

Understanding Death Data Quality: Cause of Death from Death Certificates

Death certificates are a powerful tool for understanding how and why people die. Cause-of-death information is valuable to families and to public health – and getting it right matters.

How Death Certificates Work

When a person dies, the cause of death is determined by the certifier – the physician, medical examiner, or coroner who reports it on the death certificate. States register all death certificates and send them to the National Center for Health Statistics, where they are used to produce the nation’s official death statistics.

Certifiers are asked to use their best medical judgment based on the available information and their expertise. When a definitive diagnosis cannot be made, but the circumstances are compelling within a reasonable degree of certainty, certifiers may include the terms “probable” or “presumed” in the cause-of-death statement.

CAUSE OF DEATH (See instructions and examples)		Approximate Interval: Onset to death
PART I: Enter the chain of events—diseases, 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. Acute respiratory distress syndrome Due to (or as a consequence of):	2 days
Sequentially list conditions, if any, leading to the cause listed on line a. Enter the UNDERLYING CAUSE (disease or injury that initiated the events resulting in death) LAST	b. Pneumonia Due to (or as a consequence of):	10 days
	c. COVID-19 Due to (or as a consequence of):	10 days
	d.	
PART II: Enter other significant conditions contributing to death but not resulting in the underlying cause given in PART I.		
PART III: Enter other significant conditions contributing to death but not resulting in the underlying cause given in PART I.		
13. WAS AN AUTOPSY PERFORMED? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
14. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
15. DID TOBACCO USE CONTRIBUTE TO DEATH? <input type="checkbox"/> Yes <input type="checkbox"/> Probably <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	16. IF FEMALE: <input checked="" type="checkbox"/> Not pregnant within past year <input type="checkbox"/> Pregnant at time of death <input type="checkbox"/> Not pregnant, but pregnant within 42 days of death <input type="checkbox"/> Not pregnant, but pregnant 43 days to 1 year before death <input type="checkbox"/> Unknown if pregnant within the past year	17. MANNER OF DEATH: <input checked="" type="checkbox"/> Natural <input type="checkbox"/> Homicide <input type="checkbox"/> Accident <input type="checkbox"/> Pending Investigation <input type="checkbox"/> Suicide <input type="checkbox"/> Could not be determined

Cause of Death and COVID-19

When COVID-19 is reported as a cause of death on the death certificate, it is coded and counted as a death due to COVID-19. **COVID-19 should not be reported on the death certificate if it did not cause or contribute to the death.**

Things to Know About Cause-of-Death Data Quality

Getting high quality cause-of-death information can be challenging, especially during emergencies. Certifiers may be faced with heavy workloads, may not have access to complete information about the death, or may not be well trained in how to prepare good quality cause-of-death statements.

The quality of cause-of-death data depends on death certificates being complete and accurate.

- **Complete** means describing a clear chain of events from the immediate to the underlying cause of death, reporting any other conditions that contributed to death, and providing information that is specific.
- **Accurate** means reporting the correct conditions as causes of death.

Cause-of-death information is not perfect, but it is very useful. Current estimates are that about 20-30% of death certificates have issues with completeness. This does not mean they are inaccurate. However, higher quality information can give us an even better picture of what is happening.

Making Death Certificate Data Better

We are always working towards 100% completeness and accuracy of death certificates.

- **We monitor the quality of the data** with ongoing review of death certificates as they are received and by following up with state vital records offices to verify and correct inaccuracies.
- **We provide trainings and tools** to help certifiers, such as online courses to [improve cause-of-death reporting](#) and a [Cause of Death mobile app](#).
- **We offer death certificate reporting guidance** – and tailor advice to specific topics like [COVID-19](#) – to help certifiers better complete the cause-of-death section on the death certificate.



Centers for Disease Control
and Prevention
National Center for Health Statistics