1. When does this new draft of the Fetal Death worksheet begin?

The new system will be implemented later this year. The new system requires the use of the new fetal death worksheets. SVRO will contact each hospital directly for roll-out dates for the new system.

2. Will we be able to type in the information online and print out a paper copy of the worksheet or other forms?

Yes. The new system will provide the capability to print blank forms or those that have been filled or partially filled.

3. What is an NPI?

NPI stands for National Provider Identifier. NPI is the standard 10-digit numeric unique health identifier for health care providers assigned by the National Plan and Provider Enumeration System (NPPES). It is HIPAA required and is used in billing for services. There are two types of NPIs. The first is an NPI for an individual physician and the second is an NPI for an organization. SVRO is sending an e-mail to hospitals asking them to provide their organization NPI which will be added to the system. Then the organization NPI will be prefilled to save keying time. SVRO is looking into the best way to obtain the physician NPIs.

4. Will there be a different worksheet for the mother to fill out to collect some of this information or do we use this same worksheet?

Sections 1, 2, and 3 of the Fetal Death Worksheet must be completed by either the mother or the hospital staff asking the mother these questions. SVRO made a single worksheet for fetal death because hospitals often choose to interview the mother instead of handing her the worksheet to complete because of the sensitive nature of a fetal death.

NOTE: Based on suggestions made during the Webinars, SVRO is considering designing a legal (81/2 x 14) size paper worksheet for those who would prefer using that size format.

5. The Fetal Death Worksheet only asks for street address. Will you need information on mailing address?

Mailing address is not collected for fetal deaths. Only the residence address is required. Starting with the 2003 US Standard Report of Fetal Death (the basis for the new Fetal Death Worksheet), the full residence address which includes street and number as well as county; city, village, or township; and cvt indicator is now required.
6. The form does not ask for the husband’s name. What is the rationale for Husband versus Father Information?

You are correct. We do not collect husband’s name on fetal death reports. Only the husband’s demographic data is collected; that is, date of birth, race/ethnicity, country/state of birth. The fetal death report is designed to be a statistical report and only contains the mother’s name to facilitate follow up on questions.

Wisconsin State law requires that the husband information be provided if the mother is married anytime between conception and birth. If not married, these fields should be left blank.

7. Mother's Prepregnancy Weight - is this a required field? If it is unknown because of no prenatal care - what would be entered?

Yes, this is a required field. If the prepregnancy weight is unknown after checking all resources (mother’s chart or asking mother) you may enter an unknown value. The unknown value in the new system is ‘999’.

8. Will a PO Box be sufficient for an address?

Only the residence address is required for a fetal death. A PO Box is NOT acceptable as a residence address. You must supply the street and number for the residence address.

9. Worksheet item 57, Sex of Fetus, says that the "undetermined" will be deleted. We just had a fetal demise at 20 1/7 weeks and we were not able to tell what the sex of the fetus was. What would we do in this case?

You should check the box titled ‘Not Determined.’ Currently the fetal worksheets are still a draft version. For the final version, the word ‘Undetermined’ will be deleted from the worksheet and replaced with the words ‘Not Determined.’ SVRO will not delete a fetal death because the sex is not determined.

10. Worksheet item 44, Estimated Stage of Death, lists four possible answers. Can more than one check box be selected? If mom presents at a clinic and the fetus is deceased, do we check the first option or the ‘Unknown time of death’?

Only one answer can be selected for this question. There are four choices:

   a. Dead at first assessment, no labor ongoing
   b. Dead at first assessment, labor ongoing
   c. Died during labor, after assessment
   d. Unknown time of fetal death
The status of the mother’s labor determines how this question should be answered. If a woman presents at a clinic with a deceased fetus in-utero, the hospital should first assess what is going on with labor. If the woman is in labor, hospitals should choose ‘Dead at first assessment, labor ongoing.’ If the woman is not in labor, hospitals should choose ‘Dead at first assessment, no labor ongoing.’ ‘Unknown’ would be a very rare occurrence and will most likely be used in a situation of a non-hospital delivery where the attendant was not able to assess the status of labor.

11. How do we answer Worksheet Item 66 (Was an autopsy ordered?) if genetic testing is ordered?

For the SVRO reporting purposes, an autopsy is an actual dissection of the body. This may or may not include the taking of genetic material. Genetic testing is an external examination or collection of specimens, which is not an autopsy. You may answer “Yes” or “No” depending on what procedures or tests were performed.

12. Worksheet Item 39 (Infections present or treated during this pregnancy) does not include HIV + or -. What is the rationale?

The 2003 US Standard Report of Fetal Death does not include the reporting of HIV in the list of check boxes. However, HIV should be reported under the ‘Infections, Other Specify.’ NOTE: HIV is a required report for the HIV registry.

13. If the informant (mother) said ‘Yes’ in the Hispanic origin question, do you have to complete the Race section?

Yes. ‘Hispanic’ is defined as ‘Ethnicity,’ not a ‘Race’ by federal Office of Management and Budget which was adopted by the National Center for Health Statistics. The informant (mother) needs to answer both questions. The hospital staff should provide the informant (mother) with the list of choices for each question.

NOTE: The Census for 2000 and 2010 use this format for collecting both ethnicity and race.

14. Will institutions be able to print a COBRIS for the family or will they still need to apply through the State for that? Will we be required to complete the Fetal Death Worksheet and the COBRIS (Certificate Of Birth Resulting In a Stillbirth) application in order to file and to purchase a copy at the same time?

The items from the Fetal Death Worksheet will be entered electronically and filed in the new system. This is a separate activity from printing the COBRIS application.

The a blank COBRIS application can be printed from the system by the hospital. The hospital is required to give the mother the COBRIS application. We also recommend that the hospital provide the mother with a copy of the fetal death report.

Once the application is completed, it is mailed to SVRO along with the required fee. Only SVRO can print the COBRIS certificate.
15. Can you give us examples of ITOPs?

An ‘ITOP’ is defined as the ‘induced termination of a uterine pregnancy by a physician on a woman known by the physician to be pregnant, for a purpose other than to produce a live birth or to remove a dead fetus.’ Some synonyms include: Extra-amniotic injection, Hysterectomy for termination of pregnancy, Induced Preg. Termination, Interrupted pregnancy, Medical Termination of Pregnancy, Saline Induction (Saline) (salting out procedure) (salinezation). The National Center for Health Statistics has a listing of 71 terms synonymous with ITOP.

16. What is an ITOP form?

This is the State Vital Records form (F-05506 or DPH-5506) required by State Statute to report an Induced Termination of Pregnancy (ITOP). If you have questions regarding reporting of ITOPs, please contact Laura Ninneman at (608) 266-2838 or laura.ninneman@wi.gov.

The ITOP (Induced Termination of Pregnancy) module will be implemented in the last phase of the Vital Records online project. Until then, facilities performing ITOPs must continue to send them on paper to Laura.

17. If we have further questions from this Webinar, whom do we contact?

If you have any other questions please contact one of the people listed below.

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