



Recording the Past: A History of Vital Records

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Why record vital events?

- Allows for the appropriate payment of taxes
- Permits the enforcement of conscription
- Provides proof of age and citizenship
- Assures the proper disposition of property
- Serves to shape medical and public policies



Bronze Age Mesopotamia Cuneiform tablet



Birth Certificate on a
wax tablet
Latin and Greek
128 AD

Source: University of Michigan
Library - P.Mich.Inv 766

English Domesday book



In ~~CHESTERBERIE~~ hō. ē Ingleflor qđ ten' polcehard
de Wille. i. hōd cū. i. bord. Val. iii. sol.
7 Alured hō. i. hōd in eod' cō. 7 i. car' in dñio. Val. xv. sol.
7 Godebold. i. hōd 7 dim' cū. iii. bord. Val. x. solē.
7 Radulf' de felgerf. ii. hōd 7 dim'. que iacuer' in Ingepene
sic dicit scira.

In Mercobā hō.

BENEDI' nepos. R. de perone ten' Apletone. de feudo ep'i bano
Aluim' tenent de rege. E. Tō se defit p. v. hōd. modo p. ii. hōd
7 dimid'. Tra. ē. iii. car'. In dño. ē una. 7 iii. uilli 7 v. bord'
cū. i. car' sibi. iii. serui. Valur. iii. lib. 7 post. In sol. m. l. sol.

RODBERT' ten. de rege Ingeflor.
Duo tami tenuer' de R. f. p. ii. cō. Tē 7 m. p. iii. hōd. Terra.
lib. i. car' in dñio. lib. i. uill'. 7 iij. bord'. cū. i. car'. 7 i. serui.
7 iii. ac' p'ri. 7 p'ua silua. Valur. xix. sol' 7 p'. xx. 7 m' sunt

Elaci' qđ femina conde rege in elemosina unā ē. In GAMES
Ipla tenent i. h. E. Tē geld' p' una ē qre. in p' nichulo. Telle hōd.
Valur. xxx. denar. Modo. xii. denar. In Ucehā hō.
Aluim' tenent i. h. E. qre chebā. 7 defit se p. i. hōd. In ten'
Tra. i. car'. sibi. iii. uill'. Val. xx. solē.

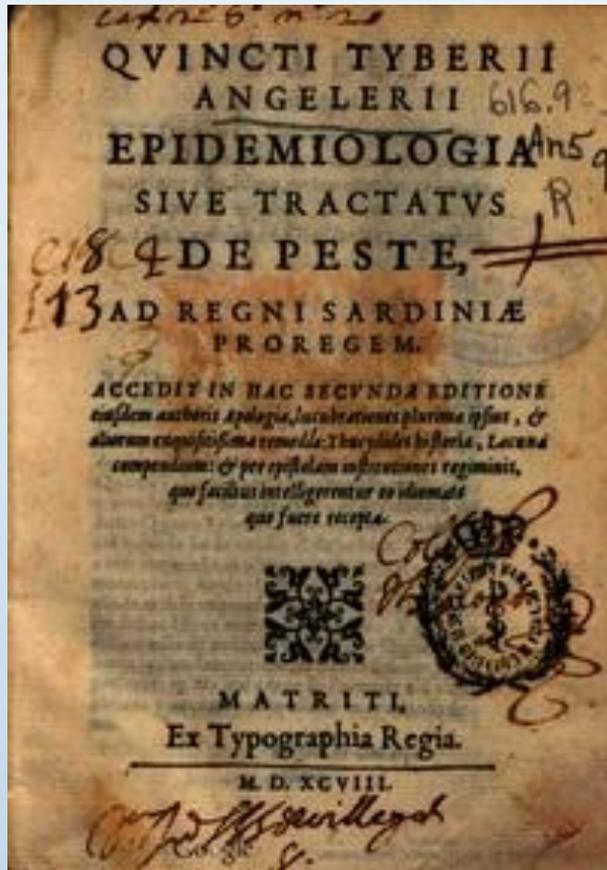


Beginning of death registration Italian States – 15th Century

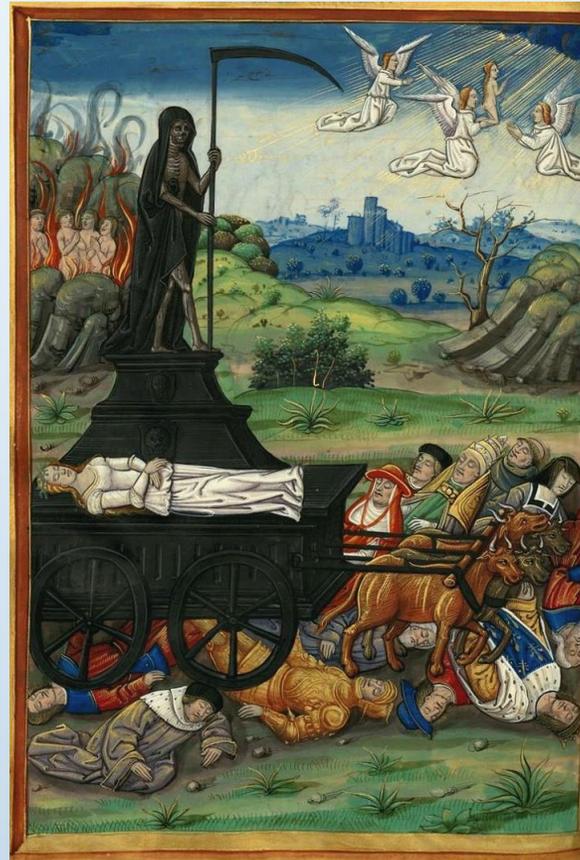


Bad Government and the Effects of Bad Government on the City Life by Ambrogio Lorenzetti (1338-40)

Death registration expands during crises of public health



Quinto Tiberio Angelerio and New Measures for Controlling Plague in 16th-Century Alghero, Sardinia



Petrarch's Triumph of Death, 16th century



Dance of Death from Hartman Schedel's Chronicle of the World (1493)

Development of Death Certification



Anatomy Lesson of Dr. Nicolaes Tulp, by Rembrandt



Doktor Schnabel von Rom
Engraving by Paul Fürst, 1656

MEMENTO MORI

LONDON'S Dreadful Visitation:
Or, A COLLECTION of All the
Bills of Mortality
For this Present Year:
Beginning the 27th of December 1664. and
ending the 19th. of December following:
As also, The GENERAL or whole years BILL:
According to the Report made to the
KING'S Most Excellent Majesty,
By the Company of Parish-Clerks of London. &c

LONDON:
Printed and are to be sold by E. Cotes living in Aldersgate-street.
Printer to the said Company 1665.

Illustration From Oxford Science / Getty

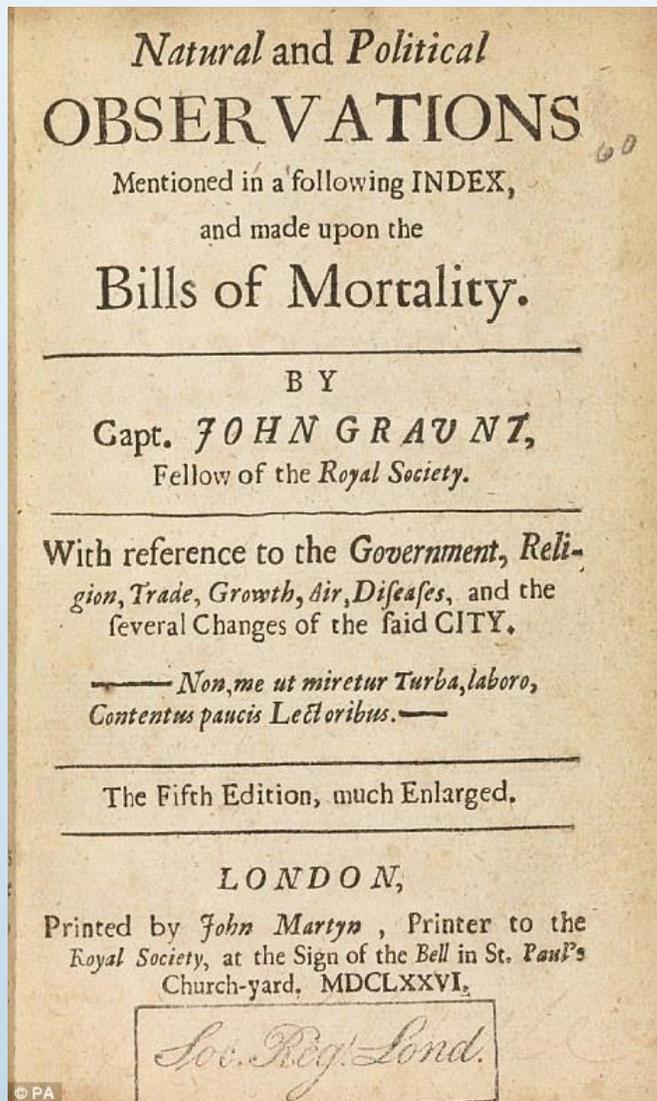
English Bills of Mortality 16th and 17th century

A general Bill for this present year,
ending the 19 of December 1665. according to
the Report made to the KING'S most Excellent Majesty.
By the Company of Parish Clerks of London, &c.

Parish	Parish	Parish	Parish
St Albans Woodstreet 100	St Clements Eastcheap 28	St Margaret Mole 18	St Michael Cornhill 104
St Allhallows Barkin 134	St Dunns Backchurch 28	St Margaret Newfish 112	St Michael Crooked 179
St Allhallows Beauld 17	St Dunns East 165	St Margaret Pattens 49	St Michael Quench 103
St Allhallows Great 415	St Edmunds Lombard 70	St Mary Abchurch 49	St Michael Que ne 141
St Allhallows Hous 10	St Ethelborough 195	St Mary Aldermanbury 131	St Michael Roy al 43
St Allhallows Lette 119	St Faiks 104	St Mary Aldemary 105	St Michael Woodstreet 113
St Allhallows Lumbard 50	St Gabriel 134	St Mary le Bow 64	St Michael Woodstreet 59
St Allhallows Station 185	St Gabriel Fen church 69	St Mary Bowke 10	St Michael Woodstreet 46
St Allhallows the Walk 500	St George Botolphsh 41	St Mary Colchurch 17	St Nicholas Acon 66
St Alphage 171	St Gregories by Paul 176	St Mary Hill 94	St Nicholas Coleabb 115
St Andrew Hubbard 71	St Helens 108	St Mary Mounthaw 16	St Nicholas Oluce 90
St Andrew Undershaft 174	St James Dukes place 161	St Mary Summerhit 34	St Olives Hurler 517
St Andrew Wardrobe 476	St James Guildhal 180	St Mary Spinning 47	St Olives Jewry 54
St Anne Aldersgate 153	St John Baptis 135	St Mary Woolchurch 65	St Olives Saboth 10
St Anne Blacke Friars 613	St John Evangelis 9	St Mary Woodbith 75	St Pancras Sopelane 10
St Antholus Parith 53	St John Zacharie 81	St Martins Ironmonger 11	St Peters Cheap 61
St Auflus Parith 41	St Katherine Coleman 199	St Martins Ludgate 196	St Peters Cornhill 116
St Bartholomew 191	St Katherine Creech 135	St Martins Organs 71	St Peters Vinsaffe 114
St Bennet Fynck 41	St Lawrence Jewry 94	St Martins Outwich 60	St Peters Dooc 47
St Bennet Gracechurch 57	St Lawrence Poultry 114	St Martins Vintry 417	St Stevens Colman 160
St Bennet Pauls Wharf 155	St Leonard Eastcheap 41	St Matthew Friday 24	St Stevens Walbrooke 14
St Bennet Sherehog 11	St Leonard Fofflane 115	St Matthias Millstreet 44	St Thomas 17
St Bonolth Billinggate 81	St Magnus Parith 191	St Matthias Oldfish 176	St Thomas Apostle 163
St Christ Church 613	St Margaret Lothbury 100	St Michael Bassishaw 153	St Thomas Parith 115
St Christophers 60			

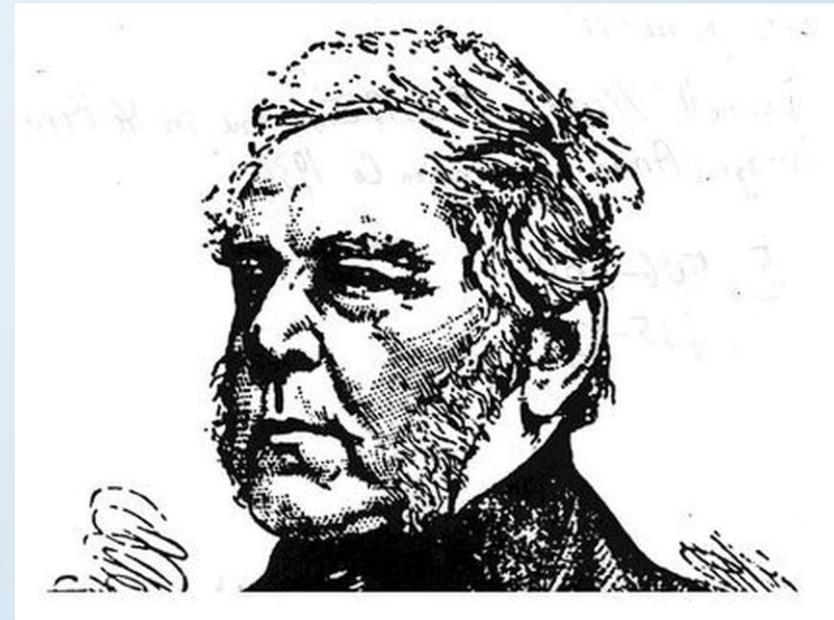
Burials the 16 Parishes within the walls 15107 whereof of the Plague 9887

Parish	Parish	Parish	Parish
St Andrew Holborn 1918	Bridwell Precinct 179	St Dunlans Well 198	St Saviours Southwark 412
St Bartholomew Great 491	St Dunlans East 161	St George Southwark 101	St Sepulchres Parith 409
St Bartholomew Lette 91	St Dunlans West 161	St Giles Cripplegate 806	St Thomas Southwark 171
St Botolph 111	St Dunlans North 161	St Giles Cornhill 428	St Trinity Minster 157
St Botolph Aldersgate 401	St Dunlans South 161	St Giles Parith 178	St Vintry 156
St Botolph Bishopsgate 1464	St Dunlans West 161	St Giles Southwark 479	St Vintry 156
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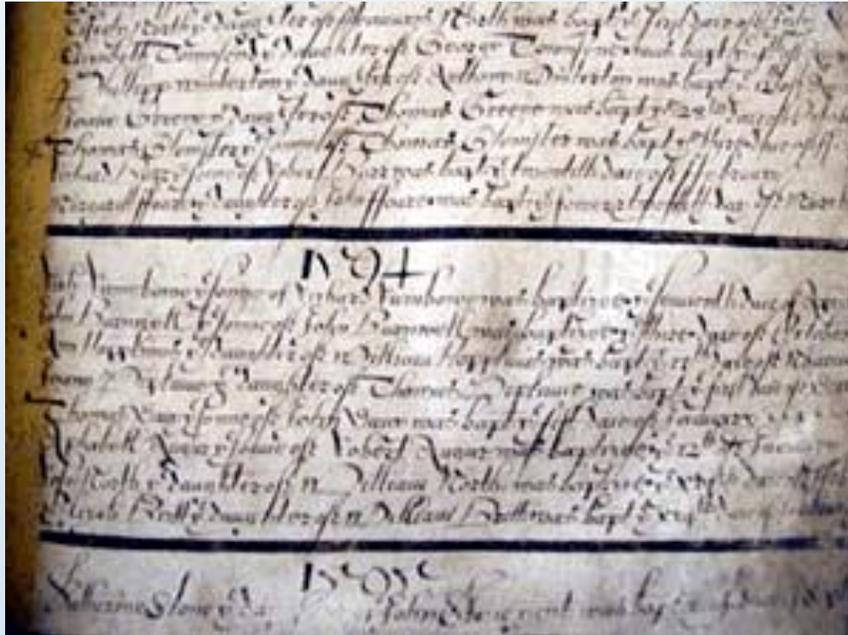


John Graunt
 April 24, 1620 – April 18, 1674

- One of the first demographers
- Used the Bills of Mortality and parish records to estimate population trends and list the frequencies of various causes of death



Starved				1
Stitch				1
Stone and Strangury	45	42	29	28
Sciatica				
Stopping of the Stomach	29	29	30	33
Surfet	217	137	136	123
Swine-Pox	4	4	3	
Teeth and Worms	767	597	540	598
Tiffick	62	47		
Thrush				
Vomiting	1	6	3	7
Worms	147	107	105	65
Wen	1		1	
Suddenly				



Anglican Parish Register - Ridgmont



Worcestershire Parish Register

Recording of Births in 16th-Century England

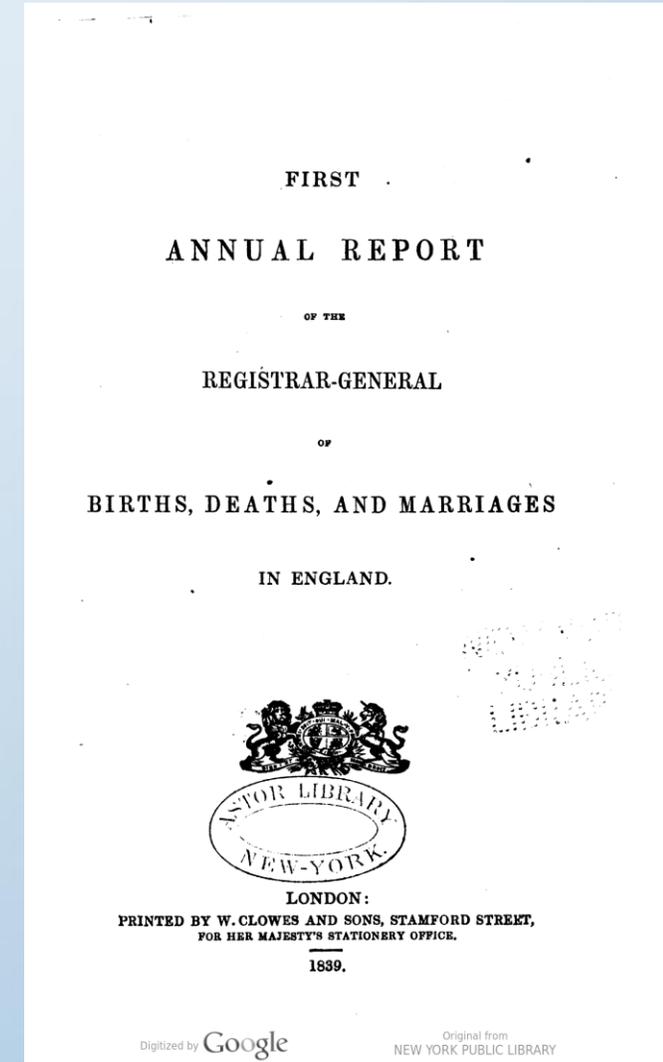


Fraktur – Pennsylvania Deitsch or Pennsylvanian German stylized birth records

William Farr
November 30, 1807 – April 14, 1883
British epidemiologist



- developed the first national vital statistics system and assured its use as a surveillance instrument
- facilitated the use of surveillance for the conduct of epidemiologic studies
- crafted a disease nosology usable by vital statisticians and epidemiologists that led to the creation of the ICD



U.S. Bureau of the Census

THE STANDARD CERTIFICATE OF BIRTH.

DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS
STANDARD CERTIFICATE OF BIRTH

PLACE OF BIRTH
County of _____
Township of _____
Village of _____
City of _____ (No. _____ St.; _____ Ward)

Registered No. _____
(If child is not yet named, make supplemental report, as directed)

FULL NAME OF CHILD _____

Sex of Child	Twins, triplet, or other?	Number in order of birth	Legitimate?	Date of birth
	(To be answered only in event of plural births)			(Month) (Day) (Year) 19__

FATHER		MOTHER	
FULL NAME	RESIDENCE	FULL MAIDEN NAME	RESIDENCE
COLOR	AGE AT LAST BIRTHDAY (Years)	COLOR	AGE AT LAST BIRTHDAY (Years)
BIRTHPLACE	OCCUPATION	BIRTHPLACE	OCCUPATION
Number of children born to the mother, including present birth _____		Number of children of this mother now living _____	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of this child, who was _____ at _____ M., on the date above stated.

(Signature) _____
(Physician or Midwife)

Given name added from a supplemental report _____, 19__
Address _____
Filed _____, 19__

RECORDED 11-315 REGISTERED

(Instructions on certain points may be printed on the back. Size of certificate, 6 1/2 x 11 inches.)
MARGIN RESERVED FOR BINDING
WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD
N. B.—In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each, in order of birth, stated.

COMMONWEALTH OF MASSACHUSETTS 451

RETURN OF A DEATH

FULL NAME Catherine Curran Registered No. 205
Place of Death* Hoburn Place 56 Park Street
Date of Death October 3 1903 Age 33 years — months — days

STATISTICAL DETAILS			PHYSICIAN'S CERTIFICATE		
SEX	COLOR	SINGLE, MARRIED, WIDOWED, OR DIVORCED	I HEREBY CERTIFY that I attended deceased during last illness, from <u>Sept. 25 1902</u> to <u>Oct. 3 1903</u> , that to the best of my knowledge and belief death occurred on the date stated above, and that the CAUSE OF DEATH was as follows:		
<u>Female</u>	<u>White</u>	<u>Married</u>	Primary: <u>Dilatation of Heart</u>		
MAIDEN NAME †	<u>Catherine Flaherty</u>		Contributory: <u>Dysentery</u>		
HUSBAND'S NAME †	<u>Thomas Curran</u>		(Signed) <u>Wm. C. Ketcher, M.D.</u>		
BIRTHPLACE †	<u>Ireland</u>		<u>Oct. 4 1903</u> Address <u>Hoburn 44 Pleasant St.</u>		
NAME OF FATHER	<u>Thomas Flaherty</u>		SPECIAL INFORMATION only for Hospitals, Institutions, Transients, or Recent Residents.		
BIRTHPLACE OF FATHER †	<u>Ireland</u>		Former or Usual Residence _____ Now long at Place of Death? _____ Days		
MAIDEN NAME OF MOTHER	<u>Hannah Conlon</u>		Where was disease contracted, if not at place of death? _____		
BIRTHPLACE OF MOTHER †	<u>Ireland</u>		Filed <u>Oct. 12 1903</u> <u>Wm. K. Finn</u> Clerk		
OCCUPATION	<u>Housewife</u>		* City or town, street and number, if any. If death occurs away from USUAL RESIDENCE, give both called for under "Special Information." If in a Hospital or Institution, give its NAME instead of street and number.		
INFORMANT †	<u>Husband</u>		1 In case of married or divorced woman, or widow.		
PLACE OF BURIAL OR REMOVAL †	<u>Cemetery, Hoburn</u>		2 State or country; also city, town or county, if known.		
DATE OF BURIAL	<u>Oct. 6 1903</u>		3 Name and address of person giving statistical details.		
UNDERTAKER	<u>Edward J. McLaughlin 46 States St.</u>		4 Name of cemetery.		

MARGIN RESERVED FOR BINDING
FILL OUT WITH INK.—THIS IS A PERMANENT RECORD
ALL NAMES TO BE IN FULL

History of Texas Vital Registration

TEXAS STATE BOARD OF HEALTH
1881
Certificate of Birth

Reg. No. Town GALVESTON
County GALVESTON

Date of Birth Jan 15 - 1913 Name of Child Rosablatt Moses
Sex Male Race or Color Hebrew Legitimate or Otherwise Live or Stillborn alive

Name of Father Abraham David Rosenblatt
Maiden Name of Mother Fannie Miller
Residence of Parents GALVESTON, Texas
Occupation of Father Butcher
Name and Residence of Person Reporting Mrs. W. Sarbaner

Permanent Record. Write plainly with unfading ink. Place 1-cent stamp within 5 days to City Registrar if birth occurs in incorporated town, otherw...





"Rhodes Mfg. Co., Lincolnton, N.C. Spinner..." Photo by Lewis Hine, 1908 Nov.

(To Be Tacked Inside of a Privy and NOT Torn Down.)

Sanitary Privies Are Cheaper Than Coffins



For Health's Sake let's keep this Privy CLEAN. Bad privies (and no privies at all) are our greatest cause of disease. Clean people or families will help us keep this place clean. It should be kept so clean as the house because it spreads more diseases.

The User Must Keep It Clean Inside. Wash the Seat Occasionally

How to Keep a Safe Privy:

1. Have the back perfectly screened against flies and animals.
2. Have a hinged door over the seat and keep it CLOSED when not in use.
3. Have a bucket beneath to catch the Excreta.
4. VENTILATE THE VAULT.
5. See that the privy is kept clean inside and out, or take the blame on yourself if some member of your family dies of Typhoid Fever.

Some of the Diseases Spread by Filthy Privies:

Typhoid Fever, Bowel Troubles of Children, Dysentery, Hookworms, Cholera, some Tuberculosis.
The Flies that You See in the Privy Will Soon Be in the Dining Room.

Walker County Board of Health

U S ARMY

THIS IS TO IDENTIFY— (AGENCY)

Harold T. Hancock
(FIRST NAME) (MIDDLE NAME) (LAST NAME)

W July 29, 1913 Brown 5 FT. 10 IN.
(RACE) (BIRTH DATE) (COLOR EYES) (HEIGHT)

Harold T. Hancock
(SIGNATURE OF BEARER)

Emory Jr **20 44 KILMER**
(MILITARY AUTHORIZATION—SIGNATURE) (DATE) (PLACE)

FOLD HERE

FINGERPRINTS—RIGHT HAND

THUMB

INDEX MIDDLE

HAROLD T HANCOCK

16-28605-1

Form 88-5
TREASURY DEPARTMENT
INTERNAL REVENUE SERVICE

U. S. SOCIAL SECURITY ACT
APPLICATION FOR ACCOUNT NUMBER **282-01-5483**

PRINT NAME **JOHN SZUCS - JR 200**

(EMPLOYEE'S FIRST NAME) (MIDDLE NAME) (LAST NAME)

15633 NORMANDY AV CLEVELAND OHIO
(STREET AND NUMBER) (CITY) (STATE)

HANKINS CONTAINER Co. 3044 W. 106 ST CLEVELAND, OHIO
(BUSINESS NAME OF PRESENT EMPLOYER) (BUSINESS ADDRESS OF PRESENT EMPLOYER)

30 1 JAN 13 1906 RUSH RUN OHIO
(AGE AT LAST BIRTHDAY) (DATE OF BIRTH: (MONTH) (DAY) (YEAR) (SUBJECT TO LATER VERIFICATION)) (PLACE OF BIRTH)

JOHN SZUCS THERESA STOKAN
(FATHER'S FULL NAME) (MOTHER'S FULL MAIDEN NAME)

SEX: MALE FEMALE (CHECK (1) WHICH)

COLOR: WHITE NEGRO OTHER (CHECK (1) WHICH) (SPECIFY)

IF REGISTERED WITH THE U. S. EMPLOYMENT SERVICE, GIVE NUMBER OF REGISTRATION CARD _____

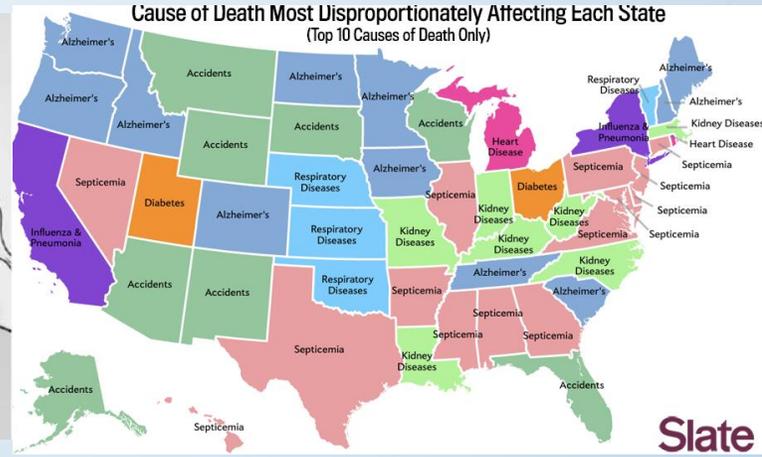
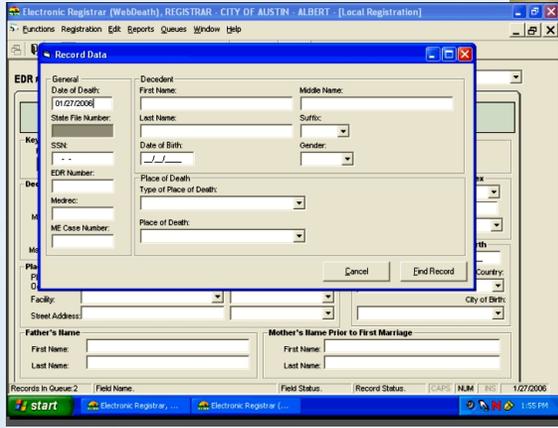
IF YOU HAVE PREVIOUSLY FILLED OUT A CARD LIKE THIS, STATE (PLACE) (DATE)

Dec. 4 1936 **John Szucs Jr**
(DATE SIGNED) (EMPLOYEE'S SIGNATURE, AS USUALLY WRITTEN)

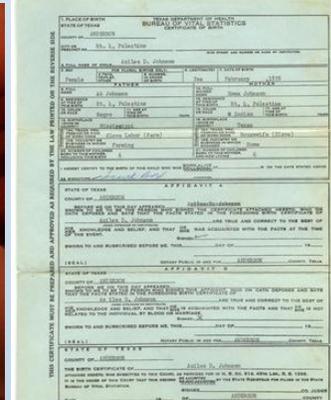
DETACH ALONG THIS LINE

Increased Need For Identifying And Statistical Info

Medical ID Card (1st pattern, folded leather-effect) of T/4 Harold T. Hancock (ASN:32666624) who served with the 96th Evacuation Hospital



Problems with Birth and Death Registration



Movement Of Vital Statistics To Public Health Service



family receives inoculations against typhoid fever.
c. 1930

https://www.nlm.nih.gov/exhibition/phs_history/fighting.html



A Public Health Service nurse teaches a mother how to
prepare a feeding formula for her infant.
c. 1920

Changes in Statistical Measures of Birth

A 1147—CERTIFICATE OF BIRTH—Class 2—(Acts 1903, p. 220.) TEXAS STANDARD FORM.

Town _____ STATE OF TEXAS
 County _____ Department of Public Health and
 Vital Statistics Clerk's Reg. No. _____ **45**

1. Date of Birth *Jan 19-1910* 2. Name of Child *John Wittle*
 3. Sex *Male* 4. Race or Color *White* 5. Legitimate or Otherwise *Leg. —*
 6. Alive or Stillborn *Alive* 7. Place of Birth *Burleigh*
 8. Name of Father *Paul Wittle* 9. Nationality *U.S.*
 10. Maiden Name of Mother *Mina Negro* 11. Nationality *U.S.*
 12. Residence of Parents *Burleigh* Town *Tex* State or Country *U.S.*
 13. Occupation of Father *Farmer*
 14. Name and Residence of Person Reporting *H. W. Brown*

Form prescribed by State Health Officer.

Key changes in the data captured by the birth certificate from early 1900's through 2003

Early 1900's	<ul style="list-style-type: none"> •Content primarily related to the date and address of birth, whether there was a multiple gestation, mother's age and race, legitimacy, paternal name and age, previous live births
1949	<ul style="list-style-type: none"> •Birth weight and length of pregnancy were added
1968	<ul style="list-style-type: none"> •Dating of the pregnancy based on last menstrual period (LMP) was added as the 1960's saw the birth of the field of Neonatology •Inclusion of questions on prenatal care
1979	<ul style="list-style-type: none"> •Changed to collecting the mother's <u>marital status</u>, dropping the more judgmental "legitimate" •Apgar scores were added, 26 years after Virginia Apgar developed the test to assess the health of newborn babies •Terminations of pregnancy (spontaneous or induced) were added as induced abortions became legalized in January of 1973 (Roe v Wade)
1989	<ul style="list-style-type: none"> •Clinical estimation of gestational age, maternal medical risk factors, whether the mother and father were of Hispanic origin, smoking and alcohol use, as well as methods and complications of delivery and obstetrical procedures •First use of checklists
2003	<ul style="list-style-type: none"> •More details on smoking (by trimester), obesity (before/after pregnancy weight and height), infertility (fertility treatments or ART), nutrition (use of WIC program, breastfeeding at discharge), and maternal morbidities related to labor/delivery (such as transfusion and ruptured uterus)

TEXAS DEPARTMENT OF HEALTH
 BUREAU OF VITAL STATISTICS
 STANDARD CERTIFICATE OF BIRTH

STATE OF TEXAS
 COUNTY OF *Andrews* NO. *002* REGISTRAR'S NO. *One*

CITY OR PRECINCT NO. *Andrews* NO. _____ ST. _____
 IF IN AN INSTITUTION, GIVE NAME OF INSTITUTION INSTEAD OF STREET AND NUMBER

1. PLACE OF BIRTH _____
 2. FULL NAME OF CHILD *Mary Sue*
 3. SEX *Female* 4. TWIN, TRIPLET, OR OTHER _____ 5. NUMBER, IN ORDER OF BIRTH _____
 6. PREMATURE FULL TERM *Yes* 7. LEGITIMATE? *Yes* 8. DATE OF BIRTH *January 9 1940*

9. FULL NAME OF FATHER *Aaron Monroe Watkins* 10. RESIDENCE *Andrews, Texas*
 11. COLOR OR RACE *Caucasian* 12. AGE AT LAST BIRTHDAY *40* (YEARS)
 13. BIRTHPLACE (CITY OR PLACE) (STATE OR COUNTRY) *Liberty County, Texas*
 14. TRADE, PROFESSION, OR KIND OF WORK DONE *Farmer (All his life)*
 15. INDUSTRY OR BUSINESS IN WHICH WORK WAS DONE *Farm*
 16. DATE LAST ENGAGED IN THIS WORK *at present* 17. TOTAL TIME (YEARS) SPENT IN THIS WORK *All his life*
 18. FULL MAISEN NAME OF MOTHER *Cynthia Myrtle Guthrie* 19. RESIDENCE *Andrews, Texas*
 20. COLOR OR RACE *Caucasian* 21. AGE AT LAST BIRTHDAY *40* (YEARS)
 22. BIRTHPLACE (CITY OR PLACE) (STATE OR COUNTRY) *San Antonio, Texas*
 23. TRADE, PROFESSION, OR KIND OF WORK DONE *Housekeeper*
 24. INDUSTRY OR BUSINESS IN WHICH WORK WAS DONE *Own home*
 25. DATE LAST ENGAGED IN THIS WORK *At present,* 26. TOTAL TIME (YEARS) SPENT IN THIS WORK *20 yrs.*

27. (A) NUMBER OF CHILDREN OF THIS MOTHER INCLUDING THIS CHILD *4* (B) BORN ALIVE AND NOW LIVING *8* (C) BORN ALIVE BUT NOW DEAD *2* (D) STILLBORN *0*
 28. IF STILLBORN, PERIOD OF GESTATION _____ HOURS _____ WEEKS 29. CAUSE OF STILLBIRTH _____ BEFORE LABOR _____ DURING LABOR _____

WERE PROPHYLACTIC PRECAUTIONS TAKEN TO PREVENT OPHTHALMIA NEONATORUM? Yes *Yes* No _____
 I HEREBY CERTIFY THAT I ATTEND TO THE BIRTH OF THIS CHILD WHO WAS BORN ALIVE AT *4:17 AM* ON THE DATE STATED ABOVE.
 (SIGNATURE) *John D. ...*
 GIVEN NAME ADDED FROM A SUPPLEMENTARY REPORT _____ ADDRESS *Andrews, Texas*
 REPORT _____ 19 _____ FILED *2-7* 19*40* REGISTERAR. LOCAL REGISTRAR.

Changes in Statistical Measures of Death

016-0-0-1 016-0-0 CERTIFICATE OF DEATH 4201 25 43134

STATE OF TEXAS

1. PLACE OF DEATH
 a. COUNTY Blanco.
 b. CITY OR TOWN (If outside city limits, give precinct no.) Johnson City.
 c. LENGTH OF STAY in l. b. _____
 d. NAME OF (If not in hospital, give street address) HOSPITAL OR INSTITUTION Miller Creek.
 e. IS PLACE OF DEATH INSIDE CITY LIMITS? YES NO

2. USUAL RESIDENCE (Where deceased lived, if institution; residence before admission)
 a. STATE Texas. b. COUNTY Blanco.
 c. CITY OR TOWN (If outside city limits, give precinct no.) Johnson City. (Miller Creek)
 d. STREET ADDRESS (If rural, give location) _____
 e. IS RESIDENCE INSIDE CITY LIMITS? YES NO f. IS RESIDENCE ON A FARM? YES NO

3. NAME OF DECEASED (Type or print)
 (a) First Robert Benjamin (b) Middle Felps (c) Last _____
 4. DATE OF DEATH August 17, 1958.

5. SEX Male. 6. COLOR OR RACE White. 7. Married Never Married Widowed Divorced
 8. DATE OF BIRTH Jan. 31, 1912. 9. AGE (In years last birthday) 46 10. UNDER 24 HRS. Months Days Hours Minutes

10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) Welder. 10b. KIND OF BUSINESS OR INDUSTRY Welding Shop.
 11. BIRTHPLACE (State or foreign country) Texas. 12. CITIZEN OF WHAT COUNTRY? U. S. A.

13. FATHER'S NAME Thomas O. Felps. 14. MOTHER'S MAIDEN NAME Claudia Johnson.
 15. WAS DECEASED EVER IN U.S. ARMED FORCES? (If yes, give war or dates of service) No. 16. SOCIAL SECURITY NO. _____
 17. INFORMANT Mrs. Anna Lou Felps. (Wife)

18. CAUSE OF DEATH (Enter only one cause per line for (a), (b), and (c).)
 PART I. DEATH WAS CAUSED BY:
 IMMEDIATE CAUSE (a) CARDIAC TAMPONADE INTERVAL BETWEEN ONSET AND DEATH 3-3 HRS
 DUE TO (b) VENTRICULAR ANEURYSM UNKNOWN
 DUE TO (c) MYOCARDIAL INFARCTION 16-12 HRS
 PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO THE TERMINAL DISEASE CONDITION GIVEN IN PART I (a) _____ 19. WAS AUTOPSY PERFORMED? YES NO

20a. ACCIDENT SUICIDE HOMICIDE 20b. DESCRIBE HOW INJURY OCCURRED. (Enter nature of injury in Part I, and date, time, and place of injury in Part II.)
 20c. TIME OF INJURY Hour _____ Month _____ Day _____ Year _____
 20d. INJURY OCCURRED _____ 20e. PLACE OF INJURY (e.g., in or about home, farm, factory, street, office building, etc.) _____
 20f. CITY, TOWN, OR VILLAGE _____ COUNTY _____ STATE _____

21. I hereby certify that I attended the deceased from 7-17 1958 to 8-17 1958 and last saw the deceased alive on 8-17 1958. Death occurred at 8:30 P. m. on the date stated above, and to the best of my knowledge, from the causes stated.
 22a. SIGNATURE [Signature] 22b. ADDRESS Johnson City, Texas. 22c. DATE SIGNED 8-17-58

23a. BURIAL, CREMATION, REMOVAL (Specify) Burial. 23b. DATE August 19, 1958. 23c. NAME OF CEMETERY OR CREMATORY Miller Creek Cemetery.
 23d. LOCATION (City, town, or county) Johnson City, Texas. 23e. FUNERAL DIRECTOR'S SIGNATURE [Signature]
 24. REGISTRAR'S FILE NO. 313 25. DATE REC'D BY LOCAL REGISTRAR 8-26-1958 26. REGISTRAR'S SIGNATURE [Signature]

105-112, REV. 1/58

Val
Page 24

CAUSE OF DEATH (See instructions and examples)

32. PART I. Enter the chain of events—disease, injuries, or complications—that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. Enter only one cause on a line. Add additional lines if necessary.

IMMEDIATE CAUSE (Final disease or condition resulting in death)
 a. Congestive heart failure Due to (or as a consequence of): _____ 7 years
 b. Coronary heart disease Due to (or as a consequence of): _____ 25 years
 c. _____ Due to (or as a consequence of): _____
 d. _____

33. WAS AN AUTOPSY PERFORMED? Yes No

34. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH? Yes No

35. DID TOBACCO USE CONTRIBUTE TO DEATH? Yes Probably No Unknown

36. IF FEMALE:
 Not pregnant within past year
 Pregnant at time of death
 Not pregnant, but pregnant within 42 days of death
 Not pregnant, but pregnant 43 days to 1 year before death
 Unknown if pregnant within the past year

37. MANNER OF DEATH
 Natural Homicide
 Accident Pending investigation
 Suicide Could not be determined

The **elderly decedent** should have a clear and distinct etiological sequence for cause of death, if possible. Terms such as senescence, infirmity, old age, and advanced age have little value for public health or medical research. Age is recorded elsewhere on the certificate. When a

A sample death certificate and instructional text from the federal Centers for Disease Control and Prevention's "Physicians' Handbook on Medical Certification of Death." (Jonathan Corum/The New York Times)

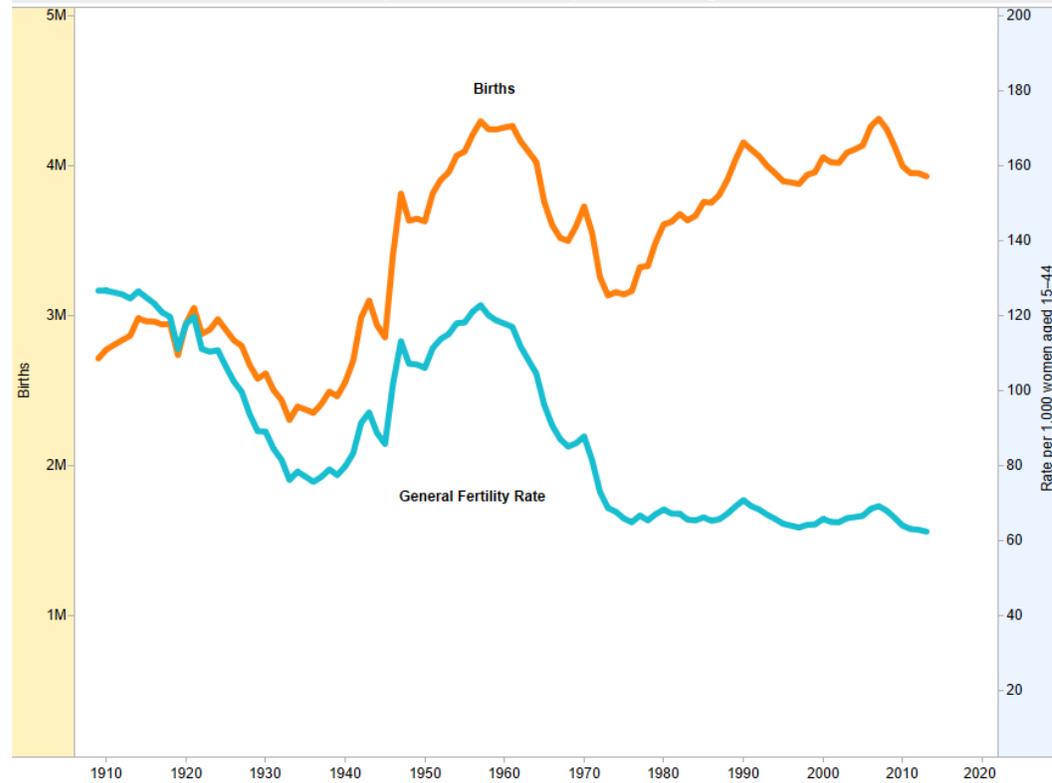
Current national statistics

Nativity Trends in the United States, 1909–2013

- 1. Births and fertility rate
- 2. Birth rates by age of mother
- 3. Percent distribution of births by age
- 4. Natality by race
- 5. Natality by Hispanic origin
- 6. Teen birth rates

Births and General Fertility Rates: United States, 1909–2013†

General fertility rate measures live births per 1,000 women aged 15–44.

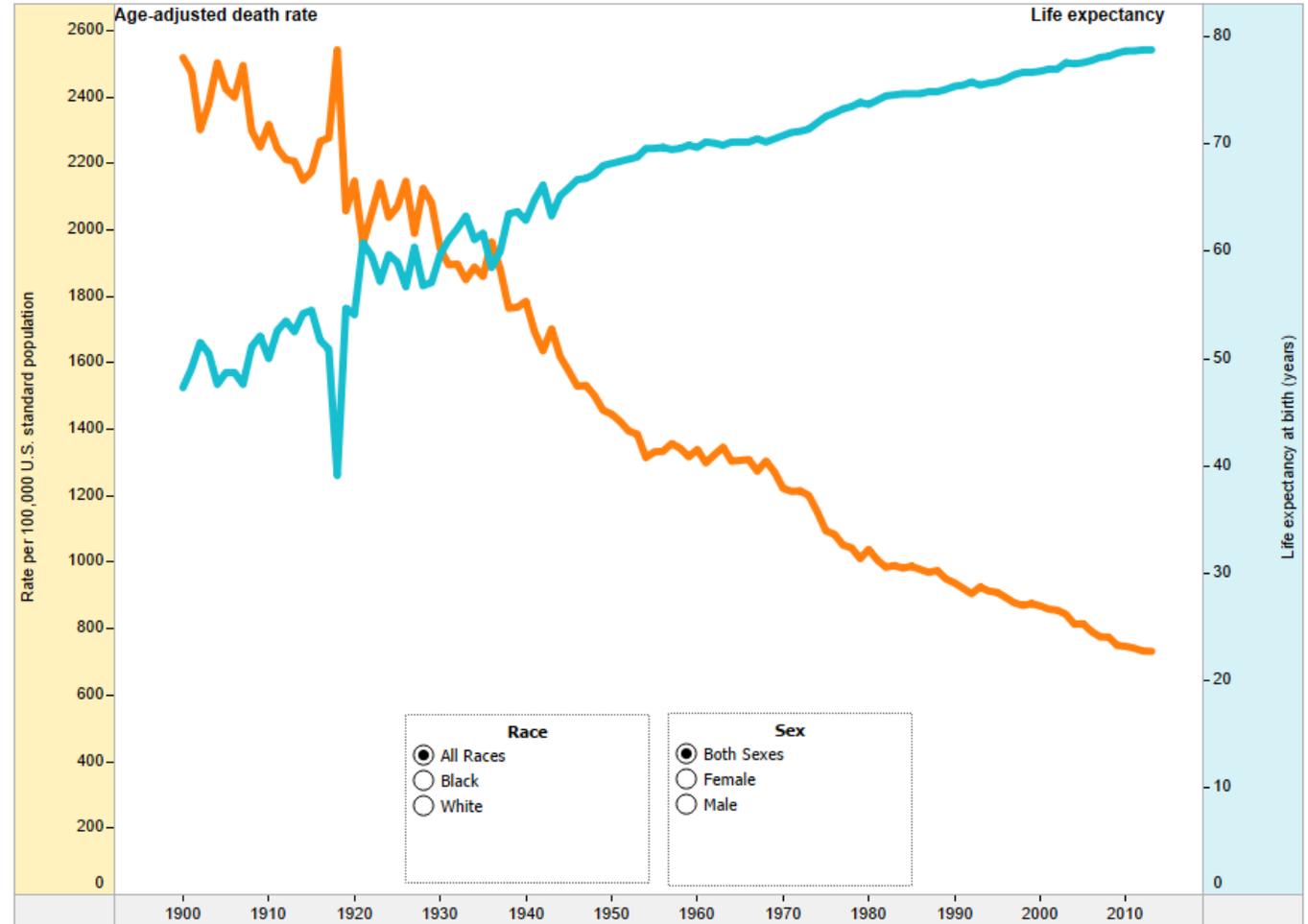


Designed by Li Lu, et al. CDC, National Center for Health Statistics. Source: CDC/NCHS, National Vital Statistics System.

Deaths in the United States, 1900–2013

- 1. Death rates & life expectancy
- 2. Infant and neonatal mortality rates
- 3. Childhood mortality rates by age
- 4. Selected causes of death

Age-adjusted Death Rates and Life Expectancy at Birth, (All Races, Both Sexes): United States, 1900–2013†



- Race**

 - All Races
 - Black
 - White

Sex

 - Both Sexes
 - Female
 - Male

Designed by Yinong Chong et al. CDC, National Center for Health Statistics. Source: CDC/NCHS, National Vital Statistics System.

Current State Statistics



On an Average Day In Texas, 2013

- The Population Increased by 572 Persons. [The rate of natural increase (Births - Deaths)]
- There were 1,061 Resident Births
 - 49 babies had no prenatal care
 - 88 low birth weight babies were born (less than 2,500 grams or less than 5 lbs. 9 oz.)
 - 34 babies were born to teenage mothers (less than 18 years of age)
 - 373 babies were delivered by C-section
- There were 489 Resident Deaths
 - 110 of these deaths were due to heart disease
 - 105 of these deaths were due to cancer
 - 26 of these deaths were due to accidents
 - 6 of these were infant deaths
- There were 491 Marriages
- There were 209 Divorces



Questions?

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direct 512-776-7392
jamie.ross@dshs.state.tx.us

