

Chapter 246-491 WAC

VITAL STATISTICS—CERTIFICATES

WAC

246-491-001	Purpose.
246-491-010	Definitions.
246-491-029	Information collected on the confidential section of live birth and fetal death certificates; modifications to the United States standard certificates and report forms.
246-491-039	Confidential information on state of Washington live birth and fetal death certificates under chapter 70.58 RCW.
246-491-149	Information collected on the legal or public section of certificates; modifications to the United States standard certificates and report forms.
246-491-990	Vital records fees.

WAC 246-491-001 Purpose. RCW 70.58.055 requires certificates for vital records to include, at a minimum, items recommended by the federal agency responsible for national vital statistics. RCW 70.58.055 allows the state board of health to require additional information for the confidential section of the birth certificate, and eliminate items from the federal forms that it identifies as not necessary for statistical study.

RCW 43.70.150 requires the secretary of the department of health to operate and maintain a state system for registering births, deaths, fetal deaths, marriages, divorce decrees, annulments and separations. RCW 43.70.160 requires the state registrar to prepare, print and supply the forms for registering, recording, and preserving vital statistics. These rules identify the forms used and information collected by the state on live birth, death, fetal death, marriage, divorce, dissolution of marriage and annulment.

[Statutory Authority: RCW 43.70.150, 70.58.055, and chapter 70.58 RCW. 02-20-092, § 246-491-001, filed 10/1/02, effective 11/1/02.]

WAC 246-491-010 Definitions. The definitions in this section apply throughout this chapter unless the context clearly requires otherwise:

- (1) "Board" means the state board of health.
- (2) "Department" means the department of health.

[Statutory Authority: RCW 43.70.150, 70.58.055, and chapter 70.58 RCW. 02-20-092, § 246-491-010, filed 10/1/02, effective 11/1/02.]

WAC 246-491-029 Information collected on the confidential section of live birth and fetal death certificates; modifications to the United States standard certificates and report forms. (1) Effective January 1, 2003, the department shall use the 2003 revisions of the United States standard forms of live birth and fetal death as the basis for the state certificates of live birth and fetal death. These forms are developed by the United States Department of Health and Human Services, National Center for Health Statistics.

(2) Copies of these forms may be obtained by contacting the department's center for vital statistics.

(3) Tables 1 and 2 list the statistical information contained in the confidential sections of the birth and fetal death

certificates that the board requires the department to collect, and the differences between the state and U.S. standard.

U.S. STANDARD CERTIFICATE OF LIVE BIRTH

**TABLE 1:
Confidential Birth Certificate Items
Difference from
U.S. Standard, if
any**

Item Number	Item Name	Difference from U.S. Standard, if any
15	Is mother married to the father? If no, was mother married to anyone during the pregnancy?	Added
20	Has the paternity affidavit been signed? Mother's education	Add "Specify": next to box for "8th Grade or less"
21	Mother of Hispanic origin?	
22	Mother's race	
23	Mother's occupation	Added
24	Mother's kind of business/industry	Added
29	Father's education	Add "Specify": next to box for "8th Grade or less"
30	Father of Hispanic origin?	
31	Father's race	
32	Father's occupation	Added
33	Father's kind of business/industry	Added
34	Mother's medical record number	
35	Mother's prepregnancy weight	
36	Mother's weight at delivery	
37	Mother's height	
38	Did mother get WIC food for herself during pregnancy?	
39	Cigarette smoking before and during pregnancy	
40a	Number of previous live births	
40b	Date of last live birth	
41a	Number of other pregnancy outcomes	
41b	Date of last other pregnancy outcome	

U.S. STANDARD CERTIFICATE OF LIVE BIRTH

TABLE 1:

Confidential Birth Certificate Items

Item Number	Item Name	Difference from U.S. Standard, if any
42a	Date of first prenatal care visit	
42b	Date of last prenatal care visit	
43	Total number of prenatal visits for this pregnancy	
44	Date last normal menses began	
45	Was mother transferred to higher-level care for maternal medical or fetal indications for delivery?	
46	Principal source of payment for this delivery	Add "Indian Health" and "CHAMPUS"
47	Newborn medical record number	
48	Birth weight	
49	Infant head circumference	Added
50	Obstetric estimate of gestation	
51	Apgar score at 5 min; if score is less than 6, score at 10 minutes	
52	Plurality	
53	If not single birth - born 1st, 2nd, 3rd etc.	
54	Was infant transferred within 24 hours of delivery?	
55	Is infant living at time of the report?	
56	Is infant being breastfed?	
57	Risk factors in this pregnancy	Add "Group B streptococcus culture positive"
58	Method of delivery	
59	Infections present and/or treated during this pregnancy	Add "HIV infection" and "Other: Specify"
60	Obstetric procedures	
61	Abnormal conditions of the newborn	
62	Characteristics of labor and delivery	
63	Congenital anomalies of the newborn	
64	Maternal morbidity	
65	Onset of labor	

U.S. STANDARD REPORT OF FETAL DEATH

TABLE 2:

Confidential Fetal Death Certificate Items

Item Number	Item Name	Difference from U.S. Standard, if any
38	Weight of fetus	
39	Obstetric estimate of gestation	
40	Plurality	
41	If not single birth - Born 1st, 2nd, 3rd etc.	
42	Mother's education	Add "Specify": next to box for "8th Grade or less"
43	Mother of Hispanic origin?	
44	Mother's race	
45	Mother's occupation	Added
46	Mother's kind of business/industry	Added
47	Mother married?	
48	Mother's height	
49	Did mother get WIC food for herself during pregnancy?	
50	Mother's prepregnancy weight	
51	Mother's weight at delivery	
52	Date last normal menses began	
53	Date of first prenatal care visit	
54	Date of last prenatal care visit	
55	Total number of prenatal visits for this pregnancy	
56a	Number of previous live births	
56b	Date of last live birth	
57a	Number of other pregnancy outcomes	
57b	Date of last other pregnancy outcome	
58	Cigarette smoking before and during pregnancy	
59	Was mother transferred to higher-level care for maternal medical or fetal indications for delivery?	
60	Father's education	Added
61	Father of Hispanic origin?	Added
62	Father's race	Added
63	Father's occupation	Added
64	Father's kind of business/industry	Added
65	Risk factors in this pregnancy	

U.S. STANDARD REPORT OF FETAL DEATH

TABLE 2:

Confidential Fetal Death Certificate Items

Item Number	Item Name	Difference from U.S. Standard, if any
66	Method of delivery	
67	Congenital anomalies of the fetus	
68	Maternal morbidity	
69	Infections present and/or treated during this pregnancy	Add "HIV infection" and "Other: Specify"

[Statutory Authority: RCW 43.70.150, 70.58.055, and chapter 70.58 RCW. 02-20-092, § 246-491-029, filed 10/1/02, effective 11/1/02. Statutory Authority: Chapter 70.58 RCW. 91-20-073 (Order 196B), § 246-491-029, filed 9/26/91, effective 10/27/91. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-491-029, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.58.200. 88-19-092 (Order 310), § 248-124-010, filed 9/20/88. Statutory Authority: RCW 43.20.050 and 70.58.200. 84-02-004 (Order 270), § 248-124-010, filed 12/23/83; Order, § 248-124-010, filed 9/1/67.]

WAC 246-491-039 Confidential information on state of Washington live birth and fetal death certificates under chapter 70.58 RCW.

(1) The confidential sections of the certificate of live birth and the certificate of fetal death are not subject to public inspection and may not be included on certified copies of the record except upon order of a court, or as specified in subsection (2) of this section.

(2) An individual who is the subject of the birth certificate may request the confidential information from that individual's birth certificate.

(a) All requests are to be made to the department on a form provided by the department.

(b) In order to obtain the confidential information:

(i) The individual and the subject of the birth certificate must be the same person.

(ii) The individual must have proof of identity as specified in (c) of this subsection.

(c) Proof of identity includes:

(i) A current document issued by a federal or state government with the individual's name, date of birth, photograph, signature, and physical description.

(ii) A legal record documenting any name change, if needed, to verify that the individual and the subject of the birth certificate are the same person.

(iii) If not applying in person, a notarized signature of the individual making the request must be included with the proof of identity.

(d) The department shall, upon receipt of a request in compliance with (a) through (c) of this subsection, provide to the individual the following items, as available from their birth certificate:

- (i) Newborn medical record number;
- (ii) Birth weight;
- (iii) Infant head circumference;
- (iv) Obstetric estimate of gestation;
- (v) Apgar scores;
- (vi) Infant transferred within twenty-four hours of delivery;
- (vii) Abnormal conditions of the newborn; and

(viii) Congenital anomalies of the newborn.

[Statutory Authority: RCW 70.58.055. 10-10-041, § 246-491-039, filed 4/27/10, effective 5/28/10. Statutory Authority: RCW 43.70.150, 70.58.055, and chapter 70.58 RCW. 02-20-092, § 246-491-039, filed 10/1/02, effective 11/1/02. Statutory Authority: Chapter 70.58 RCW. 91-20-073 (Order 196B), § 246-491-039, filed 9/26/91, effective 10/27/91. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-491-039, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.58.200. 88-19-092 (Order 310), § 248-124-015, filed 9/20/88.]

WAC 246-491-149 Information collected on the legal or public section of certificates; modifications to the United States standard certificates and report forms.

(1) Effective January 1, 2003, the department shall use the 2003 revisions of the United States standard forms for live birth and fetal death.

(2) Effective January 1, 2004, the department shall use the 2003 standard form for death.

(3) Effective January 1, 1992, the department shall use the 1988 revisions of the United States standard forms for marriage and certificate of divorce, dissolution of marriage or annulment.

(4) These forms are developed by the United States Department of Health and Human Services, National Center for Health Statistics. Copies of these forms may be obtained by contacting the department's center for vital statistics.

(5) With the exception of the confidential section, the department may modify any part of these forms.

(a) Table 3 identifies the modifications to the United States standard form for live birth.

(b) Table 4 identifies the modifications to the United States standard form for fetal death.

(c) Table 5 identifies the modifications to the United States standard form for death.

(d) Table 6 identifies modifications to the United States standard form for marriage.

(e) Table 7 identifies modifications to the United States standard form for certificate of divorce, dissolution of marriage, or annulment.

(6) Table 8 lists items to be collected on the certificate of dissolution of Washington state domestic partnership. This is a Washington state form not addressed in the United States standard forms.

U.S. STANDARD CERTIFICATE OF LIVE BIRTH

Table 3:

Legal or Public Birth Certificate Items

Item Number	Item Name	Difference from U.S. Standard, if any
1	Child's name	
2	Child's date of birth	
3	Time of birth	
4	Type of birthplace	Add "En route," Add "Planned birthplace if different"
5	Child's sex	
6	Name of facility	
7	City, town or location of birth	
8	County of birth	

U.S. STANDARD CERTIFICATE OF LIVE BIRTH

Table 3:

Legal or Public Birth Certificate Items

Item Number	Item Name	Difference from U.S. Standard, if any
9	Mother's name before first marriage	
10	Mother's date of birth	
11	Mother's birthplace	
12	Mother's Social Security number	
13	Mother's current legal last name	
14	Social Security number requested for child?	
16a	Mother's residence - Number, street, and Apt. No.	
16b	Mother's residence - City or town	
16c	Mother's residence - County	
16d	Tribal reservation name (if applicable)	Added
16e	Mother's residence - State or foreign country	
16f	Mother's residence - Zip code + 4	
16g	Mother's residence - Inside city limits?	
17	Telephone number	Added
18	How long at current residence?	Added
19	Mother's mailing address, if different	
25	Father's current legal name	
26	Father's date of birth	
27	Father's birthplace	
28	Father's Social Security number	
66	Certifier name and title	Delete check boxes
67	Date certified	
68	Attendant name and title	Delete check boxes
69	NPI of person delivering the baby	
—	Date filed by registrar	Deleted

U.S. STANDARD REPORT OF FETAL DEATH

Table 4:

Legal or Public Fetal Death Certificate Items

Item Number	Item Name	Difference from U.S. Standard, if any
1	Name of fetus	
2	Sex	
3	Date of delivery	
4	Time of delivery	

U.S. STANDARD REPORT OF FETAL DEATH

Table 4:

Legal or Public Fetal Death Certificate Items

Item Number	Item Name	Difference from U.S. Standard, if any
5	Type of birthplace	Add "En route," Add "Planned birthplace if different"
6	Name of facility	
7	Facility ID (NPI)	
8	City, town or location of birth	
9	Zip code of delivery	
10	County of birth	
11	Mother's name before first marriage	
12	Mother's date of birth	
13	Mother's current legal last name	
14	Mother's birthplace	
15a	Mother's residence - Number, street, and Apt. No.	
15b	Mother's residence - City or town	
15c	Mother's residence - County	
15d	Tribal reservation name (if applicable)	Added
15e	Mother's residence - State or foreign country	
15f	Mother's residence - Zip code + 4	
15g	Mother's residence - Inside city limits?	
16	How long at current residence?	Added
17	Father's current legal name	
18	Father's date of birth	
19	Father's birthplace	
20	Name and title of person completing the report	
21	Date report completed	
22	Attendant name and title	Delete check boxes
23	NPI of person delivering the baby	
24	Method of disposition	
25	Date of disposition	
26	Place of disposition	Added
27	Location of disposition - City/town and state	Added
28	Name and complete address of funeral facility	Added
29	Funeral director signature	Added
30	Initiating cause/condition (cause of death)	

U.S. STANDARD REPORT OF FETAL DEATH

U.S. STANDARD CERTIFICATE OF DEATH

Table 4:
Legal or Public Fetal Death Certificate Items

Table 5:
Death Certificate Items

Item Number	Item Name	Difference from U.S. Standard, if any
31	Other significant causes or conditions	
32	Estimated time of fetal death	
33	Was an autopsy performed?	
34	Was a histological placental examination performed?	
35	Were autopsy or histological placental examination results used in determining the cause of death?	
36	Registrar signature	Added
37	Date received	

Item Number	Item Name	Difference from U.S. Standard, if any
13g	Inside city limits?	
14	Estimated length of time at residence	Added
15	Marital status at time of death	
16	Surviving spouse's name	
17	Occupation	
18	Kind of business/industry	
19	Father's name	
20	Mother's name before first marriage	
21	Informant - Name	
22	Informant - Relationship to decedent	
23	Informant - Address	
24	Place of death	
25	Facility name (if not a facility, give number and street)	
26a	City, town, or location of death	
26b	State of death	
27	Zip code of death	
28	Method of disposition	
29	Place of disposition (name of cemetery, crematory, other place)	
30	Disposition - City/town, and state	
31	Name and complete address of funeral facility	
32	Date of disposition	Added
33	Funeral director signature	
34	Causes of death and intervals between onset and death	
35	Other significant conditions contributing to death	
36	Autopsy?	
37	Were autopsy findings available to complete the cause of death?	
38	Manner of death	
39	Pregnancy status	
40	Did tobacco use contribute to death?	
41	Date of injury	
42	Hour of injury	
43	Place of injury	
44	Injury at work?	
45	Injury location - Street, city, county, state, zip	County Added
46	Describe how injury occurred	
47	Transport injury type	

U.S. STANDARD CERTIFICATE OF DEATH

Table 5:
Death Certificate Items

Item Number	Item Name	Difference from U.S. Standard, if any
1	Legal name (include a.k.a.'s if any)	
2	Death date	
3	Sex	
4a	Age - Years	
4b	Age - Under 1 year	
4c	Age - Under 1 day	
5	Social Security number	
6	County of death	
7	Birth date	
8a	Birth place - City, town or county	
8b	Birth place - State or foreign country	
9	Decedent's education	Add "Specify": next to box for "8th Grade or less"
10	Decedent's Hispanic origin	
11	Decedent's race	
12	Was decedent ever in U.S. Armed Forces?	
13a	Residence - Number and street	
13b	Residence - City or town	
13c	Residence - County	
13d	Tribal reservation name (if applicable)	Added
13e	Residence - State or foreign country	
13f	Residence - Zip code	

U.S. STANDARD CERTIFICATE OF DEATH

**Table 5:
Death Certificate Items**

Item Number	Item Name	Difference from U.S. Standard, if any
48a	Certifying physician signature	
48b	Medical examiner/coroner signature	
49	Name and address of certifier	
50	Hour of death	
51	Name and title of attending physician if other than certifier	Added
52	Date certified	
53	Title of certifier	
54	License number of certifier	
55	ME/coroner file number	Added
56	Was case referred to medical examiner?	
57	County registrar signature	Added
58	County date received	Added
59	Record amendment	Added
—	License number of funeral director	Deleted
—	Date pronounced dead	Deleted
—	Time pronounced dead	Deleted
—	Signature of person pronouncing death	Deleted
—	License number of person pronouncing death	Deleted
—	Date person pronouncing death signed	Deleted

U.S. STANDARD LICENSE AND CERTIFICATE OF MARRIAGE

**Table 6:
Certificate of Marriage**

Item Number	Item Name	Difference from U.S. Standard, if any
	Certificate name	Modified
1	County of license	Added
2	Date valid	
3	Not valid after (date)	
4	County auditor signature	
5	Date received (by county auditor)	
6a	Person A - Bride/groom/spouse	Added
6b	Legal name before marriage	Modified
6c	Birth name, if different	Added
6d	Sex - Male/female	Added
6e	Current residence (street, city/town)	
6f	County of residence	
6g	State of residence	
6h	Date of birth	

U.S. STANDARD LICENSE AND CERTIFICATE OF MARRIAGE

**Table 6:
Certificate of Marriage**

Item Number	Item Name	Difference from U.S. Standard, if any
6i	Birth state (if not USA, provide country)	
6j	Mother/parent birth name	Modified
6k	Father/parent birth name	Modified
6l	Mother/parent birth state (or country)	Modified
6m	Father/parent birth state (or country)	Modified
7a	Person B - Bride/groom/spouse	Added
7b	Legal name before marriage	
7c	Birth name, if different	Modified
7d	Sex - Male/female	Added
7e	Current residence (street, city/town)	
7f	County of residence	
7g	State of residence	
7h	Date of birth	
7i	Birth state (if not USA, provide country)	
7j	Mother/parent birth name	Modified
7k	Father/parent birth name	Modified
7l	Mother/parent birth state (or country)	Modified
7m	Father/parent birth state (or country)	Modified
8	Date of marriage	
9	County of ceremony	
10	Type of ceremony	Added
11	Date signed (by officiant)	Added
12	Officiant's address	
13	Officiant's daytime phone	Added
14	Officiant's name	
15	Officiant's signature	
16	Witness signature	
17	Witness signature	
18	Person A signature	Modified
19	Date signed (by person A)	Added
20	Person B signature	Modified
21	Date signed (by person B)	Added
22	Person A - Social Security number	Added
23	Person A - Name	Added
24	Person B - Social Security number	Added
25	Person B - Name	Added
26	Person A signature - Declaration in absence of a Social Security number	Added
27	Person A date - Declaration in absence of a Social Security number	Added

U.S. STANDARD LICENSE AND CERTIFICATE OF MARRIAGE

**Table 6:
Certificate of Marriage**

Item Number	Item Name	Difference from U.S. Standard, if any
28	Person B signature - Declaration in absence of a Social Security number	Added
29	Person B date - Declaration in absence of a Social Security number (Groom's) age last birthday (Bride's) age last birthday	Added
	Signature of (license) issuing official	Deleted
	Title of (license) issuing official	Deleted
	Where married - City, town or location	Deleted
	Title (of officiant)	Deleted
	Confidential information	Deleted

U.S. STANDARD CERTIFICATE OF DIVORCE, DISSOLUTION OF MARRIAGE, OR ANNULMENT

**TABLE 7:
Certification of Dissolution, Declaration of Invalidity of Marriage, or Legal Separation**

Item Number	Item Name	Difference from U.S. Standard, if any
	Certificate name	Modified
1	Court file number	Added
2	Type of decree	
3	Date of decree	
4	County where decree filed	
5	Signature of superior court clerk	
6a	Spouse A - Name	Added
6b	Birth name, if different	Added
6c	Date of birth	
6d	Place of birth (state or country)	
6e	Residence - Street	Added
6f	Residence - City	
6g	Residence - County	
6h	Residence - State	
7a	Spouse B - Name	Added
7b	Birth name, if different	Modify
7c	Date of birth	
7d	Place of birth (state or country)	
7e	Residence - Street	Added
7f	Residence - City	
7g	Residence - County	
7h	Residence - State	
8	Place of marriage -County	
9	Place of marriage - State	
10	Date of marriage	

U.S. STANDARD CERTIFICATE OF DIVORCE, DISSOLUTION OF MARRIAGE, OR ANNULMENT

**TABLE 7:
Certification of Dissolution, Declaration of Invalidity of Marriage, or Legal Separation**

Item Number	Item Name	Difference from U.S. Standard, if any
11	Number of children born alive of this marriage	Added
12	Petitioner	
13	Name of petitioner's attorney or pro se	
14	Petitioner's attorney's address	
15	Spouse A Social Security number	Added
16	Spouse B Social Security number	Added
	Date (decree) recorded	Deleted
	Number of children under 18 whose physical custody was awarded to (husband, wife, joint, other)	Deleted
	Number of children under 18 in household	Deleted
	Title of court	Deleted
	Title of certifying official	Deleted
	Date (certifying official) signed	Deleted
	Date couple last resided in same household	Deleted
	Confidential items	Deleted

**TABLE 8:
Certification of Dissolution of Washington State Domestic Partnership**

Item Number	Item Name
	Certificate name
	Court file number
1	Type of decree
2	Date of decree
3	County where decree filed
4	Signature of superior court clerk
5a	First partner's name
5b	First partner's name at birth
6	First partner's date of birth
7	First partner's place of birth
8	First partner's residence - Street
9	First partner's residence - City
10	First partner's residence - Inside city limits
11	First partner's residence - County

TABLE 8:
Certification of Dissolution of Washington State
Domestic Partnership

Item Number	Item Name
12	First partner's residence - State
13a	Second partner's name
13b	Second partner's name at birth
14	Second partner's date of birth
15	Second partner's place of birth
16	Second partner's residence - Street
17	Second partner's residence - City
18	Second partner's residence - Inside city limits
19	Second partner's residence - County
20	Second partner's residence - State
21	Date of this partnership
22	Domestic partnership certificate number
23	Petitioner
24	Name of petitioner's attorney/pro se
25	Petitioner's address

[Statutory Authority: RCW 43.70.150. 13-01-004, § 246-491-149, filed 12/6/12, effective 12/6/12. Statutory Authority: RCW 26.09.150. 09-11-111, § 246-491-149, filed 5/19/09, effective 6/19/09. Statutory Authority: RCW 43.70.150, 70.58.055, and chapter 70.58 RCW. 02-20-092, § 246-491-149, filed 10/1/02, effective 11/1/02. Statutory Authority: RCW 43.70.150. 91-23-026 (Order 211), § 246-491-149, filed 11/12/91, effective 12/13/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-491-149, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.20A.620. 88-19-034 (Order 2696), § 248-124-160, filed 9/12/88.]

WAC 246-491-990 Vital records fees. The department shall collect fees to cover program costs as follows:

(1) To prepare a sealed file following amendment \$15.00 of the original vital record

(2) To review a sealed file \$15.00

(3) The director of the division of health may enter into agreements with state and local government agencies to establish alternate fee schedules and payment arrangements for reimbursement of these program costs.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-491-990, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 26.33.330. 88-15-011 (Order 2650), § 440-44-095, filed 7/8/88; 85-04-023 (Order 2199), § 440-44-095, filed 1/30/85.]