

OREGON PUBLIC HEALTH DIVISION • DEPARTMENT OF HUMAN SERVICES

DEATH AND TAXES IN OREGON

As Benjamin Franklin wrote, "In this world nothing can be said to be certain, except death and taxes." As Oregon government employees, we can't address the latter (although we are very happy to have our jobs). Rather, this issue of the *CD Summary* (the auspicious date that taxes are due) is devoted to the former. What follows is a quiz covering issues related to what's new with Oregon deaths.

By law, every death in Oregon (31,333 in 2006) must be registered with the Oregon Center for Health Statistics. The death certificate serves at least two purposes: to provide a legal record of the fact of death, and to collect mortality data for health statistics.

QUESTIONS

- Who can fill out and sign the medical portion of the Oregon death certificate?
 - funeral directors
 - physicians
 - physician assistants
 - nurse practitioners
- How quickly after receipt must the medical portion of the death certificate be completed, and returned to the funeral service provider?
 - 24 hours
 - 48 hours
 - 1 week
 - by the end of the month
- Which is a legitimate cause of death on the death certificate?
 - old age
 - cachexia
 - unknown natural cause
 - GOK
- What is the best example of an *immediate* cause of death?
 - acute renal failure
 - pulmonary embolism
 - myocardial infarction
 - all of the above
- What is the best example of an *underlying* cause of death?
 - organic heart disease
 - liver failure
 - cardiac arrest
 - none of the above
- What was the leading cause of death among Oregonians in 2006?
 - heart disease
 - cancer
 - chronic lower respiratory disease
 - arteriosclerosis
- Which of the following killed the most Oregonians in 2006?
 - falls
 - motor vehicle crashes
 - overdoses/poisonings
 - homicide
 - electrocution via nipple rings
- Which age group has the highest homicide rate in Oregon?
 - <1 year
 - 5–14 years
 - 15–24 years
 - 25–34 years
 - 85+ years
- When can the signature differ from the name typed or written as the certifying physician?
 - never
 - sometimes
 - always
 - it doesn't matter since we can't read the signature anyway
- How can the medical portion of the death certificate be changed once it has been registered at the county vital records office?
 - by submitting an entirely new certificate
 - calling up and badgering the State Registrar
 - submitting an affidavit with corrections
 - asking the funeral home to change the certificate
- What is EDRS?
 - Electronic Death Registration System
 - electronic decedents registry system
 - everyone doesn't remember something
 - emergency document retrieval system
- How does EDRS take care of electronic signatures of physicians?
 - it doesn't
 - digital certificates installed on the physician's office computer
 - USB key fob containing security passcode
 - finger print biometric device
- By law, the Medical Examiner must be notified in the following cases:
 - murders
 - injuries from a motor vehicle crash that die in the hospital a week later
 - unexpected out-of-hospital deaths
 - drug overdoses
 - all of the above
- Where can I get more information about completing the cause of death portion on the death certificate?
 - Oregon Center for Health Statistics web site
 - calling the State Registrar's office
 - the National Center for Health Statistics
 - all of the above
- Which of the following events are reportable to the Center for Health Statistics?
 - When the fetus is stillborn
 - baby survives less than 24 hours
 - for any induced termination of pregnancy
 - all of the above.
- What is up with the new pregnancy at death question?
 - We had extra room on the certificate we needed to fill up
 - the feds are requiring it
 - pregnancy may contribute to death from injuries, suicides and drug overdoses
 - b and c

ANSWERS

- b, c, and d) By law, licensed Oregon medical, osteopathic, chiropractic, or naturopathic physicians; certified Oregon nurse practitioners; and physician assistants can complete, sign, or change the medical portion of the death certificate.
- b) Within 48 hours, by law.
- c) It is sometimes difficult to determine conditions that led to the patient's death. In such cases, the certifier should select the causes that are suspected to have been involved, and use qualifiers, such as "probable" or "presumed". When the underlying cause of death is unknown, stating "unknown natural cause" will avoid a query. (GOK or "God only knows" is not an appropriate cause of death.)
- d) See explanation below.
- d) The cause of death refers to the disease, condition, injury, poisoning, etc, that caused the death. Causes of death are NOT the modes of dying, such as cardiac, or pulmonary arrest. Most people have multiple conditions that contribute to death, and we want to hear about all of them on the death certificate. Starting at the top, the *immediate* cause of death can be thought of as the result of the train of events that led directly to the death. Next listed are conditions



If you need this material in an alternate format, call us at 971-673-1111.

IF YOU WOULD PREFER to have your *CD Summary* delivered by e-mail, zap your request to cd.summary@state.or.us. Please include your full name and mailing address (not just your e-mail address), so that we can effectively purge you from our print mailing list, thus saving trees, taxpayer dollars, postal worker injuries, etc.

that precipitated the immediate cause, with the *underlying* cause listed last. A good example of events leading to death would be myocardial infarction (*immediate cause*), due to congestive heart failure, due to arteriosclerotic heart disease (*underlying cause*). Diabetes mellitus and emphysema might be listed as contributing conditions. The most common reason for returning a certificate is that a terminal condition is the only cause listed without the underlying conditions involved. Examples we would query include: heart disease, pulmonary embolism, sepsis, renal failure, hemorrhage, senility.

6. b) Cancer (7,193) followed by heart disease (6,466).
7. c) Poisoning/overdoses (564), followed by MVAs (459), falls (328), homicide (109). While electrocution via nipple rings was 0 this year, it has occurred previously.
8. a) <1 year (6.1 per 100,000 population), followed by 15–24 (4.7), 25–34 (4.2), 35–44 (3.7), 85+ (2.6).
9. a) Never. When signing death certificates, please check to make sure that your name, title, etc., is typed or written as the certifying physician. If it is not, please delete the information that is on all copies and print in the new information, or request that the funeral home re-do the certificate.
10. c) By law, only the person who originally signed the death certificate can change the medical portion. Once registered, any change to a certificate must be made on an affidavit that is signed and dated by the original signer. Affidavits

are legal documents and become part of the vital records archives.

11. a) The Electronic Death Registration System is the new secure, web-based death certificate system implemented by the Center for Health Statistics. With EDRS, funeral homes and medical certifiers can start a record online. The information is then immediately available to state and county registrars to register, correct, and issue certified copies of death certificates. The system will also alert public health officials to unusual causes of death that may require investigation, such as a potential epidemic.
12. d) The EDRS allows physicians to sign death certificates electronically by use of a biometric (fingerprint) reader combined with a user ID and password. The biometric system is encrypted, and extremely secure. It does not store actual fingerprint images, but rather a digital value that is based on selected characteristics of the fingerprint. It is not possible for anyone to generate actual fingerprints from these digital values, nor can they be used in any other biometric system.
13. e) ORS 146.100 specifies the causes where the Medical Examiner must be notified. If an ME declines jurisdiction on a case, it is the responsibility for the attending physician to fill in any applicable injury information.
14. d) More information than you want to know about death certificates is available at the Oregon Center for Health Statistics web site: (www.oregon.gov/DHS/ph/chs/registration/instructions.shtml); by

calling the State Registrar's office (971-673-1180); and the National Center for Health Statistics (www.cdc.gov/nchs/data/dvs/DEATH11-03final-acc.pdf)

15. d) Note: when a baby survives less than 24 hours we are expecting to see both a birth and death certificate, unless of course the baby was born in another state and transported to Oregon for final care.
16. d) Adding the new pregnancy question has nearly doubled the number of pregnancy-related deaths. We can now identify deaths in new mothers related to drug use, accidents, suicides and not just those typically associated with pregnancy-related complications. In addition, the time frame for pregnancy has expanded from within 42 days of death to 1 year. Of course, we'll be calling to query when a 90-year old female decedent is marked PG.

SCORE

14–16 correct: genius level death IQ and a future as a government mortality statistician.

11–13 correct: above-average death IQ and great potential for an exciting career in public health.

5–10 correct: average death IQ. You should spend more time reading *CD Summaries*.

0–4 correct: below-average death IQ. You may have expired while reading this issue. Taedicide (death by boredom) should be listed on your death certificate.