. An estimate of the effect of these omissions can be derived by comparing NCHS counts of records processed through the VSCP with counts prepared by Alaska as shown in table D. Differences are concentrated among selected causes of death, principally Symptoms, signs, and ill-defined conditions (ICD-9 Nos. 780-799) and external causes.

## **Quality control procedures**

*Demographic items on the death certificate-*-As previously indicated, for 1995 the mortality data for these items were obtained from two sources--photocopies of the original certificates furnished by Guam and electronic data records furnished by the 50 States, the District of Columbia, New York City, Puerto Rico, and the Virgin Islands. For Guam, which sent only copies of the original certificates, the demographic items were coded for 100 percent of the death certificates. The demographic coding for 100 percent of the certificates was independently verified.

For areas sending electronic data records, a sample of 70-80 records per month for each registration area is used to monitor quality of coding. Under this procedure, each sample record is independently coded by NCHS staff and compared to the State code assignments. NCHS/State differences are adjudicated to ascertain the source of the error and need for corrective action. The estimated average outgoing error rate for all demographic items in 1995 was 0.25 percent. The error rate is a combined measure of State coding, key entry and processing errors made in the process of preparing the statistical file. These types of errors are not necessarily randomly distributed in the file and may therefore escape detection through sample verification. To reduce some systematic errors other NCHS procedures such as detailed computer edits, tabular evaluation, and procedure review are used.

*Medical items on the death certificate--*The same procedures used for demographic data are used for the medical items. For the 41 States sending electronic files, the average outgoing error rate in 1995 was estimated at 2.8 percent for underlying cause data, and 5.5 percent for multiple cause-of-death data.

For the remaining 9 States, the District of Columbia, New York City, Puerto Rico, the Virgin Islands, and Guam, NCHS coded the medical items for all the death records. A 1-percent sample of the records was coded independently for quality control purposes. The estimated average error rate for underlying cause for these areas was 3.6 percent.

*Other control procedures*--After coding and data entry are completed, record counts are balanced against control totals for each shipment of records from a registration area. Editing procedures ensure that records with inconsistent or impossible codes are modified. Inconsistent codes are those, for example, indicating a contradiction between cause of death and age or sex of the decedent. Records so identified during the computer editing process are either corrected by reference to the source record or adjusted by arbitrary code assignment (36). Further, conditions specified on a list of infrequent or rare causes of death are confirmed by the certifier or a State health officer. All subsequent operations in tabulating and in preparing tables are verified during the computer processing or by statistical clerks.

*Estimates of errors arising from 50-percent sample for 1972--*Death statistics for 1972 are based on a 50-percent sample of all deaths occurring in the 50 States and the District of Columbia. A description of the sample design and a table of the percent errors of the estimated numbers of deaths by size of estimate and total deaths in the area are shown in the Technical Appendix from *Vital Statistics of the United States*, 1972.

## Computation of rates and other measures

#### **Population bases**

Population bases from which death rates are computed are prepared by the U.S. Bureau of the Census. Rates for 1940, 1950, 1960, 1970, 1980, and 1990 are based on the population enumerated as of April 1 in the censuses for those years. Rates for all other years use the estimated midyear (July 1) population. Death rates for the United States, individual States, and metropolitan areas are based on the total resident populations of the respective areas. Except as noted, these populations exclude the Armed Forces abroad but include the Armed Forces stationed in each area.

The resident populations of the birth- and death-registration States for 1900-32, and of the United States for 1900-95 are shown in table E. In addition, the population including Armed Forces abroad is shown for the United States. Table F lists the sources for these populations.

*Populations for 1995*--Population estimates of the United States by age, race, and sex for 1995 are shown in table G (37). The 1995 estimates are consistent with those for 1990-94. Population estimates for each State by age for 1995 are shown in table H (38). Since these population estimates are based on demographic analysis, they are not subject to sampling variability.

In addition the following estimates are shown:

- Estimated population by 5-year age groups, specified Hispanic origin, race for non-Hispanic origin, and sex: Total of 49 States and the District of Columbia, 1995 (see table I) (15)
- Estimated population for ages 15 years and over by 5-year age groups, marital status, race, and sex: United States, 1995 (see table J) (15)
- Estimated population for ages 15 years and over, by 5-year age groups, marital status, Hispanic origin, race for non-Hispanic origin, and sex: Total of 49 States and the District of Columbia, 1995 (see table K) (15)

Population estimates by specified Hispanic origin and by marital status groups are based on the Bureau of the Census' Current Population Survey (a sample-based survey) adjusted to control totals. As a result, these estimates are subject to sampling variation (see "Random variation and sampling errors").

*Population for 1990--*In the 1980 and 1990 censuses, a substantial number of persons did not specify a racial group that could be classified as any of the white, black, American Indian, Eskimo, Aleut, Asian, or Pacific Islander categories on the census form (39). In 1980 the number of persons of "Other" race was 6,758,319; in 1990, it was 9,804,847. In both censuses the large majority of these persons were of Hispanic origin (based on responses to a separate question on the form), and many wrote in their Hispanic origin (for example, Mexican and Puerto Rican) as their race. In 1980 and 1990 persons of unspecified race were allocated to one of the four tabulated racial groups (white, black, American Indian, Asian or Pacific Islander) based on their response to the Hispanic origin question. These four race categories conform with OMB Directive 15 (the standards for recordkeeping, collection, and presentation of data on race and ethnicity in Federal statistical activities and program administrative reporting) (40) and are more consistent with the race categories in vital statistics.

In 1980 the allocation of unspecified race was determined using cross-tabulations of age, sex, race, specified Hispanic origin, and county of residence. Persons of Hispanic origin and unspecified race were allocated to either white or black based on their specific Hispanic origin. Persons of "Other" race and Mexican origin were categorically assumed to be white, while persons in other Hispanic categories were distributed to white and black pro rata within the county-age-sex group. For "Other race-not-specified" persons who were not Hispanic, race was allocated to white, black, or Asian or Pacific Islander based on proportions gleaned from sample data. The 20-percent sample (respondents who were enumerated on the longer census form) provided a highly detailed coding of race, which allowed identification of otherwise unidentifiable responses with a specified race category. Thus, allocation proportions were established at the State level and were used to distribute the non-Hispanic persons of "Other" race in the 100-percent tabulations.

In 1990 the race modification procedure was implemented using individual census records. Persons whose race could not be specified were assigned to a racial category using a pool of "race donors" that consisted of persons of

specified race who had the identical responses to the Hispanic origin question and who were within the auspices of the same census district office. As in the 1980 census, it appeared that the underlying assumption made in the 1990 census was that the Hispanic origin response was the major criterion for allocating race. Unlike those responding to the 1980 census who could be assigned only to the racial group white or black, persons of Hispanic origin, including Mexicans, responding to the 1990 census could be assigned to any racial group. Also, in the 1990 census, the non-Hispanic component of "Other" race was allocated primarily on the basis of geography (district office), rather than detailed characteristic.

The means by which respondent's age was determined were fundamentally different for the two censuses; therefore, the problems that necessitated the modification were different. In 1980 respondents reported year of birth and quarter of birth (within year) on the census form. When census results were tabulated, persons born in the first quarter of the year (before April 1) had age equal to 1980 minus year of birth, while persons born in the last three quarters had age equal to 1979 minus year of birth.

In 1990 quarter year of birth was not reported on the census form, so direct determination of age from year of birth was not possible. In 1990 census publications, age is based on respondents' direct reports of age at last birthday. This definition proved inadequate for postcensal estimates as it was apparent that many respondents had reported their age at time of either completion of the census form or interview by an enumerator that could occur several months after the April 1 reference date. As a result, age was biased upward. For most respondents, modification was based on a respecification of age, by year of birth, with allocation to first quarter (persons aged 1990 minus year of birth) and last three quarters (aged 1989 minus year of birth) based on a historical series of registered births by month. This process partially restored the 1980 logic for assignment of age. It was not considered necessary to correct for age overstatement and heaping in 1990, because the availability of age and year of birth on the census form had provided for the elimination of spurious year-of-birth reports in the census data before modification occurred.

*Population estimates for 1981-89--*Death rates for 1981-89 are based on revised populations that are consistent with the 1990 census level (39). They are, therefore, not comparable with death rates published in *Vital Statistics of the United States* for 1981-89, and in other NCHS publications for those years. The 1990 census counted approximately 1.5 million fewer persons than had been estimated earlier for April 1, 1990.

*Populations for 1980--*Death rates for 1980 are based on the population enumerated as of April 1 in the 1980 census (41). The figures by race have been modified as described.

*Population estimates for 1971-79--*Death rates for 1971-79 used revised population estimates that are consistent with the 1980 census levels. The 1980 census enumerated approximately 5.5 million more persons than had been estimated for April 1, 1980 (42). These revised estimates for the United States by age, race, and sex are published by the U.S. Bureau of the Census in *Current Population Reports*, Series P-25, Number 917. Unpublished revised estimates for States were obtained from the U.S. Bureau of the Census. For Puerto Rico, the Virgin Islands, and Guam, revised estimates are published in *Current Population Reports*, Series P-25, Number 919.

*Population estimates for 1961-69--*Death rates for 1961-69 are based on revised estimates of the population and thus may differ slightly from rates published before 1976. Rates, life table values, and population estimates for each year during 1961-69 have been revised to reflect modified population bases as published in the U.S. Bureau of the Census, *Current Population Reports*, Series P-5, Number 519.

*New Jersey*--As previously indicated, data by race are not available for New Jersey for 1962 and 1963. Therefore, for 1962 and 1963, NCHS estimated a population by age, race, and sex that excluded New Jersey for rates shown by race. The methodology used to estimate the revised population excluding New Jersey is discussed in the Technical Appendixes of the 1962 and 1963 volumes.

*Rates and ratios based on live births--*Infant and maternal mortality rates are computed on the basis of the number of live births. Counts of live births are published annually in *Vital Statistics of the United States*.

#### Net census undercount

Errors can be introduced into the annual rates as a result of underenumeration of deaths and the misreporting of demographic characteristics. Errors in rates can also result from enumeration errors in the latest decennial census. This is because annual population estimates for the postcensal interval, which are used in the denominator for calculating death rates, are computed using the decennial census count as a base (39). Net census undercount

results from the miscounting and misreporting of demographic characteristics such as age. Age-specific death rates are affected by the net census undercount and the misreporting of age on the death certificate (43). To the extent that the net undercount is substantial and that it varies among subgroups and geographic areas, it may have important consequences for vital statistics measures.

Because death rates based on a population adjusted for net census undercount may be more accurate than rates based on an unadjusted population, the possible impact of net census undercount on death rates must be considered. This can be done on a national basis using results of studies conducted by the U.S. Bureau of the Census on the completeness of coverage of the U.S. population (including underenumeration and misstatement of age, race, and sex). Such studies were conducted in the last five decennial censuses--1950, 1960, 1970, 1980, and 1990. From this work have come estimates of the national population that were not counted by age, race, and sex (44-47). The reports for 1990 (unpublished data from the U.S. Bureau of the Census) include estimates of net underenumeration and overenumeration for age, sex, and racial subgroups of the national population modified for race consistency with previous population counts as described in the section "Population bases." These studies indicate that, although coverage was improved over previous censuses, there was differential coverage among the population subgroups; that is, some age, race, and sex groups were more completely counted than others.

Because estimates of net census undercount are not available by age, race, and sex for individual States and counties, it is not feasible to adjust for net census undercount when presenting rates in routine tabulations. Nevertheless, it is important to be aware that net census undercounts can affect levels of observed vital rates.

*Age, race, and sex--*If adjustments were made for net census undercount, the size of denominators of the death rates generally would increase and the rates, therefore, would decrease. The adjusted rates for 1995 can be computed by multiplying the reported rates by ratios of the census-level resident population to the resident population adjusted for the estimated net census undercount (table L). A ratio of less than 1.0 indicates a net census undercount and, when applied, results in a corresponding decrease in the death rate. A ratio greater than 1.0-- indicating a net census overcount--when multiplied by the reported rate results in an increase in the death rate.

Coverage ratios for all ages show that, in general, females were more completely enumerated than males and the white population more completely enumerated than the black population in the 1990 Census of Population. Underenumeration varied by age group for the total population, with the greatest differences found for persons aged 85 years and over. All other age groups were overcounted or undercounted by less than 4.0 percent. Among the age-sex-race groups, underenumeration was highest (13.3 percent) for black males aged 25-34 years. In contrast, white females in this age group were underenumerated by 2.5 percent.

If vital statistics measures were calculated with adjustments for net census undercounts for each population subgroup, the resulting rates would be differentially reduced from their original levels; that is, rates for those groups with the greatest estimated undercounts would show the greatest relative reductions due to these adjustments. Similar effects would be evident in the opposite direction for groups with overcounts. Consequently, the ratio of mortality between the rates for males and females and between the rates for the white population and the black population usually would be reduced.

Similarly, the differences between the death rates among subgroups of the population by cause of death would be affected by adjustments for net census undercounts. For example, in 1990 for the age group 35-39 years, the ratio of the unadjusted death rate for Homicide and legal intervention for black males to that for white males is 7.54, whereas the ratio of the death rates adjusted for net census undercount is 6.92. For Ischemic heart disease for males aged 40-44 years, the ratio of the death rate for the black population to that for the white population is 1.38 using the unadjusted rates, but it is 1.26 when adjusted for estimated underenumeration.

*Summary measures*--The effect of net census undercount on age-adjusted death rates and life table values depends on the underenumeration of each age group and on the distribution of deaths by age. Thus, the age-adjusted death rate in 1990 for All causes would decrease from 520.2 to 512.7 per 100,000 population if the age-specific death rates were corrected for net census undercount (table M). For Diseases of heart, the age-adjusted death rate for white males would decrease from 202.0 to 198.2 per 100,000 population, a decline of 2.0 percent. For black males, the change from an unadjusted rate of 275.9 to an adjusted rate of 256.7 would amount to a decrease of 7.0 percent. For HIV infection, the rate for black males would decrease from 44.2 to 39.0 and for white males from 15.0 to 14.4.

If death rates by age were adjusted, the corresponding life expectancy at birth computed from these rates would change. When calculating life expectancy, the impact of an undercount or overcount is greatest at the younger

ages. In general, the effect of correcting the death rates is to increase the estimate of life expectancy at birth. For example, adjustment for net census undercount would increase life expectancy in 1990 by an estimated 0.2 years, from 75.4 years to 75.6 years for the total U.S. population.

Adjustment for differential underenumeration among race-sex groups would lead to greater changes in life expectancy for some groups than for others. For males and females, increases would be 0.3 and 0.1 years, respectively; for the black population and white population, 0.6 and 0.2 years, respectively. The largest increase would be for black males, 1.2 years, followed by white males (0.3 years), black females (0.2 years), and white females (0.2 years).

## Age-adjusted death rates

Age-adjusted death rates are used to compare relative mortality risk across groups and over time. However, they should be viewed as constructs or indexes rather than as direct or actual measures of mortality risk. Statistically, they are weighted averages of the age-specific death rates, where the weights represent the fixed population proportions by age (48). Age-adjusted death rates were computed by the direct method, that is, by applying age-specific death rates for a given cause of death to the U.S. standard population (relative age distribution of 1940 enumerated population of the United States totaling 1,000,000 (30)). By using the same standard population, the rates for the total population and for each race-sex group were adjusted separately. It is important not to compare age-adjusted death rates with crude rates. The U.S. standard population and corresponding weights ( $w_i$ ) are as follows:

Age	Number	Weights $(w_i)$
All ages	1,000,000	1.000000
Under 1 year	15,343	0.015343
1-4 years	64,718	0.064718
5-14 years	170,355	0.170355
15-24 years	181,677	0.181677
25-34 years	162,066	0.162066
35-44 years	139,237	0.139237
45-54 years	117,811	0.117811
55-64 years	80,294	0.080294
65-74 years	48,426	0.048426
75-84 years	17,303	0.017303
85 years and over	2,770	0.002770

Age-adjusted death rates by marital status are computed using the age groups 25 years and over. Therefore, the United States standard population aged 25 years and over and corresponding weights ( $w_i$ ) are as follows:

Age	Number	Weights $(w_i)$
25 years and over	567,907	1.000000
25-34 years	162,066	0.285374
35-44 years	139,237	0.245176
45-54 years	117,811	0.207448
55-64 years	80,294	0.141386
65-74 years	48,426	0.085271
75 years and over	20,073	0.035346

## Life tables

U.S. abridged life tables are constructed by reference to a standard table (49). Life tables for the decennial period 1979-81 are used as the standard life tables in constructing the 1980-95 abridged life tables. Life table

values for 1981-89 are based on revised intercensal estimates of the populations for those years. Therefore, these life table values may differ from life table values of those years published previously.

Life tables for the decennial period 1969-71 are used as the standard life tables in constructing the 1970-79 abridged life tables. Life table values for 1970-73 were first revised in *Vital Statistics of the United States*, 1977; before 1977, life table values for 1970-73 were constructed using the 1959-61 decennial life tables. In addition, life table values for 1951-59, 1961-69, and 1971-79 are based on revised intercensal estimates of the populations for those years. As such, these life table values may differ from life table values previously published.

The annual abridged life table series was initiated for selected race-sex groups in 1945. Because of the increased interest in the average length of life ( ${}^{\circ}e_{o}$ ) for years prior to 1945, estimates were prepared for the following race and sex groups and data years (50).

Years	Race and sex groups
1900-45	Total
1900-47	Male
1900-47	Female
1900-50	White
1900-44	White, male
1900-44	White, female
1900-50	All other
1900-44	All other, male
1900-44	All other, female

The geographic areas covered in life tables before 1929-31 were limited to the death-registration areas. Life tables for 1900-02 and 1909-11 were constructed using mortality data from the 1900 death-registration States--10 States and the District of Columbia, and for 1919-21, from the 1920 death-registration States--34 States and the District of Columbia. The tables for 1929-31 through 1958 cover the conterminous United States. Decennial life table values for the 3-year period 1959-61 were derived from data that include Alaska and Hawaii for each year. Data for each year include Alaska beginning in 1959 and Hawaii beginning in 1960. It is believed that the inclusion of these two States does not materially affect life table values.

#### **Random variation and sampling errors**

*Deaths*--The number of deaths reported for an area represent complete counts of such events (except for 1972 when the data were based on a 50-percent sample because of resource constraints). As such, they are not subject to sampling error, although they are subject to non-sampling errors in the registration process. However, when the figures are used for analytical purposes, such as the comparison of rates over time or for different areas, the number of events that actually occurred may be considered as one of a large series of possible results that could have arisen under the same circumstances (51). The probable range of values may be estimated from the actual figures according to certain statistical assumptions.

In general, distributions of vital events may be assumed to follow the binomial distribution. When the number of events is large, the relative standard error is usually small. When the number of events is small (perhaps less than 100) and the probability of such an event is small, considerable caution must be observed in interpreting the data. Such infrequent events may be assumed to follow a Poisson probability distribution. As a result, the numbers of deaths, death rates, and mortality rates are subject to random variation. Estimates of relative standard errors (RSE)--a measure of variability--, 95-percent confidence intervals, and tests of statistical significance under this assumption are shown below. Mortality data may also be subject to non-sampling errors.

*Populations*-Population estimates of the United States and for each State by age, race, total Hispanic origin, and sex for 1995 are based on demographic methods and, therefore, are not subject to sampling variability. However, population estimates by specified Hispanic origin (Mexicans, Puerto Ricans, Cubans, and Other Hispanics) and by specified marital status groups (never married, married, widowed, and divorced) are based on the Bureau of the Census' Current Population Survey (CPS) adjusted to control totals and, therefore, are subject to sampling variation. As a result, death rates based on the CPS-based population estimates are subject to both

random variation of the deaths and sampling error of the population estimates. Estimates of relative standard errors, 95-percent confidence intervals, and tests of statistical significance under these assumptions are shown below. All population estimates may also be subject to non-sampling errors.

*Computation of population-based death rates*--Death rates for a single calendar year are computed by dividing the number of deaths for a class for that year by the population of a similarly-defined class for the same year and multiplying that result by 100,000 (or 1,000). Rates thus computed are per 100,000 (or 1,000) estimated population residing in selected areas of the United States. The 3-year average death rates are computed by dividing the total number of deaths for a class for a three-year period by the sum of the population estimates of a similarly defined class for the same period and multiplying that result by 100,000 (or 1,000).

*Computation of live birth-based mortality rates--*Maternal mortality rates and infant mortality rates are computed by dividing the number of deaths for a class for a specified year by the number of live births of a similarly defined class for that year and multiplying that result by 100,000 (or 1,000). Rates thus computed are per 100,000 (or 1,000) live births residing in selected areas of the United States. The 3-year average infant mortality rates for the three-year period are computed by dividing the total number of infant deaths for a class for that period by the sum of the live births of a similarly defined class for the three-year period and multiplying that result by 100,000 (or 1,000).

*Relative Standard Errors and 95% Confidence Intervals*--Formulas for computing approximate RSE's and confidence intervals (CI's) for crude, age-specific death rates, and age-adjusted death rates are shown below.

Beginning with 1989 data, an asterisk has been shown in place of a rate based on fewer than 20 deaths, which is the equivalent of an RSE of 22.94 percent or more. An RSE of this magnitude is considered statistically unreliable. That procedure has been used for mortality data except death rates based on CPS-based population estimates, for which sampling variation must be considered in addition to random variation. Formulas for computing RSE's for CPS population-based rates are presented below and an asterisk is shown in place of a rate when the RSE is 22.94 percent or more. RSE's for CPS population-based rates were introduced beginning with specified Hispanic-origin data for 1994 and subsequently for rates by marital status.

The formulas below are shown separately for rates based on demographically estimated populations, samplebased populations, and rates based on live births. Further, separate discussions are provided for rates based on less than 100 events, and rates based on 100 events or more. Specific examples are given to illustrate the use of the formulas.

The following formulas are used for demographically-estimated population-based death rates for all races, white, black, American Indian, Asian or Pacific Islander, all origins, total Hispanic, total non-Hispanic, non-Hispanic white, non-Hispanic black for **all** marital status groups combined:

Age-specific and crude death rates--

$$RSE(R) = RSE(D) = 100\sqrt{\frac{1}{D}}$$

Approximate 95% Confidence Interval: 100 or more deaths Lower: R - 1.96 \* S(R)Upper: R + 1.96 \* S(R)

Approximate 95% Confidence Interval: 1-99 deaths Lower:  $R * L(1- \alpha = .95, D)$ Upper:  $R * U(1- \alpha = .95, D)$ 

where

R = rate (deaths per 100,000 population) D = total number of deaths upon which rate is based

 $S(R) = R * \frac{RSE(R)}{100} = standard \ error \ of \ rate$ 

 $L(1-\alpha = .95,D)$  and  $U(1-\alpha = .95,D)$  are lower and upper 95% confidence limit factors and are shown in table N

Age-adjusted death rates---

$$RSE(R'') = 100 \frac{\sqrt{\sum \left\{ w_i^2 R_i^2 \left( \frac{1}{D_i} \right) \right\}}}{R''}$$

Approximate 95% Confidence Interval: 100 or more deaths Lower: *R*" - 1.96 \* S(*R*") Upper: *R*" + 1.96 \* S(*R*")

Approximate 95% Confidence Interval: 1-99 deaths Lower:  $R'' * L(1-\alpha = .95, D_{adj})$ Upper:  $R'' * U(1-\alpha = .95, D_{adj})$ 

where

R'' = age-adjusted rate (per 100,000 population) =  $\sum w_i R_i$  $w_i = i^{th}$  age-specific Standard Population such that  $\sum (w_i) = 1.0$  $R_i$  = age-specific rate (per 100,000) for the  $i^{th}$  age group  $D_i$  = total number of deaths for the  $i^{th}$  age group upon which age-specific rate is based

$$S(R'') = R'' * \frac{RSE(R'')}{100} = standard error of age-adjusted rate$$

L(1-  $\alpha$  =.95, $D_{adj}$ ) and U(1-  $\alpha$  =.95, $D_{adj}$ ) are lower and upper 95% confidence limit factors and are shown in table N

$$D_{adj} = \frac{1}{\left(\frac{RSE(R'')}{100}\right)^2}$$
 adjusted number of deaths rounded to nearest integer

The following formulas are used for CPS population-based death rates for all races, white, black, American Indian, Asian or Pacific Islander, all origins, total Hispanic, total non-Hispanic, non-Hispanic white, non-Hispanic black by **specified** marital status group (never married, married, widowed, and divorced) OR

for Mexican, Puerto Rican, Cuban, Other Hispanic for **all** marital status groups combined and by **specified** marital status group (never married, married, widowed, and divorced):

Age-specific and crude death rates--

$$RSE(R) = 100 \sqrt{\left(\frac{1}{D}\right) + f\left(a + \frac{b}{P}\right)}$$

Approximate 95% Confidence Interval: 100 or more deaths

Lower: *R*-1.96\*S(*R*) Upper: *R*+1.96\*S(*R*)

Approximate 95% Confidence Interval: 1-99 deaths

Lower: 
$$R * L \left(1 - \acute{a} = .96, D\right) * \left(1 - 2.576\sqrt{f\left(a + \frac{b}{P}\right)}\right)$$
  
Upper:  $R * U \left(1 - \acute{a} = .96, D\right) * \left(1 + 2.576\sqrt{f\left(a + \frac{b}{P}\right)}\right)$ 

where

R =rate (deaths per 100,000 population).

D = total number of deaths upon which rate is based

f = factor that depends on whether the population estimate is based on demographic analysis or CPS and the number of years used (see below)

a and b factors are CPS standard error parameters (see below)

P = total estimated population upon which rate is based (if rate is based on a 3-year average, then an approximate P would be three times the population for the most recent year)

$$S(R) = R * \frac{RSE(R)}{100} = standard error of rate$$

 $L(1-\alpha = .96,D)$  and  $U(1-\alpha = .96,D)$  are lower and upper 96% confidence limit factors and are shown in table N

Age-adjusted death rates--

$$RSE(R'') = 100 \frac{\sqrt{\sum \left(w_i^2 * R_i^2 \left(\frac{1}{D_i} + f\left(a + \frac{b}{P_i}\right)\right)\right)}}{R''}$$

Approximate 95% Confidence Interval: 100 or more deaths Lower: *R*" - 1.96 \* S(*R*") Upper: R'' + 1.96 \* S(R'')

Approximate 95% Confidence Interval: 1-99 deaths

Lower:  $R'' * L(1 - \alpha = .96, D_{adi}) * (1 - 2.576 * RSE(P_{adi}))$ Upper:  $R'' * U(1 - \alpha = .96, D_{adj}) * (1 + 2.576 * RSE(P_{adj}))$ 

where

R'' = age-adjusted rate (per 100,000 population) =  $\sum w_i R_i$ 

 $w_i = i^{th}$  age-specific Standard Population such that  $\sum (w_i) = 1.0$  $R_i$  = age-specific rate (per 100,000) for the  $i^{th}$  age group

*,* ,

- $D_i$  = total number of deaths for the *i*<sup>th</sup> age group upon which age-specific rate is based
- f = factor that depends on whether the population estimate is based on demographic analysis or CPS and the number of years used (see below)

a and b factors are CPS standard error parameters (see below)

 $P_i$  = total estimated population for the *i*<sup>th</sup> age group upon which the rate is based (if rate is based on 3-year average, then combined  $P_i$  would be three times the population for the most recent year)

$$S(R'') = R'' * \frac{RSE(R'')}{100} = standard error of age-adjusted rate$$

L(1-  $\alpha$  =.96,  $D_{adj}$ ) and U(1-  $\alpha$  =.96,  $D_{adj}$ ) are lower and upper 96% confidence limit factors and are shown in table N

 $P_{adi} = \sum (w_i * P_i)$  = adjusted estimated population rounded to nearest integer

$$RSE(P_{adj}) = \frac{\sqrt{\sum \left(w_i^2 * P_i^2 * f\left(a + \frac{b}{P_i}\right)\right)}}{P_{adj}}$$

$$D_{adj} = smaller of \sum(D_i) or \frac{1}{RSE(R'')^2 - RSE(P_{adj})^2} = adjusted number of deaths rounded to the nearest integer$$

If  $D_{adj}$  is negative, set  $D_{adj}$  to  $\sum (D_i)$ 

Shown below are the "*a*", "*b*", and "*f*" factors for various race, origin, and marital status classifications, by whether the population-based rate was based on a single year or 3-year average:

Race, origin, and marital status	Rate based on 1 year	Rate based on 3 years
All races, white, American Indian, all origins, total Hispanic, total non-Hispanic, non-Hispanic white; by never married, married, widowed, divorced	f = 0.670 a = -0.000017 b = 4,786	f = 0.440 a = -0.000017 b = 14,358
Black, non-Hispanic black; by never married, married, widowed, divorced	f = 0.670 a = -0.000204 b = 6,865	f = 0.440 a = -0.000204 b = 20,595
Asian or Pacific Islander; by never married, married, widowed, divorced	f = 0.670 a = -0.000719 b = 6,865	f = 0.440 a = -0.000719 b = 20,595
Mexican, Puerto Rican, Cuban, Other Hispanic; all marital status groups combined, never married, married, widowed, divorced	f = 0.670 a = -0.000297 b = 6,865	f = 0.440 a = -0.000297 b = 20,595

The following formulas may be used for live birth-based mortality rates:

The formulas for the RSE and 95-percent CI's of an infant mortality rate (IMR) are as follows:

$$RSE(IMR) = 100\sqrt{\frac{1}{D} + \frac{1}{B}}$$

Approximate 95% Confidence Interval: 100 or more infant deaths Lower: *IMR* - 1.96 \* S(*IMR*) Upper: *IMR* + 1.96 \* S(*IMR*)

Approximate 95% Confidence Interval: 1-99 infant deaths Lower: IMR \* L(1-  $\alpha = .95, D_{adi}$ )

Upper: IMR \* U(1-  $\alpha = .95, D_{adj}$ )

where

IMR = infant mortality rate (infant deaths per 100,000 live births) D = total number of infant deaths upon which rate is based B = total number of live births upon which IMR is based

 $S(IMR) = IMR * \frac{RSE(IMR)}{100} = standard error of infant mortality rate$ 

L(1-  $\alpha = .95, D_{adj}$ ) and U(1-  $\alpha = .95, D_{adj}$ ) are lower and upper 95% confidence limit factors and are shown in table N

 $D_{adj} = \frac{D * B}{D + B} = \frac{adjusted number of infant deaths that takes}{into account the RSE of the number of infant deaths and live births}$ 

## Statistical tests

For testing the equality of two rates,  $R_1$  and  $R_2$ , the z-test may be used (when both rates are based on 100 deaths or more) or the overlap of 95% CI's of the rates may be used (when either or both of the rates are based on less than 100 deaths).

The *z*-test is determined as follows:

$$z = \frac{R_1 - R_2}{\sqrt{R_1^2 \left(\frac{RSE(R_1)}{100}\right)^2 + R_2^2 \left(\frac{RSE(R_2)}{100}\right)^2}}$$

to define a significance test statistic. If |z| is greater than or equal 1.96, then the difference would be considered statistically significant at the 0.05 level; and if |z| is less than 1.96, the difference is not statistically significant.

As a hypothetical example, if the three-year average death rate for Mexicans,  $R_1$ , is 36.4 (based on D=120 deaths and P=330,000 population for the three years combined) and the three-year rate for non-Hispanic whites,  $R_2$ , is 13.8 (based on D=180 deaths and P=1,300,000 population for the three years combined), then using the formulas above the RSE's and *z*-test are computed as follows:

$$RSE(R_1) = 100\sqrt{\frac{1}{120} + 0.440 * \left(-.000297 + \frac{20,595}{330,000}\right)} = 18.88\%$$
$$RSE(R_2) = 100\sqrt{\frac{1}{180}} = 7.45\%$$

and

$$z = \frac{36.4 - 13.8}{\sqrt{36.4^2 \left(\frac{18.88}{100}\right)^2 + 13.8^2 \left(\frac{7.45}{100}\right)^2}} = 3.25$$

Since |z| is greater than 1.96, the difference between the two rates is statistically significant at the 0.05 level of significance.

If either of two rates is based on less than 100 deaths, then one may determine if the 95% CI's overlap as an indication of a statistically significant or non-significant difference.

As a hypothetical example, if the three-year average death rate for Cubans,  $R_3$ , is 26.7 (based on D=40 deaths and P=150,000 population for the three years combined) and the three-year rate for non-Hispanic blacks,  $R_4$ , is 61.5 (based on D=400 deaths and P=650,000 population for the three years combined), then the 95% CI's are computed using information from the following formulas and table N:

95% CI for *R*<sub>3</sub>

$$Lower: = 26.7 * 0.70266 \left( 1-2.576 \sqrt{0.44 * \left( -.000297 + \frac{20,595}{150,000} \right)} \right) = 6.9$$
$$Upper: = 26.7 * 1.37991 \left( 1+2.576 \sqrt{0.44 * \left( -.000297 + \frac{20,595}{150,000} \right)} \right) = 60.1$$

95% CI for  $R_4$ 

$$RSE(R_4) = 100\sqrt{\frac{1}{400}} = 5.00\%$$

$$Lower = 61.5 - \left(1.96 * 61.5 * \frac{5.00}{100}\right) = 55.5$$

$$Upper = 61.5 + \left(1.96 * 61.5 * \frac{5.00}{100}\right) = 67.5$$

Since the CI's overlap, the difference between  $R_3$  and  $R_4$  is not statistically significant.

# References

- 1. Tolson GC, Barnes JM, Gay GA, Kowaleski JL. The 1989 revision of the U.S. standard certificates and reports. National Center for Health Statistics. Vital Health Stat 4(28). 1991.
- 2. Hetzel AM. U.S. vital statistics system: major activities and developments, 1950-95. National Center for Health Statistics. 1997.
- 3. National Center for Health Statistics. Vital statistics, demographic classification, and coding instructions for death records, 1995. NCHS instruction manual; part 4. Hyattsville, Maryland: Public Health Service. 1995.
- 4. McCarthy MA. Comparison of the classification of place of residence on death certificates and matching census records: United States, May-August 1960. National Center for Health Statistics. Vital and Health Stat 2(30). 1969.
- 5. National Center for Health Statistics. Vital statistics, vital records geographic classification, 1994. NCHS instruction manual; part 8. Hyattsville, Maryland: Public Health Service. 1993.
- 6. U.S. Bureau of the Census. Population of metropolitan areas and component geography: 1990 and 1980 (6-30-93 definitions). CPH-L-145. Washington: U.S. Department of Commerce. 1993.
- 7. U.S. Department of Commerce. Metropolitan statistical areas classification. Federal register; vol 45 no 2. Washington: U.S. Government Printing Office, 956-62. 1980.
- 8. U.S. Office of Management and Budget. Standard metropolitan statistical areas, rev. ed. Washington: U.S. Government Printing Office, 89-90. 1975.
- 9. U.S. Bureau of the Census. 1990 Census of population. General population characteristics; (1990 CP-1-1). Washington: U.S. Department of Commerce. 1992.
- 10. National Center for Health Statistics. Public use data file documentation: Mortality detail 1995 data. Hyattsville, Maryland: Public Health Service. 1997.
- 11. National Center for Health Statistics. Public use data file documentation: Multiple cause of death for ICD-9 1995 data. Hyattsville, Maryland: Public Health Service. 1997.
- 12. Hambright TZ. Comparability of marital status, race, nativity, and country of origin on the death certificate and matching census record: United States, May-August 1960. National Center for Health Statistics. Vital Health Stat 2(34). 1969.
- 13. Sorlie PD, Rogot E, Johnson NJ. Validity of demographic characteristics on the death certificate. Epidemiology 3(2):181-4. 1992.
- 14. Poe GS, Powell-Griner E, McLaughlin JK, et al. Comparability of the death certificate and the 1986 national mortality followback survey. National Center for Health Statistics. Vital Health Stat 2(118). 1993.
- 15. U.S. Bureau of the Census. Population estimates based on unpublished tabulations prepared by the Housing and Household Economic Statistics Division. 1996.
- 16. Klebba AJ. Mortality from selected causes by marital status: United States, parts A and B. National Center for Health Statistics. Vital Health Stat 20(8a) and 20(8b). 1970.
- 17. National Center for Health Statistics. Industry and occupation coding for death certificates, 1993. NCHS instruction manual, Part 19. Hyattsville, Maryland: Public Health Service. 1992.
- 18. U.S. Bureau of the Census. Classified index of industries and occupations. 1990 Census of Population and Housing. Washington: U.S. Department of commerce. 1992.
- 19. World Health Organization. Manual of the International Statistical Classification of Diseases, Injuries, and Causes of Death, based on the recommendations of the Ninth Revision Conference, 1975. Geneva: World Health Organization. 1977.
- 20. National Center for Health Statistics. Estimates of selected comparability ratios based on dual coding of 1976 death certificates by the Eighth and Ninth Revisions of the International Classification of Diseases. Monthly vital statistics report; vol 28 no 11, suppl. Hyattsville, Maryland: Public Health Service. 1980.
- 21. Gittelsohn A, Royston PN. Annotated bibliography of cause-of-death validation studies, 1958-80. National Center for Health Statistics. Vital Health Stat 2(89). 1982.
- 22. National Center for Health Statistics. Vital statistics, ICD-9 ACME decision tables for classifying underlying causes of death, 1991. NCHS instruction manual; part 2c. Hyattsville, Maryland: Public Health Service. Published annually.

- 23. National Center for Health Statistics. Instructions for classifying multiple causes of death. NCHS instruction manual; part 2b. Hyattsville, Maryland: Public Health Service. Published annually.
- 24. National Center for Health Statistics. Nonindexed terms, standard abbreviations, and state geographic codes used in mortality data classification. NCHS instruction manual; part 2e. Hyattsville, Maryland: Public Health Service. Published annually.
- 25. National Center for Health Statistics. Vital statistics, data entry instructions for the mortality medical indexing, classification, and retrieval system (MICAR). NCHS instruction manual; part 2g. Hyattsville, Maryland: Public Health Service. Published annually.
- 26. National Center for Health Statistics. Vital statistics, dictionary of valid terms for the mortality medical indexing, classification, and retrieval system (MICAR). NCHS instruction manual; part 2h. Hyattsville, Maryland: Public Health Service. Published annually.
- Harris KW, Rosenberg HM, Kochanek KD, et al. Evaluation of an automated multiple causes of death coding system. In: American Statistical Association. 1993 Proceedings of the social statistics section. Alexandria, Virginia: American Statistical Association. 262-5. 1993.
- 28. Hoyert DL. Effect on mortality rates of the 1989 change in tabulating race. National Center for Health Statistics. Vital Health Stat 20(25). 1994.
- 29. Guralnick L, Winter ED. A note on cohort infant mortality rates. Public Health Rep 80:692-4. 1965.
- 30. Grove RD, Hetzel AM. Vital statistics rates in the United States, 1940-60. National Center for Health Statistics. Washington: Public Health Service. 1968.
- 31. McCarthy B, Terry J, Rochat R, et al. The underregistration of neonatal deaths: Georgia 1974-77. Am J Public Health 70:977-82. 1980.
- 32. Linder FE, Grove RD. Vital statistics rates in the United States, 1900-40. Washington: National Office of Vital Statistics. 1947.
- 33. Chase HC, Weiner L, Garfinkel J. Vital signs present at birth. National Center for Health Statistics. Vital and Health Stat 2(46). 1972.
- 34. Frost F, Shy KK. Racial differences between linked birth and infant death records in Washington State. Am J Public Health 70:974-6. 1980.
- 35. MacDorman MF, Atkinson JO. Infant mortality statistics from the 1996 period linked birth/infant death data set. Monthly vital statistics report; vol 46 no 12, supp. Hyattsville, Maryland: National Center for Health Statistics. 1998.
- 36. National Center for Health Statistics. Vital statistics, computer edits for mortality data, effective 1989. NCHS instruction manual; part 11. Hyattsville, Maryland: Public Health Service. 1989.
- 37. U.S. Bureau of the Census. U.S. population estimates by age, sex, race, and Hispanic origin: July 1, 1995. Census file RESD0795. 1996.
- 38. U.S. Bureau of the Census. Estimates of the resident population of States by age and sex for July 1, 1995. Census file 95AG795. 1996.
- 39. U.S. Bureau of the Census. U.S. population estimates by age, sex, race, and Hispanic origin: 1980-91. Current population reports; series P-25, no 1095. Washington: U.S. Department of Commerce. 1993.
- 40. Executive Office of the President. Office of Management and Budget. Statistical Policy Directive No. 15. Race and ethnic standards for federal statistics and administrative reporting.
- 41. National Center for Health Statistics. Technical appendix. Vital statistics of the United States, 1980, vol II, mortality, part A. Washington: Public Health Service. 1985.
- 42. U.S. Bureau of the Census. Coverage of the national population in the 1980 census by age, sex, and race. Preliminary estimates by demographic analysis. Current population reports; series P-23, no 115. Washington: U.S. Department of Commerce. 1982.
- 43. Hambright TZ. Comparability of age on the death certificate and matching census records: United States, May-August 1960. National Center for Health Statistics. Vital Health Stat 2(29). 1968.
- 44. U.S. Bureau of the Census. Estimates of coverage of the population by sex, race, and age--demographic analysis: 1970 census of population and housing. PHC(E)-4. Washington: U.S. Department of Commerce. 1974.

- 45. U.S. Bureau of the Census. Developmental estimates of the coverage of the population of States in the 1970 census--demographic analysis. Current population reports; series P-23, no 65. Washington: U.S. Department of Commerce. 1977.
- 46. Passel JS, Robinson JG. Revised demographic estimates of the coverage of the population by age, sex, and race in the 1980 Census. Unpublished memorandum, U.S. Bureau of the Census. Washington: U.S. Department of Commerce. 1985.
- 47. U.S. Bureau of the Census. Estimates of population of the United States by age, sex, and race: 1980 to 1985. Current population reports; series P-25, no 985. Washington: U.S. Department of Commerce. 1986.
- 48. Feinleib M, Zarate AO, eds. Reconsidering age adjustment procedures: Workshop proceedings. National Center for Health Statistics. Vital Health Stat 4(29). 1992.
- 49. Sirken MG. Comparison of two methods of constructing abridged life tables by reference to a "standard" table. National Center for Health Statistics. Vital Health Stat 2(4). 1966.
- 50. Greville TNE, Carlson GA. Estimated average length of life in the death-registration States. Vital statistics-Special reports. vol 33 no 9. National Center for Health Statistics. Washington: Public Health Service. 1951.
- 51. Chiang CL. Standard error of the age-adjusted death rate. Vital statistics-Special reports. vol 47 no 9. National Center for Health Statistics. Washington: Public Health Service. 1961.
- 52. Pearson, ES, Hartley, HO. Biometrika tables for statisticians, vol I. Cambridge University Press. 1966.

	Cer	isus	$NLMS^{1}$			
Race	RatioPercentcensus/agreementdeathcertificate		Percent agreement	Ratio CPS <sup>2</sup> / death certificate		
White	99.8	1.00	99.2	1.00		
Black	98.2	1.00	98.2	1.00		
American Indian	79.2	1.12	73.6	1.22		
Asian			82.4	1.12		
Japanese	97.0	1.04				
Chinese	90.3	1.07				
Filipino	72.6	1.28				

Table A. Comparison of percent agreement and ratio of deaths for census or survey record to deaths by race for matching death certificate: 1960 and 1979-85

--- Data not available.

... Category not applicable.

<sup>1</sup>NLMS is defined as National Longitudinal Mortality Study.

<sup>2</sup> CPS is defined as Current Population Survey.

SOURCES: Hambright TZ. Comparability of marital status, race, nativity, and country of origin on the death certificate and matching census record: U.S., May-August 1960. National Center for Health Statistics. Vital Health Stat 2(34). 1969; Sorlie PD, Rogot E, Johnson NJ. Validity of demographic characteristics on the death certificate. Epidemiology 3(2):181-4. 1992.

Table B. Infant mortality rates by race of infant from the death certificate and by race of motherfrom the birth certificate, and ratio of rates, 1995-96

	Infant mor	Ratio	
Race	Race from death certificate	Race from birth certificate	birth/ death
All races	7.5	7.4	0.99
White	6.2	6.2	1.00
Black	14.9	14.4	0.97
American Indian	8.3	9.5	1.14
Asian or Pacific Islander	4.1	5.2	1.27
Chinese	2.9	3.5	1.21
Japanese	2.3	4.7	2.04
Hawaiian	7.2	6.1	0.85
Filipino	3.4	5.7	1.68
Other Asian or Pacific Islander	4.8	5.6	1.17

[Rates per 1,000 live births in specified group]

SOURCE: Rosenberg H, Maurer JD, Sorlie PD, Johnson NJ, MacDorman M, Hoyert DL, Spitler JF, Scott C. Quality of death rates by race and Hispanic origin: a summary. National vital statistics reports (forthcoming).

Table C. Infant mortality rates by Hispanic origin of infant from the death certificate and by race of mother from the birth certificate, and ratio of rates, 1996

	Infant mor	Infant mortality rate			
Race	Hispanic origin from death certificate <sup>1</sup>	Hispanic origin from birth certificate	Ratio linked file/ birth/death		
All origins <sup>2</sup>	7.3	7.4	1.01		
Total Hispanic	5.9	6.2	1.05		
Mexican	5.9	5.9	1.00		
Puerto Rican	7.8	8.7	1.12		
Cuban	5.1	5.2	1.02		
Other Hispanic <sup>3</sup>	5.3	5.9	1.11		
Non-Hispanic total <sup>4</sup>	7.6	7.7	1.01		
Non-Hispanic white	6.1	6.2	1.02		
Non-Hispanic black	14.7	14.4	0.98		

[Rates per 1,000 live births in specified group]

<sup>1</sup> Data excludes Oklahoma which did not have a question on Hispanic origin on its death certificate.

<sup>2</sup> Includes Hispanic origin not stated.

<sup>3</sup> Includes Central and South American and Other and unknown Hispanic.

<sup>4</sup> Includes races other than white and black.

SOURCE: Rosenberg H, Maurer JD, Sorlie PD, Johnson NJ, MacDorman M, Hoyert DL, Spitler JF, Scott C. Quality of death rates by race and Hispanic origin: a summary. National vital statistics reports (forthcoming).

# Table D. Numbers of deaths and ratios of deaths for selected causes as tabulated by State of occurrence and NCHS, 1995

[Data by place of occurrence include deaths of nonresidents. Numbers after causes of death are category numbers of the Ninth Revision, International Classification of Diseases, 1975]

Causes	Alaska	NCHS	Ratio AK/NCHS
All causes	2,546	2,546	1.00
Symptoms, signs, and ill-defined conditions780-799	42	43	0.98
Accidents and adverse effectsE800-E949	368	376	0.98
Motor vehicle accidents	105	96	1.09
All other accidents and adverse effectsE800-E807,E826-E949	263	280	0.94
Suicide	118	105	1.12
Homicide and legal interventionE960-E978	56	55	1.02
All other external causes	7	11	0.64

[Populat	[Population enumerated as of April 1 for 1940, 1950, 1960, 1970, 1980, and 1990 and estimated as of July 1 for all other years]									
	United	States <sup>1</sup>		United	States <sup>1</sup>		registration States		registration	
Year	Population including Armed Forces abroad	Population residing in area	Year	Population including Armed Forces abroad	Population residing in area	Number of States <sup>2</sup>	Population residing in area	Number of States <sup>2</sup>	Population residing in area	
1995	263,033,968	262 755 270	1947	144,126,000	143,446,000					
1994			1946	141,389,000	140,054,000					
1994			1945	139,928,000	132,481,000					
1992			1944	138,397,000	132,885,000					
1992	252,688,000		1943	136,739,000	134,245,000					
1990			1942	134,860,000	133,920,000					
1989			1941	133,402,000	133,121,000					
1988	245,021,000		1940	131,820,000	131,669,275					
1987	242,804,000		1939	131,028,000	130,879,718					
1986	240,651,000		1938	129,969,000	129,824,939					
1985	238,466,000		1937	128,961,000	129,824,829					
1984			1936	128,181,000	128,053,180					
1983			1935	127,362,000	127,250,232					
1982	232,188,000		1934	126,485,000	126,373,773					
1981	229,966,000		1933	125,690,000	125,578,763					
1980	227,061,000	226,545,805		124,949,000	124,840,471	 47	 118,903,899	 47	118,903,899	
1979			1931	124,149,000	124,039,648	46	117,455,229	47	118,148,987	
1978	222,585,000		1930	123,188,000	123,076,741	46	116,544,946		117,238,278	
1977	220,239,000		1929		121,769,939	46	115,317,450		115,317,450	
1976	218,035,000		1929		120,501,115	40	113,636,160		113,636,160	
1975			1928		119,038,062	40	104,320,830		107,084,532	
1974			1926		117,399,225	35	90,400,590		107,084,532	
1973			1925		117,377,223	33	90,400,590 88,294,564	40	102,031,555	
1972	209,896,000		1923		114,113,463	33	87,000,295	39	99,318,098	
1971			1924		111,949,945	30	81,072,123	38	96,788,197	
1970	207,001,000		1922		110,054,778	30	79,560,746		92,702,901	
1969			1922		108,541,489	27	70,807,090		87,814,447	
1968			1920		106,466,420	23	63,597,307	34	86,079,263	
1967			1920	105,063,000	100,400,420	23	61,212,076		83,157,982	
1966	196,560,000		1919	103,003,000	103,202,801	20	55,153,782	30	79,008,412	
1965	190,300,000		1918	104,330,000	103,265,913	20 20	55,197,952	30 27	79,008,412	
1964			1917		103,203,913	20 11	32,944,013	27	66,971,177	
1963	191,889,000		1910		101,903,984	11	32,944,013	20 24	61,894,847	
1962	189,242,000		1913		99,117,567			24 24	60,963,309	
1962	180,538,000		1914		99,117,307 97,226,814			24	58,156,740	
1961	179,933,000		1913		97,220,814 95,331,300			23 22	54,847,700	
1960			1912		93,331,300 93,867,814			22	53,929,644	
1939	177,204,000	170,515,000	1911		93,007,814	• • •	• • •	22	55,929,044	

# Table E. Population of birth- and death-registration States, 1900-1932, and United States, 1900-1995

[Population enumerated as of April 1 for 1940, 1950, 1960, 1970, 1980, and 1990 and estimated as of July 1 for all other years]									
	United States <sup>1</sup>			United States <sup>1</sup>		Birth-registration States		Death-registration States	
Year	Population including Armed Forces abroad	Population residing in area	Year	Population including Armed Forces abroad	Population residing in area	Number of States <sup>2</sup>	Population residing in area	Number of States <sup>2</sup>	Population residing in area
1958	174,141,000	172,320,000	1910		92,406,536			20	47,470,437
1957	171,274,000	170,371,000	1909		90,491,525			18	44,223,513
1956	168,221,000	167,306,000	1908		88,708,976			17	38,634,759
1955	165,275,000	164,308,000	1907		87,000,271			15	34,552,837
1954	162,391,000	161,164,000	1906		85,436,556			15	33,782,288
1953	159,565,000	158,242,000	1905		83,819,666			10	21,767,980
1952	156,954,000	155,687,000	1904		82,164,974			10	21,332,076
1951	154,287,000	153,310,000	1903		80,632,152			10	20,943,222
1950	151,132,000	150,697,361	1902		79,160,196			10	20,582,907
1949	149,188,000	148,665,000	1901		77,585,128			10	20,237,453
1948	146,631,000	146,093,000	1900		76,094,134			10	19,965,446

# Table E. Population of birth- and death-registration States, 1900-1932, and United States, 1900-1995

[Population enumerated as of April 1 for 1940, 1950, 1960, 1970, 1980, and 1990 and estimated as of July 1 for all other years]

--- Data not available.

... Category not applicable.

<sup>1</sup> Alaska included beginning 1959 and Hawaii, 1960.

<sup>2</sup> The District of Columbia is not included in "Number of States," but it is represented in all data shown for each year.

SOURCE: Published and unpublished data from the U.S. Bureau of the Census; see text.

# Table F. Source for resident population and population including Armed Forces abroad:Birth- and death-registration States, 1900-32, and United States, 1900-95

Year	Source
1995	U.S. Bureau of the Census, Electronic Data File, RESD0795, and unpublished data.
	U.S. Bureau of the Census, Electronic Data File, RESD0794, and unpublished data.
1993	U.S. Bureau of the Census, Electronic Data File, RESP0793, and unpublished data.
1992	U.S. Bureau of the Census, Electronic Data File, RESP0792, and unpublished data.
1991	U.S. Bureau of the Census, Current Population Reports, Series P-25, No. 1095, 1993.
1990	U.S. Bureau of the Census, Unpublished data from the 1990 census, 1990 CPH-L-74 and unpublished data
	consistent with Current Population Reports, Series P-25, No. 1095.
1981-89	U.S. Bureau of the Census, Current Population Reports, Series P-25, No. 1095, 1993.
1980	U.S. Bureau of the Census, U.S. Census of Population: 1980, Number of Inhabitants, PC-80-1A1,
	United States Summary, 1983.
1971-79	U.S. Bureau of the Census, Current Population Reports, Series P-25, No. 917, July 1982.
	U.S. Bureau of the Census, U.S. Census of Population: 1970, Number of Inhabitants, Final Report PC(1)-A1,
	United States Summary, 1971.
1961-69	U.S. Bureau of the Census, Current Population Reports, Series P-25, No. 519, April 1974.
1960	U.S. Bureau of the Census, U.S. Census of Population: 1960, Number of Inhabitants, PC(1)-A1,
	United States Summary, 1964.
1951-59	U.S. Bureau of the Census, Current Population Reports, Series P-25, No. 310, June 30, 1965.
1940-50	U.S. Bureau of the Census, Current Population Reports, Series P-25, No. 499, May 1973.
1930-39	U.S. Bureau of the Census, Current Population Reports, Series P-25, No. 499, May 1973, and National Office of
	Vital Statistics, Vital Statistics Rates in the United States, 1900-1940, 1947.
1920-29	National Office of Vital Statistics, Vital Statistics Rates in the United States, 1900-1940, 1947.
1917-19	Same as for 1930-39.
1900-16	Same as for 1920-29.

# Table G. Estimated population of the United States, by 5-year age groups, race, and sex: July 1, 1995

		All races			White		All other					
Age	Dethermore	M-1	E1-	Dethermore	M-1	E1		Total		Black		
	Both sexes	Male	Female	Both sexes	Male	Female	Both sexes	Male	Female	Both sexes	Male	Female
All ages	262,755,270	128,313,798	134,441,472	218,085,421	106,993,635	111,091,786	44,669,849	21,320,163	23,349,686	33,141,148	15,721,074	17,420,074
Under 1 year	3,848,106	1,969,872	1,878,234	3,014,707	1,547,420	1,467,287	833,399	422,452	410,947	621,144	314,438	306,706
1-4 years	15,743,042	8,055,333	7,687,709	12,436,458	6,376,721	6,059,737	3,306,584	1,678,612	1,627,972	2,478,716	1,255,910	1,222,806
5-9 years	19,219,956	9,843,300	9,376,656	15,236,617	7,818,268	7,418,349	3,983,339	2,025,032	1,958,307	3,025,305	1,534,797	1,490,508
10-14 years	18,914,532	9,685,241	9,229,291	15,039,772	7,720,711	7,319,061	3,874,760	1,964,530	1,910,230	2,876,972	1,459,558	1,417,414
15-19 years	18,064,517	9,265,025	8,799,492	14,362,303	7,390,200	6,972,103	3,702,214	1,874,825	1,827,389	2,821,796	1,430,218	1,391,578
20-24 years	17,882,118	9,087,045	8,795,073	14,317,137	7,323,846	6,993,291	3,564,981	1,763,199	1,801,782	2,637,568	1,299,324	1,338,244
25-29 years	19,005,343	9,529,765	9,475,578	15,402,702	7,795,910	7,606,792	3,602,641	1,733,855	1,868,786	2,594,461	1,239,775	1,354,686
30-34 years	21,867,796	10,902,150	10,965,646	17,984,412	9,062,225	8,922,187	3,883,384	1,839,925	2,043,459	2,825,366	1,325,134	1,500,232
35-39 years	22,248,914	11,071,207	11,177,707	18,458,496	9,282,016	9,176,480	3,790,418	1,789,191	2,001,227	2,787,896	1,307,303	1,480,593
40-44 years	20,218,805	9,990,476	10,228,329	16,929,523	8,460,555	8,468,968	3,289,282	1,529,921	1,759,361	2,390,339	1,108,770	1,281,569
45-49 years	17,448,898	8,559,836	8,889,062	14,858,289	7,370,499	7,487,790	2,590,609	1,189,337	1,401,272	1,854,835	846,389	1,008,446
50-54 years	13,629,862	6,621,815	7,008,047	11,725,262	5,754,226	5,971,036	1,904,600	867,589	1,037,011	1,380,983	619,729	761,254
55-59 years	11,084,606	5,317,251	5,767,355	9,540,786	4,625,549	4,915,237	1,543,820	691,702	852,118	1,137,905	499,639	638,266
60-64 years	10,046,478	4,726,807	5,319,671	8,723,606	4,152,335	4,571,271	1,322,872	574,472	748,400	988,458	425,295	563,163
65-69 years	9,927,958	4,505,822	5,422,136	8,725,874	3,993,037	4,732,837	1,202,084	512,785	689,299	920,412	393,354	527,058
70-74 years	8,831,205	3,836,272	4,994,933	7,918,213	3,461,716	4,456,497	912,992	374,556	538,436	696,791	280,476	416,315
75-79 years	6,681,247	2,720,385	3,960,862	6,038,810	2,470,292	3,568,518	642,437	250,093	392,344	509,967	194,449	315,518
80-84 years	4,463,733	1,609,321	2,854,412	4,069,152	1,469,402	2,599,750	394,581	139,919	254,662	318,168	107,311	210,857
85 years and over	3,628,154	1,016,875	2,611,279	3,303,302	918,707	2,384,595	324,852	98,168	226,684	274,066	79,205	194,861

[Figures include Arr	ned forces stationed i	in the United	States and exclude	e those stationed	outside the Unit	ed States]

SOURCE: Published and unpublished data from the U.S. Bureau of the Census; see text.

# Table H. Estimated population, by age, for the United States, each division and State, Puerto Rico,Virgin Islands, and Guam: July 1, 1995

[Figures include Armed Forces stationed in each area, and exclude Armed Forces stationed outside the United States
--

Division and State	Total	Under 5 years	15-19 years	20-44 years	45-64 years	65 years and over
United States	262,755,270	19,591,148	56,199,005	101,222,976	52,209,844	33,532,297
Geographic divisions:						
New England	13,312,412	895,898	2,627,215	5,258,704	2,667,863	1,862,732
Middle Atlantic	38,153,221	2,721,237	7,634,671	14,472,477	7,894,731	5,430,105
East North Central	43,456,141	3,128,414	9,409,884	16,616,553	8,729,381	5,571,909
West North Central	18,347,676	1,264,639	4,112,086	6,831,914	3,617,041	2,521,996
South Atlantic	46,995,266	3,325,490	9,509,928	18,160,132	9,555,646	6,444,070
East South Central	16,066,495	1,135,805	3,461,262	6,101,786	3,339,026	2,028,616
West South Central	28,827,781	2,320,898	6,706,183	11,030,113	5,560,170	3,210,417
Mountain	15,645,168	1,244,762	3,684,177	5,897,743	3,051,888	1,766,598
Pacific	41,951,110	3,554,005	9,053,599	16,853,554	7,794,098	4,695,854
New England:						
Maine	1,241,382	74,513	262,980	472,162	259,582	172,145
New Hampshire	1,148,253	76,269	245,451	467,324	222,709	136,500
Vermont	584,771	37,092	124,782	231,079	121,369	70,449
Massachusetts	6,073,550	412,862	1,156,540	2,444,165	1,199,376	860,607
Rhode Island	989,794	67,570	193,057	385,682	187,680	155,805
Connecticut	3,274,662	227,592	644,405	1,258,292	677,147	467,226
Middle Atlantic:						
New York	18,136,081	1,359,704	3,631,631	6,990,701	3,730,227	2,423,818
New Jersey	7,945,298	577,194	1,577,326	3,037,472	1,663,133	1,090,173
Pennsylvania	12,071,842	784,339	2,425,714	4,444,304	2,501,371	1,916,114

# Table H. Estimated population, by age, for the United States, each division and State, Puerto Rico,Virgin Islands, and Guam: July 1, 1995

[Figures include Armed Forces stationed in each area	, and exclude Armed Forces stationed outside the United States]
I iguies merude i miled i erees stationed in each area	and exclude finited forces stationed outside the entited states]

Division and State	Total	Under 5 years	15-19 years	20-44 years	45-64 years	65 years and over
East North Central:						
Ohio	11,150,506	772,833	2,391,427	4,215,895	2,279,935	1,490,416
Indiana	5,803,471	407,943	1,245,848	2,230,373	1,186,217	733,090
Illinois	11,829,940	920,982	2,521,591	4,564,415	2,338,816	1,484,136
Michigan	9,549,353	682,697	2,099,165	3,672,566	1,913,132	1,181,793
Wisconsin	5,122,871	343,959	1,151,853	1,933,304	1,011,281	682,474
West North Central:						
Minnesota	4,609,548	320,664	1,048,040	1,778,168	889,575	573,101
Iowa	2,841,764	183,794	622,313	1,023,882	579,737	432,038
Missouri	5,323,523	369,321	1,156,726	1,979,691	1,077,359	740,426
North Dakota	641,367	41,830	148,246	236,343	122,192	92,756
South Dakota	729,034	52,310	176,704	258,281	136,919	104,820
Nebraska	1,637,112	114,141	376,888	599,452	318,954	227,677
Kansas	2,565,328	182,579	583,169	956,097	492,305	351,178
South Atlantic:						
Delaware	717,197	51,616	145,089	287,082	142,759	90,651
Maryland	5,042,438	368,055	1,023,354	2,051,902	1,027,382	571,745
District of Columbia .	554,256	39,909	85,456	241,384	110,267	77,240
Virginia	6,618,358	463,688	1,324,642	2,733,999	1,358,594	737,435
West Virginia	1,828,140	106,460	371,332	656,509	414,624	279,215
North Carolina	7,195,138	513,888	1,476,269	2,824,410	1,481,113	899,458
South Carolina	3,673,287	262,833	787,894	1,430,888	751,769	439,903
Georgia	7,200,882	551,180	1,572,524	2,944,887	1,414,385	717,906
Florida	14,165,570	967,861	2,723,368	4,989,071	2,854,753	2,630,517

# Table H. Estimated population, by age, for the United States, each division and State, Puerto Rico,Virgin Islands, and Guam: July 1, 1995

[Figures include Armed Forces stationed in each area	, and exclude Armed Forces stationed outside the United States]
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Division and State	Total	Under 5 years	15-19 years	20-44 years	45-64 years	65 years and over
East South Central:						
Kentucky	3,860,219	261,108	827,133	1,473,939	811,474	486,565
Tennessee	5,256,051	365,477	1,088,517	2,022,370	1,121,476	658,211
Alabama	4,252,982	300,663	904,543	1,609,445	885,871	552,460
Mississippi	2,697,243	208,557	641,069	996,032	520,205	331,380
West South Central:						
Arkansas	2,483,769	172,617	550,258	883,203	518,417	359,274
Louisiana	4,342,334	336,295	1,040,537	1,624,199	846,822	494,481
Oklahoma	3,277,687	230,362	743,577	1,184,260	677,267	442,221
Texas	18,723,991	1,581,624	4,371,811	7,338,451	3,517,664	1,914,441
Mountain:						
Montana	870,281	56,982	205,670	305,673	188,295	113,661
Idaho	1,163,261	89,426	298,399	415,220	227,661	132,555
Wyoming	480,184	32,257	119,801	175,179	99,674	53,273
Colorado	3,746,585	268,950	814,019	1,501,226	786,087	376,303
New Mexico	1,685,401	138,303	412,650	620,969	330,092	183,387
Arizona	4,217,940	355,808	949,809	1,561,024	790,771	560,528
Utah	1,951,408	183,818	568,951	721,790	304,842	172,007
Nevada	1,530,108	119,218	314,878	596,662	324,466	174,884
Pacific:						
Washington	5,430,940	385,897	1,178,182	2,145,740	1,093,387	627,734
Oregon	3,140,585	209,591	672,424	1,168,806	663,899	425,865
California	31,589,153	2,809,826	6,801,330	12,830,615	5,684,563	3,462,819
Alaska	603,617	52,882	155,312	249,856	115,784	29,783
Hawaii	1,186,815	95,809	246,351	458,537	236,465	149,653

# Table H. Estimated population, by age, for the United States, each division and State, Puerto Rico,Virgin Islands, and Guam: July 1, 1995

[Figures include Armed Forces stationed in each area, and exclude Armed Forces stationed outside the United States]

Division and State	Total	Under 5 years	15-19 years	20-44 years	45-64 years	65 years and over	
Puerto Rico	3,731,006	319,833	967,608	1,367,887	699,770	375,908	
Virgin Islands	111,950	11,746	30,308	36,893	24,731	8,272	
Guam	143,855	20,016	38,101	56,922	21,526	7,290	

SOURCE: Published and unpublished data from the U.S. Bureau of the Census; see text.

# Table I. Estimated population by 5-year age groups, specified Hispanic origin, race for non-Hispanic origin, andsex: Total of 49 States and the District of Columbia, July 1, 1995

[Figures include Armed Forces stationed in the United States and exclude those stationed outside the U	United States]
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				Hispanic			Non-Hispanic			
Sex and age	All origins	Total	Mexican	Puerto Rican	Cuban	Other Hispanic <sup>1</sup>	Total <sup>2</sup>	White	Black	
Both sexes										
All ages	259,504,615	26,903,271	17,355,772	2,769,337	1,131,663	5,646,499	232,601,344	190,850,619	31,362,664	
Under 1 year	3,809,275	655,554	470,799	64,678	8,367	111,710	3,153,721	2,384,798	578,805	
1-4 years	15,580,062	2,543,683	1,831,485	212,544	52,849	446,805	13,036,379	9,978,680	2,320,160	
5-9 years	19,012,420	2,651,648	1,827,552	275,458	67,706	480,932	16,360,772	12,660,787	2,847,501	
10-14 years	18,630,833	2,417,045	1,640,556	285,618	54,814	436,057	16,213,788	12,623,204	2,710,259	
15-19 years	17,819,048	2,270,583	1,461,401	270,401	59,450	479,331	15,548,465	12,107,989	2,664,902	
20-24 years	17,672,363	2,328,759	1,581,229	200,083	67,422	480,025	15,343,604	12,039,504	2,485,920	
25-29 years	18,817,030	2,494,511	1,700,668	212,113	77,023	504,707	16,322,519	12,972,578	2,442,477	
30-34 years	21,650,105	2,524,224	1,611,589	227,880	89,061	595,694	19,125,881	15,498,672	2,667,118	
35-39 years	21,991,526	2,150,017	1,310,414	233,753	99,407	506,443	19,841,509	16,292,926	2,635,411	
40-44 years	19,954,489	1,716,147	1,015,553	190,484	78,309	431,801	18,238,342	15,157,873	2,257,012	
45-49 years	17,220,601	1,307,489	751,352	158,791	81,819	315,527	15,913,112	13,475,210	1,765,840	
50-54 years	13,430,283	958,448	556,698	129,488	49,707	222,555	12,471,835		1,318,856	
55-59 years	10,925,387	758,260	432,167	98,311	60,555	167,227	10,167,127	8,705,433	1,088,923	
60-64 years	9,899,196	632,954	358,687	76,178	65,229	132,860	9,266,242	8,008,598	950,312	
65-69 years	9,812,348	540,568	304,944	45,729	63,881	126,014	9,271,780	8,127,172	884,416	
70-74 years	8,702,959	403,168	219,217	40,286	56,636	87,029	8,299,791	7,420,570	676,445	
75-79 years	6,583,805	254,182	120,665	18,276	51,868	63,373	6,329,623	5,714,811	493,861	
80-84 years	4,408,015	167,139	96,302	15,701	19,958	35,178	4,240,876	3,861,759	307,575	
85 years and over	3,584,870	128,892	64,494	13,565	27,602	23,231	3,455,978	3,141,504	266,871	
Male										
All ages	126,752,625	13,628,500	8,974,090	1,303,169	568,949	2,782,292	113,124,125	93,270,479	14,828,366	
Under 1 year	1,950,448	336,434	248,742	30,711	5,199	51,782	1,614,014	1,227,497	290,941	
1-4 years	7,974,893	1,302,113	927,676	99,554	32,451	242,432	6,672,780	5,121,759	1,175,545	
5-9 years	9,735,795	1,356,198	914,348	144,442	39,111	258,297	8,379,597	6,497,997	1,445,807	
10-14 years	9,536,570	1,233,877	808,092	161,091	27,560	237,134	8,302,693	6,486,892	1,372,005	
15-19 years	9,143,122	1,162,112		129,647	26,834	231,592	7,981,010	6,234,908	1,352,603	

# Table I. Estimated population by 5-year age groups, specified Hispanic origin, race for non-Hispanic origin, andsex: Total of 49 States and the District of Columbia, July 1, 1995

				Hispanic		Non-Hispanic			
Sex and age	All origins	Total	Mexican	Puerto Rican	Cuban	Other Hispanic <sup>1</sup>	Total <sup>2</sup>	White	Black
20-24 years	8,979,149	1,227,296	857,708	88,891	36,259	244,438	7,751,853	6,125,276	1,220,795
25-29 years	9,446,366	1,340,052	940,380	91,997	44,081	263,594	8,106,314	6,503,109	1,160,579
30-34 years	10,791,780	1,328,484	879,990	102,131	45,048	301,315	9,463,296	7,754,055	1,244,394
35-39 years	10,951,099	1,107,376	695,076	114,486	54,313	243,501	9,843,723	8,179,225	1,229,869
40-44 years	9,851,416	860,573	534,558	84,524	37,865	203,626	8,990,843	7,567,522	1,041,341
45-49 years	8,472,709	642,933	395,439	66,350	35,143	146,001	7,829,776	6,714,254	799,865
50-54 years	6,510,211	460,474	268,781	64,902	26,641	100,150	6,049,737	5,241,592	589,922
55-59 years	5,243,725	356,245	207,394	37,720	34,963	76,168	4,887,480	4,231,003	478,799
60-64 years	4,656,801	292,546	174,331	33,902	27,778	56,535	4,364,255	3,819,584	408,331
65-69 years	4,453,305	240,855	139,365	19,085	31,018	51,387	4,212,450	3,722,238	377,203
70-74 years	3,780,240	176,596	98,650	18,121	27,892	31,933	3,603,644	3,242,236	272,714
75-79 years	2,680,830	102,125	51,452	6,232	21,487	22,954	2,578,705	2,337,566	188,359
80-84 years	1,584,091	59,655	37,819	3,391	5,150	13,295	1,524,436	1,391,899	101,425
85 years and over	1,010,075	42,556	20,250	5,992	10,156	6,158	967,519	871,867	77,869
Female									
All ages	132,751,990	13,274,771	8,381,682	1,466,168	562,714	2,864,207	119,477,219	97,580,140	16,534,298
Under 1 year	1,858,827	319,120	222,057	33,967	3,168	59,928	1,539,707	1,157,301	287,864
1-4 years	7,605,169	1,241,570	903,809	112,990	20,398	204,373	6,363,599	4,856,921	1,144,615
5-9 years	9,276,625	1,295,450	913,204	131,016	28,595	222,635	7,981,175	6,162,790	1,401,694
10-14 years	9,094,263	1,183,168	832,464	124,527	27,254	198,923	7,911,095	6,136,312	1,338,254
15-19 years	8,675,926	1,108,471	687,362	140,754	32,616	247,739	7,567,455	5,873,081	1,312,299
20-24 years	8,693,214	1,101,463	723,521	111,192	31,163	235,587	7,591,751	5,914,228	1,265,125
25-29 years	9,370,664	1,154,459	760,288	120,116	32,942	241,113	8,216,205	6,469,469	1,281,898
30-34 years	10,858,325	1,195,740	731,599	125,749	44,013	294,379	9,662,585	7,744,617	1,422,724
35-39 years	11,040,427	1,042,641	615,338	119,267	45,094	262,942	9,997,786	8,113,701	1,405,542
40-44 years	10,103,073	855,574	480,995	105,960	40,444	228,175	9,247,499	7,590,351	1,215,671

[Figures include Armed Forces stationed in the United States and exclude those stationed outside the United States]

# Table I. Estimated population by 5-year age groups, specified Hispanic origin, race for non-Hispanic origin, andsex: Total of 49 States and the District of Columbia, July 1, 1995

Sex and age				Hispanic	Non-Hispanic				
	All origins	Total	Mexican	Puerto Rican	Cuban	Other Hispanic <sup>1</sup>	Total <sup>2</sup>	White	Black
45-49 years	8,747,892 6,920,072 5,681,662 5,242,395 5,359,043	497,974 402,015 340,408	287,917 224,773 184,356	92,441 64,586 60,591 42,276 26,644	25,592	122,405 91,059 76,325	8,083,336 6,422,098 5,279,647 4,901,987 5,059,330	5,436,959 4,474,430 4,189,014	728,934 610,124 541,981
70-74 years	4,922,719 3,902,975 2,823,924 2,574,795	152,057 107,484	69,213 58,483	22,165 12,044 12,310 7,573	28,744 30,381 14,808 17,446	40,419 21,883	4,696,147 3,750,918 2,716,440 2,488,459	4,178,334 3,377,245 2,469,860 2,269,637	305,502

[Figures include Armed Forces stationed in the United States and exclude those stationed outside the United States]

<sup>1</sup> Includes Central and South American and Other and unknown Hispanic.

<sup>2</sup> Includes races other than white and black.

# Table J. Estimated population for ages 15 years and over, by 5-year age groups, marital status, race, and sex: United States, 1995

[Figures may be subject to large sampling variability. Figures include Armed Forces stationed in the United States and exclude
those stationed outside the United States]

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Race, sex, and marital status	15 years and over	15-17 years	18-19 years	20-24 years	25-29 years	30-34 years	35-39 years	40-44 years	45-49 years
White, male									
Never married	23,750,005	4,474,440	2,809,114	5,787,809	3,792,697	2,346,118	1,692,627	1,057,271	627,638
Married	51,250,071	17,889	75,290	1,445,577	3,661,405	5,893,078	6,543,111	6,326,628	5,730,011
Widowed	2,104,997	1,189	315	-	5,229	15,259	24,800	36,068	50,687
Divorced	6,425,431	9,449	2,509	90,457	336,578	807,768	1,021,478	1,040,588	962,156
White, female									
Never married	18,192,353	4,173,426	2,483,742	4,458,856	2,373,723	1,426,763	901,826	616,717	417,743
Married	51,742,023	52,788	246,917	2,306,878	4,675,165	6,540,284	6,942,335	6,442,465	5,700,667
Widowed	10,320,547	588	339	10,808	16,713	40,393	90,459	114,322	209,813
Divorced	8,572,453	5,886	8,425	216,745	541,191	914,759	1,241,857	1,295,463	1,159,578
Black, male									
Never married	5,217,613	869,069	547,531	1,165,762	810,062	620,472	477,994	286,672	154,253
Married	4,701,195	6,327	1,253	122,128	386,772	615,821	698,148	620,641	560,293
Widowed	319,907	420	-	-	-	1,671	4,512	10,195	8,819
Divorced	917,652	5,620	-	11,437	42,935	87,161	126,653	191,268	123,026
Black, female									
Never married	5,138,791	840,458	528,317	1,129,588	805,603	620,945	460,771	267,489	183,942
Married	4,893,415	5,999	14,155	188,803	460,700	698,877	732,533	697,581	572,248
Widowed	1,424,088	1,265	-	1,462	2,439	16,808	23,599	37,657	47,931
Divorced	1,526,366	-	1,389	18,400	85,952	163,599	263,691	278,838	204,324

# Table J. Estimated population for ages 15 years and over, by 5-year age groups, marital status, race, and sex: United States, 1995

[Figures may be subject to large sampling variability. Figures include Armed Forces stationed in the United States and exclude
those stationed outside the United States]

Race, sex, and marital status	15 years and over	15-17 years	18-19 years	20-24 years	25-29 years	30-34 years	35-39 years	40-44 years	45-49 years
American Indian, male									
Never married	286,152	64,551	34,302	67,805	50,189	30,361	17,887	11,178	2,303
Married	376,812	-	2,311	26,325	35,866	47,744	50,088	47,904	49,245
Widowed	23,787	-	-	-	-	1,399	559	-	2,855
Divorced	83,983	-	-	470	7,022	13,541	18,767	16,288	6,367
American Indian, female									
Never married	255,491	60,821	32,249	58,903	51,487	15,086	9,519	9,396	2,218
Married	371,103	1,275	2,517	28,290	29,671	57,865	66,221	50,887	41,817
Widowed	78,422	1,170	1,494	-	-	3,170	504	2,365	5,068
Divorced	97,808	-	-	3,121	5,986	16,756	13,529	17,535	15,035
Asian or Pacific Islander, male									
Never married	1,271,962	212,391	128,562	339,586	261,374	149,950	81,197	49,431	19,571
Married	1,882,658	1,578	910	29,691	129,989	261,779	291,809	270,396	245,044
Widowed	38,375	-	-	-	2,981	-	-	-	791
Divorced	109,445	-	-	-	6,666	10,018	21,586	25,956	16,772
Asian or Pacific Islander, female									
Never married	988,646	204,348	122,714	276,193	200,872	70,303	47,973	23,894	11,872
Married	2,231,482	1,695	5,462	92,109	219,864	354,566	361,861	341,791	267,472
Widowed	257,286	1,686	-	2,175	-	5,650	5,244	2,915	14,143
Divorced	179,343	-	384	2,752	6,216	19,832	15,786	29,008	35,191

# Table J. Estimated population for ages 15 years and over, by 5-year age groups, marital status, race, and sex: United States, 1995

[Figures may be subject to large sampling variability. Figures include Armed Forces stationed in the United States and exclude
those stationed outside the United States]

those stationed outside the officed states]									
Race, sex, and marital status	50-54 years	55-59 years	60-64 years	65-69 years	70-74 years	75-79 years	80-84 years	85 years and over	
White, male									
Never married	303,354	216,138	165,215	170,503	138,637	70,242	53,787	44,415	
Married	4,725,765	3,829,836	3,482,112	3,280,266	2,793,139	1,932,538	1,047,438	465,988	
Widowed	66,695	84,525	141,186	267,914	338,555	363,694	328,760	380,121	
Divorced	658,417	495,051	363,831	274,354	191,383	103,814	39,412	28,186	
White, female									
Never married	270,307	202,164	157,323	168,623	164,555	152,077	94,783	129,725	
Married	4,522,863	3,581,871	3,199,446	2,874,328	2,332,948	1,402,859	635,805	284,404	
Widowed	281,180	416,694	662,822	1,286,623	1,664,854	1,844,560	1,767,488	1,912,891	
Divorced	896,684	714,500	551,687	403,262	294,140	169,022	101,682	57,572	
Black, male									
Never married	106,276	58,275	47,769	20,723	17,486	20,436	5,786	9,047	
Married	388,332	358,855	280,399	254,459	190,307	112,829	60,007	44,624	
Widowed	12,310	14,624	39,342	76,454	44,445	48,051	33,766	25,298	
Divorced	112,813	67,882	57,782	41,722	28,235	13,130	7,752	236	
Black, female									
Never married	77,869	64,840	54,710	38,477	31,162	11,400	10,456	12,764	
Married	413,236	353,999	274,069	213,925	148,331	74,521	31,111	13,327	
Widowed	92,370	123,976	158,261	193,880	196,599	208,224	157,003	162,614	
Divorced	177,782	95,449	76,124	80,777	40,219	21,376	12,290	6,156	

# Table J. Estimated population for ages 15 years and over, by 5-year age groups, marital status, race, and sex: United States, 1995

[Figures may be subject to large sampling variability. Figures include Armed Forces stationed in the United States and exclude
those stationed outside the United States]

Race, sex, and marital status	50-54 years	55-59 years	60-64 years	65-69 years	70-74 years	75-79 years	80-84 years	85 years and over	
American Indian, male									
Never married	1,720	3,289	1,712	-	855	-	-	-	
Married	37,235	24,960	19,752	15,595	10,821	3,417	2,203	3,346	
Widowed	977	1,006	646	1,582	2,378	6,793	4,133	1,459	
Divorced	4,974	4,922	4,977	4,132	2,523	-	-	-	
American Indian, female									
Never married	5,068	3,147	784	1,814	837	4,162	-	-	
Married	29,950	23,681	15,634	10,843	7,516	2,499	2,437	-	
Widowed	9,711	5,138	7,907	10,522	7,228	6,377	7,590	10,178	
Divorced	3,811	6,074	6,621	2,297	5,242	1,741	60	-	
Asian or Pacific Islander, male									
Never married	6,939	5,546	4,065	1,788	6,772	2,580	-	2,210	
Married	182,835	141,898	112,177	85,898	60,604	34,521	23,859	9,670	
Widowed	1,250	1,863	2,121	8,333	8,020	8,334	2,407	2,275	
Divorced	11,935	8,571	3,727	2,105	2,109	-	-	-	
Asian or Pacific Islander, female									
Never married	10,239	3,507	2,130	6,213	2,713	1,759	3,916	-	
Married	177,853	136,391	98,592	84,827	50,379	25,076	10,587	2,957	
Widowed	17,575	16,157	36,410	39,890	44,085	33,461	19,212	18,683	
Divorced	21,544	19,759	17,158	5,836	4,122	1,755	-	-	

- Quantity zero.

Table K. Estimated population for ages 15 years and over, by 5-year age groups, marital status, specified Hispanic origin, race for non-Hispanic origin, and sex: Total of 49 States and the District of Columbia, 1995

15 years and over	15-17 years	18-19 years	20-24 years	25-29 years	30-34 years	35-39 years	40-44 years	45-49 years
2,322,825	457,701	295,170	603,495	446,087	233,563	153,949	64,788	30,410
3,297,451	4,766	14,340	250,615	459,330	572,445	480,813	417,848	313,727
97,547	-	-	-	-	3,866	3,890	1,393	4,244
357,424	2,058	-	3,599	34,963	70,119	56,433	50,526	47,059
1,527,024	397,750	222,502	338,783	213,449	135,568	79,024	43,925	26,901
3,270,290	16,313	49,763	365,743	511,615	539,485	453,673	364,736	271,323
316,760	-	1,030	703	3,663	4,430	8,781	10,153	15,657
396,077	-	-	18,291	31,561	52,118	73,856	62,180	42,029
352,630	81,264	46,075	72,249	47,956	35,726	29,008	14,880	9,564
428,958	-	2,309	14,628	41,501	60,257	72,807	54,520	47,801
17,600	-	-	-	-	-	-	-	-
68,187	-	-	2,016	2,540	6,150	12,670	15,123	8,986
381,157	88,517	44,689	75,968	45,798	34,808	26,400	21,252	15,225
504,684	2,096	5,446	30,619	69,279	75,260	71,154	64,426	64,314
73,505	-	-	1,126	-	829	2,050	3,108	3,193
104,311	-	-	3,478	5,042	14,851	19,669	17,177	9,706
	and over 2,322,825 3,297,451 97,547 357,424 1,527,024 3,270,290 316,760 396,077 352,630 428,958 17,600 68,187 381,157 504,684 73,505	and overyears2,322,825457,7013,297,4514,76697,547-357,4242,0581,527,024397,7503,270,29016,313316,760-396,077-352,63081,264428,958-17,600-68,187-381,15788,517504,6842,09673,505-	15 years       15-17 years       18-19 years         2,322,825       457,701       295,170         3,297,451       4,766       14,340         97,547       -       -         357,424       2,058       -         1,527,024       397,750       222,502         3,270,290       16,313       49,763         316,760       -       1,030         396,077       -       -         352,630       81,264       46,075         428,958       -       2,309         17,600       -       -         68,187       -       -         381,157       88,517       44,689         504,684       2,096       5,446         73,505       -       -	15 years $15-17$ years $18-19$ years $20-24$ years $2,322,825$ $457,701$ $295,170$ $603,495$ $3,297,451$ $4,766$ $14,340$ $250,615$ $97,547$ $357,424$ $2,058$ - $3,599$ $1,527,024$ $397,750$ $222,502$ $338,783$ $3,270,290$ $16,313$ $49,763$ $365,743$ $316,760$ - $1,030$ $703$ $396,077$ 18,291 $352,630$ $81,264$ $46,075$ $72,249$ $428,958$ - $2,309$ $14,628$ $17,600$ $68,187$ -2,016 $381,157$ $88,517$ $44,689$ $75,968$ $504,684$ $2,096$ $5,446$ $30,619$ $73,505$ 1,126	15 years and over15-17 years18-19 years20-24 years25-29 years2,322,825457,701295,170603,495446,0873,297,4514,76614,340250,615459,33097,547357,4242,058-3,59934,9631,527,024397,750222,502338,783213,4493,270,29016,31349,763365,743511,615316,760-1,0307033,663396,07768,187-2,30914,62841,50117,60068,18788,51744,68975,96845,798504,6842,0965,44630,61969,27973,5051,126-	15 years and over15-17 years18-19 years20-24 years25-29 years30-34 years2,322,825457,701295,170603,495446,087233,5633,297,4514,76614,340250,615459,330572,44597,5473,866357,4242,058-3,59934,96370,1191,527,024397,750222,502338,783213,449135,5683,270,29016,31349,763365,743511,615539,485316,760-1,0307033,6634,430396,07768,187-2,30914,62841,50160,25717,60068,187-2,0162,5406,150381,15788,51744,68975,96845,79834,808504,6842,0965,44630,61969,27975,26073,505829	15 years and over15-17 years18-19 years20-24 years25-29 years $30-34$ years $35-39$ years2,322,825457,701295,170 $603,495$ 446,087233,563 $153,949$ 3,297,4514,76614,340250,615459,330 $572,445$ 480,81397,5473,8663,890357,4242,058-3,59934,96370,11956,4331,527,024397,750222,502338,783213,449135,56879,0243,270,29016,31349,763365,743511,615539,485453,673316,760-1,0307033,6634,4308,781396,07768,187-2,30914,62841,50160,25772,80717,6002,0162,5406,15012,670381,15788,51744,68975,96845,79834,80826,400504,6842,0965,44630,61969,27975,26071,15473,5051,126-8292,050	15 years and over15-17 years18-19 years20-24 years25-29 years $30-34$ years $35-39$ years $40-44$ years2,322,825457,701295,170603,495446,087233,563153,94964,7883,297,4514,76614,340250,615459,330572,445480,813417,84897,5473,8663,8901,393357,4242,058-3,59934,96370,11956,43350,5261,527,024397,750222,502338,783213,449135,56879,02443,9253,270,29016,31349,763365,743511,615539,485453,673364,736316,760-1,0307033,6634,4308,78110,153396,07718,29131,56152,11873,85662,180428,958-2,30914,62841,50160,25772,80754,52017,60068,187-2,0162,5406,15012,67015,123381,15788,51744,68975,96845,79834,80826,40021,252504,6842,0965,44630,61969,27975,26071,15464,42673,5051,126-8292,0503,108

Table K. Estimated population for ages 15 years and over, by 5-year age groups, marital status, specified Hispanic origin, race for non-Hispanic origin, and sex: Total of 49 States and the District of Columbia, 1995

					1				
Hispanic origin, race for non-Hispanic origin, sex, and marital status	15 years and over	15-17 years	18-19 years	20-24 years	25-29 years	30-34 years	35-39 years	40-44 years	45-49 years
Cuban, male									
Never married	127,649	18,460	8,374	29,216	20,293	8,986	17,857	5,421	5,160
Married	275,402	-	-	7,043	19,810	32,399	28,346	26,224	24,246
Widowed	15,165	-	-	-	-	-	-	-	385
Divorced	46,410	-	-	-	3,977	3,663	8,108	6,218	5,352
Cuban, female									
Never married	85,168	20,684	11,199	15,642	5,958	6,385	2,857	1,122	3,595
Married	266,532	-	417	12,810	21,520	33,535	34,489	29,803	34,845
Widowed	66,612	-	317	-	-	-	-	3,275	2,459
Divorced	64,993	-	-	2,712	5,469	4,095	7,749	6,245	5,777
Other Hispanic, male									
Never married	811,525	137,554	90,555	195,234	151,429	109,091	58,023	27,421	14,241
Married	1,052,273	786	2,493	46,322	104,886	177,503	170,945	151,462	118,370
Widowed	20,520	-	-	-	-	-	699	-	474
Divorced	108,327	204	-	2,880	7,283	14,720	13,827	24,744	12,916
Other Hispanic, female									
Never married	652,747	138,608	96,065	150,142	87,517	55,678	33,588	28,225	14,084
Married	1,152,917	2,453	9,687	79,230	138,913	212,729	178,841	160,235	114,654
Widowed	155,806	-	-	162	403	1,748	5,534	2,190	8,844
Divorced	216,890	647	283	6,056	14,284	24,226	44,980	37,525	31,949

Table K. Estimated population for ages 15 years and over, by 5-year age groups, marital status, specified Hispanic origin, race for non-Hispanic origin, and sex: Total of 49 States and the District of Columbia, 1995

			stationed of		ned Blates]				
Hispanic origin, race for non-Hispanic origin, sex, and marital status	15 years and over	15-17 years	18-19 years	20-24 years	25-29 years	30-34 years	35-39 years	40-44 years	45-49 years
White non-Hispanic, male									
Never married	20,245,460	3,791,468	2,364,743	4,921,513	3,171,758	1,966,046	1,449,787	945,579	569,893
Married	45,917,584	12,372	55,016	1,120,573	3,041,677	5,060,787	5,775,486	5,645,516	5,214,272
Widowed	1,937,395	1,204	322	-	5,327	9,645	17,761	34,476	43,993
Divorced	5,835,874	7,229	2,562	83,194	284,340	717,579	936,187	941,947	886,100
White non-Hispanic, female									
Never married	15,651,617	3,536,170	2,107,657	3,914,191	2,042,535	1,212,558	768,114	528,100	360,996
Married	46,281,708	32,608	182,978	1,807,332	3,931,751	5,682,767	6,190,751	5,804,934	5,160,216
Widowed	9,611,884	591	-	7,941	12,785	33,430	71,147	93,739	175,274
Divorced	7,721,626	5,300	7,777	184,765	482,408	815,861	1,083,684	1,163,574	1,064,472
Black non-Hispanic, male									
Never married	4,907,358	817,919	521,577	1,101,958	755,604	582,615	445,606	261,366	146,790
Married	4,455,660	6,205	974	107,570	363,817	577,442	660,156	588,671	529,153
Widowed	311,121	412	-	-	-	1,592	4,363	9,892	8,517
Divorced	869,940	5,513	-	11,270	41,157	82,747	119,748	181,415	115,406
Black non-Hispanic, female									
Never married	4,873,265	791,914	500,438	1,066,678	763,932	590,471	442,735	250,464	178,356
Married	4,664,116	5,845	11,518	179,998	433,189	662,237	693,235	660,860	548,337
Widowed	1,369,955	1,233	-	1,425	1,965	14,395	22,691	35,111	46,526
Divorced	1,454,540	-	1,355	17,029	82,817	155,622	246,875	269,234	192,752

Table K. Estimated population for ages 15 years and over, by 5-year age groups, marital status, specified Hispanic origin, race for non-Hispanic origin, and sex: Total of 49 States and the District of Columbia, 1995

			stationed of		inea states]				
Hispanic origin, race for non-Hispanic origin, sex, and marital status	15 years and over	15-17 years	18-19 years	20-24 years	25-29 years	30-34 years	35-39 years	40-44 years	45-49 years
Other non-Hispanic, male									
Never married	1,396,459	244,585	142,916	358,637	278,624	168,659	90,900	55,942	21,431
Married	2,060,114	1,542	4,455	46,344	149,892	276,226	310,852	289,723	271,561
Widowed	54,000	-	-	-	2,692	1,125	506	-	2,390
Divorced	164,061	-	-	802	11,413	18,839	32,374	36,315	20,277
Other non-Hispanic, female									
Never married	1,110,439	232,766	138,648	297,934	228,728	74,581	53,086	33,765	10,519
Married	2,386,733	2,501	5,746	109,426	228,818	377,255	393,806	358,167	284,324
Widowed	299,185	2,417	-	2,012	-	7,829	5,369	5,296	15,319
Divorced	256,594	-	-	3,027	7,286	35,580	26,281	44,247	46,243

Table K. Estimated population for ages 15 years and over, by 5-Year age groups, marital status, race, and specified Hispanic origin, race for non-Hispanic origin, and sex: Total of 49 States and the District of Columbia, 1995

		5	utioned outsid	ie die Office 5	tutes]			
Hispanic origin, race for non-Hispanic origin, sex, and marital status	50-54 years	55-59 years	60-64 years	65-69 years	70-74 years	75-80 years	80-84 years	85 years and over
Mexican, male								
Never married	13,033	10,797	6,540	443	2,667	1,374	1,492	1,316
Married	215,691	169,838	152,478	112,339	72,136	27,478	23,277	10,330
Widowed	7,435	4,208	5,330	13,565	19,613	15,628	10,942	7,433
Divorced	32,620	22,558	9,984	13,017	4,240	6,971	2,108	1,169
Mexican, female								
Never married	19,117	14,829	10,923	8,662	8,148	3,183	1,055	3,205
Married	216,305	166,481	117,679	106,910	47,547	18,006	17,154	7,557
Widowed	15,002	20,289	35,002	38,568	47,286	43,767	39,766	32,663
Divorced	37,490	23,179	20,754	11,442	17,590	4,259	510	818
Puerto Rican, male								
Never married	9,601	3,105	1,444	1,290	468	-	-	-
Married	44,131	29,314	27,958	12,638	12,511	4,286	2,867	1,430
Widowed	1,271	387	2,324	2,872	4,523	1,138	524	4,561
Divorced	9,901	4,914	2,175	2,285	618	809	-	-
Puerto Rican, female								
Never married	8,350	6,204	3,501	5,241	986	2,055	888	1,275
Married	42,335	28,874	23,653	11,895	9,724	3,185	1,337	1,087
Widowed	5,417	12,016	7,910	8,458	8,065	6,036	10,086	5,211
Divorced	8,485	13,491	7,210	1,050	3,388	764	-	-

Table K. Estimated population for ages 15 years and over, by 5-Year age groups, marital status, race, and specified Hispanic origin, race for non-Hispanic origin, and sex: Total of 49 States and the District of Columbia, 1995

	r	r			·····			
Hispanic origin, race for non-Hispanic origin, sex, and marital status	50-54 years	55-59 years	60-64 years	65-69 years	70-74 years	75-80 years	80-84 years	85 years and over
Cuban, male								
Never married	2,241	5,367	405	1,585	1,659	1,410	-	1,215
Married	21,701	24,306	25,859	23,720	17,258	13,996	5,150	5,344
Widowed	-	-	333	2,747	3,330	6,082	-	2,288
Divorced	2,698	5,288	1,182	2,969	5,645	-	-	1,310
Cuban, female								
Never married	2,010	3,291	2,681	1,748	2,446	2,655	1,464	1,431
Married	14,709	16,049	29,335	17,843	8,711	6,557	3,474	2,435
Widowed	-	932	2,209	5,355	11,808	17,290	9,867	13,100
Divorced	6,347	5,319	3,225	7,917	5,780	3,878	-	480
Other Hispanic, male								
Never married	10,912	5,307	6,752	1,747	766	1,040	1,453	-
Married	79,200	60,827	41,963	43,361	21,221	17,703	9,617	5,614
Widowed	-	4,920	2,232	3,653	5,533	1,998	466	545
Divorced	10,043	5,112	5,589	2,624	4,414	2,212	1,759	-
Other Hispanic, female								
Never married	12,922	8,740	4,302	10,334	5,525	3,919	1,710	1,388
Married	86,550	56,533	48,604	33,638	15,819	8,468	4,930	1,633
Widowed	8,132	10,369	15,231	23,716	26,283	24,842	14,301	14,051
Divorced	14,797	15,418	8,189	6,937	7,471	3,188	940	-

Table K. Estimated population for ages 15 years and over, by 5-Year age groups, marital status, race, and specified Hispanic origin, race for non-Hispanic origin, and sex: Total of 49 States and the District of Columbia, 1995

		8		le the Office S	tatesj			
Hispanic origin, race for non-Hispanic origin, sex, and marital status	50-54 years	55-59 years	60-64 years	65-69 years	70-74 years	75-80 years	80-84 years	85 years and over
White non-Hispanic, male								
Never married	265,431	191,875	150,639	165,098	132,961	66,643	50,033	41,993
Married	4,319,697	3,509,268	3,196,765	3,060,082	2,635,630	1,837,941	991,877	440,625
Widowed	57,619	73,973	128,368	242,289	302,201	339,713	316,175	364,329
Divorced	598,845	455,883	343,804	254,767	171,442	93,266	33,805	24,924
White non-Hispanic, female								
Never married	230,024	170,109	135,542	144,467	149,188	141,215	87,966	122,785
Married	4,129,325	3,286,163	2,950,324	2,684,533	2,215,955	1,344,292	606,109	271,670
Widowed	252,262	372,870	602,457	1,201,982	1,555,852	1,735,208	1,677,545	1,818,801
Divorced	825,342	645,286	500,702	373,951	257,351	156,523	98,240	56,390
Black non-Hispanic, male								
Never married	100,207	55,756	46,579	19,504	17,247	20,022	5,714	8,894
Married	368,346	342,800	268,571	245,912	185,192	108,401	58,578	43,872
Widowed	12,048	14,311	37,299	74,146	43,243	47,074	33,353	24,871
Divorced	109,319	65,935	55,880	37,643	27,031	12,865	3,779	232
Black non-Hispanic, female								
Never married	75,195	62,307	52,547	35,516	29,585	10,524	10,295	12,308
Married	394,359	341,342	266,416	207,257	143,074	73,496	29,678	13,275
Widowed	90,194	115,516	149,294	188,306	191,525	200,401	154,083	157,290
Divorced	169,182	90,957	73,729	76,135	39,544	21,079	12,100	6,130

Table K. Estimated population for ages 15 years and over, by 5-Year age groups, marital status, race, and specified Hispanic origin, race for non-Hispanic origin, and sex: Total of 49 States and the District of Columbia, 1995

[Figures may be subject to large sampling variability. Figures include Armed Forces stationed in the United States and exclude those stationed outside the United States]

					-			
Hispanic origin, race for non-Hispanic origin, sex, and marital status	50-54 years	55-59 years	60-64 years	65-69 years	70-74 years	75-80 years	80-84 years	85 years and over
Other non-Hispanic, male								
Never married	7,512	8,008	5,454	1,658	7,442	2,509	-	2,182
Married	191,294	156,044	122,064	97,199	68,446	36,116	26,798	11,558
Widowed	2,184	2,605	2,662	9,124	8,203	14,155	4,310	4,044
Divorced	17,234	11,023	6,158	5,026	4,600	-	-	-
Other non-Hispanic, female								
Never married	12,222	6,151	2,817	6,373	3,231	5,685	3,933	-
Married	193,559	142,152	104,518	91,834	51,740	27,468	11,553	3,866
Widowed	24,677	20,167	37,256	42,250	52,450	33,290	24,900	25,953
Divorced	25,751	26,619	26,401	6,722	6,664	1,729	44	-

- Quantity zero

		All races			White			Black	
	D d	All faces		D d	white		D d	DIACK	
Age	Both sexes	Male	Female	Both sexes	Male	Female	Both sexes	Male	Female
All ages	0.9815	0.9721	0.9906	0.9802	0.9728	0.9873	0.9432	0.9151	0.9699
Under 5 years	0.9632	0.9634	0.9629	0.9677	0.9685	0.9669	0.9160	0.9139	0.9182
Under 1 year	0.9686	0.9684	0.9689	0.9730	0.9734	0.9725	0.9239	0.9214	0.9264
1-4 years	0.9617	0.9621	0.9613	0.9664	0.9674	0.9654	0.9139	0.9119	0.9159
1 + yous	0.9017	0.9021	0.9015	0.9004	0.9074	0.9054	0.9139	0.9119	0.9139
5-14 years	0.9761	0.9768	0.9753	0.9740	0.9750	0.9730	0.9410	0.9402	0.9418
5-9 years	0.9649	0.9655	0.9642	0.9657	0.9665	0.9649	0.9241	0.9230	0.9252
10-14 years	0.9882	0.9891	0.9873	0.9830	0.9841	0.9818	0.9591	0.9586	0.9595
15-24 years	1.0081	1.0088	1.0073	1.0032	1.0053	1.0010	0.9789	0.9723	0.9855
15-19 years	1.0166	1.0198	1.0133	1.0094	1.0128	1.0059	0.9988	1.0016	0.9959
20-24 years	1.0002	0.9987	1.0017	0.9975	0.9985	0.9966	0.9593	0.9432	0.9753
20-24 years	1.0002	0.9987	1.0017	0.9975	0.9965	0.9900	0.9393	0.9432	0.9755
25-34 years	0.9639	0.9463	0.9821	0.9614	0.9480	0.9755	0.9126	0.8666	0.9580
25-29 years	0.9591	0.9439	0.9748	0.9558	0.9441	0.9681	0.9123	0.8732	0.9510
30-34 years	0.9687	0.9487	0.9892	0.9669	0.9518	0.9828	0.9129	0.8599	0.9651
35-44 years	0.9842	0.9689	0.9996	0.9816	0.9700	0.9935	0.9350	0.8867	0.9810
35-39 years	0.9790	0.9628	0.9954	0.9764	0.9643	0.9888	0.9303	0.8808	0.9778
40-44 years	0.9901	0.9758	1.0044	0.9875	0.9764	0.9988	0.9410	0.8943	0.9850
45-54 years	0.9780	0.9628	0.9929	0.9772	0.9649	0.9894	0.9322	0.8805	0.9799
45-49 years	0.9775	0.9633	0.9916	0.9762	0.9648	0.9877	0.9302	0.8807	0.9762
50-54 years	0.9785	0.9623	0.9944	0.9784	0.9651	0.9914	0.9346	0.8802	0.9844
55-64 years	0.9824	0.9640	0.9995	0.9828	0.9684	0.9962	0.9545	0.8875	1.0138
55-59 years	0.9794	0.9609	0.9968	0.9801	0.9656	0.9941	0.9426	0.8790	0.9999
60-64 years	0.9854	0.9671	0.1002	0.9853	0.9712	0.9982	0.9675	0.8969	1.0287

Table L. Ratio of census-level resident population to resident population adjusted for estimated net<br/>census undercount by age, sex, and race: April 1, 1990

		All races			White			Black	
Age	Both sexes	Male	Female	Both sexes	Male	Female	Both sexes	Male	Female
65-74 years	0.9960	0.9784	1.0101	0.9935	0.9781	1.0060	1.0211	0.9704	1.0596
65-69 years	0.9980	0.9776	1.0152	0.9943	0.9762	1.0096	1.0336	0.9786	1.0773
70-74 years	0.9934	0.9795	1.0040	0.9926	0.9807	1.0017	1.0049	0.9589	1.0376
75-84 years	1.0021	1.0046	1.0006	1.0038	1.0066	1.0021	0.9971	0.9913	1.0004
75-79 years	1.0082	1.0064	1.0094	1.0077	1.0065	1.0085	1.0258	1.0126	1.0337
80-84 years	0.9927	1.0015	0.9881	0.9978	1.0068	0.9931	0.9524	0.9547	0.9512
85 years and over	0.9411	0.9592	0.9342	0.9512	0.9696	0.9444	0.8503	0.8827	0.8373

Table L. Ratio of census-level resident population to resident population adjusted for estimated net<br/>census undercount by age, sex, and race: April 1, 1990

SOURCE: Unpublished data from the U.S. Bureau of the Census.

# Table M. Age-adjusted death rates for selected causes by race and sex, unadjusted and adjusted for estimated net census undercount: United States, 1990

[Based on age-specific death rates per 100,000 population in specified group. Age-adjusted death rates per 100,000 U.S. standard population. Numbers after causes of deaths are numbers of the Ninth Revision, International Classification of Diseases, 1975. Beginning 1987 includes category numbers \*042-\*044. See section "Cause of death"]

Race, sex, and adjustment for net census undercount	All causes	Human immunodeficiency virus infection (*042-*044)	Malignant neoplasms, including neoplasms of lymphatic and hematopoietic tissues (140-208)	Diabetes mellitus (250)	Diseases of heart (390-398,402, 404-429)	Cerebrovascular diseases (430-438)	Homicide and legal intervention (E960-E978)
All races					,		
Both sexes:							
Unadjusted	520.2	9.8	135.0	11.7	152.0	27.7	10.2
Adjusted	512.7	9.6	133.3	11.5	149.9	27.3	10.1
Male:							
Unadjusted	680.2	17.7	166.3	12.3	206.7	30.2	16.3
Adjusted	664.3	17.0	162.4	12.1	202.1	29.6	15.9
Female:							
Unadjusted	390.6	2.1	112.7	11.1	108.9	25.7	4.2
Adjusted	387.9	2.1	112.6	11.0	107.9	25.4	4.2
White							
Both sexes:							
Unadjusted	492.8	8.0	131.5	10.4	146.9	25.5	5.9
Adjusted	485.9	7.8	129.9	10.2	145.0	25.2	5.7
Male:							
Unadjusted	644.3	15.0	160.3	11.3	202.0	27.7	8.9
Adjusted	631.0	14.4	156.9	11.1	198.2	27.3	8.7
Female:							
Unadjusted	369.9	1.1	111.2	9.5	103.1	23.8	2.8
Adjusted	367.0	1.0	110.8	9.5	102.2	23.5	2.7
Black							
Both sexes:							
Unadjusted	789.2	25.7	182.0	24.8	213.5	48.4	39.5
Adjusted	760.0	23.9	177.0	24.1	207.2	46.9	37.4
Male:							
Unadjusted	1,061.3	44.2	248.1	23.6	275.9	56.1	68.7
Adjusted	980.8	39.0	230.9	21.9	256.7	52.3	62.9
Female:							
Unadjusted	581.6	9.9	137.2	25.4	168.1	42.7	13.0
Adjusted	579.4	9.7	138.4	25.7	168.2	42.7	12.7

D or D	L(1- a=.95, <i>D</i> )	U(1- a =.95, <i>D</i> )	L(1-a = .96,D) or $L(1-a = .96,D_{adj})$	U(1- $a = .96,D$ ) or U(1- $a = .96,D_{adj}$ )
$D_{adj}$			$L(1 - a = .90, D_{adj})$	$U(1-a = .90, D_{adj})$
1	0.02532	5.57164	0.02020	5.83392
2	0.12110	3.61234	0.10735	3.75830
3	0.20622	2.92242	0.18907	3.02804
4	0.27247	2.56040	0.25406	2.64510
5	0.32470	2.33367	0.30591	2.40540
6	0.36698	2.17658	0.34819	2.23940
7	0.40205	2.06038	0.38344	2.11666
8	0.43173	1.97040	0.41339	2.02164
9	0.45726	1.89831	0.43923	1.94553
10	0.47954	1.83904	0.46183	1.88297
11	0.49920	1.78928	0.48182	1.83047
12	0.51671	1.74680	0.49966	1.78566
13	0.53246	1.71003	0.51571	1.74688
14	0.54671	1.67783	0.53027	1.71292
15	0.55969	1.64935	0.54354	1.68289
16	0.57159	1.62394	0.55571	1.65610
17	0.58254	1.60110	0.56692	1.63203
18	0.59266	1.58043	0.57730	1.61024
19	0.60207	1.56162	0.58695	1.59042
20	0.61083	1.54442	0.59594	1.57230
21	0.61902	1.52861	0.60435	1.55563
22	0.62669	1.51401	0.61224	1.54026
23	0.63391	1.50049	0.61966	1.52602
24	0.64072	1.48792	0.62666	1.51278
25	0.64715	1.47620	0.63328	1.50043
26	0.65323	1.46523	0.63954	1.48888

# Table N. Lower and upper 95% and 96% confidence limit factors for a death rate based on a Poisson variable of 1 through 99 deaths, D or $D_{adj}$

D or	L(1- a=.95, <i>D</i> )	U(1- a =.95, <i>D</i> )	L(1- a =.96, <i>D</i> ) or	U(1- a =.96, <i>D</i> ) or
$D_{adj}$			$L(1-a=.96, D_{adj})$	$U(1-a=.96, D_{adj})$
27	0.65901	1.45495	0.64549	1.47805
28	0.66449	1.44528	0.65114	1.46787
29	0.66972	1.43617	0.65652	1.45827
30	0.67470	1.42756	0.66166	1.44922
31	0.67945	1.41942	0.66656	1.44064
32	0.68400	1.41170	0.67125	1.43252
33	0.68835	1.40437	0.67575	1.42480
34	0.69253	1.39740	0.68005	1.41746
35	0.69654	1.39076	0.68419	1.41047
36	0.70039	1.38442	0.68817	1.40380
37	0.70409	1.37837	0.69199	1.39743
38	0.70766	1.37258	0.69568	1.39134
39	0.71110	1.36703	0.69923	1.38550
40	0.71441	1.36172	0.70266	1.37991
41	0.71762	1.35661	0.70597	1.37454
42	0.72071	1.35171	0.70917	1.36938
43	0.72370	1.34699	0.71227	1.36442
44	0.72660	1.34245	0.71526	1.35964
45	0.72941	1.33808	0.71816	1.35504
46	0.73213	1.33386	0.72098	1.35060
47	0.73476	1.32979	0.72370	1.34632
48	0.73732	1.32585	0.72635	1.34218
49	0.73981	1.32205	0.72892	1.33818
50	0.74222	1.31838	0.73142	1.33431
51	0.74457	1.31482	0.73385	1.33057
52	0.74685	1.31137	0.73621	1.32694

# Table N. Lower and upper 95% and 96% confidence limit factors for a death rate based on a Poisson variable of 1 through 99 deaths, D or $D_{adj}$

$D$ or $D_{adj}$	L(1- a=.95, <i>D</i> )	U(1- a =.95, <i>D</i> )	L(1- a =.96, <i>D</i> ) or L(1- a =.96, $D_{adj}$ )	U(1- a =.96, <i>D</i> ) or U(1- a =.96, <i>D</i> <sub>adj</sub> )
			$E(1, u = .50, D_{adj})$	$O(1 \ a = .90, D_{adj})$
53	0.74907	1.30802	0.73851	1.32342
54	0.75123	1.30478	0.74075	1.32002
55	0.75334	1.30164	0.74293	1.31671
56	0.75539	1.29858	0.74506	1.31349
57	0.75739	1.29562	0.74713	1.31037
58	0.75934	1.29273	0.74916	1.30734
59	0.76125	1.28993	0.75113	1.30439
60	0.76311	1.28720	0.75306	1.30152
61	0.76492	1.28454	0.75494	1.29873
62	0.76669	1.28195	0.75678	1.29601
63	0.76843	1.27943	0.75857	1.29336
64	0.77012	1.27698	0.76033	1.29077
65	0.77178	1.27458	0.76205	1.28826
66	0.77340	1.27225	0.76373	1.28580
67	0.77499	1.26996	0.76537	1.28340
68	0.77654	1.26774	0.76698	1.28106
69	0.77806	1.26556	0.76856	1.27877
70	0.77955	1.26344	0.77011	1.27654
71	0.78101	1.26136	0.77162	1.27436
72	0.78244	1.25933	0.77310	1.27223
73	0.78384	1.25735	0.77456	1.27014
74	0.78522	1.25541	0.77598	1.26810
75	0.78656	1.25351	0.77738	1.26610
76	0.78789	1.25165	0.77876	1.26415
77	0.78918	1.24983	0.78010	1.26223
78	0.79046	1.24805	0.78143	1.26036

# Table N. Lower and upper 95% and 96% confidence limit factors for a death rate based on a Poisson variable of 1 through 99 deaths, D or $D_{adj}$

D or $D_{adj}$	L(1- a=.95, <i>D</i> )	U(1- a =.95, <i>D</i> )	L(1- a =.96, <i>D</i> ) or L(1- a =.96, <i>D</i> <sub>adj</sub> )	U(1- a =.96, <i>D</i> ) or U(1- a =.96, <i>D</i> <sub>adj</sub> )
79	0.79171	1.24630	0.78272	1.25852
80	0.79294	1.24459	0.78400	1.25672
81	0.79414	1.24291	0.78525	1.25496
82	0.79533	1.24126	0.78648	1.25323
83	0.79649	1.23965	0.78769	1.25153
84	0.79764	1.23807	0.78888	1.24987
85	0.79876	1.23652	0.79005	1.24824
86	0.79987	1.23499	0.79120	1.24664
87	0.80096	1.23350	0.79233	1.24507
88	0.80203	1.23203	0.79344	1.24352
89	0.80308	1.23059	0.79453	1.24201
90	0.80412	1.22917	0.79561	1.24052
91	0.80514	1.22778	0.79667	1.23906
92	0.80614	1.22641	0.79771	1.23762
93	0.80713	1.22507	0.79874	1.23621
94	0.80810	1.22375	0.79975	1.23482
95	0.80906	1.22245	0.80074	1.23345
96	0.81000	1.22117	0.80172	1.23211
97	0.81093	1.21992	0.80269	1.23079
98	0.81185	1.21868	0.80364	1.22949
99	0.81275	1.21746	0.80458	1.22822

# Table N. Lower and upper 95% and 96% confidence limit factors for a death rate based on a Poisson variable of 1 through 99 deaths, D or $D_{adj}$

NOTE: Table N was generated using the SAS<sup>®</sup> code below. Users can compute other level Confidence Intervals by changing the alpha-value. Table N is a modified version of Table 40 (52).

```
* Program to compute confidence intervals for expectations of Poisson variables ;
* Specify alpha for alpha*100% Confidence Interval ;
%let alpha = .95;
data CI ;
    alo = (1-&alpha)/2 ;
    ahi = (&alpha+1)/2 ;
do n = 1 to 99;
L = Gaminv ( alo,n )/n ;
U = Gaminv ( alo,n )/n ;
U = Gaminv ( ahi,n+1)/n ;
output;
end;
proc print data= CI;
var n L U ;
run;
```