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

IHE-Quality, Research and Public Health
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

**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