



Integrating  
the Healthcare  
Enterprise

# Birth and Fetal Death Reporting Enhanced (BFDR-E) and Vital Records Death Reporting (VRDR)

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# The Problem

- Vital Events reporting includes demographic, medical, and geographic data derived from birth certificates, death certificates and fetal death reports



- Current process of capturing vital records information is
  - Duplicative
  - Labor-intensive
  - Costly
  - Can be error prone
- Results in issues with timeliness of data submission and the quality and usefulness of these data may be adversely affected



# Use Case Scenario

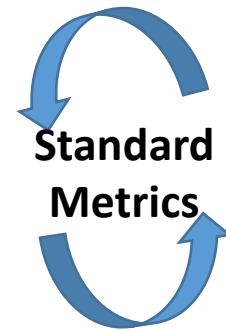
Capturing birth and death data in electronic health record systems



Electronic exchange using HL7 and IHE-based standards

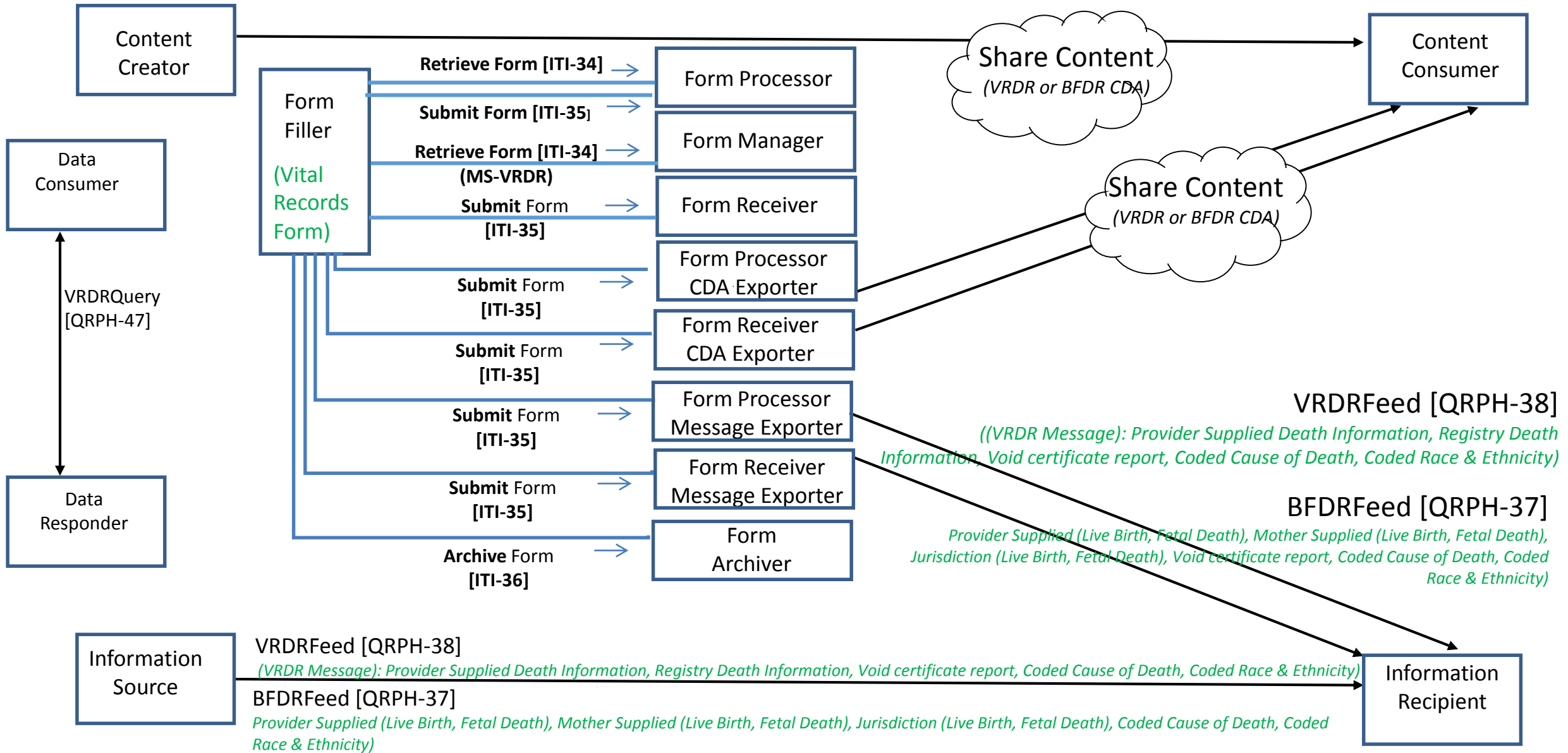


Improving the timeliness, accuracy, and completeness of vital records data from provider to Jurisdiction and bi-directional Jurisdiction – National information flows



# Technical Solution

## QRPH: Vital Records Reporting Profiles Basic Process Flow in BFDR-E and VRDR



# Technical Solution

## VRDR

- Conveys death reporting information using:
  - Pre-population of data (using a Medical Summary) from EHRs to Jurisdiction
  - Messages between Provider and Jurisdiction and bi-directionally between Jurisdictions and National Vital Statistics Agency
  - CDA Death Report between Provider and Jurisdiction or from Jurisdiction to National Vital Statistics Agency
  - FHIR-based query for Provider Supplied Death Reporting Information
- Supports WHO Verbal Autopsy Report

Integrating the Healthcare Enterprise

# IHE

IHE Quality, Research and Public Health  
Technical Framework Supplement

Vital Records Death Reporting  
(VRDR)

Integrating the Healthcare Enterprise

# IHE

IHE Quality, Research and Public Health  
Technical Framework Supplement

Birth and Fetal Death -Enhanced Reporting  
(BFDR-E)

## BFDR-E

- Conveys Birth and Fetal Death information using:
  - Pre-population of data (using the PCC Labor and Delivery Summary) from EHRs to Jurisdiction
  - Messages between Provider and Jurisdiction and bi-directionally between Jurisdictions and National Vital Statistics Agency
  - CDA Report of Birth and CDA Report of Fetal Death between Provider and Jurisdiction or from Jurisdiction to National Vital Statistics Agency
- Supports WHO statistics for prenatal data, labor and delivery data, and newborn/fetus data

# Value Proposition

- **Establish interoperable electronic exchange of VR data between EHR and VR Systems**
  - More timely data release
  - Higher quality data for demographic, epidemiologic surveillance and research
  - Improved efficiency for electronic exchange of vital records information
  - Greater integration with other stakeholder electronic systems
  - Greater standardization of electronic Vital Records data collection and exchange
  - Promote consistent statistics between the jurisdictions and national vital records offices