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RECAP

United States Census Office

TO MORTALITY STATISTICS



THE INTERNATIONAL CLASSI-FICATION OF CAUSES OF DEATH AS ADOPTED BY THE UNITED STATES CENSUS OFFICE AND APPROVED BY THE AMERICAN PUBLIC HEALTH ASSOCIATION



(READ CAREFULLY AND PRESERVE FOR REFERENCE)

Washington = 1903

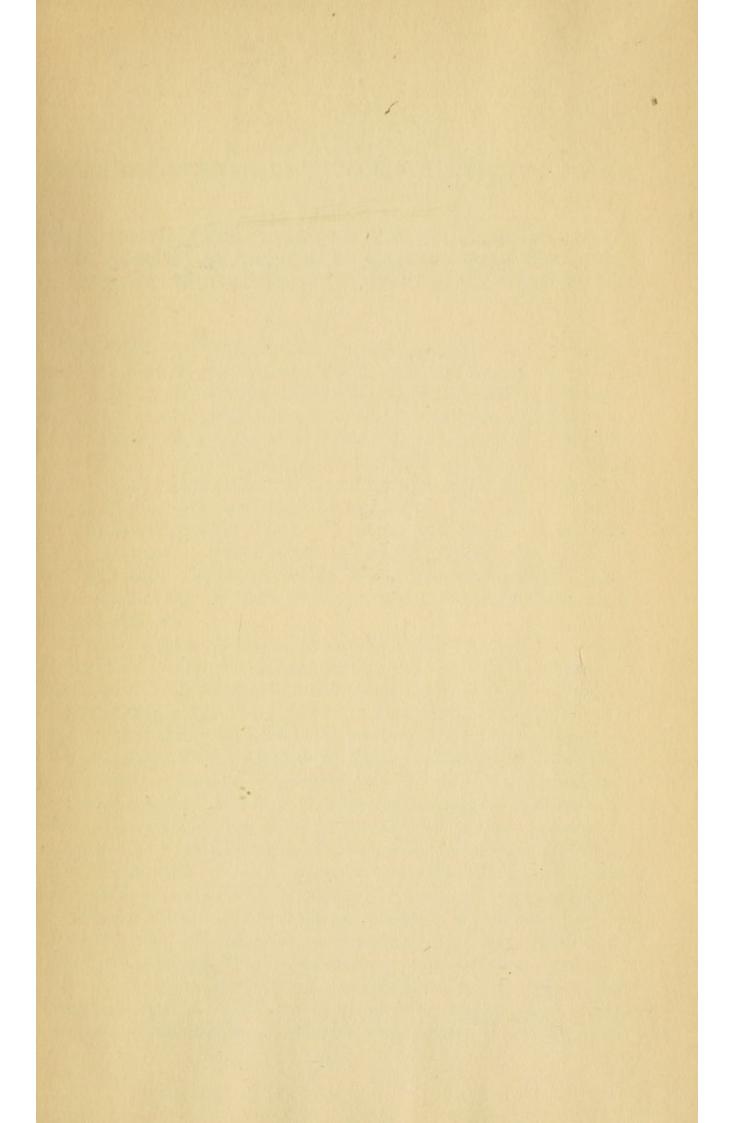
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RELATION OF PHYSICIANS TO MORTALITY STATISTICS.

THE INTERNATIONAL CLASSIFICATION OF CAUSES OF DEATH AS ADOPTED BY THE UNITED STATES CENSUS OFFICE AND APPROVED BY THE AMERICAN PUBLIC HEALTH ASSOCIATION.

This circular is issued for the use and benefit of physicians who have to make out certificates of death in compliance with registration laws, by acquainting them with the scope and requirements of the International classification, which has been adopted by all of the registration states and by most of the principal registration cities for the compilation of their mortality statistics. Such statistics, to be comparable, must be uniform; and to be valuable for scientific purposes they must be accurate. Their chief value is in the distribution of deaths by causes, but the cause of death must be properly stated before it can be properly classified. In this particular the entire value of the statistics depends solely upon the lucidity and certainty with which the physicians supply the information.

In all statistics of deaths by causes there is much too large a proportion of unknown or indefinite items for which the physicians alone are directly responsible and which they alone can remedy.

It is probable that the defect in this particular is largely due to the fact that there has heretofore been no general and comprehensive plan to direct the attention of all physicians to the use of their certificates for statistical purposes, and to exhibit the necessities and requirements in this respect by explaining the classification used and by specifying wherein certain returns are incomplete, indefinite, or unsatisfactory. This circular is designed to furnish such information. It will be sent to every physician in the country, and it is confidently expected that they will appreciate the importance of the matter—the purpose for which the circular is issued—and will manifest their appreciation by making their certificates conform to the suggestions noted, as far as possible.

It should be considered that the classification, in itself, is but a selection and arrangement of *titles only*, under which deaths reported in thousands of different ways must be compiled, and

that the assignment of any death to the proper title requires a definite statement of the course of disease or the sequence of causes resulting in the death.

The list of titles is given below, and, where necessary, explanatory notes are given, which show the essential distinctions to be made. Some of the titles—indicated by the asterisk (*)—are themselves indefinite, and it is very desirable that causes of death be so stated as to permit their classification under some more specific title.

If physicians will carefully examine the list of titles and observe the explanations appended, a vast improvement can be made in the statistics.

Following the detailed list and explanation of the *titles* is a list of indefinite and unsatisfactory *terms* very frequently used by physicians, with similar explanatory notes. The terms in this list can not be properly classified as given, and should never be used without further explanation.

It is suggested that physicians take a few cases that occur to them and see whether—if the causes of death are stated in the terms they usually employ—they can themselves classify the deaths under some definite and specific (*unstarred*) title. This will give them a practical idea of the difficulties in the way, and of the sufficiency of their statement of the cause of death.

ARRANGEMENT OF TITLES OF THE INTERNATIONAL CLASSIFICA-TION AS ADOPTED BY THE CENSUS OFFICE.

[Titles marked with the asterisk (*) are indefinite and unsatisfactory.]

List of titles.

Explanatory notes.

ALL CAUSES.

I. GENERAL DISEASES.

(A. Epidemic diseases.)

Of special importance for sanitary purposes, hence only exact and definite statements should be given for this class.

Typhoid fever.

Avoid use of "typhoid pneumonia" when pneumonic typhoid or pneumonia occurring as a complication or form of typhoid fever is meant. Typhoid pneumonia will be compiled under "pneumonia."

Exanthematic typhus.

Report cases exactly in form of title. Do not write "typhus" or "typhus fever," which are ordinarily understood as typhoid fever.

Relapsing fever.

Not a relapse of fever but the specific disease of this name is meant.

Malarial fever.

Do not use the terms "malaria" and "malarial fever" indefinitely, but employ them only when malarial infection was actually a cause of death. Never use the term "typhomalarial fever." In the rare cases of mixed infection state separately, with evidence of presence of both diseases.

Smallpox.

Measles.

When measles caused bronchopneumonia or other complication, first state measles—and then the complications.

Scarlet fever.

When accompanied by complications or sequelae, as acute nephritis, do not fail to give this as the primary cause.

Whooping cough.

In deaths from bronchopneumonia following whooping cough, the primary cause should invariably be stated.

Diphtheria. Croup. Deaths from membranous croup, or croup not specified as spasmodic, are considered diphtheritic. Sequelae of diphtheria, as paralysis of the throat, should have their diphtheritic origin specified.

Influenza (Grip).

Only genuine influenza should be reported as such. Do not use the term to cover every affection of the respiratory system.

Miliary fever.

Asiatic cholera

Cholera nostras.

Dysentery.

To be used only when true epidemic dysentery is meant. Do not use this term when ordinary diarrhea is intended.

Explanatory notes.

Plague.

Yellow fever.

Leprosy.

Erysipelas.

Other epidemic diseases.

(B. Other general diseases.)

*Septicemia.

Glanders and farcy.

Malignant pustule and charbon.

Rabies.

Actinomycosis, trichinosis, etc.

Pellagra.

Tuberculosis of lungs.

Tuberculosis of larynx.

Tuberculous meningitis.

Abdominal tuberculosis.

Pott's disease.

*Tuberculous abscess.

White swelling.

Tuberculosis of other organs.

General tuberculosis.

*Scrofula.

Syphilis.

Gonorrhea of the adult.

Gonorrheal infections of children.

Cancer of mouth.

Cancer of stomach and liver.

Cancer of intestines and peritoneum.

Cancer of genital organs.

Cancer of breast.

Cancer of skin.

*Cancer of other or unspecified organs.

*Tumor (noncancerous).

Do not write "tumor" when some form of cancer is meant.

Acute articular rheumatism.

Chronic rheumatism gout.

Survey.

Give the cause, as puerperal, traumatic, etc. If traumatic state the nature of the injury, and whether accidental, etc.

If pulmonary tuberculosis was also involved always state that fact.

An objectionable term. Was tuberculosis, and in what form, the cause of death?

Do not fail to specify the seat of cancer, if known. Also state as carcinoma, sarcoma, etc., if possible, using the definite pathological term descriptive of the growth instead of simply "cancer." Do not write "malignant disease" when cancer is meant.

Always state organ or part of body affected.

Always define as acute or chronic.

Explanatory notes.

Diabetes.

Exophthalmic goiter.

Addison's disease.

Leukemia.

*Anemia, chlorosis.

If anemia is due to tuberculosis, syphilis, or other disease, so state. Give the cause of the anemia whenever possible.

Alcoholism.

Always state the organic disease resulting from alcoholism, as cirrhosis of liver, etc.

Lead poisoning.

Other professional intoxications.

Other chronic poisonings.

Other general diseases.

II. DISEASES OF THE NERVOUS SYSTEM.

*Encephalitis.

Meningitis.

Never use this term or its English equivalent, "brain fever."

Always specify fully all deaths that occur from epidemic cerebro-spinal meningitis. Never omit the word epidemic or shorten to cerebral, spinal, or unqualified meningitis. When meningitis results from tuberculosis, traumatism, etc., do not fail to specify the cause of the meningitis.

Locomotor ataxia.

Other diseases of spinal cord.

Do not report as "spinal disease" or the like, but state the definite form of disease of spinal cord, if known.

Apoplexy.

Only deaths from cerebral hemorrhage should be so reported.

Do not include all sudden deaths with undefined causes.

Avoid the use of the term "congestion of brain" as a cause of death.

Softening of brain.

*Paralysis.

Give the cause. If from cerebral hemorrhage, that fact should be stated. If due to an affection of the spinal cord, name the specific form.

General paralysis of insane.

Do not fail to include the full title, as otherwise the death may be included among deaths from paralysis of undefined character.

Other forms of mental disease.

Other diseases of brain.

Epilepsy.

- *Convulsions (nonpuerperal).
- *Convulsions of children.

Give the disease causing the convulsions, and in females of childbearing age do not fail to state whether pregnancy was the exciting cause. In infants, pains should be taken to report diarrheal diseases, and in adults the presence of epilepsy or Bright's disease.

Tetanus.

Chorea.

Other diseases of nervous system.

Explanatory notes.

Diseases of the eye and its adnexa.

Diseases of the ear.

In otitis media, its cause, as scarlet fever, should be given, if

III. DISEASES OF THE CIRCU-LATORY SYSTEM.

Pericarditis.

Endocarditis.

Heart disease.

The special form of heart disease should be stated whenever possible. Never return "heart failure" when organic disease of the heart was the cause of death; in fact, never use the expression "heart failure" on certificates of death in any case.

Angina pectoris.

Diseases of arteries.

Embolism and thrombosis.

Diseases of veins.

Diseases of lymphatics.

lungs).

*Hemorrhages (except of Always state the cause of the hemorrhage. If after a surgical operation, state the disease or injury for which the operation was undertaken.

Otner diseases of circulatory system.

IV. DISEASES OF THE RESPIR-ATORY SYSTEM.

*Diseases of nasal fossa.

Laryngitis.

If diphtheritic, do not fail to say so.

Other diseases of larynx.

Diseases of the thyroid body.

Acute bronchitis.

Chronic bronchitis.

Always specify definitely as acute or chronic. Do not report chronic bronchitis when pulmonary tuberculosis was the disease causing death.

Bronchopneumonia.

Report fully as bronchopneumonia, not as pneumonia unqualified.

Pneumonia.

Report definitely as lobar pneumonia or croupous pneumonia. Avoid use of term "typhoid pneumonia," as it frequently misleads.

Pleurisy.

If tuberculous, do not fail to state the fact.

*Congestion of lungs.

Never use this term on a certificate of death. If death is due to pneumonia, either catarrhal or lobar, so state. If the condition was passive congestion of the lungs, pulmonary edema, or hypostatic pneumonia, name the disease in which this condition occurred as the cause of death.

Gangrene of lungs.

Asthma.

Emphysema.

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List of titles.	Explanatory notes.
*Hemorrhage of lungs.	Nearly always pulmonary tuberculosis should be stated as the cause of the pulmonary hemorrhage.
Other diseases of respiratory system.	
V. DISEASES OF THE DIGEST-	
Diseases of mouth.	
Tonsilitis.	If diphtheritic, say so.
Diseases of pharynx.	
Diseases of esophagus.	
Ulcer of stomach.	
*Gastritis.	Often used very indefinitely. State cause, if known.
Other diseases of stomach.	
*Dentition.	Not a proper cause of death. State disease.
Diarrhea and enteritis (under 2 years).	
Diarrhea and enteritis (2 years and over).	
Intestinal parasites.	
Hernia.	
Obstruction of intestines.	
Other diseases of intestines.	
Acute yellow atrophy of liver.	
Hydatid tumors of liver.	
Cirrhosis of liver.	
Biliary calculi.	
Other diseases of liver.	Avoid use of indefinite terms, "disease of liver," "liver com- plaint," and the like, which are very uncertain evidence of actual disease of the liver.
Diseases of spleen.	
Peritonitis (nonpuerperal). Appendicitis.	Do not fail to specify cause of peritonitis, if known, and in females of childbearing age always state definitely whether puerperal or not.
Other diseases of digestive	
other diseases of digestive	

Other diseases of digestive system.

VI. DISEASES OF THE GENITO-URINARY SYSTEM.

Acute nephritis.

If due to acute infectious disease, as scarlet fever, do not fail to specify origin of condition.

Bright's disease.

Specify definite form. Do not report uremia alone without explaining its cause.

Other diseases of kidneys.

Calculi of urinary tract.

Explanatory notes.

Diseases of bladder.

Diseases of urethra, urinary If due to gonorrhea, so state. abscess, etc.

Diseases of prostate.

Nonvenereal diseases of (male) genital organs.

Metritis.

Uterine hemorrhage (non-

Specify definitely as puerperal or nonpuerperal.

Uterine tumor (noncancerous).

Other diseases of uterus.

Ovarian tumors.

Diseases of tubes.

Other diseases of female genital organs.

Nonpuerperal diseases of the breast (cancer excepted).

VII. CHILDBIRTH.

Accidents of pregnancy.

Puerperal hemorrhage.

Other accidents of labor.

Puerperal septicemia.

Puerperal convulsions.

Puerperal phlegmasia alba dolens.

Other puerperal accidents.

Puerperal diseases of the breast.

VIII. DISEASES OF THE SKIN.

Gangrene.

Give cause and part affected.

Carbuncle.

*Abscess.

Give cause and part affected. Note especially tuberculous abscesses.

Other diseases of skin.

IX. DISEASES OF THE LOCO-MOTOR SYSTEM.

Diseases of bones.

Diseases of joints.

Specify cause, as tuberculosis, etc., whenever known.

*Amputation.

Amputation for what—disease or injury? Specify fully, and if from injury, note the nature of the injury.

Other diseases of organs of locomotion.

Explanatory notes.

X. MALFORMATION.

Hydrocephalus.

Specify as congenital hydrocephalus. If acute hydrocephalus from tuberculous infection is meant, specify the tuberculous character of the disease definitely.

heart, cyanosis.

Congenital malformation of Report as congenital malformation of heart rather than as cyanosis, the latter term being rather indefinite.

Other congenital malformations.

XI. EARLY INFANCY.

Premature birth.

Give cause, if known.

*Congenital debility.

What disease caused the debility? This return is little more definite than to say from unknown cause.

Other diseases of early infancy.

Lack of care.

XII. OLD AGE.

Old age.

Name the disease causing death in the old person. The statement "old age," in the vast majority of cases, is simply equivalent to unknown, and shows lack of observation and precision of statement.

XIII. VIOLENCE.

Suicide by poison.

Suicide by asphyxia.

Suicide by hanging or strangulation.

Suicide by drowning.

Suicide by firearms.

Suicide by cutting instruments.

Suicide by jumping from high places.

Suicide by crushing.

Other suicides.

Fractures.

Dislocations.

State the cause of the fracture or dislocation.

Burns and scalds.

Burning by corrosive substances.

Heat and sunstroke.

State heat or sunstroke only when the direct cause of death. Deaths of infants from cholera infantum or of elderly persons from heart disease, etc., although accelerated by warm weather, should rather be reported from the disease causing death.

Cold and freezing.

Deaths from diseases aggravated by cold weather should not be reported under this title. Specify definitely as freezing whenever this was the case, or report as exposure to cold. Do not write cold without qualification, as this may be mistaken for some respiratory disease.

List of titles.	Explanatory notes.
Lightning.	
Drowning.	Specify as accidental or suicidal in every case.
Starvation, privation, etc.	Do not include inability to take food or exhaustion resulting from disease under this title, but state the name of the disease causing the condition. Only deaths from inability to procure food should be here included.
Inhalation of poisonous gases.	Specify nature of gas and whether accidental or suicidal. If an anesthetic used in surgical operation, and properly given, state the disease or injury for which the operation was undertaken.
Other accidental poisonings.	
Accidental gunshot wounds.	
Injuries by machinery.	
Injuries in mines and quarries.	
Railroad accidents and injuries.	
Injuries by horses and vehicles.	
Other accidental traumatisms.	
Suffocation.	Do not return without full explanation as to cause, stating
Injuries at birth.	whether by gas or poisonous vapor, in mine, etc.
Other external violence.	
Homicide.	
XIV. ILL-DEFINED DISEASES.	
*"Dropsy."	Give the cause of the dropsy, thus enabling the return to be removed from ill-defined causes.
*Sudden death.	Give the cause of the sudden death, if known.
*Heart failure.	A thoroughly worthless return. Never give it as the sole cause of death. Name the disease which occasioned the "heart failure."
*Inanition (over 3 months). a	What was the cause of the inanition?
*Debility (over 3 months). a	What was the cause of the debility?
* Marasmus (over 3 months). a	What was the cause of the marasmus? If due to tuberculosis or other wasting disease, specify definitely.
*Fever.	What fever was it? If not a specific fever, what was the disease in which the fever occurred?
Other ill-defined diseases.	

a Deaths reported from this cause under 3 months of age are compiled under "congenital debility."

Unknown.

LIST OF INDEFINITE TERMS FREQUENTLY USED BY PHYSICIANS IN STATING CAUSES OF DEATH, BUT WHICH SHOULD BE AVOIDED.

Indefinite terms used in reporting deaths.	Further information required for proper classification
Abscess.	What caused the abscess? What organ or part of the body was affected? Was it tuberculous or result of injury? If of lung, was it not pulmonary phthisis?
Accident.	What was the nature of the accident?
Acute gastritis.	State cause. Was it due to some irritant poison?
Acute hydrocephalus.	Was this due to tuberculous meningitis?
Advanced age.	What disease caused death? See "Old age."
Albuminuria.	Name the acute or chronic disease causing the albuminuria. Was it due to scarlet fever or Bright's disease?
Amputation.	What was the disease or injury requiring the amputation to be performed? State fully, and if due to injury from violence, state nature of the accident.
Anasarca.	Name disease causing anasarca. See "Dropsy."
Anemia.	State cause of the anemia, if known. A death should not be reported thus when the cause of the anemia was pulmonary tuberculosis or other wasting disease.
Anesthesia.	Name the anesthetic and state whether it was administered for a surgical operation, in which case give the disease or injury for which the operation was undertaken.
Angina.	Was it due to scarlet fever or diphtheria? This is a suspicious return and one to be carefully scrutinized by registrars.
Ascites.	Name disease causing ascites. See "Dropsy."
Asphyxia.	How? Was it accidental? If so, state fully the nature of the accident. If by gases or poisonous vapors, give particulars. Was it a case of "overlying" (child)? If in a mine, it should be so stated. Physiologic asphyxiation (mode of death) by failure to eliminate CO ₂ should not be given as a cause alone. What disease caused this condition?
Asthenia.	A practically worthless statement. See "Debility." What was the cause?
Atrophy.	What caused the atrophy? Was it tuberculous wasting (phthisis)? Was it syphilis? What organ or part atrophied?
Autoinfection.	What caused the autoinfection? This term should not be used when cholera infantum or other diarrheal disease is meant.
Bad cold.	Was it bronchitis, pneumonia, or pulmonary consumption?
Bed sores.	What was the disease causing death and during which the patient contracted bed sores? Was it rheumatism, paralysis, etc.?

(13)

Very indefinite. Name disease causing death.

Bilious attack.

Indefinite terms used in reporting deaths.	Further information required for proper classification.
Bilious fever.	Was it malarial, typhoid, or other form of fever? State definitely.
Blood poisoning.	Do you mean septicemia, syphilis, or any other definite disease? If septicemia, what was the cause? Was it puerperal?
Bottle feeding.	This return is valuable but only in connection with the disease causing death. Was the disease resulting from improper feeding diarrheal in character?
Bowel disease.	What disease of the bowels? If cholera infantum or diarrheal disease of infants, state definitely.
Bowel trouble.	What was the "trouble"? Name a definite disease. Was it diarrhea, dysentery, enteritis? Was it cancer or colic or strangulated hernia? All these are "troubles," besides some others.
Brain disease.	Was it a tumor of the brain? Was it meningitis? Name disease causing death.
Brain disorder.	What was the disease causing death? Was it paralysis, apoplexy, etc.? Was it caused by tuberculosis or syphilis? Be definite.
Brain fever.	This term is thoroughly discredited. Was it meningitis? Name disease causing death.
Breaking down.	A worthless return. What disease caused the breaking down? See "Debility."
Bright's disease.	State whether acute or chronic. Acute nephritis following scarlet fever or other infectious disease should be reported under the primary cause.
Bronchitis.	Was it acute or chronic? If it extended to pneumonia, the death should be reported from bronchopneumonia. See also "Chronic bronchitis."
Cachexia.	What disease caused the cachexia? Was it cancer, syphilis, tuberculosis? State cause definitely.
Cancer.	What organ or part of the body did the cancer affect? Always state this.
Carbuncle.	Was this anthrax or malignant pustule? Was it caused by diabetes?
Carcinoma.	What organ or part of the body did the carcinoma affect?
Cardiae asthma.	Name the form of heart disease causing death.
Cardiac asthenia.)
Cardiac debility.	These returns are generally equivalent to "heart failure," a
Cardiac failure.	return which should never be made nor accepted. See "Heart failure."
Cardiac weakness.) man man
Caries.	State location and cause. Was it tuberculous?
Casualty.	Give nature of accident.
Catarrh.	An unsatisfactory statement. Give location and preferably make a proper statement of disease causing death.
Catarrh of bowels.	Was this diarrhea or enteritis?
Catarrh of lungs.	Was this acute or chronic bronchitis, bronchopneumonia, or

pulmonary tuberculosis?

Indefinite terms used in reporting deaths.	Further information required for proper classification.
Catarrh of stomach.	Very indefinite and frequently secondary to other diseases. Name disease causing death.
Cellulitis.	Give location and cause. Was it erysipelas? Was it puer- peral or traumatic?
Cerebral coma.	"Coma" is necessarily cerebral as resulting from interference with the functions of the brain, but the cause of it may vary widely. Was it from cerebral hemorrhage, Bright's disease, etc.? Was it due to violence? If so, give nature of accident.
Cerebral exhaustion.	A more definite statement is desirable in place of this return. Was it cerebral softening, paretic dementia, etc.?
Childbirth.	Name immediate cause of death, as puerperal hemorrhage, puerperal convulsions, etc.
Choking.	Give cause. If in course of disease, name the disease causing death.
Chronic bronchitis.	This statement frequently disguises pulmonary tuberculosis. Was the death caused by consumption?
Chronic pneumonia.	Was this not pulmonary tuberculosis?
Chronic senility.	"Senility" is never a satisfactory return. See "Old age."
Cirrhosis.	Cirrhosis of what organ? Of the brain, spinal cord, liver, or kidneys?
Cold.	Cold weather (temperature) or a "cold on the lungs"? If freezing is meant, say so. If a disease, use a more defi- nite term. See "Bad cold."
Colie.	Name disease causing colic.
Collapse.	Collapse from what? Disease or injury? If from surgical operation, state the reason for the operation. "Collapse" alone is a most worthless statement.
Coma.	What was the cause of the coma? This is a mere symptom of little value for compilation unless explained. See "Cerebral coma."
Complicated disability.	First name the disease causing death, and then the compli- cations, if desired.
Complications.	What "complications" of what primary disease? Name the disease causing death.
Concealed hemorrhage.	What was the cause of the concealed hemorrhage? Did it occur during pregnancy or after childbirth? Was it from rupture of aneurism? Was it cerebral hemorrhage? If caused by violence, what was the nature of the accident or injury?
Concussion of brain.	What caused it? State the nature of the accident.
Congenital causes.	What were the congenital causes? Was death due to syphilis or tuberculosis?
Congestion.	Of what organ? Did the congestion amount to inflamma- tion? If so, it should be definitely stated. Was it pas- sive or hypostatic congestion? If so, name the disease from which it resulted.
Congestion of brain.	Was this due to hemorrhage (apoplexy)? Was it some form of meningitis? State definitely.

Indefinite terms used in reporting deaths.	Further information required for proper classification.
Congestion of lungs.	Was it acute bronchitis, bronchopneumonia, or lobar pneumonia? If so, state definitely. Was it passive or hypostatic congestion? If so, name disease causing the condition.
Congestive chill.	Was this a symptom of malarial fever, pneumonia, or other acute disease? State definitely the disease causing death.
Congestive fever.	Was it malarial or other fever? Give name.
Continued fever.	Was it typhoid fever? State definitely.
Convulsions.	What caused the convulsions? Were they epileptic, puer- peral, or caused by diarrhea or enteritis (infants)? Name the disease in which the convulsions occurred. "Convulsions" are mere symptoms and should not be given as equivalent to a proper statement of cause of death.
Cramps.	See "Convulsions" above. Inquire especially whether due to diarrheal disease (infants).
Crushed.	What was the nature of the accident? Was it in a mine, by falling earth in excavation, by railroad accident, etc.?
Cyanosis.	If due to malformation of heart in infants, so state it. It due to organic disease, state definitely.
Debilitated.	Name the disease or other cause of the debilitated condition See "Debility."
Debilitation of heart.	See "Heart failure." This is a worthless synonym for ar indefinite return that should never be accepted.
Debility.	What caused the debility? Name the acute or chronic dis ease. Debility might follow typhoid fever, diphtheria tuberculosis, Bright's disease, and a host of other causes The return is worthless and should never be made.
Decrepitude.	Entirely indefinite. What was the cause of the condition See "Debility."
Defective circulation.	In infants inquire whether this was due to malformation of heart (cyanosis). What caused the defective circulation was it due to organic heart disease? This return may be equivalent to the worthless "heart failure."
Defective vitality.	Indefinite. See "Debility."
Delirium.	Give cause of delirium.
Dementia.	If any acute disease caused death it should be named, as also the cause of the dementia, if known.
Dentition.	What was the disease causing death of the teething child "Dentition" is not a proper cause of death, and, like "infantile" and "old age," does little except to mark the approximate age of decedents.
Deranged nerves.	Worthless. Name the disease causing death.
Despondency.	Was this a death from suicide? If so, state means employed
Diarrhea.	Diarrhea occurring as a mere symptom of other diseases, a tuberculosis, cancer, etc., should not be reported as the cause of death.
Diathesis.	Name actual disease causing death.
Diathesis.	

Indefinite terms used	in
reporting deaths.	

Further information required for proper classification.

Died suddenly.

What caused the death? If no cause can be ascertained, this return is preferable to a mere guess. Did the death occur during an acute disease? Was it apoplexy or organic heart disease? Such cases may require investigation by the health officer or coroner.

Disease of brain, bowels, heart, liver, lungs, stomach, uterus, or other organs or parts of the body.

Name the disease causing death. Never make a return of the mere location of the disease without specifying its nature.

Dropsy.

Name the disease in which the "dropsy" occurred. This is a mere symptom and should never be accepted when possible to secure a definite statement of cause. In children inquire whether scarlet fever preceded. Was it due to organic heart, liver, or kidney disease?

Drowning.

Always state whether accidental or suicidal, if known.

Dyspepsia.

Not to be accepted as a proper statement of cause of death when more definite information can be obtained. Was there organic disease of the stomach or other organs? If so, name the disease causing death.

Eclampsia.

Give cause of convulsions. Were they puerperal?

Edema of lungs.

Give cause. See "Congestion of lungs."

Effects of age.

Name the disease causing death. See "Old age."

Electrocuted.

Was this legal execution or accidental death by electricity?

Emaciation.

What caused the emaciation? Was it pulmonary phthisis? Was it after some acute disease, as typhoid fever? Name the disease causing death.

Encephalitis.

This term is deservedly passing out of use. Name definite disease. See "Brain fever."

Endometritis.

Give cause. Was it puerperal?

Epithelioma.

What part of the body was affected?

Eruption.

Name disease causing eruption.

Eruptive fever.

Name the fever precisely. Health officers should investigate such a return in order to discover presence of some communicable disease.

Exhaustion.

What caused the "exhaustion"? This is a most worthless term, but one frequently returned from public institutions. If after a surgical operation, name the disease or injury for which the operation was undertaken.

Failure of vital powers.

A worthless statement, not better than "debility," which see. What disease caused the failure of vital powers?

Feebleness.

What disease caused death? See "Debility."

Female trouble.

What was the disease causing death? Was it a uterine or ovarian tumor or cancer? Was it a result of childbirth? Such an indefinite and worthless statement as this should never be accepted without question.

Fever.

What was the fever? Was it enteric (typhoid) fever? Was it scarlet fever? Was the fever merely symptomatic of some acute disease, as tuberculosis, pneumonia? Was it puerperal fever? It is very important that full information be given in such a case.

Filling up of lungs.

Was this due to bronchitis? Pneumonia? Pulmonary consumption? Name the disease causing death.

Indefinite terms used in reporting deaths.	Further information required for proper classification.
Fits.	Were these epileptic "fits"? See "Convulsions."
Fracture.	What was the nature of the accident causing the fracture?
Gangrene.	Did this follow an injury? If so, state nature of accident that caused it. Give cause for condition, if known.
Gastrie catarrh.	See "Catarrh of stomach."
Gastric fever.	A worthless return. Was it acute gastritis (q. v.) or some definite form of fever, as typhoid, malarial, etc.?
*General anasarca. a	See "Dropsy."
*General asthenia.a	See "Asthenia."
*General breaking down.a	See "Breaking down."
*General debility.a	See "Debility."
*General decline.a	What caused the decline? Was it pulmonary phthisis? State disease.
*General dropsy.a	See "Dropsy."
*General failure.a	Name the disease that caused death. What organ failed especially? If heart, see "Heart failure."
*General inertia.a	See "Debility." In Southern states inquire as to infection from uncinaria.
General paralysis.	If extended paralysis resulted from cerebral hemorrhage the cause should be given and the expression "general paralysis" should be avoided. "General paralysis" should be written only for "general paralysis of the in- sane," or paretic dementia, and the statement of the fact of insanity should always be included.
*General prostration.a	What was the cause?
*General weakness.a	What disease led to this condition?
Gradual decay.	What disease caused the gradual decay? Was it pulmonary tuberculosis?
Gunshot wound.	Accidental, suicidal, or homicidal?
Hanging.	Suicidal, or legal execution?
Headache.	A mere symptom without definite value for statistical pur- poses. What disease caused death?
Head trouble.	Was this a disease of the brain or of the face or scalp? What was the disease causing death?
Heart clot.	State if caused by embolism. Did it occur in course of in- fectious disease? Was there organic disease of the heart?
Heart disease.	Better stated as "organic heart disease," and the exact form of the disease, with its origin, if known, would be still more desirable. Do not report "heart disease" in every case of sudden death unless it actually existed.
Heart failure.	This return, with all of its worthless synonyms, as "cardiac asthenia," "cardiac debility," "cardiac paralysis," etc., should never be accepted as the sole cause of death. What disease caused the "heart failure"? The heart always "fails" before death from any cause. Be particularly careful that deaths from diphtheria, tuberculosis, etc., are not so reported. If organic heart disease is meant it should be so stated.

a As a rule, the adjective "general" attached to an indefinite term throws no additional light upon the case. The accuracy of all such expressions is questionable.

Indefinite terms used in reporting deaths.	Further information required for proper classification.
Heart trouble.	Was it organic heart disease?
Hematemesis.	Name the cause. Was it ulcer or cancer of stomach? Was the blood derived from the lungs and was it a case of pulmonary phthisis?
Hemoptysis.	See "Hemorrhage of lungs."
Hemorrhage.	From what organ or part of the body? Was it puerperal, or from accident or injury? If the latter, state nature of injury and whether accidental, suicidal, or homicidal. If from lungs, was it not due to pulmonary tuberculosis? Was it cerebral or from rupture of aneurism?
Hemorrhage of bowels.	Did this occur in course of typhoid fever? Then the disease causing the hemorrhage of bowels should be given as the cause of death.
Hemorrhage of lungs.	Was this not due to pulmonary tuberculosis? If so, the primary cause should be reported without fail.
Hereditary influence.	What is meant—tuberculosis? Syphilis? State definite disease causing death.
Hydrocephalus.	Was it congenital hydrocephalus? If acute hydrocephalus, state whether caused by tuberculous meningitis.
Hypostatic congestion.	Name the disease causing the passive or hypostatic congestion.
Icterus.	See "Jaundice."
Imbecility.	Was it congenital, or after disease of brain? If the latter, state cause of condition.
Imperfect nutrition.	State name of disease causing imperfect nutrition. Did it follow some disease? If so, give name of disease.
Inanition.	This is a particularly pernicious term and is responsible for a multitude of worthless certificates. It sounds as if it meant something definite, but, in the majority of cases, it does not. What disease caused the inanition? Was it syphilis, tuberculosis, cholera infantum? If inability to take food, state cause.
Indisposition.	Worthless. What disease caused death?
Inertia.	What disease caused death? Uterine inertia: Uncinariasis? See "Debility."
Infancy.	"Infancy" is not a disease or cause of death. Infants are peculiarly liable to certain affections, which should be definitely named. What disease caused death?
Infantile asthenia.	See "Asthenia" and "Infancy." The term "infantile" adds no precision to an indefinite statement.
Infantile atrophy.	See "Atrophy" and "Infancy."
Infantile debility.	See "Debility" and "Infancy."
Infantile marasmus.	See "Marasmus" and "Infancy."
Infirmity.)
Infirmity of age.	What disease caused the "infirmity"? See "Old age."
Inflammation.	Inflammation of what organ or part of the body? State cause, if known.
njury.	What was the nature of the injury, and was it accidental, spicidal or homicidal?

suicidal, or homicidal?

Indefinite terms used in reporting deaths.	Further information required for proper classification.
Insanity.	Give form of insanity and immediate cause of death
Internal hemorrhage.	Hemorrhage of what organ? Rupture of aneurism? Puer- peral hemorrhage? If due to external violence, state nature of accident.
Internal injuries.	State nature of accident causing internal injuries.
Intestinal hemorrhage.	Did this follow typhoid fever? If due to injuries, state fully nature of accident.
Intestinal perforation.	Was this a result of typhoid fever? Was it due to hernia or other intestinal obstructions? Was it the result of violence? State fully the cause of this condition.
Inward convulsions.	Name disease causing convulsions. See "Convulsions."
Jaundice.	When jaundice or icterus is reported for decedents over three months of age, name disease causing this condition.
Kidney complaint.	Name the form of kidney disease as definitely as possible. "Kidney complaint" is very indefinite.
Kidney disease.	Name the disease.
Kidney trouble.	Name the disease.
Killed.	Accidental, suicidal, or homicidal? State means of death. This calls for investigation by a coroner.
Lack of energy.	Name disease causing death.
Lack of respiration.	Name the disease in which the "lack of respiration" occurred. Was it diphtheria? Was it asphyxia or suffocation? Was it atelectasis (infant)?
Lack of vitality.	What disease caused death? See "Debility."
Laparotomy.	What was the disease or nature of injury requiring operation?
Laryngitis.	Was it not diphtheritic?
Liver complaint.	Was there a definite disease of the liver? If so, state it precisely.
Liver disease.	Name the disease.
Loss of blood.	What caused the "loss of blood"? See "Hemorrhage."
Lung disease.	Was it acute or chronic bronchitis, bronchopneumonia, lobar pneumonia, or pulmonary tuberculosis? Name the definite disease causing death.
Lung trouble.	What was the name of the disease? Was it pulmonary tuberculosis? Was it pneumonia?
Malaria.	Was death caused by malarial fever? Do not use the term "malaria" loosely, but limit it to forms of disease of definite malarial origin.
Malassimilation.	What disease caused the malassimilation?
Malignant disease.	Name the disease. Was it scarlet fever, diphtheria, cancer, or other disease to which the very indefinite adjective "malignant" may be applied?
Malignant fever.	Name the fever.
Malignant sore throat.	Was not this diphtheria?
Molnatultion	What disease anneal the malantaities 9

What disease caused the malnutrition?

Malnutrition.

Indefinite terms used in reporting deaths.	Further information required for proper classification.
Marasmus.	What disease caused the "marasmus"? Was it due to tuberculosis, syphilis, or cholera infantum? State fully as this return in itself is practically worthless for compilation.
Meningitis.	Was it epidemic cerebro-spinal meningitis? If so, write exactly in this form, being particular not to omit the word "epidemic." Did it follow scarlet fever, pneumonia, or some acute infection? If so, name the primary disease. Was it traumatic? If so, state the nature of the violence which caused the meningitis. Was it tuberculous meningitis?
Mental debility.	Give cause of "mental debility," and immediate cause of death.
Metritis.	Give cause. Was it puerperal?
Metroperitonitis.	Give cause. Was it puerperal?
Milk infection.	State whether diarrhea or enteritis was caused by the milk infection.
Mortification.	State cause. See "Gangrene."
Narcotism.	Name narcotic employed, and whether accidental, suicidal, or homicidal.
Natural causes.	Name the disease causing death. The statement "natural causes" is entirely worthless, although frequently reported by coroners.
Necrosis.	Give location and cause. Was it tuberculous?
Nephritis.	Was it acute or chronic? If acute, occurring in the course of some disease, name the disease causing death.
Nervous exhaustion.	Name a definite disease causing death, if possible.
Nervous fever.	Give name of fever attended with nervous or cerebral symptoms. Was it typhoid fever?
Nervous fit.	See "Convulsions."
Nervous shock.	What caused the nervous shock? Was it due to an accident or injury? If after surgical operation, name disease or injury requiring operation.
Newborn.	What disease caused death of the newborn child? See "Infancy."
No vitality.	What disease caused death? What caused the lack of vitality?
Obstruction.	Obstruction of what? Name organ affected.
Old age.	This is not a satisfactory return. The influence of age is shown by the statement of age in years, months, and days. To this the statement of "old age" as a cause of death adds nothing of value. Name the disease to which the old person succumbed.
Operation.	Name the disease or injury requiring the operation. See "Surgical operation."
Overwork.	Name disease causing death.
Paralysis.	Give cause of paralysis, if known, or state definite form, as paralysis agitans, infantile paralysis, etc. Did the pa- ralysis follow cerebral hemorrhage? Did it follow some

acute disease? Give the primary cause.

Indefinite terms used in reporting deaths.	Further information required for proper classification.
Paralysis of heart.	This is usually a mere synonym of "Heart failure" and should never be used nor accepted. See "Heart failure."
Pelvic abscess.	What was the cause? Was it puerperal?
Pelvic peritonitis.	What was the cause? Was it puerperal?
Perforation of bowels.	See "Intestinal perforation."
Perimetritis.	What was the cause? Was it puerperal?
Peritonitis.	What was the cause of the peritonitis? "Idiopathic peritonitis" should be rarely returned. Was it puerperal or traumatic? In the latter case, state mode of injury.
Pernicious anemia.	If any definite cause can be assigned for the anemia, it should be reported. Anemia due to tuberculosis, syphilis, etc., should be returned under the primary disease.
Phlebitis.	What was the cause? Was it puerperal?
Pneumonia.	Specify definitely whether bronchopneumonia or lobar pneumonia. If sequel to influenza, state that fact.
Poisoning.	Name poison, and whether accidental, suicidal, or homicidal. Autointoxication should not be returned in this form, but the disease causing the condition should be named.
Pregnancy.	State cause of death more specifically. Was it due to abortion or miscarriage, nephritis, etc.?
Progressive asthenia.	What was the disease causing the condition? See "Asthenia."
Prostration.	What disease caused the prostration? See "Debility."
Pulmonary hemorrhage.	Was it not due to pulmonary tuberculosis?
Pyemia.	What caused the pyemia? Was it puerperal or traumatic? If traumatic, state nature of accident causing injury.
Rash.	What was the disease attended by rash? This is a suspicious return and may indicate scarlet fever, measles, etc.
Rheumatism.	Always state whether acute or chronic. If chronic rheuma- tism, note any organic disease of heart or other organs resulting therefrom.
Rubeola.	Was this measles or German measles (rötheln)?
Rupture.	Rupture of what? If hernia is meant, it would be better so written, as "rupture" alone may be misinterpreted.
Sarcoma.	Of what organ or part of the body?
Scarlet rash.	Was this scarlet fever?
Sclerosis.	Sclerosis of what organ? If cancer (scirrhus) is meant, state that fact definitely.
Scrofula.	A term now fortunately going out of use. State definitely the form of tuberculosis.
Senectus.	See "Old age."
Senile anasarca.	See "Old age" and "Dropsy." Neither term is satisfactory. Give disease causing death.
Senile asthenia.	See "Old age" and "Asthenia." Give disease causing death.
Senile atrophy.	See "Old age" and "Atrophy." State disease causing death.
Senile decay.	See "Old age." State disease causing death.
Senile declino.	See "Old age." Name the disease, if any, that caused the decline.

Indefinite terms used in reporting deaths.	Further information required for proper classification.	
Senile degeneration.	See "Old age." Degeneration of what organ? State di- ease causing death.	
Senile dementia.	See "Old age."	
Senile disease.	What was the disease? See "Old age."	
Senile exhaustion.	See "Old age" and "Exhaustion." Name disease causin death.	
Senile marasmus.	See "Old age" and "Marasmus." Name disease causing death.	
Senility.	See "Old age." Name disease causing death.	
Sepsis.		
Septicemia.	What caused the "septicemia"? Was it puerperal, transmatic, or did it occur in the course of some disease Specify fully.	
Septic infection.		
Septic poisoning.		
Shock.	What caused the shock? If from injury, state nature of accident. If from surgical operation, state disease of injury requiring the operation.	
Shot.	How? Accidental, suicidal, or homicidal?	
Simple atrophy.	See "Atrophy."	
Sloughing.	Explain fully, stating disease or injury.	
Sore throat.	Was it not diphtheria? Such a return in a fatal case is ex- tremely suspicious, and a definite statement should be insisted upon by registrars.	
Specific disease.	Name the disease.	
Specific infection.	Name the disease.	
Spinal trouble.	Was this a disease of the spinal cord or of the spine, and in either case, what was the disease? Was it Pott's dis- ease of the spine?	
Stillborn.	Never report a child as stillborn unless dead at birth. If the child survived any time whatever, the cause of death should be stated.	
Stomach trouble.	Was it cancer, round ulcer, or other definite disease of the stomach? State fully as this, alone, is very indefinite and unsatisfactory.	
Stoppage.	Stoppage of what? Explain fully and name disease causing death.	
Strangulation.	Was this strangulation from disease (diphtheria), choking, or hanging? If from disease, state fully. If from hanging, state whether suicidal or legal execution.	
Stricture.	Stricture of what? Was it of intestines, esophagus, urethra?	
Stroke.	Was this a "stroke of apoplexy" due to cerebral hemorrhage?	
Stupor.	What was the cause of the stupor, disease, or injury? State fully. See also "Coma."	
Sudden.	What disease caused the sudden death? If from violence,	

Suffocation.

State very precisely the cause of the suffocation, as this term, returned alone, is very indefinite. See "Asphyxia."

Indefinite terms used in reporting deaths.	Further information required for proper classification. State means of death employed.		
Suicide.			
Surgical operation. Surgical shock.	Always state the disease or injury requiring operation. Un less the operation was improper or unskillfully performed it should not be given as the primary cause of death.		
Syncope.	What caused the syncope? Was death due to organic hear disease? Give disease causing death.		
Teething.	Name the disease affecting the teething child. See "Dent tion."		
Tonsilitis.	Was death not due to diphtheria? This is a suspiciou return.		
Toxemia.	Was this acute or chronic poisoning due to some external agent? If so, state fully, giving name of poison, whether accidental, etc. Was it autointoxication, due to poisons generated in the body by disease? If so, state the name of the disease causing the condition which resulted in death. Avoid use of easily misunderstood terms of this character.		
Tuberculosis.	State organ affected. Do not fail to state as pulmonary tuberculosis if lungs were affected.		
Tumor.	Was it a cancer? Whether a cancer or tumor, do not fail to specify organ or part of body affected.		
Typhoid condition.	Avoid this term as it is likely to be mistaken for typhoid fever.		
Typhoid pneumonia.	Was the primary disease typhoid fever or pneumonia?		
Typho-malarial fever.	Was it typhoid fever? Was it malarial fever? A mixtur of these diseases rarely occurs, the great majority of case of so-called "typho-malarial fever" being nothing mor nor less than typhoid fever.		
Typhus.	Was this not typhoid fever?		
Ulcer.	State location and cause.		
Uremia.) State cause of uremia. If due to an acute disease, the latte		
Uremic poisoning.	should be named as the cause of death. If in Bright's or other organic disease, state fully. Was it puerperal?		
Violence.	State form of violence and whether accidental, suicidal, or homicidal.		
Vital degeneration.	Worthless. State disease causing death.		
Want of vitality.	See "Lack of vitality."		
Wasting.	What was the disease causing "wasting"? See "Atrophy."		
Weak heart.	If organic heart disease, so state it. Give the disease causing death. This return may be equivalent to "Heart failure," which see.		
Weakness.	Name disease causing weakness. See "Debility."		
Wounds.	What was the cause of the injury, and was it accidental or		

A copy of the list of indefinite returns given above will be sent to every local registrar in the United States with the suggestion that no certificates containing only these or similar terms be accepted, and no burial permit be issued, until the cause of death

homicidal?

is accurately specified, in accordance with the explanatory notes, or a satisfactory explanation made.

It is not to be expected that an entirely definite and accurate statement of the cause of death can be made in every case. There will undoubtedly be cases in which the exact cause can not be ascertained and others in which an accurate diagnosis is impossible, but an observance of the suggestions made in this circular will very largely reduce the number of deaths that must necessarily be classed as unknown or ill-defined.

COMPLETE RETURNS.

THE STANDARD CERTIFICATE OF DEATH.

What has been said above relates wholly to the statement of the cause of death, which is always furnished by the physician. But while this is the most important item, a complete return of any death requires the statement of other personal and statistical particulars concerning the death, and the blank certificate or return used for reporting deaths is simply a specification, in convenient form, of the legal requirements in the case, all of which are intended to be observed.

The relation to and influence upon the mortality from different diseases, of age, sex, color, conjugal condition, nativity, parent nativity, and occupation, are of the utmost importance, and the preparation of uniform statistics for all registration states and cities requires that these items, and others necessary for record, shall be given just as fully and as accurately as the cause of death. It is, therefore, very desirable that the forms of certificates used shall, as far as possible, be identical in substance.

To promote uniformity in this direction, the "Standard Certificate of Death" (copies inclosed) has been prepared, in conjunction with the Committee on Demography and Statistics of the American Public Health Association, and has been approved by resolution of the Association. This form of certificate has been adopted by the states of Colorado, Illinois, Indiana, Michigan, New York, and Vermont, and will be adopted by other states and cities as soon as the change can conveniently be made.

In some of the states and cities the law requires the physician to supply all of the information called for by the form of certificate used, and attention is therefore directed to the "Standard Certificate" as indicating the detailed information generally required. So far as the form in local use corresponds to the Standard Certificate, the facts should be stated as called for in the latter.

Particular attention is directed to the items relating to conjugal condition, birthplace, birthplace of father and mother, and occupation, as these are the items most frequently omitted in the returns. They all constitute principal factors in some of the statistical tables, and should be supplied in every instance if they can possibly be ascertained.

Age should be stated exactly, not in "round numbers."

Widowed or divorced persons should not be reported as "married" or "single."

Birthplace of person, of father, and of mother are very important. Occupation should always be reported for any person who has

any remunerative employment—women as well as men—and in reporting occupation particular care should be taken to express it in such a way that it will not be confounded with other occupations.

Civil, mechanical, and mining engineers should be distinguished from *locomotive* engineers, and locomotive engineers and firemen from those of stationary engines.

Commercial travelers or salesmen should be distinguished from clerks or salesmen in stores.

Miners should be distinguished as coal, iron, lead, etc.

Mill and factory operatives should be distinguished according to the product of the mill, as woolen, cotton, silk, carpet, etc.

Agricultural laborers, railroad laborers, and ordinary day laborers should be distinguished from each other.

Married women, female heads of families, and girls who are employed only in their own homes should not be reported as "housekeepers," "housewives," or "housework."

This circular is one of a series designed to secure uniformity in the return, classification, tabulation, and presentation of mortality statistics, which should be of greater importance and value to physicians than to any other class, as contributing to the advancement of medical science; and the basis of the statistics is the returns made by the physicians themselves.

W. A. KING, Chief Statistician for Vital Statistics.

Approved:

WM. R. MERRIAM, Director.



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