


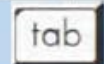


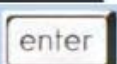











BASIC FETAL DEATH REGISTRATION FOR FUNERAL HOMES



Keyboard Shortcuts

Press T or 	Enters current date in any date field.
Press T and  or 	Enters the current date and you can populate a day before or after.
Tab or 	Moves forward from one box/field to another box/field.
Shift Tab or  + 	Moves backward from one box/field to another box/field.
Enter or 	Activates the next button on the page.
1st Letter of a Word	Enters selection from pick list of a dropdown list. Scroll through that letter.
Space Bar or 	Selects a radio button or check box.
Arrow Keys or  or 	Moves from one radio button to the next. Right to Left or Left to Right.
Down Arrow or 	Opens a dropdown list.
Escape or 	Closes a dropdown list.
Ctrl + S or  + 	Saves the current record.
State Abbreviations	Selects the associated State by typing the first letter.

Diacritical Marks

TxEVER will allow the use of Diacritical Marks. To insert a diacritical mark within a name, Press and Hold the "ALT" key and type the 3 or 4 digit code. Release the "ALT" key and the respective diacritical mark will appear. Example: **ALT+128 = Ç**

ALT Code	Name	ALT Code	Name
128	Ç Diacritical Mark	0200	È Diacritical Mark
142	Ä Diacritical Mark	0205	Í Diacritical Mark
144	É Diacritical Mark	0207	Ï Diacritical Mark
153	Ö Diacritical Mark	0204	Ì Diacritical Mark
154	Ü Diacritical Mark	0211	Ó Diacritical Mark
165	Ñ Diacritical Mark	0210	Ò Diacritical Mark
0193	Á Diacritical Mark	0213	Õ Diacritical Mark
0194	Â Diacritical Mark	0218	Ú Diacritical Mark
0192	À Diacritical Mark	0217	Ù Diacritical Mark
0195	Ã Diacritical Mark	0221	Ý Diacritical Mark
0235	Ë Diacritical Mark		

Login to TxEVER

Login to TxEVER via the web:

<https://txever.dshs.texas.gov/TxEverUI/Welcome.htm>

**TEXAS**
Health and Human
Services

Texas Department of State
Health Services



Welcome to the Texas Department of State Health Services!



Step 1: Click here to
open the TxEVER log in

LOG IN to TxEVER

TxEVER is the vital records registration and issuance software that was developed for Texas Department of State Health Services (DSHS), State Office of Vital Records by Genesis Systems, Inc.
DSHS Vital Records office hours are 8:00 AM - 4:30 PM, Monday - Friday.
State vital records are considered to be private and confidential. Access to vital records is restricted by statute.

Contacting the Texas Department of State Health Services(DSHS)

Telephone Numbers:

Description	Phone Number	Hours
Vital Events Registration System	XXX-XXX-XXXX	8:00 AM - 4:30 PM M-F
Fax Number	XXX-XXX-XXXX	8:00 AM - 4:30 PM M-F
Vital Records - Customer Service	XXX-XXX-XXXX	8:00 AM - 4:30 PM M-F

Mailing Address:

Texas Department of State Health Services
State Office of Vital Records
Address: 1100 West 49th Street,
Austin, TX 78756
Ph. (512) 776-7111

Click here to report
issues with TxEVER

Log on to Texas Department of State Health Services

User Enrollment

Report TxEVER Issue(s)

Click here to enroll OR
update your user account

TxEVER Terms of Use

WARNING: THIS IS A TEXAS HEALTH AND HUMAN SERVICES INFORMATION RESOURCES SYSTEM THAT CONTAINS STATE AND/OR U.S. GOVERNMENT INFORMATION. BY USING THIS SYSTEM YOU ACKNOWLEDGE AND AGREE THAT YOU HAVE NO RIGHT OF PRIVACY IN CONNECTION WITH YOUR USE OF THE SYSTEM OR YOUR ACCESS TO THE INFORMATION CONTAINED WITHIN IT. BY ACCESSING AND USING THIS SYSTEM YOU ARE CONSENTING TO THE MONITORING OF YOUR USE OF THE SYSTEM, AND TO SECURITY ASSESSMENT AND AUDITING ACTIVITIES THAT MAY BE USED FOR LAW ENFORCEMENT OR OTHER LEGALLY PERMISSIBLE PURPOSES. ANY UNAUTHORIZED USE OR ACCESS, OR ANY UNAUTHORIZED ATTEMPTS TO USE OR ACCESS, THIS SYSTEM MAY SUBJECT YOU TO DISCIPLINARY ACTION, SANCTIONS, CIVIL PENALTIES, OR CRIMINAL PROSECUTION TO THE EXTENT PERMITTED UNDER APPLICABLE LAW.

Are you in agreement with above stated terms & conditions?

Step 2: Click Yes to agree to the terms and conditions and gain access to TxEVER.



TEXAS
Health and Human
Services

Texas Department of State
Health Services



Login

User Name:

komieatty1

Password:

.....

[Forgot Password?](#)

Log In

Step 3: Type your
TxEVER user name and
password.

Forgot your password?
Click here to reset password.

Step 4: Click "Log In".



Location

Find important news and updates in the TxEVER broadcast message area.

Message By: VFARINELLI On 3/13/2018 10:53:11 AM

This message should be seen by ALL users

Select Location:

BEAUTIFUL BEGINNINGS - (BIRTH)

OK

Step 5: Select your user location.
Use dropdown if you have multiple
locations/offices.

Step 6: Click "OK."

[Skip to main content](#)

[GLOBAL](#)

[DEATH](#)

[FETAL DEATH](#)



TEXAS
Health and Human
Services

Texas Department of State
Health Services

Step 7: Select Fetal
Death Module Tab

Step 8: Click the dropdown
arrow next to "FUNCTION"
to be taken to the
Demographic Data Entry

FUNCTION ▾

TOOLS

HELP ▾

[Demographic Data Entry](#)

[Switch Location](#)

[Exit Application](#)

Step 9: Select "Demographic
Data Entry" to start, locate,
search, save or reject a
record from your work queue.

Show Dashboard

Helpful Tip: Click
"Show dashboard" for a
list of different statuses
regarding existing
records



Helpful Tip: Click on Dashboard filters to see a dropdown of record options like "Records not filed within 5 days of birth", "Record Returned for Correction from the Sate", and "All Unresolved".

Dashboard filters: [RECORD NOT FILED WITHIN 5 DAYS OF BIRTH](#)

EFR #	Fetus Med Rec #	Fetus DOD	Fetus First Name	Fetus Middle Name	Fetus Last Name	Medical Certifier	Funeral Home
00000000000185	EEEEEE	03/12/2018	JOSIE	THE	RIVETER	JOE SMITH	DALLAS COUNTY MEDIC
00000000000186	BLAH	03/16/2018	MINNI3	LOU.	MOUSE	ALICIA WILLIAMS-JONES	DALLAS COUNTY MEDIC
00000000000186		03/19/2018				ALICIA WILLIAMS-JONES	GOLDEN GATE FUNERA
00000000000189	03/29/2018	INFANT		INFANT		
00000000000190	99	03/29/2018	INFANT		INFANT	ALICIA WILLIAMS-JONES	GOLDEN GATE FUNERA
00000000000192		04/04/2018	INFANT		INFANT		
00000000000195	CHS123	04/10/2018	INFANT		INFANT	ALICIA WILLIAMS-JONES	DALLAS COUNTY MEDIC
00000000000195		03/25/2018	INFANT		INFANT		



EDIC:

Filing Deadline: Day(s)

Unresolved Work Queue Filter:

MEDICAL DATA ENTRY

Unresolved Work Queue: 0

Help tips

Search for a Record

Start NEW Record

Save Current Record

CANCEL current changes since last save

Navigation buttons for switching between records in queue

Navigation buttons for switching between registration tabs

Demographic 1

Demographic 2

Demographic 3

Demographic 4

Demographic 5

State File Number

Birth State File Number

Record Type:

Generational ID:

Date of Death Type: Date of Death:

Time Of Death Type: Time Of Death: Time Of Death Indicator:

Decedent's Sex

Sex: *

Maiden Last Name:

Decedent's Date Of Birth

Date Of Birth:

Age Units:

Age:

Decedent's Birthplace

State/Country: (Please click checkbox to filter countries only)

County Of Birth:

City Of Birth:

Decedent's SSN

SSN:

Social Security Missing Value Variable:

SSN Verification Status:



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Health Services

[FUNCTIONS](#) ▾

[RECORD](#) ▾

[HELP](#) ▾



Unresolved Work Queue Filter:

--Select a value--

FETAL DEATH REGISTRATION

Unresolved Work Queue:

--Select a value--

0

Step 10: Click new record icon in upper left-hand corner to start a new record

[Unresolved / StakeHolders](#)

[Fetus](#)

[Mother](#)

[Mother Dem](#)

[Mother Medical-1](#)

[Mother Medical-2](#)

FETUS'S GENERAL INFORMATION

Record type:

Plurality:

Delivery Order:

FETUS'S INFORMATION

☐ Is Fetus Unnamed?

First Name:

Middle Name:

Last Name:

Suffix:

Date Of Delivery:

Time of Delivery:

New Record

Answer the questions below regardless of the calculated or estimated gestational age of the fetus:

1. Did the fetus take a breath?
☐ Yes ☐ No
2. Was there pulsation of the umbilical cord?
☐ Yes ☐ No
3. Was there definite movement of voluntary muscles?
☐ Yes ☐ No
4. Select APGAR score
--Select a value-- ▾

OK

Close

Step 11:
Answer
questions 1-4

GENERAL

Record Type:*

--Select a value--



Plurality:*

--Select a value--



Delivery Order:*

--Select a value--



Date Of Delivery:*

__/__/__

EFR Number:

Mother's Medical Record Number:

FETUS

First Name:

Middle Name:

Last Name:

MOTHER

First Name:

Middle Name:

Last Name:*

Date Of Birth:*

__/__/__

FindRecord

Close

New Record

Answer the questions below regardless of the calculated or estimated gestational age of the fetus:

1. Did the fetus take a breath?
☐ Yes ☒ No
2. Was there pulsation of the umbilical cord?
☐ Yes ☒ No
3. Was there definite movement of voluntary muscles?
☐ Yes ☒ No
4. Select APGAR score
0

Enter calculated or estimated gestational age

15

OK

Close

Step 13:
Click "OK"

Step 12: Enter calculated or estimated gestational age. This field will only appear if questions 1-3 are answered "no" and the APGAR score is 0.

GENERAL

Record Type:*

--Select a value--

Plurality:*

--Select a value--

Delivery Order:*

--Select a value--

Date Of Delivery:*

__/__/__

EFR Number:

Mother's Medical Record Number:

FETUS

First Name:

Middle Name:

Last Name:

MOTHER

First Name:

Middle Name:

Last Name:*

Date Of Birth:*

__/__/__

FindRecord

Close

New Record

Answer the questions below regardless of the calculated or estimated gestational age of the fetus:

1. Did the fetus take a breath? ☐ Yes ☒ No
2. Was there pulsation of the umbilical cord? ☐ Yes ☒ No
3. Was there definite movement of voluntary muscles?
4. Select APGAR score

Enter calculated or estimated gestational age

OK

Helpful Tip: If answers to questions 1-4 on top qualifies it as a fetal death, the bottom fields will open: white -> yellow, once you click "OK".

GENERAL

Record Type:*

Plurality:*

Delivery Order:*

Date Of Delivery:*

EFR Number:

Mother's Medical Record Number:

FETUS

First Name:

Middle Name:

Last Name:

MOTHER

First Name:

Middle Name:

Last Name:*

Date Of Birth:*

FindRecord

Close

New Record



The APGAR score you have entered indicates that this was a "live" birth and not a fetal death. Please enter this as a birth and death record.

OK

Helpful Tip: If answers to questions 1-4 does not qualify it as a fetal death, you will receive this notice. A birth and death record will need to be filed for the deceased infant.

New Record

Answer the questions below regardless of the calculated or estimated gestational age of the fetus:

1. Did the fetus take a breath? ☐ Yes ☒ No
2. Was there pulsation of the umbilical cord? ☐ Yes ☒ No
3. Was there definite movement of voluntary muscles? ☐ Yes ☒ No
4. Select APGAR score

0

Enter calculated or estimated gestational age

15

OK

Close

Step 14: Fill-out General, Fetus and Mother Fields. Fields with a red asterisk are required.

GENERAL

Record Type:*

BORN AT THIS FACILITY

Plurality:*

SINGLE

Delivery Order:*

SINGLE

Date Of Delivery:*

05/04/2019

EFR Number:

000000000

Mother's Medical Record Number:

000000000

FETUS

First Name:

CHEWBACCA

Middle Name:

Last Name:

VADER

MOTHER

First Name:

PRINCESS

Middle Name:

Last Name:*

LEIA

Date Of Birth:*

05/04/1977

Step 15: Click "Find Record"

FindRecord

Close

New Record

Answer the questions below regardless of the calculated or estimated gestational age of the fetus:

1. Did the fetus take a breath? ☐ Yes ☒ No
2. Was there pulsation of the umbilical cord? ☐ Yes ☒ No
3. Was there definite movement of voluntary muscles? ☐ Yes ☒ No
4. Select APGAR score

Enter calculated or estimated gestational age

New Record

No matching record was found. Do you want to create a new record?

FETUS

Record Type:*

BORN AT THIS FACILITY

EFR Number:

000000000

Date Of Delivery:*

/2019

First Name:

CHEWBACCA

Middle Name:

Step 16: Click
"OK" to create a
new record

First Name:

PRINCESS

Middle Name:

Date Of Birth:*

05/04/1977

EFR:

009999035593772

Unresolved Work Queue Filter:

--Select a value--

FETAL DEATH REGISTRATION

Unresolved Work Queue:

--Select a value--



Funeral Home

Unresolved / StakeHolders

Fetus

Mother

Mother Dem

Mother Medical-1

Mother Medical-2

Mother Medical-3

Mother Medical-4

Fetus Medical-1

Fetus Medical-2

Cause Of Death

Certification

✓ Demographic

Comments

ACTIVITY:

Funeral Home:
--Select a value--

Field Status:
Unresolved

Action:
Updating Record

FETUS'S INFORMATION

☐ Is Fetus Unnamed?

First Name:

CHEWBACCA

Last Name:

VADER

Middle Name:

Suffix:

Helpful Tip: Only the medical certifier
can fill-out the first 11 tabs.

MOTHER'S INFORMATION

MOTHER

Middle Name:

Suffix:

First Name:

PRINCESS

Last Name:

LEIA

Date of birth:

05/04/1977

METHOD OF DISPOSITION

if Other (Specify):

BURIAL DETAILS

Unknown Section/Block/Lot/Space Number:



Block Number:

Space Number:

Section Number:

Lot Number:

PLACE OF DISPOSITION

Place of Disposition Type:

CEMETERY

Place of Disposition:

EVERGREEN CEMETERY-AUSTIN



State/Country: (Please click checkbox to filter countries only)

☐

TEXAS

City/Town:

AUSTIN

Zip:

78721

Date Of Disposition:

06/17/2019

Place of Disposition (Specify):

Street Address:

3304 EAST 12TH STREET

County:

TRAVIS

City(Other):

AUSTIN

Zip Ext:

Demographic tab
continued...

FUNERAL HOME INFORMATION

Funeral Home:

GOLDEN GATE FUNERAL HOME-DALLAS

Funeral Home Apt-Nbr:

Funeral Home County:

DALLAS

Funeral Home Zip:

75224

Funeral Director:

CAROLINE ZANOT

Funeral Director's Middle Name:

License Number:

123456

Funeral Home Address:

4555 S. R. L. THORTON

Funeral Home State:

TEXAS

Funeral Home Town:

DALLAS

Funeral Director's First Name:

CAROLINE

Funeral Director's Last Name:

ZANOT

Date Verified:

Previous

Save

Next



EFR:

009999035593772

Unresolved Work Queue Filter:

--Select a value--

FETAL DEATH REGISTRATION

Un

--S



Funeral Home

Unresolved / StakeHolders

Fetus

Mother

Mother Dem

Mother Medical-1

Mother Medical-2

Mother Medical-3

Mother Medical-4

Fetus Medical-1

Fetus Medical-2

Cause Of Death

Certification

✓ Demographic

Comments

☐ Is Fetus Unnamed?

First Name:

CHEWBACCA

Last Name:

VADER

Date Of Delivery:

05/04/2019

Suffix:

MOTHER'S INFORMATION

Title Preference

MOTHER

Middle Name:

Suffix:

First Name:

PRINCESS

Last Name:

LEIA

Date of birth:

05/04/1977

METHOD OF DISPOSITION

Method of Disposition:

BURIAL

if Other (Specify):

BURIAL DETAILS

Unknown Section/Block/Lot/Space Number:

Section Number:

Step 18: Next designate the medical certifier by clicking "Medical Designation" in the Record drop-down menu

[New](#)

[Search](#)

[Save](#)

[Cancel](#)

[Abandon](#)

[Verify](#)

[De-verify](#)

[Release](#)

[Medical Designation](#)

[Refer to JP/Medical Examiner](#)

[Reminder to Medical Certifier](#)

Medical Certifier Designation

Certifier Type:

MEDICAL EXAMINER

Step 19: Enter the
Certifier Type

Facility Name:

And/Or

Step 20: Enter searchable data;
facility name and/or name of
certifier and/or license number

First Name:

Last Name:

License:

ZANOT

Designate

Search

Cancel

Step 21:
Click "Search"

Medical Certifier Designation

Certifier Type:

MEDICAL EXAMINER

Facility Name:

And/Or

First Name:

Middle

Step 23: Click
"Designate"

Last Name:

License:

ZANOT

Designate

Search

Cancel

Facility Name

Type

First Name

Middle Name

DALLAS COUNTY MEDICAL EXAM

MEDICAL EXAMINER

CAROLINE

Step 22: Select
certifier in table

From the Medical Certifier Side

- The medical certifier will login to TxEVER, open the fetal death record, accept designation, fill-out the remaining tabs, then certify the record.
 - Fetal Death -> "Show Dashboard" -> All Unresolved work queue filter -> select record designated to you -> accept ownership of record -> fill-out remaining tabs -> certify record



EFR:

009999035593772

Unresolved Work Queue Filter:

--Select a value--



(Demo) Is Fetus Unnamed?

Step 24: Once the certifier has filled out the remaining tabs and certified the record, the funeral home will verify the record. To verify: Select "verify" under the record-drop down menu.

[New](#)

[Search](#)

[Save](#)

[Cancel](#)

[Abandon](#)

[Verify](#)

[De-verify](#)

[Release](#)

[Medical Designation](#)

[Refer to JP/Medical Examiner](#)

[Reminder to Medical Certifier](#)

Unresolved / StakeHolders

✓ Fetus

✓ Mother

✓ Mother Dem

✓ Mother Medical-1

✓ Mother Medical-2

✓ Mother Medical-3

✓ Mother Medical-4

✓ Fetus Medical-1

✓ Fetus Medical-2

✓ Cause Of Death

✓ Certification

✓ Demographic

FETUS'S INFORMATION

☐ Is Fetus Unnamed?

First Name:

CHEWBACCA

Last Name:

VADER

Date Of Delivery:

05/04/2019

Middle Name:

Suffix:

--Select a value--

MOTHER'S INFORMATION

Title Preference

MOTHER

Middle Name:

Suffix:

--Select a value--

First Name:

PRINCESS

Last Name:

LEIA

Date of birth:

05/04/1977

METHOD OF DISPOSITION

Method of Disposition:

BURIAL

if Other (Specify):

Verification

FETUS INFORMATION

First Name: CHEWBACCA
Middle Name:
Last Name: VADER
Suffix:
Date of Delivery: 05/04/2019

VERIFIER INFORMATION

Funeral Home: GOLDEN GATE FUNERAL HOME-DALLAS
First Name: CAROLINE
Middle Name:
Last Name: ZANOT

Recommended: Click
"Preview" to open a
printable screen for
the abstract of the
fetal death record.

Preview Close Verification

Step 25: Click
"Verification" when you
are ready to certify the
record.

Verification

FETUS INFORMATION

First Name: CHEWBACCA
Middle Name:
Last Name: VADER
Suffix:
Date of Delivery: 05/04/2019

VERIFIER INFORMATION

Funeral Home: GOLDEN GATE FUNERAL HOME-DALLAS
First Name: CAROLINE
Middle Name:
Last Name: ZANOT

Step 26: Read and check box

Step 27: Enter pin number. (Same pin number used for death registration)

PLEASE ENTER PIN

☒ I verify that to the best of my knowledge the demographic information on this record is complete and accurate.

Verifier Pin:

.....

[Forgot my PIN](#)

Step 28:
Click "Ok"

Ok

Close

Verification

FETUS INFORMATION

First Name: CHEWBACCA
Middle Name:
Last Name: VADER
Suffix:
Date of Delivery: 05/04/2019

VERIFIER INFORMATION

Funeral Home:
First Name:
Middle Name:
Last Name:

Fetal Death Registration

Are you sure you are ready to verify the record?

Yes

No

Review

Close

Verification

PLEASE ENTER PIN

☒ I verify that to the best of my knowledge the demographic record is complete and accurate.

Verifier Pin:

•••••

Forgot my PIN

Ok

Close

Step 29:
Click "Yes"

Unresolved / StakeHolders

- ✓ Fetus
- ✓ Mother
- ✓ Mother Dem
- ✓ Mother Medical-1

☐ Is Fetus Unnamed

First Name:

CHEWBACCA

Last Name:

VADER

Date Of Delivery:

Fetal Death Registration

Record successfully verified.

OK

Step 30: Click
"OK"



TEXAS
Health and Human
Services

Texas Department of State
Health Services

FUNCTIONS ▾

RECORD ▾

HELP ▾



EFR:

009999035593772

Unresolved Work Queue Filter:

--Select a value--

FETAL DEATH REGISTRATION



(Demo) Is Fetus Unnamed?

Step 31: Click the
record drop-down
menu, then click
"Release."

Unresolved / StakeHolders

✓ Fetus

✓ Mother

✓ Mother Dem

✓ Mother Medical-1

✓ Mother Medical-2

✓ Mother Medical-3

✓ Mother Medical-4

✓ Fetus Medical-1

✓ Fetus Medical-2

Record type:

BORN AT THIS FACILITY

Plurality:

SINGLE

Delivery

SINGLE

FETUS'S INFORMATION

☐ Is Fetus Unnamed?

First Name:

CHEWBACCA

Last Name:

VADER

Date Of Delivery:

05/04/2019

Sex:

MALE

Middle Name:

Suffix:

Time of Delivery:

04:04 AM

MOTHER'S CURRENT LEGAL NAME

Title Preference

First Name:

PRINCESS

Last Name:

LEIA

Mothers Medical Record Number:

00000000

Age at Child's Birth:

Helpful Tip: Make sure to review all of your inputs before releasing. The only way to make a correction after releasing is through an amendment.

[New](#)

[Search](#)

[Save](#)

[Cancel](#)

[Abandon](#)

[Verify](#)

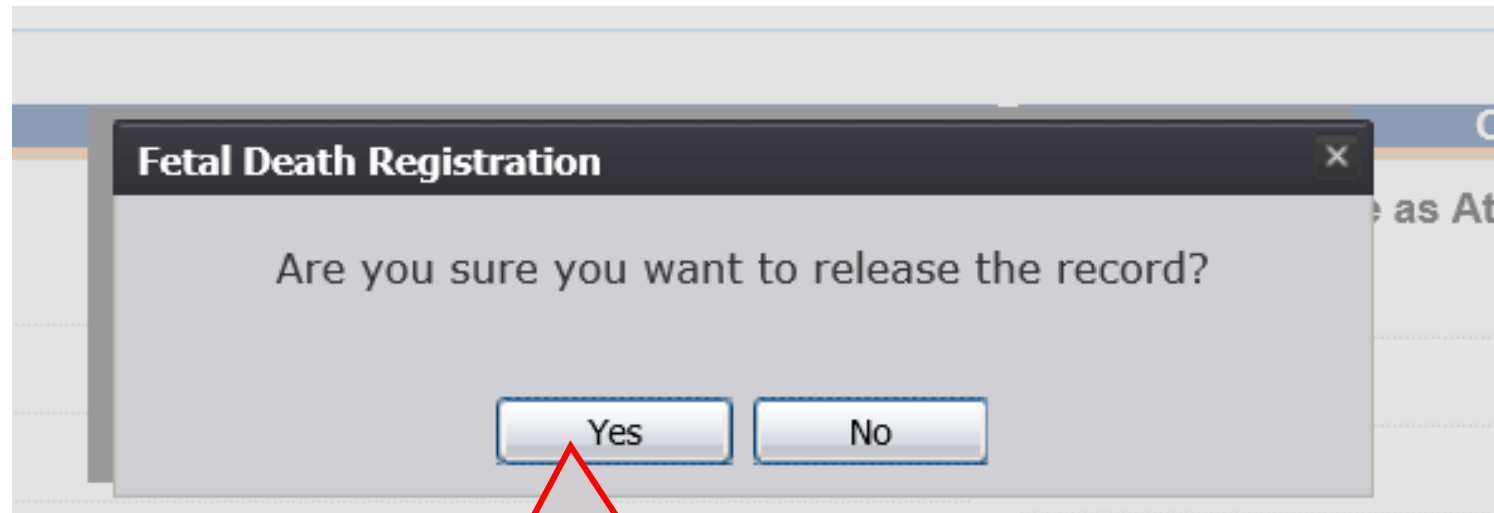
[De-verify](#)

[Release](#)

[Medical Designation](#)

[Refer to JP/Medical Examiner](#)

[Reminder to Medical Certifier](#)



Step 32: Click "Yes"

Who can order fetal death records?

The family of the deceased fetus or the funeral home can order the certificate from:

- The state (form on DSHS website that family can mail-in)
- The local registrar in the county where the death occurred

Basic Fetal Death Registration for Medical Certifiers and Funeral Homes

- Medical certifiers **can** create and release fetal death records start to finish without involvement of a funeral home.
- Funeral homes **cannot** complete fetal death records independent of Medical certifiers.
 - Funeral homes can start fetal death records, but they are limited in what they can do.

Basic Fetal Death Registration if Funeral Home Starts Record

1. Funeral home starts record
2. Funeral home fills-out demographic tab
3. Funeral home designates a medical certifier
4. Medical certifier performs data entry and certifies record
5. Funeral home verifies record (FH cannot verify until MC certifies record)
6. Funeral home releases record (Medical certifier can also release record as long as the funeral home has completed verification).

Basic Fetal Death Registration if Medical Certifier starts record with involvement of Funeral Home

1. Medical Certifier starts record and performs data entry
2. Medical Certifier demographically designates Funeral Home
 - Note: Medical certifier cannot click “demographic designation” if they have already medically certified
3. Medical certifier certifies record
4. Funeral home accepts and verifies record
5. Medical certifier releases record

Basic Fetal Death Registration if Medical Certifier Starts Fetal Death Record without involvement of Funeral Home

1. Medical Certifier starts record and performs data entry
2. Medical certifier certifies record
3. Medical certifier releases record

Statutes and Codes

Rule §181.7 - Fetal Death (Stillbirth)

- (a) A certificate of fetal death shall be filed for any fetus weighing 350 grams or more, or if the weight is unknown, a fetus aged 20 weeks or more as calculated from the start date of the last normal menstrual period to the date of delivery.
- (b) A certificate of fetal death shall be considered properly filed:
 - (1) when all of the items thereon have been satisfactorily and definitely answered; and
 - (2) when the certificate has been presented for filing to the local registrar of the registration district in which the fetal death (stillbirth) occurred or the fetus was found. A certificate of fetal death (stillbirth) shall be filed with the local registrar within five days after the date of fetal death (stillbirth).

APGAR Score: The acronym for “Appearance, Pulse, Grimace, Activity, and Respiration” score. This score (from 0 to 10) is determined by evaluating the condition of the newborn baby based on the five criteria above.