

Draft
ICD-10 MICAR200 Input Record Format

Variable	Position	Len	Description
Data Year	01-04	4	0000-9999 (Numeric) Year of Death
State Code	05-06	2	Numeric, see MICAR Instruction Manual 2g, Appendix A
Certificate Number	07-12	6	6-digit number, padded with 0's on left
Coder Status	13	1	Numeric: Valid codes 0 - 9
Lot	14-17	4	NCHS ID Information Numeric, 0001-9999
Section Number	18	1	NCHS ID Information Numeric, 0-9
Shipment Number	19-21	3	NCHS ID Information Alpha/Numeric
Receipt Date	22-27	6	NCHS ID Information Data inserted at the time file is received by NCHS
PGM Version Control	28-31	4	Super-MICAR/PC-MICAR version number
Manner of Death	32	1	Accident 1 Suicide 2 Homicide 3 Pending Investigation 4 Could Not Determine 5 Self-Inflicted 6 Natural 7 Not Specified blank

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Variable	Position	Len	Description
Injury Place	33	1	Home A
			Farm B
			Residential Institution C
			Military Residence D
			Hospital E
			School, Other Institution, Administrative Area F
			Industrial & Construction G
			Garage/Warehouse H
			Trade and Service Area I
			Mine/Quarry J
			Street/Highway K
			Public Recreation Area L
			Institutional Recreation Area M
			Sports & Athletics Area N
			Other Building O
			Other Specified Place P
			Unspecified Place Q
Blank blank			
Activity Code	34	1	While Engaged in Sports Activity 0
			While Engaged in Leisure Activity 1
			While Working for Income 2
			While Engaged in Other types of Work 3
			While Resting, Sleeping, Eating (vital Activities) 4
			While Engaged in Other specified Activities 8
			During Unspecified Activity 9
			Not applicable blank
Sex of Decedent	35	1	Male 1
			Female 2
			Not Classifiable 9

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Variable	Position	Len	Description
Month of Death	36-37	2	Numeric, 01 - 12 Not classifiable.....99
Day of Death	38-39	2	Numeric, 01 - 31 Not classifiable.....99
Age Unit	40	1	years < 100 0 years => 100 1 months 2 weeks 3 days 4 hours 5 minutes 6 Not classifiable 9
Number of Units	41-42	2	Numeric, age value
Date of Injury Month (2) Day (2) Year (4)	43-50	8	Numeric or blank if no injury reported. If any portion is not reported 99
Injury at Work	51	1	Yes Y No N Otherwise blank
Date of Surgery Month (2) Day (2) Year (4)	52-59	8	Numeric or blank if no Surgery reported. If any portion is not reported 99
Maximum Conditions Flag	60	1	More than 20 conditions reported or incomplete data in SuperMICAR 1 Otherwise blank

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Variable	Position	Len	Description
Condition Codes	61-219	150	Maximum of 15 codes, 10 positions for each code Position 1-2: Line Number Position 3-4: Position on Line Position 5-10: Entity Reference No.
Duration Codes	211-315	105	Maximum of 15 codes, 7 positions for each code Position 1-2: Line Number Position 3-4: Position on Line Position 5-7: Duration
Number of Codes on Each Line	315-338	24	12 2-digit codes
Lowest Used Line in Part I	339-340	2	Numeric, 01-09
Absolute Lowest Used Line	341-342	2	Numeric, 01-12
Instruction Flag (1)	343	1	Cancer Secondary 1
Instruction Flag (2)	344	1	Part II Information from Manner of Death Box 1
Instruction Flag (3)	345	1	Reserved
State Specific Data	319-348	30	Optional Any information entered through PC-MICAR or SuperMICAR for state use. Data is retained by Mortality Medical Data System.

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