

**National Violent Death Reporting System
Coding Manual
Version 2**

**National Center for Injury Prevention and Control
Centers for Disease Control and Prevention**

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National Violent Death Reporting System Coding Manual Team

The creation of the National Violent Death Reporting System (NVDRS) coding manual has been a collaborative process involving Centers for Disease Control and Prevention (CDC), National Violent Injury Statistics System (NVISS) and InDyne. CDC has taken the lead on developing the case definition, table structure, the document-based architecture of the system, and several new data elements. NVISS supplied most of the data elements and definitions based on an earlier pilot for the NVDRS. The NVISS Child Fatality Module Team developed the Child Fatality data elements that are being piloted in NVDRS. InDyne, Inc., produced the software for the system.

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Introduction

Purpose of the Coding Manual

The NVDRS Coding Manual is a reference document to be used by state health departments for defining cases, entering data, and checking data once it is entered. It contains information about individual variables and the way the data are structured. The Coding Manual is intended to be used in conjunction with the materials provided at the coding training and the NVDRS Software Manual. It should be kept at hand when doing data entry or checking, both in the office and in the field. This manual is stored in the software as an Adobe Acrobat.pdf file and will be available at www.cdc.gov/ncipc/profiles/nvdrs/publications.htm. Other material related to setting up a state violent death reporting system can be found in the NVDRS Implementation Manual.

Background on NVDRS

Violence against others or oneself is a major public health problem in the United States, claiming 50,000 lives each year. It is a particular problem for the young: homicide was the second and suicide was the third leading cause of death for Americans 1 to 34 years of age in 2001.

Given the importance of the problem, it is noteworthy that no national surveillance system for violence exists in the United States. In contrast, the federal government has supported extensive data collection efforts for the past three decades to record information about other leading causes of death. For example, the National Highway Traffic Safety Administration has recorded the critical details of fatal motor vehicle crashes, which result in about 40,000 deaths among U.S. residents annually. That system, called the Fatality Analysis Reporting System (FARS), has existed since 1975. The result of that investment has been a better understanding of the risk factors for motor vehicle deaths — information that has helped to target safety improvements that have led to a significant decline in motor vehicle fatalities since the 1970s.

Public health leaders and others are aware of the long-standing gap in information about violence, and have been pressing the need for a national surveillance system for violent deaths since 1989. In 1999, the Institute of Medicine recommended that CDC develop a fatal intentional injury surveillance system modeled after FARS. That same year, six private foundations pooled their funds to demonstrate that data collection about violent deaths was feasible and useful. They supported the National Violent Injury Statistics System (NVISS). NVISS has been administered by the Harvard Injury Control Research Center and includes 12 participating universities, health departments, and medical centers.

In 2000, dozens of medical associations, suicide prevention groups, child protection advocates, and family violence prevention organizations joined a coalition whose purpose was to secure federal funding to extend NVISS-like surveillance nationwide. Congress approved \$1.5 million in funding to start the new system, called the National Violent Death Reporting System (NVDRS), in fiscal year 2002. The first cooperative agreements

were established with six state health departments in September 2002, including: Maryland, Massachusetts, New Jersey, Oregon, South Carolina and Virginia. Additional funding to add more states was made available in fiscal year 2003 and another seven states were funded (Alaska, Colorado, Georgia, North Carolina, Oklahoma, Rhode Island, and Wisconsin). Further funding became available in 2004, and California, Kentucky, New Mexico, and Utah received funding to begin data collection in 2005.

NVDRS Methodology

NVDRS will provide a census of violent deaths that occur within the United States to both residents and nonresidents. The system will define a death due to violence as “a death resulting from the intentional use of physical force or power against oneself, another person, or against a group or community,” which is the World Health Organization (WHO) definition of violence. The case definition includes suicides, homicides, deaths from legal intervention (a subtype of homicide), deaths from undetermined intent, and unintentional firearm fatalities. Deaths of undetermined intent are included because this category includes some deaths with some evidence of intent, but without enough to definitively classify as purposeful. Unintentional firearm injury deaths, otherwise known as accidental, are included because the category includes some deaths that are in fact intentional or undetermined. Legal executions, which are considered part of deaths from legal intervention, are excluded from NVDRS as beyond the scope of public health. (Case definitions are provided in detail with examples in the following section of the manual.)

The system will be coordinated and funded at the federal level but will depend on separate data collection efforts in each state managed by the state health departments. In accordance with the system’s design principles, the data will be incident-based rather than victim-based. The record for an incident will include information about all the victims and suspects, their relationships, and any weapon(s) involved in each incident.

To fully characterize the incidents, states will collect information about each incident from three primary data sources: Death Certificates (DC), Coroner/Medical Examiner (CME) records, and Police Records (PR). A fourth source, crime lab records, will be tapped when a firearm is involved in the incident. (More information about these sources can be found in the NVDRS Implementation Manual.) Most states will find it easiest to begin data collection with death certificates because the state health department itself collects death certificates. At a minimum, 85 unique data elements will be collected for a relatively simple incident like a firearm suicide by an adult. Many additional variables are available as options or for more complicated cases. The data are sorted by source document so the source of each entry can be determined.

Over time, additional data sources that are particularly useful for specific kinds of death may be added to the system. In the first year of NVDRS, for example, some of the funded state health departments tested the availability and utility of data from child fatality review teams, using a module specially designed to take advantage of the detailed information available from that source.

Data collection can be done by either abstraction from the records maintained by the primary sources at their offices or by transfer of data from the primary sources to the health department's NVDRS office. At present, most data must be manually entered into the software. Data collection will be staged so that basic demographic information can be published early and more detailed information about potential causal factors can be published later. Death certificates will probably provide the earliest information, but this may not be the case in every state. Hopefully, certificate information will be available to the health department and entered into the system within six months. Police and CME data are expected to become available within 18 months of the occurrence of the death.

The data are stored in a secure, relational database. Personally identifying variables will not be forwarded to the national database. A list of those variables is available from CDC. The list includes names, social security number, street address of injury and residence, full birth date, source record numbers, and firearm serial number. The software used to enter and transmit the data is described in a separate NVDRS Software Manual. Deaths occurring in 2003 will constitute the first year of data for NVDRS.

Definitions

Centers for Disease Control and Prevention (CDC) has developed these case definitions for NVDRS. States should collect information about all cases that meet these definitions. They may also, however, develop their own, different state definitions. If their definitions are broader than those shown here, states may also enter cases that meet only their case definitions into their database. Reports generated by CDC, however, will include only those cases that meet the CDC definitions. States should cite which definition they are using, state or federal, when they cite their own data.

I. Violent Death

A. Conceptual definition

A death that results from the intentional use of physical force or power, threatened or actual, against oneself, another person, or a group or community. The person using the force or power need only have intended to use force or power; they need not have intended to produce the consequence that actually occurred. “Physical force” should be interpreted broadly to include the use of poisons or drugs. The word “power” includes acts of neglect or omission by one person who has control over another.

In addition, NVDRS captures unintentional firearm deaths. Such deaths are defined in Section IV. D, below.

B. Operational definition to be used in case ascertainment

1. The underlying cause of death must be coded on the death certificate as one of the causes listed on Table 1, and
2. The death of a fetus prior to birth that is caused by violence is not included in the case definition.

II. Resident and Occurrent Violent Deaths

A. U.S. resident violent death

The decedent was an official resident of the United States, including its territories, or a resident of a Native American reservation at the time of injury, according to the death certificate.

B. State resident violent death

The decedent was an official resident of the state (or territory) including those portions of a Native American reservation within the state at the time of injury, according to the death certificate.

C. U.S. occurrent violent death

The initial injury must have occurred within the United States, including its territories, or on a Native American reservation.

D. State occurrent violent death

The initial injury must have occurred within the state or on those portions of the Native American reservations within the state.

Note: The collection of all resident violent deaths is essential for calculating population-based rates. The collection of all occurrent fatal injuries is essential for designing and evaluating prevention efforts focused on specific communities. Usually the state of residence and state of occurrence of a fatal injury will be the same, but every state will have some exceptions. States are expected to collect both violent deaths among their residents, wherever they occur, and fatal violent injuries occurring within their borders irrespective of residence. If the states of residence and injury occurrence are both NVDRS states, the state of injury occurrence is responsible for collecting the information.

III. Preliminary Versus Confirmed Violent Death

A. Preliminary violent death

1. The underlying cause of death has not yet been officially coded using the International Statistical Classification of Diseases and Related Health Problems, 10th Revision (ICD-10); and
2. Review of the uncoded death certificate or official police or coroner/medical examiner (CME) records indicate that the death is likely to be ultimately coded as one of the ICD codes included in the case definition above.

B. Confirmed violent death

The underlying cause of death has been officially coded using ICD-10 as one of the codes included in the case definition above.

IV. Violent Death Types

For public health purposes, violent deaths are assigned to types according to the ICD code assigned to the underlying cause of death indicated on the death certificate by the CME. However, CMEs may not use the same definitions in all states. Therefore, NVDRS will also try to achieve some standardization of death type through these definitions. NVDRS sites should also use these definitions to identify preliminary cases.

A. Suicide

A death resulting from the intentional use of force against oneself. A preponderance of evidence should indicate that the use of force was intentional.

Specific scenarios that should be classified as suicide:

- ~ A person committed a suicidal act, then changed his mind, but still died as a result of the act
- ~ A person intended only to injure rather than kill himself — “Russian roulette” played voluntarily with a firearm
- ~ Assisted suicide involving passive assistance to the decedent, e.g., supplying only means or information needed to complete the act
- ~ Intentional, self-inflicted deaths committed while under the influence of a mind-altering drug taken voluntarily
- ~ Intentional, self-inflicted deaths committed while under the influence of a mental illness

Specific scenarios that should not be classified as suicide: (The preferred NVDRS category is shown in parentheses.)

- ~ The physical consequences of chronic substance abuse, including alcohol or drugs (natural death)
- ~ Acute substance abuse including alcohol or drugs with less than a preponderance of evidence of intent to use the substance(s) against oneself (undetermined or unintentional injury death)
- ~ Death as a result of autoerotic behavior, e.g., self-strangulation during sexual activity (unintentional injury death)

B. Homicide¹

Homicide is defined as a death resulting from the intentional use of force or power, threatened or actual, against another person, group, or community. A preponderance of evidence must indicate that the use of force was intentional. Such deaths resulting from legal intervention are included in a separate category below. Two special scenarios the National Center for Health Statistics (NCHS) regards as homicides are included in the NVDRS definition: (1) arson with no intent to injure a person, and (2) a stabbing with intent unspecified.

Specific scenarios that should be classified as homicide:

- ~ Deaths when the suspect intended to only injure rather than kill the victim
- ~ Deaths resulting from heart attacks induced when someone uses force or power against the decedent
- ~ A death resulting from a weapon that discharges unintentionally while being used to control or frighten the victim — Deaths that result when a person kills an attacker in self-defense
- ~ Deaths labeled “justifiable homicides” where the person committing the homicide was not a police officer
- ~ Deaths that result from a variation of Russian roulette where one person aims a partially loaded gun at another person and pulls the trigger knowing that there was at least some chance that the gun would fire
- ~ Death attributed to “child abuse” without an intent being specified
- ~ Death of a child after birth that results from a direct injury due to violence sustained prior to birth
- ~ Death that results from an intentional act of neglect or omission by one person against another

Specific scenarios that should not be classified as homicide: (The preferred NVDRS category is shown in parentheses.)

- ~ “Vehicular homicide” without a preponderance of evidence of intent to use force against another (unintentional injury)
- ~ Hunting “accident” with a gun (unintentional firearm injury)
- ~ “Accidental” deaths at shooting ranges (unintentional firearm injury)
- ~ A youth kills someone by playing with a gun he believes is unloaded (unintentional firearm injury)
- ~ Deaths that take place in combat in declared or undeclared wars (operation of war)

- ~ Death of a child after birth that results indirectly from violence sustained by its mother before its birth, e.g., a death from prematurity following premature labor brought on by violence (coded as “condition originating in the perinatal period”.)

C. Undetermined manner of death

A death resulting from the use of force or power against oneself or another person for which the evidence indicating one manner of death is no more compelling than the evidence indicating another manner of death.

Specific scenarios that should be classified as undetermined manner of death:

- ~ Coroner or medical examiner ruling that states: “accident or suicide,” “accident or homicide,” “undetermined,” “open verdict,” or “jumped or fell”
- ~ Self-inflicted injuries when the records give no evidence or opinions in favor of either unintentional or intentional injury

D. Unintentional firearm injury death

A death resulting from a penetrating injury or gunshot wound from a weapon that uses a powder charge to fire a projectile when there was a preponderance of evidence that the shooting was not intentionally directed at the victim.

Specific scenarios that should be classified as unintentional firearm deaths:

- ~ Celebratory firing that was not intended to frighten, control, or harm anyone
- ~ A person shoots himself when using a gun to frighten, control, or harm another person
- ~ A child less than the age of 6 shoots himself or another person
- ~ A soldier who is shot during field exercises in peacetime
- ~ A person mistakenly thinks a gun is unloaded and shoots himself or another person while fooling around with it
- ~ A child who dies after birth from an unintentional firearm injury that is sustained prior to birth, i.e., in utero

Specific scenarios that should not be classified as unintentional firearm deaths:
(The preferred NVDRS category is shown in parentheses.)

- ~ A person unintentionally shoots someone while defending himself against an aggressor (homicide)
- ~ A person unintentionally shoots another person while using a gun to commit a crime (homicide)
- ~ Firearm injuries caused by unintentionally striking a person with the firearm, e.g., by dropping it on their head, rather than with a projectile fired from the firearm (non-firearm unintentional injury)
- ~ Unintentional injuries from non-powder guns (e.g., BB, pellet, and other compressed air or gas-powered guns) (non-firearm unintentional injury)

E. Legal intervention death

A death when the decedent was killed by a police officer or other peace officer (persons with specified legal authority to use deadly force), including military police, acting in the line of duty.

Specific scenarios that should be classified as legal interventions:
~ “Justifiable” and “criminal” homicides meeting the above definition

Specific scenarios that should not be included in the legal intervention category in NVDRS:

~ Legal executions

F. Terrorism-related death

Terrorism deaths are homicides or suicides that result from events that are labeled by the Federal Bureau of Investigation (FBI) as acts of terrorism.

Terrorism is a mechanism of death rather than a manner of death. The manner of such death is either homicide or suicide.

V. Violent Death Incident

Unlike most public health surveillance systems, that are victim-based, the NVDRS is incident-based and reports all victims and suspects associated with a given incident in one record. A violent death incident can be made up of any of the following:

1. One isolated violent death
2. Two or more homicides, including legal interventions, when:
 - a. the deaths involve at least one person who is a suspect or victim in the first death and a suspect or victim in the second death
 - b. the fatal injuries are inflicted less than 24 hours apart
3. Two or more suicides or undetermined manner deaths, when:
 - a. there is some evidence that the second or subsequent death was planned to coincide with or follow the preceding death, and
 - b. the fatal injuries are inflicted less than 24 hours apart
4. One or more homicides or unintentional firearm deaths combined with one or more suicides when:
 - a. the suspect in the first death is the person who commits suicide, and
 - b. the fatal injuries are inflicted less than 24 hours apart
5. Two or more unintentional firearm deaths when:
 - a. the same firearm inflicts two or more fatal injuries, and
 - b. the fatal injuries are inflicted by one shot or burst of shots

Examples of single incidents that involve more than one death:

~ Homicides: A member of Gang A kills a member of Gang B, and Gang B reciprocates, all during a street brawl. (The members of Gang A are suspects in the first killing, and one of them becomes the victim in the second.)

- ~ Homicides: A man kills his family and then drives to work to kill his supervisor. (The suspect in the first homicide is also the suspect in the second homicide.)
- ~ Homicide and legal intervention: Police kill a suspect as he flees the scene of a homicide. (The first suspect is the victim in the second death.)
- ~ Suicides: An elderly couple voluntarily commit suicide together. (The deaths were planned to coincide.)
- ~ Homicide-suicide: A man kills his wife at home and then kills himself 12 hours later when pulled over by the police.
- ~ Unintentional firearm-suicide: A boy unintentionally kills his father while hunting and immediately shoots himself out of guilt.

Examples of separate incidents:

- ~ Homicides: A sniper kills a person and two days later returns to the same location and kills another person (more than 24 hours apart).
- ~ Suicides: Two teenagers agree to commit suicide on the same day. One kills himself a week after the first victim dies (more than 24 hours apart).
- ~ Homicide-suicide: A woman learns that her son has murdered her husband. She kills herself from grief. (The suspect in the first death is not the person who commits suicide.)

Note: Decisions about whether two or more deaths belong to the same incident should be based on the timing of the injuries, rather than the timing of the deaths.

VI. Resident and Occurrent Violent Death Incidents

A. Resident incident

The majority of the deaths must be resident violent deaths. If no jurisdiction accounts for the majority of victims, the incident would be a resident incident for the jurisdiction of residence of the first victim.

B. Occurrent incident

The majority of fatal injuries must be occurrent fatal injuries. If no jurisdiction accounts for the majority of fatal injuries, the incident would be an occurrent incident for the place of injury of the first victim.

Note: The responsibility for abstracting a violent death falls on the state where the incident occurred irrespective of where the victim was a resident or died. NVDRS states should cooperate whenever possible by sending records to the state with responsibility for abstraction when incidents cross state lines. However, NVDRS states should also try to abstract the complete incident if one of their own residents dies violently in a state that is not currently part of NVDRS.

VII. Data Year

A. Year of a violent death

The year of death is the calendar year in which the victim died. So, for example, if a victim was injured at the end of December 2002, but died in early January 2003, the death would be reported in the 2003 data year. Although the NVDRS software allows for specific month or date of death to be entered as “Unknown,”

the year of death must be filled in. In the case of a true unknown year of death (as in skeletal remains with unknown year of death, or an unattended death that may have occurred either shortly before or shortly after January 1), enter the year in which the body was found as the year of death.

B. Year of a violent death incident

The year of a violent death incident is the first year in which any of the victims in the incident died. For example, the only exception to this rule occurs when any of the deaths occurred in a year prior to 2003, the first year of NVDRS. In that case, place the incident in the first year of death after 2002. In other words, incidents with deaths in 2002 and 2003 should be placed in 2003. Incidents with deaths in 2002 and 2004 should be placed in 2004. Incident with deaths in 2003 and 2004 should be placed in 2003.

VIII. Violent Death Rate per Year

The violent death rate per year is the number of resident violent deaths recorded during the calendar year divided by the resident population of the jurisdiction, as defined in official U.S. Census figures, and multiplied by 100,000 for a rate per 100,000 population. Preliminary rates include both preliminary and confirmed deaths. Confirmed rates include only confirmed deaths. Intercensal state population estimates may be used for intercensal year rates when official U.S. Census figures are not available. Whether U.S. Census or state estimates are used, the state should specify the source of the population estimate.

Table 1: ICD-10 External Causes of Death Codes for Manners of Death Meeting the NVDRS Case Definition

<u>Manner of Death</u>	<u>ICD-10 Codes</u>	
	<u>Death <1 year after the injury</u>	<u>Death >1 year after the injury</u>
Intentional self harm (suicide)	X60–X84	Y87.0
Assault (homicide)	X85–X99, Y00–Y09	Y87.1
Event of undetermined intent	Y10–Y34	Y87.2, Y89.9
Unintentional exposure to inanimate mechanical forces (firearms)	W32–W34	Y86 determined to be due to firearms
Legal intervention excluding executions, Y35.5	Y35.0–Y35.4 Y35.6–Y35.7	Y89.0
Terrorism	U01, U03	U02

End Notes

Use of the term “homicide” can be a point of confusion in a violent death reporting system. The term literally means the killing of one person by another, whether intentionally or unintentionally. Law enforcement and many CMEs adhere to this broader definition of homicide and therefore refer to unintentional car crash deaths as “vehicular homicides,” and the unintentional death of a person that results from another’s negligence as “negligent homicides.” Examples of the latter category are unintentional shootings of one person by another (as in two 12-year-old boys playing with a gun they believe is unloaded) and negligent acts by a caretaker of a dependent person (as in a toddler who is left unattended in the bathtub briefly while its mother answers the phone). The ICD system, on the other hand, uses the term homicide in its narrower sense to indicate the intentional or assault-related killing of one person by another. The NVDRS also uses this narrower definition of homicide.

The disjuncture between the law enforcement and public health uses of the term homicide can lead to coding problems. The ICD system is the basis for coding underlying cause of death on the death certificate. However, the code is chosen based on the information supplied by the CME on the death certificate. So, for example, in the case of the 12-year-old boys playing with the gun they mistakenly believed was unloaded, the CME is likely to code the manner of death as “homicide” and supply only medical information in the text fields for underlying cause of death. The information regarding the unintentional nature of the shooting will be available only in the narrative report, not on the death certificate itself. The Vital Statistics coder will likely code the case in the homicide range, not the unintentional range, because the information that would place it in the unintentional range according to ICD protocols is not available on the death certificate. This confusion in terms is one reason that the NVDRS has chosen to include the abstractor-assigned “Type of Death” code in the reporting system. This code applies a uniform protocol to categorizing violence-related homicides, unintentional deaths, suicides, and deaths of unknown intent.

One useful piece of information when attempting to distinguish a violence-related homicide from a negligent homicide is to check how the case was reported on the Supplementary Homicide Report form. Violence-related homicides are reported as “1A – Murder/non-negligent manslaughter” offenses, while unintentional homicides (e.g., “accidental” shooting while hunting, children playing with a gun) are coded as “1B – Negligent manslaughter” offenses. See: Barber C, Hochstadt J, Hemenway D, Azrael D. Underestimates of unintentional firearm fatalities: Comparing Supplementary Homicide Report data with the National Vital Statistics System. *Injury Prevention* 2002;8:252–6.

Entering a Case Data Structure

An incident involving one or more violent deaths is the unit of surveillance in NVDRS. To understand how all the variables fit together in one incident, it may be helpful to think of them in a hierarchy with four levels:

- The first, or incident level, is information about the incident to be described, such as how many people were involved and a narrative of the event.
- The second, or component level, divides the incident into its components: the documents, people, relationships, and weapons involved.
- The third, or data-source level, divides each component into the sources contributing to it (e.g., information about a person from the death certificate, from the police, from the CME).
- The fourth, or additional-element level, divides information from a given source into logical subsets on separate screens when all the elements cannot fit on one screen.

In outline form, this hierarchy looks like the following:

I. Incident

- A. Documents used
- B. Person(s), (victims, suspects, or both) involved
 - 1. Multi-sourced identity or demographic
 - 2. Death certificate (DC)
 - a. Main elements
 - b. All listed causes of death (“multiple causes”)
 - 3. Coroner/Medical Examiner (CME)
 - a. Main elements
 - b. Circumstances
 - 4. Police Reports (PR)
 - a. Main elements
 - b. Circumstances
 - 5. Supplementary Homicide Reports (SHR)
 - 6. Hospital Information (HOSP)
 - 7. Child Fatality Review (CFR)
 - a. Main elements
 - b. Household and Committee Information
 - c. Circumstances
 - 8. Abstractor-completed
- C. Victim-suspect relationships
 - 1. Coroner/Medical Examiner
 - 2. Police
 - 3. Supplementary Homicide Report
- D. Weapon(s) involved
 - 1. Abstractor
 - 2. Bureau of Alcohol Tobacco Firearms and Explosives (ATF) trace information

3. Coroner/Medical Examiner
 4. Police
 5. Crime lab
- E. Person-weapon relationships
1. ATF-Firearm trace information
 2. Coroner/Medical Examiner
 3. Police
 4. Supplementary Homicide Report

Note: Not every part of the outline can be completed for every incident. If the incident is an isolated suicide, there will be no victim-suspect relationship. If one of the persons involved is a suspect who did not die in the incident, there will be no death certificate information for that person. If the weapon was not a firearm, there can be no information from ATF, and there will be no crime lab information. The structure is designed to handle all types of violent deaths. It allows the use of data from the four primary data sources (death certificate, police, CME, and crime lab) and three additional ones (hospitals, supplementary homicide reports, and child fatality review teams), and provides places for input from the abstractor.

Variable or Data Element Priority

Given all the data entry fields available to handle various scenarios, and that there is a place to put each data item from each data source, the number of data entry locations is large, approximately 600. Not all the variables are required. Data collection from hospitals, supplementary homicide reports (SHRs), and Child Fatality Review (CFR) is optional (unless a state is being funded to pilot test an optional source). Collecting information about the source documents is optional. In addition, some variables from the primary data sources are considered to be of lesser importance for surveillance purposes and are also optional.

Each data element falls into one of three priorities: Early Required (ER), Late Required (LR), or Optional (O). These are sometimes referred to as 1st, 2nd, and 3rd priority, respectively. All states should complete the required variables. Early required variables are those from the death certificate primarily and should be completed within six months of the date of death. Late required variables are primarily from the other sources and should be completed within eighteen months of the date of death. Optional variables can be completed at any point prior to the close of the data year. The priority for each data element is shown in the body of the Coding Manual. The priority of an element is reflected in the color used for the variable label in the data entry screens. Note that a given variable may have different priorities depending on the source from which it is derived. For example, race is an early required (first priority) variable obtained from the death certificate, but late required (second priority) variables are derived from other data sources, which tend to be available later than the death certificate.

The Data Source Concept

The strength of NVDRS is its use of multiple, complementary data sources. Given that data would be obtained from multiple sources, each with its own documents, and that data might be entered from one source about an incident before the information is

available from a second source, NVDRS was designed to keep the data sorted by source. The idea is that NVDRS staff can capture the information available in a given location for a set of incidents and move on to another office, where the information available there is added to those incidents. This process can be repeated until the incidents are complete.

The table below shows the sources from which data on different topics is to be recorded.

Data Topic	DC	CME	PR	SHR	CFRT	LAB	ATF	USER
Case status								X
Number of persons and weapons								X
Incident narrative		X	X		X			
Document tracking								X
Person type (victim/suspect)	X	X	X	X				
Name, address	X	X	X					
Age/sex/race/ethnicity	X	X	X	X				
When and where (injury/death)	X	X	X					
Cause of death ICD code(s)	X							
Manner of death	X	X			X			X
Additional person descriptors	X	X	X		X			
Alcohol and drug tests		X						
Wounds		X	X					
Associated circumstances		X	X	X	X			
Victim-suspect relationship		X	X	X				
History of victim abuse		X			X			
Suspect was victim caretaker		X	X		X			
Weapon type								X
Firearm trace							X	
Firearm descriptors		X	X			X		
Poison details		X	X					
Weapon used by/on person		X	X	X				
Person purchasing firearm			X				X	

DC=Death Certificate; CME=Coroner/Medical Examiner; PR=Police Report; SHR=Supplementary Homicide Report; CFRT=Child Fatality Review Team; Lab=Crime Lab; ATF=Bureau of Alcohol, Tobacco, Firearms, and Explosives. Note: The hospital source was left out of the table to save space. It only captures whether inpatient or Emergency Department (ED) care occurred and what International Classification of Diseases (ICD) codes were assigned. Tabs in the application mark the places where data from each source document can be entered.

In addition to allowing independent entry of each source, this approach allows for later review of what each source contributed and for identifying missing sources. It increases the validity of comparisons between years and states by allowing comparisons of data from the same sources. It also allows the generation of reports back to the sources showing exactly what their records contained. Eventually, once data source documents are standardized nationally, it can also facilitate direct importation of data.

Primacy Among Data Sources

Data sources may not always agree about every fact of a given incident. A way to identify what is likely the best available information among different sources is needed. Therefore, the data sources have been ranked in terms of their likely accuracy for each data element. The term used for the ranking is “primacy.” The source with 1st primacy is considered most reliable for a given variable and will be the source of choice. Lower primacy sources are the most reliable after 1st primacy and can be used when a higher-primacy source is not available. For example, sex of the victim is taken first from the death certificate, second from the CME, and finally from the police.

States will retain all the data and can determine their own primacy in their state-specific analysis files. States may even choose to use different primacy rankings for different parts of the state or different time periods. However, for nationwide comparisons, the CDC will use the primacy ranking built into the software. The primacy of each source for each variable to which it applies is shown in the “Primacy” column of the coding manual’s variable section.

When different sources have complete but discordant data, the simplest approach is to use primacy. This is probably adequate for surveillance purposes. For research purposes, however, states may elect to settle such discordance by case-by-case review to identify the preferred source for each discordant field.

Auto Filling Across Data Sources

Because much of the information collected will be the same in multiple data sources for one incident, the software will save time by automatically filling blank fields across sources for a given data element. To avoid using automatically-filled data when the actual data is missing for a given source, “auto filled” data has to be confirmed or accepted by the data-entry person. Auto filled data can also be overwritten by the actual data when the two sources differ.

Additional Features

Data are coded whenever possible to avoid problems with variant spellings. A number of range and logic edits exist that can be applied to the case upon completion. Users can generate a number of reports about the data to search for specific incidents or people or to get a preliminary look at the aggregate data.

Steps in Starting an Incident

Step 1: Decide what constitutes an “incident.”

See the definition of an incident in the definitions section of this coding manual. This is mostly a process of deciding whether deaths that are connected in some way belong in the same incident or different ones.

Step 2: Open a new incident in the software.
(Refer to the Software Manual for instructions.)

Step 3: Decide who should be included in the incident and enter that number on the first screen.

The software initially asks how many people are to be covered in the incident. People in the incident may be fatally injured victims, suspects in their deaths, or both victims and suspects. Identifying the victims in the incident is not difficult once you have determined how to define the incident. Identifying how many suspects to include is more difficult. There are no suspects for isolated suicides and self-inflicted unintentional firearm deaths. For homicides, include as suspects people who are listed by the police or the CME as suspects. For unintentional firearm deaths that are not self-inflicted, include the person who fired the weapon as a suspect and anyone else listed by the police as a suspect. A person does not have to be arrested or identified to be listed as a suspect. As long as the number of persons involved in the death is known, (e.g., police report that the victim was stabbed by two men), list each as a suspect, even if nothing further is known about them. See the Person Type variable on the Identity panel in the coding manual for further details and examples.

Step 4: Decide how many weapons to include in the incident and enter that number.

The concept of a weapon in NVDRS combines the concepts of things used to injure and actions that lead to injury. Weapons can therefore range from instruments everyone would call a weapon, such as a gun or bayonet, to actions such as setting fires, pushing someone over a cliff, or shaking (as in shaken baby syndrome). Additional descriptive data elements exist only for firearms and poisons.

Because details are collected only about firearms and poisons, enter each one involved in the incident as a separate weapon. For all other weapon types involved in a violent death, list the weapon only once per incident. For example, if multiple sharp objects or knives are used to kill one or more persons in an incident, enter only one weapon to represent all these sharp objects. If multiple knives and multiple blunt objects are used, one “sharp instrument” and one “blunt instrument” weapon should be entered.

If a gun is not recovered, but the victim died of a gunshot wound, code the number of weapons as “1”. Similarly, if a knife is not recovered, but the victim died from wounds inflicted by a sharp object, code the number of weapons as 1. Guns on the scene that were not used to shoot the victim (e.g., a gun on the person of the victim), are not counted as weapons in the incident. Similarly, poisons or drugs on the scene that were not ingested in a drug overdose are not counted. Basically, anything that injures the victim is counted as a weapon even though it was not described as the “cause of death”.

Step 5: Determine the number of documents to be used for the incident and enter that number.

Note: Information about, and the number of documents, does not have to be entered to open a case. If states choose to use these fields as logbooks or ways to track the completion of a case, the following information may prove helpful:

A document was conceived as a piece of paper or a computerized record that contains information that is used to complete an incident. References to a document within another document would usually not be counted as a separate document. The minimum expected number of documents per incident is three: a death certificate, a police report,

and a CME report. Two deaths in one incident would have a minimum of five documents: two death certificates, two CME reports, and a police report. This is assuming that the police described both deaths in the incident in one report.

States can count multiple reports contained within a CME or police file as part of one document. Such files often contain autopsy reports, toxicology reports, gun traces, and the like. States can also record each of these documents separately, at their discretion.

Once these steps are completed, the software will set up the appropriate number of blank screens so that the incident can be captured. The user can then complete the case, one source document at a time. The next section of the coding manual provides details about the data elements to be completed.

Throughout the manual a standard approach is used to code 'Unknown'. For numerical fields, the numbers '9', '99', '999', etc. are mostly used to indicate 'Unknown'. Similarly, the numbers '8', '88', '888', etc. are usually used for 'Not applicable'. It is suggested that 'Unk' be entered for 'Unknown' in any relevant text field.

Reabstraction Guidelines

Reabstraction of cases is probably the most important quality control measure of NVDRS. It is far superior to reviewing completed incidents without access to the original source documents. The primary purpose of reabstraction is to identify errors in the coding of key data sources in a timely way. A secondary purpose is to identify data fields that have low reliability, i.e., they are not completed in the same way by trained independent observers in a significant percentage of incidents, perhaps because of their inherent subjectivity.

We suggest the following reabstraction guidelines:

1. Reabstraction should be done by the person who is most skilled in coding. This need not always be the supervisor. It should not be done by the same person who did the original coding.
2. The reabstractor should have access to all the original records used by the original abstractor.
3. The reabstractor should not have access to the original abstractor's paper or electronic abstraction when they reabstract the incident. Preferably, to reduce the chances that they will be biased by the other person's interpretation, they will not have read the original abstraction before doing the reabstraction.
4. The reabstractor should reabstract ten percent of incidents completed in the previous quarter or previous month. By completed incidents, we mean incidents that have had data entered from the death certificate, police record, and CME record.

5. Reabstractors should select the incident numbers of the incidents they want to reabstract along with the necessary identifiers before going into the field. We suggest using the Reports/Search by/Incident ID report in the application to create a list of incident IDs from which to select. Eliminate from the list those incidents that have more than two people listed in the report because it will not be possible to determine which person in the original abstraction was intended to correspond to which person in the reabstraction otherwise. Such matching can be done with only one person in the incident or with two people, one victim and one suspect.
6. Initially, it is suggested to select every ninth completed record to have a few backup incident numbers in case some original records are temporarily unavailable. Over time, experience will suggest the sampling fraction that will result in successful completion of ten percent.
7. Reabstraction should start soon after the end of the first quarter of data collection and be done on an ongoing basis so that feedback to abstractors is timely.
8. Reabstractors should open a new incident for every reabstraction. The incident should be put in the 2002 database so that it never becomes an unwanted duplicate in the current year's file.
9. Note also that you should not select incidents to reabstract that have not been checked in from a laptop because their incident number may change when they are checked in.
10. Reabstractions will be sent to the CDC along with all other incidents in the routine way. CDC will link the originals with their reabstractions and calculate concordance using kappa statistics for all coded fields that have been completed by either abstractor.
11. State supervisor/reabstractors will want to compare their results with the original abstractions themselves manually by printing an incident or by setting up queries to do record comparisons for specified pairs of incidents. Any discrepancies noted should be reconciled through discussion with the original abstractor.
12. It is important to distinguish between the two possible sources of error: true coder disagreement and data entry error. Retraining or clarification of coding instructions may help with coder disagreement, while changes in question format may help with data entry error.

Note: Do not reabstract incidents that have not been checked in from a laptop because their incident number may change when they are checked in.

Data Elements Key

The next sections provide detailed information for each data element captured by NVDRS. The sections are organized by screens as they appear in the NVDRS software application. Within each section, the data elements are arranged by location on the screen. Each data element or group of related data elements begins on a new page and follows the format below:

The header refers to the screen path of the variable.

Variable Label: **Variable Name**

Name **Definition**

Variable Name Definition of variable

Uses

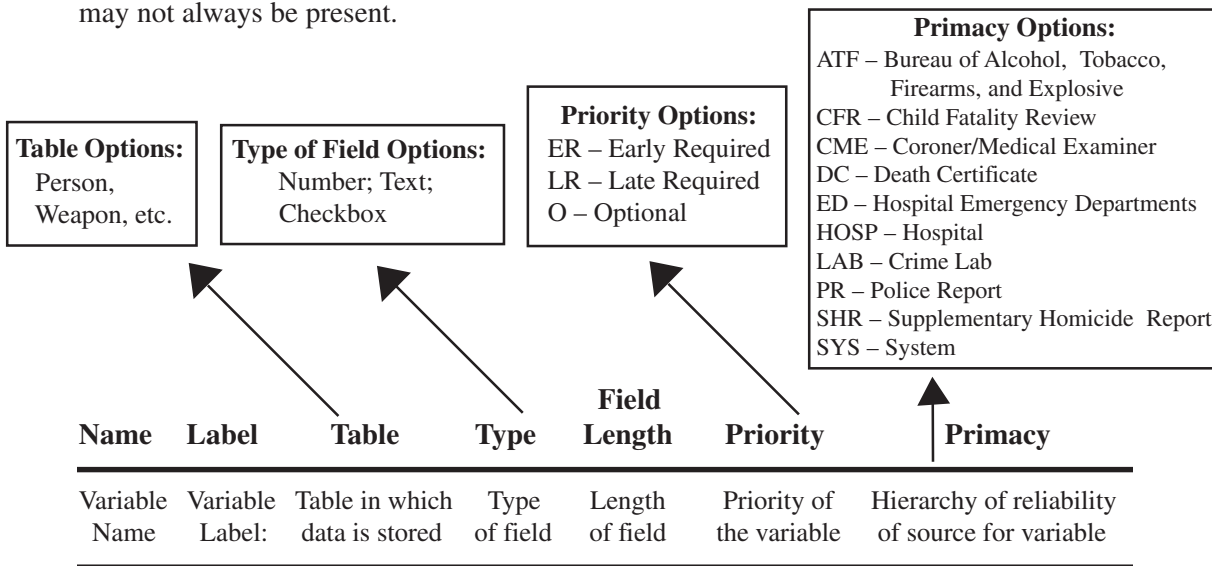
Discusses the uses of the data element or group of data elements.

Discussion

Provides guidance on how to code the data element or group of data elements.

Case Examples

Provides examples of data element, may not always be present.



Response Options:

Variable name
Pick list for variable

If this is blank, no drop-down menu is provided by the software for this variable

Data Standards and Guidelines

If data standards or guidelines do not exist, this section will be omitted.

Section 1

INCIDENT VARIABLES

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Site ID: SiteID
Incident ID: IncID

Name	Definition
SiteID	Identifier for the state reporting site
IncID	Identifier used to identify the incident

Uses

Used together, the Site ID and the Incident ID uniquely identify each incident in the database. The Site and Incident ID are used to link data from all of the tables in the relational database. The site number can be used to sort data by site for analysis.

Discussion

The Site ID number is the Federal Information Processing Standards (FIPS) code assigned to the state. The Incident ID is automatically assigned by the software and increases by one for each incident. There are no provisions for missing or unknown information for these two data elements.

Name	Label	Table	Type	Field Length	Priority	Primacy
SiteID	Site ID:	Incident	Number	2	ER	SYS
IncID	Incident ID:	Incident	Text	9	ER	SYS

Response Options:

SiteID	
1	Alabama
2	Alaska
4	Arizona
5	Arkansas
6	California
8	Colorado
9	Connecticut
10	Delaware
11	District of Columbia
12	Florida
13	Georgia
15	Hawaii
16	Idaho
17	Illinois
18	Indiana
19	Iowa
20	Kansas
21	Kentucky

Incident

22	Louisiana
23	Maine
24	Maryland
25	Massachusetts
26	Michigan
27	Minnesota
28	Mississippi
29	Missouri
30	Montana
31	Nebraska
32	Nevada
33	New Hampshire
34	New Jersey
35	New Mexico
36	New York
37	North Carolina
38	North Dakota
39	Ohio
40	Oklahoma
41	Oregon
42	Pennsylvania
43	Puerto Rico
44	Rhode Island
45	South Carolina
46	South Dakota
47	Tennessee
48	Texas
49	Utah
50	Vermont
51	Virginia
53	Washington
54	West Virginia
55	Wisconsin
56	Wyoming

IncID

Data Standards or Guidelines

FIPS state codes: Federal Information Processing Standards (FIPS),
National Institute of Standards and Technologies

Case status: CaseStat**Name Definition**

CaseStat	Status of case
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Uses

This field will help the abstractor, supervisor, and CDC identify whether a given case is complete. For some purposes, it may be sufficient to use any cases for which at least the early required/(mandatory) variables are completed. For other purposes, the late required variables should be complete. States may also prefer to keep track of whether the optional fields have also been completed.

Discussion

When a new case is started, it will be given a case status of 1 (open) by default. This value can be changed as different stages of data entry are completed to mark progress. This variable is included in a standard quality control report that can be generated by NVDRS software to determine how many cases are in each status category. States or CDC may prefer to restrict the data to incidents of a particular case status before performing analyses. The case status variable will have no bearing on whether individual incidents are uploaded to CDC during routine uploads; all incidents will be uploaded.

Name	Label	Table	Type	Field	Priority	Primacy
				Length		
CaseStat	Case status:	Incident	Number	1	O	SYS

Response Options:

CaseStat

- 0 Incident abstraction initiated
- 1 Preliminary early required abstracted
- 2 Near final early required completed
- 3 Preliminary late required abstracted
- 4 Near final late required completed
- 5 Preliminary optional abstracted
- 6 Near final optional completed
- 7 Incident abstraction completed
- 8 Incident closed to further edits

INCIDENT COUNTERS

Number of source documents in incident:	NumSrDocs
Number of persons in incident:	NumPersons
Number of weapons in incident:	NumWeapons
Number of victim-suspect relationship records in incident:	NumVSRels
Number of person-weapon relationship records in incident:	NumPWRel

Name	Definition
NumSrDocs	Number of source documents
NumPersons	Number of persons in incident
NumWeapons	Number of weapons in incident
NumVSRels	Number of victim-suspect relationship records in incident
NumPWRel	Number of person-weapon relationship records in incident

Uses

These variables define the number of key components in the incident.

Discussion

There must be a minimum of one document, one person, and one weapon in each incident. The number of source documents is the total number of death certificates, CME reports, police reports, etc. that provided information for the incident. People in the incident are only those who are fatally injured victims, or suspects in their deaths. Identifying the victims in the incident is not difficult once you have determined how to define an incident (see Definitions section). Identifying how many suspects to include may be more difficult. There are no suspects for isolated suicides and self-inflicted unintentional firearm deaths. For homicides, suspects include people who are listed by the police or the CME as suspects. For unintentional firearm deaths that are not self-inflicted, include the person who fired the weapon as a suspect and anyone else listed by the police as a suspect. A person does not have to be arrested or identified to be listed as a suspect. As long as the number of persons involved in the death is known (e.g., police report that the victim was stabbed by two males), each should be listed as a suspect, even if nothing further is known about them. When the number of suspects is not known in homicides, consider the number of suspects to be zero. The number of persons in such incidents is therefore equal to the number of victims.

Weapons can range from instruments everyone would call a weapon, such as a gun or bayonet, to actions such as setting fires, pushing someone over a cliff, or shaking (as in shaken baby syndrome). Additional descriptive data elements exist only for firearms and poisons. The weapon type categories other than firearms and poisons are as follows:

nonpowder guns (e.g., BB guns), sharp instruments, blunt instruments, hanging/suffocation, personal weapons (e.g., fist or feet), fall, explosive, drowning, fire, shaking, motor vehicle, biological weapon, and intentional neglect. Because details are collected only about firearms and poisons, enter each firearm or poison involved in the incident as a separate weapon. For all other weapon types involved in a violent death, list the weapon only once per incident. For example, if multiple sharp objects or knives are used to kill one or more persons in an incident, enter only one weapon to represent all these sharp objects. If multiple knives and blunt objects are used, one “sharp instrument” and one “blunt instrument” weapon record should be entered. Guns on the scene known not used to shoot the victim, (e.g., a gun on the person of the victim), are not counted as weapons in the incident. Similarly, poisons or drugs on the scene that were not ingested in a drug overdose are not counted. Evidence that it was taken as an overdose would be indicated in a statement that the person took an overdose, that the drug helped cause the death, or that drug levels were more than therapeutic or beyond the normal range.

The numbers of Victim Suspect Relationships and Person Weapon Relationships are automatically calculated by the software.

Name	Label	Table	Type	Field		
				Length	Priority	Primacy
NumSrDocs	Number of source documents in incident:	Incident	Number	4	ER	SYS
NumPersons	Number of persons in incident:	Incident	Number	4	ER	SYS
NumWeapons	Number of weapons in incident:	Incident	Number	4	ER	SYS
NumVSRels	Number of victim-suspect relationship records in incident:	Incident	Number	4	LR	SYS
NumPWRel	Number of person-weapon relationship records in incident:	Incident	Number	4	LR	SYS

Response Options:

- NumSrDocs
- NumPersons
- NumWeapons
- NumVSRels
- NumPWRel

SUPERVISOR CHECK

Date supervisor checked incident: DtSuper
Date supervisor rechecked incident: DtReSuper
Supervisor note field: SuperTxt

Name	Definition
DtSuper	Date supervisor checked incident
DtReSuper	Date supervisor rechecked incident
SuperTxt	Supervisor note field

Uses

Supervisors can use these fields to track whether they have checked the incident. Problems or questions noted in the supervisor’s review can be placed in the supervisor note field. In Version 1, states marked reabstracted incidents in the 2002 database with the following text string in the supervisor field: “dup/siteID/yyyy/IncID”. This information is needed for linking the reabstraction incident to the original incident for cases entered in Version 1.

From Version 2 of the software onwards, two data elements (‘ReabstractYr’ and ‘ReabstractInc’) were added to the 2002 data year panel to make the linking of reabstracted incidents to original incidents easier. Please see page 1-15.

Discussion

These fields are optional.

Name	Label	Table	Type	Field Length	Priority	Primacy
DtSuper	Date supervisor checked incident:	Incident	Text	10	O	SYS
DtReSuper	Date supervisor rechecked incident:	Incident	Text	10	O	SYS
SuperTxt	Supervisor note field:	Incident	Text	1000	O	SYS

Response Options:

DtSuper
DtReSuper
SuperTxt

Number of nonfatally shot persons in incident: NumInjure

Name	Definition
NumInjure	Number of nonfatal gunshot wound victims associated with the report

Uses

Can be used to assess the extent of multiple-victim incidents and the association of nonfatal injuries with fatal incidents. Appears in PR and CME panels only.

Discussion

Record the total number of victims who sustained a projectile wound from a firearm during the course of the incident and survived. Victims of pistol whipping should not be counted here. This variable appears in PR and CME sections of Incident screen. Enter "0" if there is no indication of a nonfatal shooting. Enter "9999" if the number of such persons is unknown.

Name	Label	Table	Type	Field Length	Priority	Primacy
NumInjure	Number of nonfatally shot persons in incident:	Incident	Number	4	LR/LR	CME/PR

Response Options:

NumInjure	
0	None
9999	Unknown

Data Standards or Guidelines

NVISS

Narrative of the incident: IncNarr

Name	Definition
IncNarr	Narrative of the incident

Uses

There are a number of purposes for collecting a narrative account of the incident.

- The first is to briefly summarize what happened, and why, and include important information that is not otherwise captured in the coded variables.
- The second is to facilitate data quality control checks on the coding of key variables — particularly type of death, person type, circumstance, and victim-suspect relationship.
- The narrative also provides the context for understanding the incident.
- Lastly, the narrative records information that cannot be captured elsewhere.

Discussion

Incident narratives are written based on a single data source. Consequently, there is an incident narrative that summarizes the police findings, a narrative that describes the CME’s findings, and one that records additional information from the Child Fatality Review Team (CFRT). Please do not include personally identifying information in narratives such as names of people, towns, streets, police departments, and hospitals. Also avoid using specific dates. Describe, in a few sentences:

- Who was injured by whom,
- The relationship between victim and suspect if other than self-inflicted,
- Where the incident occurred, and
- The precipitating circumstances according to the data source.

Each circumstance variable that is positively endorsed on the circumstance screen should be mentioned in the narrative. Please include sex and age of person(s) involved. Avoid using abbreviations, with the exception of V for Victim, S for Suspect, and V/S for persons who are both victims and suspects.

An example of a **homicide** narrative is: “V was a 20 year old male who was a passenger in a taxi cab who was shot by the male cab driver, S, after an altercation over the amount of the cab fare. The two were not previously acquainted. The V had been drinking at a bar.”

An example of a **suicide** narrative is: “Male victim was 45 years old and was found in his parked car in the driveway of his home with a self-inflicted gunshot wound to the head. No suicide note was found. His wife reports he was despondent over the loss of his job four months ago and had talked about suicide but never previously attempted. CME report does not document any mental health or substance abuse history.”

Try to keep the narratives relatively short. Avoid using incomplete sentences, as they are hard to understand. Do not adopt the ‘tone’ of the source document. There is no need to document timing, who found the body, body position, wound information, treatment information, etc. The following is a poor example of an incident narrative: “Victim approached by 2 AMs IFO Store 24 on Fresno Blvd. at approximately 11:50 p.m. First AM dropped to his knees, took aim, and shot V in left leg. V raises hand to block shot. Second S shoots V in hand and chest. V crawls to pay phone. EMS responds. V to Bruckner Hospital; ICU three days; life support withdrawn 3/12/03.” Instead, this could be worded as follows: “V was approached and shot on the street by two males. No information about precipitating circumstance or victim-offender relationship was reported.” If multiple police records conflict about the narrative details, record what you believe to be in the most accurate narrative. Do the same for multiple CME records.

Name	Label	Table	Type	Field Length	Priority	Primacy
IncNarr	Narrative of the incident:	Incident	Text	1000	LR/LR	CME/PR

Response Options:

IncNarr

Data Standards or Guidelines

NVISS

Scene investigation by law enforcement: ScenLaw
Scene investigation by the CME: ScenME

Name	Definition
ScenLaw	Did the police conduct an on-scene investigation?
ScenME	Did the CME office conduct an on-scene investigation?

Uses

These variables are part of the Child Fatality Review (CFR) Module. Many CFR programs have developed protocols for investigating child deaths. They generally recommend that CMEs and/or police conduct investigations at the scene of a child’s death in the case of injury deaths and medical deaths occurring outside a health care setting. Investigations that rely only on examining the body after its removal from the incident scene may fail to reveal information that could aid in identifying homicides. These data elements document whether on-scene investigations occurred and will be useful for determining the extent to which recommended investigation protocols are followed in the case of child suicides, homicides, and unintentional gun deaths.

Discussion

If there is no empirical evidence that the specified parties conducted an investigation, these variables should be coded “No”. If the CFRT does not ask, code “Not collected by reporting site”. If the CFRT asks, but the information is not available, code “Unknown”.

Name	Label	Table	Type	Field Length	Priority	Primacy
ScenLaw	Scene investigation by law enforcement:	Incident	Number	1	O	CFR
ScenME	Scene investigation by the CME:	Incident	Number	1	O	CFR

Response Options:

- ScenLaw
 and
 ScenME
- 0 No
 - 1 Yes
 - 7 Not collected by reporting site
 - 8 Not applicable
 - 9 Unknown

Data Standards or Guidelines

NVISS

Witness(es) to fatal incident: **Witness**
If yes, child witness: **ChldWit**

Name	Definition
Witness	Were there any witnesses to the incident?
ChldWit	Were there any child witnesses to the fatal incident?

Uses

Information about witnesses may provide insight into potential risk factors for violent child deaths and may also be useful for planning services and interventions for those who witnessed the violence.

Discussion

Witness(es) include any person(s) other than a suspect who was present and observed the incident that led to the child's death. The supervisor can be considered a witness, but only if that person was not also the perpetrator. A child witness is defined as a person under 18 years of age who was present and observed the fatal incident. These two variables are part of the CFR module.

Name	Label	Table	Type	Field Length	Priority	Primacy
Witness	Witness(es) to fatal incident:	Incident	Number	1	O	CFR
ChldWit	If yes, child witness:	Incident	Number	1	O	CFR

Response Options:

Witness	
and	
ChldWit	
0	No
1	Yes
7	Not collected by reporting site
8	Not applicable
9	Unknown

Data Standards or Guidelines

NVISS

CFR additional information: CFRTxt

Name	Definition
CFRTxt	Text field for describing additional relevant information provided by the Child Fatality Review data source

Uses

The CFR data source may provide information that is relevant to the death but is not available from other sources.

Discussion

As a text field, use this area to clarify circumstances surrounding the death that may not be clear from the CFR data elements or other NVDRS data sources. For example, unusual circumstances surrounding the death, household composition, supervision, or CFR committee decisions would be helpful in this text box. Also, coding options for several variables require further explanation in the incident narrative; that information should be included here. This box should only reflect unique information gathered from CFR, as it is a document-based system.

Name	Label	Table	Type	Field Length	Priority	Primacy
CFRTxt	CFR additional information:	Incident	Text	1000	O	CFR

Response Options:

CFRTxt

Data Standards or Guidelines

NVISS

INCIDENT REABSTRACTION (2002 data year panel only)

Reabstraction from data year: **ReabstractYr**
 Of incident number: **ReabstractInc**

Name	Definition
ReabstractYr	The year of the incident that is being reabstracted
ReabstractInc	The incident number of the case that is being reabstracted

Uses

States use the 2002 data year incident panel to enter reabstracted incidents. These fields are used to link the reabstracted incidents to the original incident. The primary purpose of reabstraction is to identify errors in the coding of key data sources in a timely way. A secondary purpose is to identify data fields that have low reliability, i.e., they are not completed in the same way by trained independent observers in a significant percentage of incident, perhaps because of their inherent subjectivity.

Discussion

Ten percent of the incidents completed from the previous quarter or previous month should be reabstracted. Completed incidents refer to incidents that have data entered from the death certificate, police record, and CME record.

Incident Selection

Reabstractors should select the incident numbers of the incidents they want to reabstract along with the necessary identifiers prior to the reabstraction. We suggest using the Reports/Search by/Incident ID report in the NVDRS software to create a list of incident ID numbers that can be reabstracted. Eliminate from the list those incidents that have more than two people listed in the report because it will be impossible to determine match the person in the original abstraction to the person in the reabstraction. Such matching can be done with only one person in the incident or with two people, one victim and one suspect. We further suggest selecting every ninth completed record initially to have a few backup incident numbers in case some original records are temporarily unavailable. Over time, experience will suggest the sampling fraction that will result in successful completion of ten percent.

Reabstraction

Reabstraction should start soon after the first completed quarter of data collection and be done on an ongoing basis so that feedback to abstractors is timely. Reabstractors should open a new incident for every reabstraction. The reabstracted incident should be put in the 2002 database so that it never becomes an unwanted duplicate in the current year's file. Reabstraction should be completed by the individual who is most skilled in coding, not necessarily the supervisor. It should *not* be completed by the same person who originally coded the incident. To reduce the chances that the reabstractor will be biased

Incident

by another person's interpretation of the incident, they should not have read the original abstraction before doing the reabstraction and they should not have access to the original abstractor's paper or electronic abstraction when they reabstract the incident. The reabstractor should have access to all the original records used by the original abstractor.

Reabstracted cases will be sent to the CDC along with all other incidents in the routine way. CDC will link the originals with their reabstractions and calculate concordance using kappa statistics for all coded fields that have been completed by either abstractor.

State supervisor/reabstractors will want to compare their results with the original abstractions themselves manually by printing an incident or by setting up queries to do record comparisons for specified pairs of incidents. Any discrepancies noted should be reconciled through discussion with the original abstractor. It will be important to distinguish between the two possible sources of error: true coder disagreement and data entry error. Retraining or clarification of coding instructions may help with coder disagreement, while changes in question format may help with data entry error.

Note: Do not reabstract incidents that have not been checked in from a laptop because their incident number may change when they are checked in.

Name	Label	Table	Type	Field Length	Priority	Primacy
ReabstractYr	Reabstraction from data year:	Incident	Text	4	O	SYS
ReabstractInc	Of incident number:	Incident	Text	4	O	SYS

Response Options:

ReabstractYr

ReabstractInc

Section 2

DOCUMENT VARIABLES

DOCUMENT VARIABLES

2-3

DOCUMENT VARIABLES

Document type:	DocTyp
Source agency requested from:	SrAgen
Source agency's internal record number:	AgenNum
Person who entered record:	UserID
Date record requested/expected/sought:	DtReqs
Date record rerequested/re-searched:	DtReReqs
Date record received:	DtRecd
Date record abstracted/imported:	DtAbst
Date entered data checked:	DtChk
Document determined to be unavailable:	DocUnav
Document notes field:	DocTxt

Name	Definition
DocTyp	Document type
SrAgen	Source agency requested from
AgenNum	Source agency's internal record number
UserID	Person who entered record
DtReqs	Date record requested, expected, sought
DtReReqs	Date record re-requested, re-searched
DtRecd	Date record received
DtAbst	Date record abstracted, imported
DtChk	Date entered data checked
DocUnav	Document determined to be unavailable
DocTxt	Document notes field

Uses

These variables allow a record to be kept of the sources of information used for each incident. This can be useful in checking information, but they can also be used as an abstractor "logbook" to track the status of records that have been requested but not yet received. Moreover, they can be used for measuring timeliness by calculating the median interval between date of death and date abstracted for each abstractor. See the Introduction section of this manual for a discussion about handling variables that identify individual persons or agencies.

Documents

Discussion

These variables are optional, but their use is encouraged. A press release from a law enforcement agency or prosecutor should be considered a police report rather than a newspaper article.

Name	Label	Table	Type	Field Length	Priority	Primacy
DocTyp	Document type:	Document	Number	2	O	SYS
SrAgen	Source agency requested from:	Document	Text	50	O	SYS
AgenNum	Source agency's internal record number:	Document	Text	50	O	SYS
UserID	Person who entered record:	Document	Text	15	O	SYS
DtReqs	Date record requested/ expected/sought:	Document	Text	10	O	SYS
DtReReqs	Date record re-requested/ re-searched:	Document	Text	10	O	SYS
DtRecd	Date record received:	Document	Text	10	O	SYS
DtAbst	Date record abstracted/imported:	Document	Text	10	O	SYS
DtChk	Date entered data checked:	Document	Text	10	O	SYS
DocUnav	Document determined to be unavailable:	Document	Number	1	O	SYS
DocTxt	Document notes field:	Document	Text	1000	O	SYS

Response Options:

DocTyp

- 1 Death certificate
- 2 Medical examiner report
- 3 Coroner report
- 4 Police report
- 5 SHR
- 6 NIBRS
- 7 Crime lab report
- 8 Toxicology report
- 9 Hospital discharge record

Response Options: (Continued)

10	ED record
11	Gun trace
12	EMS report
13	CFRT report
14	Newspaper article
88	Other

SrAgen

AgenNm

UserID

DtReqs

DtReReqs

None

DtRecd

None

DtAbst

and

DtChk

None

DocUnav

0 No

1 Yes

DocTxt

None

Section 3

PERSON'S IDENTITY

Person type: PType	3-3
NAME	3-4
Social Security #: SSN	3-5
AGE	3-6
Person's sex: Sex	3-8
RACE	3-9
Hispanic/Latino/Spanish: Ethnic	3-11
ADDRESS	3-12

Person type: PType**Name Definition**

Name	Definition
PType	Indicates whether the person is a victim, suspect, or both

Uses

Used to identify a person's role in an incident.

Discussion

Victims are people who died in a suicide, violence-related homicide, legal intervention, as the result of a firearm injury, or from an undetermined manner. A baby who dies as the result of direct, violent injuries sustained before birth should not be recorded as a victim unless he or she was delivered and lived outside the womb for any period of time and was issued both a birth certificate and a death certificate.

Suspects are those suspected of having killed another person in an incident, whether intentionally or (in the case of firearm injuries) unintentionally. When two or more people attack a victim in an incident, all of the attackers should be recorded as suspects, regardless of who actually dealt the fatal blow. For example, in the case of two armed robbers who hold up a store, even if only one actually pulled the trigger, both robbers should be listed as suspected offenders in the homicide.

Both are victims who also killed someone else in the incident. For example, a person who kills his wife and himself would have a Ptype of "Both" as would a person who kills a police officer and is then shot dead himself by another police officer. A suicide victim has a Ptype of "Victim", not "Both", unless they also killed someone else in the incident. A person's status as a victim, suspect, or both should be assigned only with reference to fatal injuries.

One source may report more people in an incident than another, e.g., a suspect may be mentioned in a police report, but not in the medical examiner records. The value '4' can be entered for the person(s) not mentioned by a source.

Name	Label	Table	Type	Field Length	Priority	Primacy
PType	Person type:	Person	Number	1	LR/ER/LR/O	CME/DC/PR/SHR

Response Options:

PType

- | | |
|---|--|
| 1 | Victim |
| 2 | Suspect |
| 3 | Both victim and suspect |
| 4 | This source does not mention this person |

Data Standards or Guidelines

NVISS

NAME

Last name: LName
First name: FName
Middle name: MName

Name	Definition
LName	Last name of victim or suspect
FName	First name of victim or suspect
MName	Middle name of victim or suspect

Uses

Personal identifiers are used to uniquely identify an individual for linking data across data sources and for identifying duplicate records. See the Introduction section of this manual for a discussion about handling variables that can identify individual persons or agencies.

Discussion

Names are not always accurate unique identifiers, as alternate spellings and versions of a name are common. Some victims and suspects also use one or more aliases. In some reporting sites, an individual data source will require that unique identifiers, such as name or social security number, be stored in hard copy only and not in the electronic database. If this is the case, it is acceptable to leave these fields blank.

Name	Label	Table	Type	Field Length	Priority	Primacy
LName	Last name:	Person	Text	50	ER/LR/LR	DC/CME/PR
FName	First name:	Person	Text	50	ER/LR/LR	DC/CME/PR
MName	Middle name:	Person	Text	50	ER/LR/LR	DC/CME/PR

Response Options:

LName
 FName
 MName

Unk Unknown

Social Security #: SSN**Name Definition**

SSN	Social Security number of victim or suspect
-----	---

Uses

Personal identifiers are used to uniquely identify an individual for linking data across data sources and for identifying duplicate records. See the Introduction section of this manual for a discussion about handling variables that can identify individual persons or agencies.

Discussion

At some reporting sites, an individual data source will require that unique identifiers, such as name or social security number be stored in hard copy only, and not in the electronic database. If this is the case, it is acceptable to leave these fields blank.

Name	Label	Table	Type	Field Length	Priority	Primacy
SSN	Social Security #:	Person	Number	9	LR/ER	CME/DC

Response Options:

SSN	999999999	Unknown
-----	-----------	---------

AGE

Date of birth: **DOB**
Age: **Age**
Age unit: **AgeTyp**

Name	Definition
DOB	Date of birth of victim or suspect
Age	Age of victim or suspect
AgeTyp	Type of unit (e.g., years, hours) used to report age

Uses

Age is standard demographic information used in epidemiologic analyses. Date of birth is used to verify age and to assist in uniquely identifying an individual. See the Introduction section of this manual for a discussion about handling variables that can identify individual persons or agencies.

Discussion

Age is reported using the same conventions that vital statistics data uses to facilitate more precise reporting of newborn and infant ages. It is reported in two variables: “Age” identifies the number of years, months, other units of the victim, and “AgeTyp” identifies the type of unit used. So, for example, a two-month-old baby has an Age of 2, and an AgeTyp of 2 (months). In some cases, the victim’s or suspect’s exact age will not be known. If age is provided within a five-year age range or less, choose the midpoint of the range; round to the lower year if the midpoint calculation results in a half year. For example, a suspect reported to be 20 to 25 years of age would be entered as 22. If an age range of > 5 years is provided, enter the age as unknown. Do not calculate age from date of birth and date of incident. If age is not provided, code as “Unknown”. For victims, use the age at the time of death. For suspects, use the age as given in the record in question whether it is the age at injury or at arrest.

Name	Label	Table	Type	Field		
				Length	Priority	Primacy
DOB	Date of birth:	Person	Text	10	LR/ER	CME/DC
Age	Age:	Person	Number	3	LR/ER/LR/O	CME/DC/PR/SHR
AgeTyp	Age unit:	Person	Number	1	LR/ER/LR	CME/DC/PR

Response Options:

DOB

Age

999 Unknown

AgeTyp	
1	Years
2	Months
3	Weeks
4	Days
5	Hours
6	Minutes
9	Unknown

Data Standards or Guidelines

U.S. standard death certificate

Person's sex: Sex

Name Definition

Sex Sex of the victim or suspect

Uses

The person's sex is standard demographic information used in epidemiologic analyses.

Discussion

None

Name	Label	Table	Type	Field Length	Priority	Primacy
Sex	Person's sex:	Person	Number	1	ER/LR/O/LR	DC/CME/SHR/PR

Response Options:

Sex

- 1 Male
- 2 Female
- 9 Unknown

RACE

White:	White
Black:	Black
Asian:	Asian
Pacific Islander:	PacIsland
American Indian:	AmerIndian
Other:	OtherRace
Unspecified:	Unspecified

Name	Definition
White	Person with origins among any of the original peoples of Europe, North Africa, or the Middle East
Black	Person with origins among any of the black racial groups of Africa
Asian	Person with origins among any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent
PacIsland	Person with origins among any of the original peoples of the Pacific Islands
AmerIndian	Person with origins among any of the original peoples of North America and who maintains cultural identification through tribal affiliation or community recognition
OtherRace	Other
Unspecified	Unspecified

Uses

Although the biological significance of race has been questioned, data on race are used frequently in public health surveillance and epidemiologic, clinical, and health services research.

Discussion

Racial categories are neither precise nor mutually exclusive, and the concept of race lacks clear scientific definition. Starting in 1977, the federal government sought to standardize data on race and ethnicity among its agencies through the Office of Management and Budget's (OMB) Statistical Policy Directive Number 15: Race and Ethnic Standards for Federal Statistics and Administrative Reporting (OMB 1978).

Statistical Policy Directive Number 15 was replaced and superseded on October 30, 1997. According to the standards, the racial and ethnic categories set forth should not be interpreted as being primarily biological or genetic in reference. Race and ethnicity may be thought of in terms of social and cultural characteristics, and ancestry.

Person/Identity

The following major changes regarding race were made to the standards: (1) The Asian or Pacific Islander category was separated into two, replacing the existing four categories with five; (2) When self-identification is used, there should be a method for reporting more than one race that should take the form of multiple responses to a single question and should not include a “multiracial” category; (3) Some changes were made to the definitions of the categories, e.g., Central and South American Indians should be classified as American Indian. If a person’s ethnicity is provided in place of their race, e.g., race is given as “Hispanic”, and no other valid race value is given, mark their race as “unspecified”. For SHR data, if race is left blank, enter “Unspecified”. If “Asian/Pacific Islander” is indicated, check both “Asian” and “PacIsland”.

These new standards were used by the U.S. Census Bureau in the 2000 decennial census. Other Federal programs have been instructed to adopt the standards as soon as possible, but not later than January 1, 2003, for household surveys, administrative forms and records, and other data collections. Most state health departments have not adopted the new race categories in their vital statistics registries for 2003; rather, each state has set its own start-up date for the new format and these dates range over the next few years.

Name	Label	Table	Type	Field Length	Priority	Primacy
White	White:	Person	Checkbox	1	ER/LR/O/LR	DC/CME/SHR/PR
Black	Black:	Person	Checkbox	1	ER/LR/O/LR	DC/CME/SHR/PR
Asian	Asian:	Person	Checkbox	1	ER/LR/O/LR	DC/CME/SHR/PR
PacIsland	Pacific Islander:	Person	Checkbox	1	ER/LR/O/LR	DC/CME/SHR/PR
AmerIndian	American Indian:	Person	Checkbox	1	ER/LR/O/LR	DC/CME/SHR/PR
OtherRace	Other:	Person	Checkbox	1	ER/LR/O/LR	DC/CME/SHR/PR
Unspecified	Unspecified:	Person	Checkbox	1	ER/LR/O/LR	DC/CME/SHR/PR

Response Options:

White

Black

Asian

PacIsland

AmerIndian

OtherRace

Unspecified

0 No

1 Yes

Data Standards or Guidelines

Office of Management and Budget, Revisions to the Standards for Classification of Federal Data on Race and Ethnicity: <http://www.whitehouse.gov/omb/fedreg/ombdir15.html>.

Hispanic/Latino/Spanish: Ethnic

Name	Definition
Ethnic	Ethnicity of the victim or suspect of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race

Uses

Data on ethnicity can be used in public health surveillance, and in epidemiologic, clinical, and health services research.

Discussion

Ethnicity is a concept used to differentiate population groups on the basis of shared cultural characteristics or geographic origins. A variety of cultural attributes contribute to ethnic differentiation, including language, patterns of social interaction, religion, and styles of dress. However, ethnic differentiation is imprecise and fluid. It is contingent upon a sense of group identity that can change over time and that involves subjective and attitudinal influences. Since 1977, the federal government has sought to standardize data on race and ethnicity among its agencies through the Office of Management and Budget's (OMB) Statistical Policy Directive Number 15: Race and Ethnic Standards for Federal Statistics and Administrative Reporting (OMB 1978). The revision to Directive Number 15 replaces the two ethnic categories — Hispanic and Not of Hispanic Origin — with "Hispanic or Latino" and "Not Hispanic or Latino".

Name	Label	Table	Type	Field Length	Priority	Primacy
Ethnic	Hispanic/Latino/ Spanish:	Person	Number	1	ER/LR/O/LR	DC/CME/SHR/PR

Response Options:

Ethnic

- 0 Not Hispanic or Latino
- 1 Hispanic or Latino
- 9 Unknown

Data Standards or Guidelines

Office of Management and Budget, Revisions to the Standards for Classification of Federal Data on Race and Ethnicity: <http://www.whitehouse.gov/omb/fedreg/ombdir15.html>.

ADDRESS

State:	ResState
County:	ResCounty
City:	Place
Address:	ResAddress
ZIP code:	ResZip
Country:	Countr
US Census tract:	CensSt
US Census block group:	CensBI

Name	Definition
ResState	Residential state address of victim or suspect, FIPS 2-digit state code
ResCounty	Residential county address of victim or suspect, FIPS 3-digit county code
Place	Residential city address of the victim or suspect, FIPS 5-digit city/town code (“place” code)
ResAddress	Residential street address of the victim or suspect
ResZip	Residential zip code, 5-digit zip code
Countr	Residential country of victim or suspect
CensSt	U.S. Census tract of residence of victim or suspect
CensBI	U.S. Census block group of residence of victim or suspect

Uses

The address is useful to determine the agency responsible for potential public health interventions, to undertake geocoding, and to calculate population-based injury rates. The address can also be used to gain access to U.S. Census information about the socioeconomic status of the victim’s neighborhood. These data elements also identify non-U.S. residents. See the Introduction section of this manual for a discussion about handling variables that can identify individual persons or agencies.

Discussion

If a person is currently residing in a short-term facility such as a rehabilitation hospital, drug treatment program, jail, etc., use his or her home address as their residential address. If a person is residing in a long-term facility, such as a college dormitory, prison, or residential nursing home, use the institution’s address. If they are living in a short-term facility and no residential address is noted, use the address of the short-term facility. The address information should be collected at the local level in a format that meets the local standards for geocoding. Reporting sites planning to geocode their data at the local level

can generate the census block group and tract in which the incident occurred from a geocoding program. In some states, the vital statistics registry or police department will have already geocoded the address and will have census tract and block group information available. The person's city/town ("place") and county are coded using standard Federal Information Processing Standards (FIPS) codes. If the state or country of residence is unknown, enter 99. If the person is a resident of a U.S. territory, enter the FIPS code for that territory (see the following list). If the person is not a resident of a U.S. state or territory, enter 88 for "Not applicable". In general, use whatever is coded on the death certificate as the place of residence. This should handle tourists, itinerants, part-time residents, etc. If there is no death certificate, as for living suspects, use whatever state of residence is provided by the CME and police. Native American reservations should be coded as the state in which it is located. The NVDRS software provides these codes in drop-down menus with a convenient user interface. For out-of-state addresses, the following website supplies FIPS place and county codes: <http://geonames.usgs.gov/fips55.html>. FIPS place codes are frequently more specific than standard city/town designations. For example, they frequently supply codes for neighborhoods of cities.

Note: Vital Statistics data use two coding systems for states: FIPS and their own system. Please use the FIPS version here. It is okay to look up the zip code in a directory if it is not provided.

Name	Label	Table	Type	Field Length	Priority	Primacy
ResState	State:	Person	Number	100	LR/ER/LR	CME/DC/PR
ResCounty	County:	Person	Number	3	LR/ER/LR	CME/DC/PR
Place	City:	Person	Number	5	LR/ER/LR	CME/DC/PR
ResAddress	Address:	Person	Text	50	LR/ER/LR	CME/DC/PR
ResZip	ZIP code:	Person	Number	5	LR/ER/LR	CME/DC/PR
Countr	Country:	Person	Text	45	O/O/O	CME/DC/PR
CensSt	US Census tract:	Person	Text	7	O	DC
CensBl	US Census block group:	Person	Text	1	O	DC

Response Options:

ResState	
1	Alabama
2	Alaska
4	Arizona
5	Arkansas

Person/Identity

6	California
8	Colorado
9	Connecticut
10	Delaware
11	District of Columbia
12	Florida
13	Georgia
15	Hawaii
16	Idaho
17	Illinois
18	Indiana
19	Iowa
20	Kansas
21	Kentucky
22	Louisiana
23	Maine
24	Maryland
25	Massachusetts
26	Michigan
27	Minnesota
28	Mississippi
29	Missouri
30	Montana
31	Nebraska
32	Nevada
33	New Hampshire
34	New Jersey
35	New Mexico
36	New York
37	North Carolina
38	North Dakota
39	Ohio
40	Oklahoma
41	Oregon
42	Pennsylvania
43	Puerto Rico
44	Rhode Island
45	South Carolina
46	South Dakota
47	Tennessee
48	Texas
49	Utah
50	Vermont
51	Virginia
53	Washington
54	West Virginia
55	Wisconsin
56	Wyoming
60	American Samoa

64 Federated States of Micronesia
 66 Guam
 68 Marshall Islands
 69 Northern Mariana Islands
 70 Palau
 74 U.S. Minor Outlying Islands
 78 Virgin Islands of the U.S.
 88 Not applicable
 99 Unknown

ResCounty

Place

ResAddress

9 Unknown

ResZip

99999 Unknown

Countr

Afghanistan	Cambodia
Albania	Cameroon
Algeria	Canada
American Samoa	Cape Verde
Andorra	Cayman Islands
Angola	Central African Republic
Anguilla	Chad
Antigua and Barbuda	Chile
Argentina	China
Armenia	Christmas Island
Aruba	Cocos (Keeling) Islands
Australia	Colombia
Austria	Comoros
Azerbaijan	Congo, Democratic Republic
Bahamas, The	of the Congo, Republic of the
Bahrain	Cook Islands
Bangladesh	Costa Rica
Barbados	Cote d'Ivoire
Belarus	Croatia
Belgium	Cuba
Belize	Cyprus
Benin	Czech Republic
Bermuda	Denmark
Bhutan	Djibouti
Bolivia	Dominica
Bosnia and Herzegovina	Dominican Republic
Botswana	Ecuador
Brazil	Egypt
British Virgin	El Salvador
IslandsBrunei Darussalam	Equatorial Guinea
Bulgaria	Eritrea
Burkina Faso	Estonia
Burundi	Ethiopia

Person/Identity

Falkland Islands
Faroe IslandsFiji
FinlandFrance
French Guiana
French Polynesia
Gabon
Gambia, The
Georgia
Germany
Ghana
Gibraltar
Greece
Greenland
Grenada
Guadeloupe
Guam
Guatemala
Guernsey
Guinea
Guinea-Bissau
Guyana
Haiti
Holy See
Honduras
Hong Kong
Hungary
Iceland
India
Indonesia
Iran
Iraq
Ireland
Israel
Italy
Jamaica
Jan Mayen
Japan
Jersey
Jordan
Kazakstan
Kenya
Kiribati
Korea-North
Korea-South
Kuwait
Kyrgyzstan
Laos
Latvia
Lebanon

Lesotho
Liberia
Libya
Liechtenstein
Lithuania
Luxembourg
Macao
Macedonia
Madagascar
Malawi
Malaysia
Maldives
Mali
Malta
Man
Marshall Islands
Martinique
Mauritania
Mauritius
Mayotte
Mexico
Micronesia
Moldova
Monaco
Mongolia
Montserrat
Morocco
Mozambique
Myanmar
Namibia
Nauru
Nepal
Netherlands
Netherlands Antilles
New Caledonia
New Zealand
Nicaragua
Niger
Nigeria
Niue
Norfolk Island
Northern Mariana
Islands
Norway
Oman
Pakistan
Palau
Palestine
Panama

Papua New Guinea	Paraguay	Sweden
Peru		Switzerland
Philippines		Syria
Pitcairn		Taiwan
Poland		Tajikistan
Portugal		Tanzania
Puerto Rico		Thailand
Qatar		Togo
Reunion		Tokelau
Romania		Tonga
Russia		Trinidad and Tobago
Rwanda		Tunisia
Saint Kitts and Nevis		Turkey
Saint Lucia		Turkmenistan
Saint Pierre and Miquelon		Turks and Caicos Islands
Saint Vincent and the Grenadines		Tuvalu
Samoa		Uganda
San Marino		Ukraine
Sao Tome and Principe		United Arab Emirates
Saudi Arabia		United Kingdom
Senegal		United States
Seychelles		Uruguay
Sierra Leone		Uzbekistan
Singapore		Vanuatu
Slovakia		Venezuela
Slovenia		Vietnam
Solomon Islands		Virgin Islands of the U.S.
Somalia		Wallis and Futuna
South Africa		Western Sahara
Spain		Yemen
Sri Lanka		Yugoslavia
St. Helena		Zambia
Sudan, The		Zimbabwe
Suriname		Other
Svalbard		Unknown
Swasiland		

CensSt		
	9999.99	Unknown
CensBl		
	9999.99	Unknown

Data Standards or Guidelines

Federal Information Processing Standards (FIPS); National Institute of Standards and Technologies; U.S. Bureau of the Census; U.S. Postal Service

Section 4
DEATH CERTIFICATE
MAIN ELEMENTS
MULTIPLE CONDITIONS

Death Certificate number: DthCrtNum	4-3
Birth place: BthPlc	4-4
Country of birth if not listed: BthTxt	
Veteran status: Vetran	4-6
Marital status: MarStat	4-7
Place of death: Dthplace	4-8
Place of death if other: PDthTx	
Date pronounced dead: PrncdDt	4-9
Date of death: DthDt	4-10
State of death: DthState	4-11
CAUSE OF DEATH	4-13
Underlying cause of death code: ICD_10	4-14
4th: 4th_ICD	
5th: 5th_ICD	
Autopsy performed: Autpsy	4-18
Person was pregnant: Preg	4-19
Manner of death: Manner	4-20
Date of injury: IDate	4-21
Time of injury: ITime	
Type of location where injured: LocTyp	4-22
Injured at work: AtWork	4-24
INJURY ADDRESS	4-26
Survival time no. of units: Surviv	4-30
Unit of time used in survival time: Sunit	
Education: Educ	4-31
Number years education: OldEduc	

USUAL OCCUPATION

4-34

Multiple conditions on Death Certificate

4-36

1-20: Mult1001 through Mult1020

Mult1001D4 through Mult1020D5

Mult1001D5 through Mult1020D5

Death Certificate number: DthCrtNum

Name	Definition
------	------------

DthCrtNum	Victim's death certificate number
-----------	-----------------------------------

Uses

The death certificate number is used only for data linkage and tracking purposes. See the Introduction section of this manual for a discussion about handling variables that can identify individual persons or agencies.

Discussion

None

Name	Label	Table	Type	Field Length	Priority	Primacy
DthCrtNum	Death Certificate number:	Person	Text	50	ER	DC

Response Options:

DthCrtNum

Birth place: **BthPlc**
Country of birth if not listed: **BthTxt**

Name	Definition
BthPlc	Person's state of birth
BthTxt	Person's country of birth, if not U.S.

Uses

Used for identifying immigrants.

Discussion

The state of birth is indicated on the death certificate and is coded by the vital statistics registry using the code list below. Note: the code list used for place of birth is not a FIPS code list, it is the National Center for Health Statistics code list. If the victim was not born in the United States, please enter the victim's country of birth and refer to code list for Country.

Name	Label	Table	Type	Field Length	Priority	Primacy
BthPlc	Birth place:	Person	Number	2	LR/LR	DC/CME
BthTxt	Country of birth if not listed:	Person	Text	30	O/O	DC/CME

Response Options:

BthPlc

- 1 Alabama
- 2 Alaska
- 3 Arizona
- 4 Arkansas
- 5 California
- 6 Colorado
- 7 Connecticut
- 8 Delaware
- 9 District of Columbia
- 10 Florida
- 11 Georgia
- 12 Hawaii
- 13 Idaho
- 14 Illinois
- 15 Indiana
- 16 Iowa
- 17 Kansas
- 18 Kentucky
- 19 Louisiana
- 20 Maine

- 21 Maryland
- 22 Massachusetts
- 23 Michigan
- 24 Minnesota
- 25 Mississippi
- 26 Missouri
- 27 Montana
- 28 Nebraska
- 29 Nevada
- 30 New Hampshire
- 31 New Jersey
- 32 New Mexico
- 33 New York
- 34 North Carolina
- 35 North Dakota
- 36 Ohio
- 37 Oklahoma
- 38 Oregon
- 39 Pennsylvania
- 40 Rhode Island
- 41 South Carolina
- 42 South Dakota
- 43 Tennessee
- 44 Texas
- 45 Utah
- 46 Vermont
- 47 Virginia
- 48 Washington
- 49 West Virginia
- 50 Wisconsin
- 51 Wyoming
- 52 Puerto Rico
- 53 Virgin Island
- 54 Guam
- 55 Canada
- 56 Cuba
- 57 Mexico
- 61 American Samoa
- 62 Northern Marianas
- 88 Remainder of the world (specify in birthplace text)
- 99 Unknown

BthTxt

Refer to Countr

Data Standards or Guidelines

U.S. standard death certificate

Veteran status: Vetran

Name	Definition
Vetran	Has the person ever served in the U.S. Armed Forces?

Uses

Used to examine violent injury deaths among veterans.

Discussion

Veteran status is indicated on the death certificate in section “Ever in U.S. Armed Forces”. If a state’s death certificate has the variant wording, “If U.S. War veteran, specify war,” a blank or missing response should be coded as “Unknown” rather than “No”.

Name	Label	Table	Type	Field Length	Priority	Primacy
Vetran	Veteran status:	Person	Number	1	LR	DC

Response Options:

Vetran

- 0 No
- 1 Yes
- 9 Unknown

Data Standards or Guidelines

U.S. standard death certificate

Marital status: MarStat

Name	Definition
MarStat	Person’s marital status

Uses

The victim’s marital status is standard demographic information used in epidemiologic analyses. It can be used to explore whether certain types of marital status are a risk factor for violent death (such as widowhood as a risk for suicide).

Discussion

Marital status is regularly completed on the death certificate and often noted in law enforcement or medical examiner records. Marital status should be completed for persons of all ages, including children. If the marital status is not explicitly noted, code as 9, “Unknown”. In an incident in which a person kills their spouse, their marital status should be coded as “Married”, not “Widowed”. Use “Widowed” for a person of either sex whose spouse has died. Use the “Single” option when this term is used in CME records and it is not clear whether the person was never married, widowed, divorced, or separated. Consider a person in a common-law marriage to be “Married”.

Name	Label	Table	Type	Field Length	Priority	Primacy
MarStat	Marital status:	Person	Number	1	LR/LR	DC/CME

Response Options:

MarStat	
1	Married
2	Never Married
3	Widowed
4	Divorced
5	Married, but separated
6	Single, not otherwise specified
9	Unknown

Data Standards or Guidelines

U.S. standard death certificate

Place of death: Dthplace
Place of death if other: PDthTx

Name	Definition
Dthplace	Victim’s place of death
PDthTx	Text if place of death is “other”

Uses

The place of death may be useful for emergency response planning and to assist in evaluating hospital or EMS services.

Discussion

The code list for Place of Death is the list used on the new standard U.S. death certificate. The older standard certificate uses slightly different codes (e.g., there is no separate code for “Hospice,” and “residence” is used rather than “Decedent’s home”.) If your state uses the older code list, “residence” is comparable to “Decedent’s home” (although this may sometimes be incorrect). Some deaths will be coded on the death certificate as “Other” for place of death. This will usually refer to “Scene” deaths (e.g., a homicide victim who dies on the street). If “Other” is coded on the death certificate, enter the place of death in the free text field if the place is specified on the death certificate. If it is not, leave the text field blank. Do not enter the information supplied in the death certificate’s item, “Place of injury”, as this may be a different location than the place where the victim actually died. “Body location” can be used as place of death if there is no indication that the person died elsewhere.

Name	Label	Table	Type	Field Length	Priority	Primacy
Dthplace	Place of death:	Person	Number	1	ER/LR	DC/CME
PDthTx	Place of death if other:	Person	Text	30	O/O	DC/CME

Response Options:

- Dthplace
- 1 Hospital inpatient
 - 2 ED/outpatient
 - 3 Dead on arrival
 - 4 Hospice facility
 - 5 Nursing home, long-term care facility
 - 6 Decedent’s home
 - 7 Other (specify)
 - 9 Undetermined

PDthTx

Data Standards or Guidelines

U.S. standard death certificate

Date pronounced dead: PrncdDt

Name	Definition
PrncdDt	Date on which the victim was found or pronounced dead

Uses

This variable is useful when a person is found dead and the actual date of death is unclear. It provides a date that the death must have preceded.

Discussion

This field is found on the standard death certificate as Item 24, "Date pronounced dead". It should differ from the actual date of death only when death was not observed and may have occurred prior to the date the body was found. This date should be known in every case, whereas the day, month, or even year of actual death may be unknown.

Name	Label	Table	Type	Field Length	Priority	Primacy
PrncdDt	Date pronounced dead:	Person	Text	10	ER	DC

Response Options:

PrncdDt

Data Standards or Guidelines

U.S. standard death certificate

Date of death: DthDt

Name Definition

DthDt	Date of victim’s death
-------	------------------------

Uses

Date of death determines the data year in which the victim will be counted in conjunction with date and time of the incident and with survival time. It can be used for emergency response planning and to assist in evaluating the effectiveness of EMS services and hospital care. See the Introduction section of this manual for a discussion about handling variables that can identify individual persons or agencies.

Discussion

When recording the information from the death certificate, enter the date of death exactly as it appears in the “Date of Death” field, even if the word “found” or “pronounced” precedes it on the hard copy. If the date on the CME report is referred to as an actual date of death, record it. If the date is referred to as the date on which the body was found or the death was pronounced, and it is unknown on which date the death actually occurred, enter only that portion of the date that is known. For example, if a person was last seen on a Friday and their body was discovered on a Monday and it is unknown when they died, enter the actual month and year, but enter “99” for the day.

Name	Label	Table	Type	Field Length	Priority	Primacy
DthDt	Date of death:	Person	Text	10	ER/LR	DC/CME

Response Options:

DthDt

Data Standards or Guidelines

NVISS

State of death: DthState**Name Definition**

Name	Definition
DthState	State in which the death occurred

Uses

Identifies the state in which the death certificate was filed. This variable will be used to facilitate data sharing across states when state of injury and state of death differ.

Discussion

State of death will usually be the same as state of injury; however, on occasion the two will differ. This is true for victims who are injured in one state and transported to another state for emergency medical care. If the state of death is unknown, enter the state in which the person was pronounced dead, i.e., the state that issued the death certificate. If the person was pronounced dead in a U.S. territory, enter the FIPS code for that territory. If the person was not pronounced dead in any U.S. state or territory, enter 88, for "Not applicable". Native American reservations should be coded as the state where it is located.

Name	Label	Table	Type	Field Length	Priority	Primacy
DthState	State of death:	Person	Number	2	ER/LR/LR	DC/CME/PR

Response Options:

DthState	
1	Alabama
2	Alaska
4	Arizona
5	Arkansas
6	California
8	Colorado
9	Connecticut
10	Delaware
11	District of Columbia
12	Florida
13	Georgia
15	Hawaii
16	Idaho
17	Illinois
18	Indiana
19	Iowa
20	Kansas
21	Kentucky
22	Louisiana
23	Maine
24	Maryland
25	Massachusetts

Person/DC/Main Elements

26	Michigan
26	Michigan
27	Minnesota
28	Mississippi
29	Missouri
30	Montana
31	Nebraska
32	Nevada
33	New Hampshire
34	New Jersey
35	New Mexico
36	New York
37	North Carolina
38	North Dakota
39	Ohio
40	Oklahoma
41	Oregon
42	Pennsylvania
43	Puerto Rico
44	Rhode Island
45	South Carolina
46	South Dakota
47	Tennessee
48	Texas
49	Utah
50	Vermont
51	Virginia
53	Washington
54	West Virginia
55	Wisconsin
56	Wyoming
60	American Samoa
64	Federated States of Micronesia
66	Guam
68	Marshall Islands
69	Northern Mariana Islands
70	Palau
74	U.S. Minor Outlying Islands
78	Virgin Islands of the U.S.
88	Not applicable
99	Unknown

Data Standards or Guidelines

Federal Information Processing Standards (FIPS); National Institute of Standards and Technologies; U.S. Postal Service

CAUSE OF DEATH

Immediate cause of death text:	CausIA
Cause leading to immediate cause text:	CausIB
Next antecedent cause of death text:	CausIC
Underlying cause of death text:	CausID

Name	Definition
CausIA	Immediate cause of death (text)
CausIB	Cause leading to immediate cause of death (text)
CausIC	Next antecedent cause of death (text)
CausID	Underlying cause of death (text)

Uses

The text that the death certifier supplies on the death certificate regarding the causes of death can be used to identify reportable cases in a timely manner. While coded data that captures the underlying cause of death using ICD codes is an efficient means of identifying confirmed cases, these coded data will not be available in some states for many months.

Discussion

Enter the text exactly as it appears on the death certificate. The letters in the variable names correspond to the lettered lines appearing on the death certificate. Some death certificates will not have an entry on all four lines, so not all four variables need to be completed.

Name	Label	Table	Type	Field Length	Priority	Primacy
CausIA	Immediate cause of death text:	Person	Text	120	ER	DC
CausIB	Cause leading to immediate cause text:	Person	Text	120	O	DC
CausIC	Next antecedent cause of death text:	Person	Text	120	O	DC
CausID	Underlying cause of death text:	Person	Text	120	O	DC

Response Options:

CausIA

CausIB

CausIC

CausID

None

Data Standards or Guidelines

U.S. standard death certificate

Underlying cause of death code: ICD_10
4th: 4th_ICD
5th: 5th_ICD

Name	Definition
ICD_10	Underlying cause-of-death code (ICD-10)
4th_ICD	4th
5th_ICD	5th

Uses

The underlying cause of death assigned on the death certificate is the basis for the nation’s official count of deaths due to homicide, suicide, and other causes. A comparison of this variable and the CME variable “Manner”, and the abstractor variable “Type of Death”, will indicate the degree to which data sources vary in classifying deaths.

Discussion

Cause of death is coded using the system established by the World Health Organization’s International Classification of Diseases (ICD). A variable should be coded exactly as it appears in the underlying cause of death field in death certificate data. If death certificate data are not available at the time that the reporting site is gathering data on the case, code as Unknown. These data may be reported at a later update. Use the decimal point following the second digit. Do not use trailing zeros after the decimal point (unless a true zero is part of the actual code). The code options listed below indicate codes in the reportable range.

The fourth ICD-10 digit in the underlying cause of death code is used with some external cause code categories to identify the place of occurrence of the external cause where relevant. The fifth ICD-10 digit is provided for optional use in a supplementary character position with some categories to indicate the activity of the injured person at the time the event occurred. This subclassification should not be confused with, or be used instead of, the recommended fourth-character subdivisions provided to indicate the place of occurrence.

Name	Label	Table	Type	Field Length	Priority	Primacy
ICD_10	Underlying cause of death code:	Person	Text	6	O	DC
4th_ICD	4th	Person	Text	1	O	DC
5th_ICD	5th	Person	Text	1	O	DC

Response Options:

ICD_10

Format: L##.## (the first character must be a letter, followed by at least two and up to four digits)

ICD-10 coding of first 3 to 4 characters (cause of injury):

- U01 Assault by terrorism
- U01.0 Assault by terrorism by explosion of marine weapons
- U01.1 Assault by terrorism involving destruction of aircraft
- U01.2 Assault by terrorism involving other explosions and fragments
- U01.3 Assault by terrorism involving fires, conflagration, hot substances
- U01.4 Assault by terrorism involving firearms
- U01.5 Assault by terrorism involving nuclear weapons
- U01.6 Assault by terrorism involving biological weapons
- U01.7 Assault by terrorism involving chemical weapons
- U01.8 Assault by terrorism, other specified
- U01.9 Assault by terrorism, unspecified
- U02 Sequelae of terrorism
- U03 Intentional self-harm by terrorism
- U03.0 Intentional self-harm by terrorism involving explosions and fragments
- U03.9 Intentional self-harm by terrorism by other and unspecified means
- W32 Accidental handgun discharge
- W33 Accidental rifle, shotgun, and larger firearm discharge
- W34 Accidental discharge from other and unspecified firearms (this code does not discriminate between firearms and nonpowder guns)
- X60–X69 Intentional self-poisoning
- X70 Intentional self-harm by hanging, strangulation, and suffocation
- X71 Intentional self-harm by drowning and submersion
- X72 Intentional self-harm by handgun discharge
- X73 Intentional self-harm by rifle, shotgun, and larger firearm discharge
- X74 Intentional self-harm by other and unspecified firearm discharge
- X75 Intentional self-harm by explosive material
- X76 Intentional self-harm by smoke, fire, and flames
- X77 Intentional self-harm by steam, hot vapors, and hot objects
- X78 Intentional self-harm by sharp object
- X79 Intentional self-harm by blunt object
- X80 Intentional self-harm by jumping from a high place
- X81 Intentional self-harm by jumping or lying before moving object
- X82 Intentional self-harm by crashing a motor vehicle
- X83 Intentional self-harm by other specified means
- X84 Intentional self-harm by unspecified means
- X85 Assault by drugs, medicaments, and biological substances
- X86 Assault by corrosive substance
- X87 Assault by pesticides
- X88 Assault by gases and vapors
- X89 Assault by other specified chemicals and noxious substances
- X90 Assault by other unspecified chemicals and noxious substances
- X91 Assault by hanging, strangulation, and suffocation
- X92 Assault by drowning and submersion

- X93 Assault by handgun discharge
- X94 Assault by rifle, shotgun, and larger firearm discharge
- X95 Assault by other and unspecified firearm discharge
- X96 Assault by explosive material
- X97 Assault by smoke, fire, and flames
- X98 Assault by steam, hot vapors, and hot objects
- X99 Assault by sharp object
- Y00 Assault by blunt object
- Y01 Assault by pushing from high place
- Y02 Assault by pushing or placing victim before moving object
- Y03 Assault by crashing a motor vehicle
- Y04 Assault by bodily force (unarmed brawl or fight)
- Y05 Sexual assault by bodily force
- Y06 Neglect and abandonment
- Y07 Other maltreatment syndromes (physical or sexual abuse, torture)
- Y08 Assault by other specified means
- Y09 Assault by unspecified means
- Y10 Poisoning by and exposure to nonopioid analgesics, antipyretics, and antirheumatics undetermined intent
- Y11 Poisoning by and exposure to antiepileptic, sedative-hypnotic, antiparkinsonism, and psychotropic drugs, not elsewhere classified, undetermined intent
- Y12 Poisoning by and exposure to narcotics and psychodysleptics hallucinogens, not elsewhere classified, undetermined intent
- Y13 Poisoning by and exposure to other drugs acting on the autonomic nervous system, undetermined intent
- Y14 Poisoning by and exposure to other and unspecified drugs, medicaments, and biological substances, undetermined intent
- Y15 Poisoning by and exposure to alcohol, undetermined intent
- Y16 Poisoning by and exposure to organic solvents and halogenated hydrocarbons and their vapors, undetermined intent
- Y17 Poisoning by and exposure to other gases and vapors, undetermined intent
- Y18 Poisoning by and exposure to pesticides, undetermined intent
- Y19 Poisoning by and exposure to other and unspecified chemicals and noxious substances, undetermined intent
- Y20 Hanging, strangulation, and suffocation, undetermined intent
- Y21 Drowning and submersion, undetermined intent
- Y22 Handgun discharge, undetermined intent
- Y23 Rifle, shotgun, and larger firearm discharge, undetermined intent
- Y24 Other and unspecified firearm discharge, undetermined intent
- Y25 Contact with explosive material, undetermined intent
- Y26 Exposure to smoke, fire, and flames, undetermined intent
- Y27 Contact with steam, hot vapors, and hot objects, undetermined intent
- Y28 Contact with sharp object, undetermined intent
- Y29 Contact with blunt object, undetermined intent
- Y30 Falling, jumping, or pushed from a high place, undetermined intent
- Y31 Falling, lying, or running before or into moving object, undetermined intent

Y32	Crashing of motor vehicle, undetermined intent
Y33	Other specified events, undetermined intent
Y34	Unspecified event, undetermined intent
Y35.0	Legal intervention involving firearm discharge
Y35.1	Legal intervention involving explosives
Y35.2	Legal intervention involving gas
Y35.3	Legal intervention involving blunt objects
Y35.4	Legal intervention involving sharp objects
Y35.6	Legal intervention involving other specified means
Y35.7	Legal intervention, means unspecified
Y86	Sequelae of other accidents (where determined to be due to firearms)
Y87.0	Sequelae of intentional self-harm
Y87.1	Sequelae of assault
Y87.2	Sequelae of events of undetermined intent
Y89.0	Sequelae of legal intervention
Y89.9	Sequelae of unspecified external cause
L88.88	Not applicable*
L99.99	Unknown or missing*

* Not an ICD-10 code, but an added code

4th_ICD

ICD-10 coding of 4th character (type of place of occurrence) — applies only to codes in the W32 to Y34 range above, except Y06 and Y07.

0	Home
1	Residential institution
2	School, institution, public administrative area (e.g., courthouse, hospital, daycare center)
3	Sports and athletic area
4	Street and highway
5	Trade and service area
6	Industrial and construction (e.g., factory, shipyard)
7	Farm
8	Other
9	Unspecified

5th_ICD

ICD-10 Coding of 5th character (type of activity when injured) — applies only to codes in the W32 to Y34 range above.

0	While engaged in sports activity
1	While engaged in leisure activity
2	While working for income
3	While engaged in other types of work (e.g., chores, school)
4	While resting, sleeping, eating, or engaging in other vital activities
5	While engaged in other specified activities
6	While engaged in unspecified activities

Data Standards or Guidelines

(ICD-10) International Statistical Classification of Diseases and Related Health Problems: 10th Revision: Geneva: World Health Organization 1992.

Autopsy performed: Autpsy

Name Definition

Autpsy	Autopsy performed on the victim?
--------	----------------------------------

Uses

Decedents who have been autopsied are likely to have more reliable cause of death codes and pregnancy findings.

Discussion

A yes/no item appears on the death certificate to indicate if an autopsy was performed. Autopsies are not always performed on every case that comes to the attention of a CME. For example, a witnessed suicide may not be autopsied. In some cases, a partial autopsy may be performed. For example, a person who kills him or herself with a gunshot wound to the head may receive a head-only autopsy. A “visual-only autopsy” (that is, the body was visually inspected, but not physically examined) does not qualify as an autopsy here.

Name	Label	Table	Type	Field Length	Priority	Primacy
Autpsy	Autopsy performed:	Person	Number	1	LR/ER	CME/DC

Response Options:

- Autpsy
- 0 Not autopsied
 - 1 Autopsied (full or partial)
 - 9 Unknown

Data Standards or Guidelines

U.S. standard death certificate

Person was pregnant: Preg**Name Definition**

Preg	Person was pregnant or recently pregnant at the time of death
------	---

Uses

This variable is used to identify pregnant or recently pregnant victims and to document types of violence against pregnant and postpartum women. It is also useful in documenting a potentially precipitating circumstance in suicide cases.

Discussion

Victim's pregnancy status is often noted on the death certificate and in the CME report. Findings are more likely to be authoritative if a full autopsy has been performed. This variable should be coded for all female victims regardless of age. The variable will not apply to males. It is based on the codes used on the new U.S. standard death certificate. As such, it collects pregnancy status at the time of death, not at the time of injury. So, for example, if a pregnant woman was assaulted, miscarried, and died a month later, she would be coded in the CME version of the variable as "Not pregnant but pregnant within 42 days of death," not as "Pregnant at time of death". Code "Unknown", regardless of the victim's age, if the victim's pregnancy status is not mentioned on the record for the CME version of the variable or for states that have added their own pregnancy variable to their death certificate. If the victim is noted by the CME or death certificate as "Not pregnant", but there is no mention as to whether she was pregnant in the year preceding her death, code the variable as "Unknown". If your state's death certificate has a pregnancy variable that does not match the national standard, use the 4 and 5 options to capture this information on the DC screen. Continue to use the 0–3 options to code this information on the CME screen.

Name	Label	Table	Type	Field Length	Priority	Primacy
Preg	Person was pregnant:	Person	Number	1	LR/LR	CME/DC

Response Options:

Preg

- | | |
|---|--|
| 0 | Not pregnant within last year |
| 1 | Pregnant at time of death |
| 2 | Not pregnant but pregnant w/in 42 days of death |
| 3 | Not pregnant but pregnant 43 days to 1 year before death |
| 4 | Not pregnant, not otherwise specified |
| 5 | Pregnant, not otherwise specified |
| 8 | Not applicable |
| 9 | Unknown if pregnant within past year |

Data Standards or Guidelines

U.S. standard death certificate

Manner of death: Manner

Name	Definition
Manner	Manner of death

Uses

Manner of death is a broad classification of the cause of death as natural, accidental, suicide, homicide, pending investigation, or not determined. Manner is determined by the coroner or medical examiner and, when considered in conjunction with the narrative cause of death statements on the death certificate, is the basis for how the official underlying cause of death is coded in vital statistics data. Data describing the manner of death are useful for public health surveillance, for health care planning and administration, and for clinical and health services, and epidemiologic research. Because the CME’s manner of death sometimes contradicts the manner implied by the death certificate’s underlying cause-of-death code, the police designation of the death, or the death type assigned to the victim by the abstractor, it is useful to document manner by source.

Discussion

CMEs investigate suspicious injury deaths and determine the likely manner of death using a check box on the death certificate. Record the manner of death exactly as it appears on the death certificate and CME report. If a manner is noted as “Pending investigation,” check back on the case later to update the manner. “Pending” is considered a temporary designation. Since states’ death certificates may have a state-added code to indicate “Legal intervention” as the manner of death, code “Legal intervention” only if it is presented on the death certificate. Do not use the DC manner for the CME manner field even if the DC is found in the ME records. Record the manner from the CME records.

Name	Label	Table	Type	Field Length	Priority	Primacy
Manner	Manner of death:	Person	Number	1	LR/ER	CME/DC

Response Options:

- Manner
- 1 Natural
 - 2 Accident
 - 3 Suicide
 - 4 Homicide
 - 5 Pending investigation
 - 6 Could not be determined
 - 7 Legal intervention
 - 9 Record not available or blank

Data Standards or Guidelines

U.S. standard death certificate

Date of injury: IDate
Time of injury: ITime

Name	Definition
IDate	Date of injury
ITime	Time of Injury

Uses

Date of injury can be used to examine trends over time in violent deaths, to detect epidemics, and to test for seasonal effects on violent death. Time of injury can be used to identify times of day incidents may be more likely to occur. Date and time of injury can also be used to interpret toxicology test results. See the Introduction section of this manual for a discussion about handling variables that can identify individual persons or agencies.

Discussion

Exact date and time of injury are sometimes unknown, as in an unwitnessed suicide or homicide. Do not enter date that the victim was last seen if actual date of injury is unknown. The software allows for partially known date information to be entered. For example, if a suicide victim was last seen July 6th and the body was discovered July 7th, but the day the victim was injured was unknown, date of injury can be coded as 07/99/2003. If month and day are unknown, but the year is known, code the date as 99/99/2003. If no information is known about when the incident occurred (as in when skeletal remains are found), it is acceptable to code date of injury as 99/99/9999. If a range of greater than one hour is noted for the time of injury (e.g., “sometime between 9:30 a.m. and noon”), treat time as unknown. If a range of less than an hour is given (e.g., “around 9:30 a.m.” or “between 9:30 and 10:30”), code that as the lowest time in the range (0930 in both cases). Time of injury is coded using the 24-hour military format. Midnight is 0000.

Name	Label	Table	Type	Field Length	Priority	Primacy
IDate	Date of injury:	Person	Text	10	ER/LR/LR	DC/CME/PR
ITime	Time of injury:	Person	Text	5	ER/LR/LR	DC/CME/PR

Response Options:

IDate
 mm\dd\yyyy
 ITime
 #####

Data Standards or Guidelines

NVISS

Type of location where injured: LocTyp**Name Definition**

LocTyp	Type of place at which the injury occurred
--------	--

Uses

Data on the type of place at which an injury occurred help to describe the injury-producing event and are valuable for planning and evaluating prevention programs.

Discussion

Code the location at which the victim was injured. Designations of specific buildings (such as “House, apartment” or “Bar, nightclub”) include both the building itself and the area directly outside, such as a driveway, porch, or front walk. If a victim was injured in a variety of locations (e.g., the victim was stabbed on a bus and was pursued by the attacker off the bus and into a store and stabbed a second time), code the location at which the victim was first injured. Events that occur on public sidewalks should be coded as “Street”, with the exception of those occurring on sidewalks that are the private property of an adjacent building. Those should be coded to the building. For example, an incident that occurs on a walkway on the front lawn of a home should be coded as “House, apartment”. If an incident occurs in a garage at a private home, code “House, apartment”. If an incident occurs in a commercial parking garage, parking lot, or a garage used by four or more different households (e.g., a garage serving a large apartment building), code the location as “12 – Parking lot/public parking garage”. If an incident occurs while the victim is in a motor vehicle, please code “4 – Motor vehicle” rather than the location of the motor vehicle. Injury “site”, injury “location”, and injury “scene” can all be used as synonyms. If the injury occurred in a “home,” put down “House, apartment” even if it is not certain that this was the victim’s home.

Name	Label	Table	Type	Field Length	Priority	Primacy
LocTyp	Type of location where injured:	Person	Number	2	ER/LR/LR	DC/PR/CME

Response Options:

LocTyp

- 1 House, apartment, including driveway, porch, yard
- 2 Street/road, sidewalk, alley
- 3 Highway, freeway
- 4 Motor vehicle (excluding school bus, 15 and public transportation, 21)
- 5 Bar, nightclub
- 6 Service station
- 7 Bank, credit union, ATM location
- 8 Liquor store
- 9 Other commercial establishment (e.g., grocery store, retail outlet, laundromat), including parking lot
- 10 Industrial or construction areas (e.g., factory, warehouse)

- 11 Office building
- 12 Parking lot/public parking garage (e.g., parking lot at mall, parking lot shared by four or more households)
- 13 Abandoned house, building, or warehouse
- 14 Sports or athletic area (e.g., stadium, baseball field, gymnasium, recreation center)
- 15 School bus
- 16 Child care center, daycare, preschool
- 17 Elementary school, middle school (i.e., K-8) including school dormitory, residential school
- 18 High school, including school dormitory, residential school
- 19 College/University, including dormitory, fraternity/sorority
- 20 Unspecified school
- 21 Public transportation or station (e.g., bus, train, plane, airport, depot, taxi)
- 22 Synagogue, church, temple
- 23 Hospital or medical facility
- 24 Supervised residential facility (e.g., shelter, halfway house, group home)
- 25 Farm
- 26 Jail, prison, detention facility
- 27 Park, playground, public use area
- 28 Natural area (e.g., field, river, beaches, woods)
- 29 Hotel/motel
- 66 Other (e.g., on railroad tracks)
- 99 Unknown

Data Standards or Guidelines

NVISS

Injured at work: AtWork

Name	Definition
-------------	-------------------

AtWork	Injury occurred at work or while the person was working
--------	---

Uses

Knowing the relationship of the incident to a person's work can help determine the impact of violence and suicide in the workplace and can be used to plan and develop work-related violence prevention programs.

Discussion

"AtWork" includes those incidents that occur while the person is at work or working. These injuries could occur at the person's place of work or off-site during the course of work-related activities. For example, a person who is murdered while driving a truck to deliver produce should be coded as a work-related injury. However, a person who is shot while commuting between work and home would not be considered to have suffered a work-related injury. The AtWork definition applies only to current jobs. The "Injured at work" item on the death certificate is supposed to be filled out for all injury victims with the exception of those less than age 14 (unless warranted for a younger child injured at work). "Not applicable" can therefore be coded for victims ages 13 years and younger. An injury at work can occur:

- on employer premises while engaged in work activity, apprenticing, or in vocational training (regardless of the relationship between the victim and suspect);
- on employer premises while on break, in hallways, rest room, cafeteria, or storage area;
- on employer parking lots while working, arriving or leaving;
- while working for pay or compensation, including at home;
- while working as a volunteer EMS, firefighter, or law enforcement officer;
- while working in a family business, including family farm (activity should be clearly related to a profit-oriented business);
- while traveling on business, including to and from customer/business contacts;
- while engaged in work activity where a vehicle is considered the work environment.

An injury at work does not include:

- commuting to or from work;
- engaging in criminal activity as a means of economic support;
- engaging in recreational activities on employer controlled facilities (e.g., games) for personal enjoyment on employer premises;
- on employer premises while victim was visiting for non-work purposes (i.e., not on official business);
- working as a homemaker at homemaking activities;

- engaging in school activities while enrolled as a student;
- working for self or for no profit (e.g., mowing yard, repairing own roof, hobby, recreational activities)
- operating a vehicle (personal or commercial) for non-work purposes

Name	Label	Table	Type	Field Length	Priority	Primacy
AtWork	Injured at work:	Person	Number	1	ER/LR/LR	DC/PR/CME

Response Options:

AtWork	
0	No, injury did not occur at work or while the victim was working
1	Yes, injury occurred at work or while the victim was working
8	Not applicable (e.g., child, unemployed, retiree)
9	Unknown

Data Standards or Guidelines

U.S. standard death certificate

INJURY ADDRESS

State of injury FIPS code:	InjState
County of Injury:	County
City of injury FIPS code:	InjPlace
Street and number of injury site:	InjAddress
US Census block group of injury:	CnsBlk
US Census tract of injury:	CnsTrt

Name	Definition
InjState	State in which injury was inflicted
County	County in which injury occurred (FIPS code)
InjPlace	City/town in which injury was inflicted
InjAddress	Street address at which injury was inflicted
CnsBlk	Census block in which injury was inflicted
CnsTrt	Census tract in which injury was inflicted

Uses

The address of the incident is used to determine the agency responsible for potential public health interventions; to gain information about the socioeconomic status (SES) of the neighborhoods where injuries occur (via U.S. Census data); to map incidents; and to conduct analyses of the distribution of cases by SES and geographic area. See the Introduction section of this manual for a discussion about handling variables that can identify individual persons or agencies.

Discussion

If the incident covers more than one address, code the address where the first injury was inflicted. In some cases, there will not be an explicit address for the injury incident (e.g., in a field or park). In these cases, record the nearest address or cross streets. If the nearest street address or intersection is not available from the records, enter the place name, e.g., the name of the park or beach. The address information should be collected at the local level in a format that meets the local standards for geocoding. Reporting sites planning to geocode their data at the local level can generate the census block group and tract where the incident occurred from a geocoding program. In some states, the vital statistics registry or police department will have already geocoded the address and will have census tract and block group information available.

The person's city/town ("Place") is coded using standard Federal Information Processing Standards (FIPS) codes. The NVDRS software provides these codes in drop-down menus with a convenient user interface. For out-of-state addresses, the following website will supply FIPS place codes: <http://geonames.usgs.gov/fips55.html>. FIPS place codes are frequently more specific than standard city/town designations. For example, they frequently supply codes for neighborhoods of cities.

The county is coded using standard Federal Information Processing Standards (FIPS) codes. These codes are provided in drop-down menus in the NVDRS software. For out-of-state addresses, the following website will supply FIPS county codes: <http://geonames.usgs.gov/fips55.html>.

If the state of injury or country of injury is unknown, enter 99. If the place of injury is a U.S. territory, enter the FIPS code for that territory. If the place of injury was known to be outside of the U.S. and its territories, enter 88 for “Not applicable”. Native American reservations should be coded as the state in which it is located.

Note: Vital Statistics data use two coding systems for states: FIPS and their own system. Please use the FIPS version here.

Name	Label	Table	Type	Field Length	Priority	Primacy
InjState	State of injury FIPS code:	Person	Number	2	ER/LR/LR	DC/CME/PR
County	County of Injury:	Person	Number	3	ER/LR/LR	DC/CME/PR
InjPlace	City of injury FIPS code:	Person	Number	5	ER/LR/LR	DC/CME/PR
InjAddress	Street and number of injury site:	Person	Text	100	O/LR/LR	DC/CME/PR
CnsBlk	US Census block group of injury:	Person	Text	1	O	DC
CnsTrt	US Census tract of injury:	Person	Text	7	O	DC

Response Options:

InjState	
1	Alabama
2	Alaska
4	Arizona
5	Arkansas
6	California
8	Colorado
9	Connecticut
10	Delaware
11	District of Columbia
12	Florida
13	Georgia
15	Hawaii
16	Idaho

Person/DC/Main Elements

17	Illinois
18	Indiana
19	Iowa
20	Kansas
21	Kentucky
22	Louisiana
23	Maine
24	Maryland
25	Massachusetts
26	Michigan
27	Minnesota
28	Mississippi
29	Missouri
30	Montana
31	Nebraska
32	Nevada
33	New Hampshire
34	New Jersey
35	New Mexico
36	New York
37	North Carolina
38	North Dakota
39	Ohio
40	Oklahoma
41	Oregon
42	Pennsylvania
43	Puerto Rico
44	Rhode Island
45	South Carolina
46	South Dakota
47	Tennessee
48	Texas
49	Utah
50	Vermont
51	Virginia
53	Washington
54	West Virginia
55	Wisconsin
56	Wyoming
60	American Samoa
64	Federated States of Micronesia
66	Guam
68	Marshall Islands
69	Northern Mariana Islands
70	Palau
74	U.S. Minor Outlying Islands
78	Virgin Islands of the U.S.
88	Not applicable
99	Unknown

County	999	Unknown
InjPlace	99999	Unknown
InjAddress	9	Unknown
CnsBlk	9	Unknown
CnsTrt	9999.99	Unknown

Data Standards or Guidelines

Federal Information Processing Standards (FIPS); National Institute of Standards and Technologies; U.S. Bureau of the Census; U.S. Postal Service

Survival time no. of units: Surviv
Unit of time used in survival time: Sunit

Name	Definition
Surviv	Interval between injury and death
Sunit	Unit used to report interval between injury and death

Uses

Survival time can be used to evaluate health outcome data and EMS system needs. It can also be useful in interpreting toxicology test results.

Discussion

Survival time is noted on the death certificate in the section called “Approximate interval between onset and death” to the right of the cause of death text. It is often either explicitly mentioned in the CME’s report or it can be calculated based on date and time of injury and death. If date and time of injury or death are not known, do not calculate survival based on the interval between the time the person was last seen and the body found (unless that was under two hours). Use only the survival time listed for the violent injury. Do not use the survival time listed for the consequences or complications of injury. Do not add the survival times listed next to each cause of death listed on the death certificate. Indicate the length of survival interval in Surviv and the units of measurement for the interval (e.g., minutes, hours, days) in Sunit. For under two hours, use minutes; for two hours through 47 hours, use hours; for 48 hours and over, use days. For 365 or more days, use years. Round to the nearest unit. If survival time was noted as a range, use the high end of the range (e.g., 15–30 minutes, use 30). If survival time is not precisely noted, indicate 999 in Surviv and the applicable unit in Sunit (e.g., “patient survived a few minutes” would be 999 in Surviv and 1 [minutes] in Sunit). If death is described as “immediate,” “sudden,” or “instantaneous,” indicate 0 in Surviv and 1 [minutes] in Sunit.

Name	Label	Table	Type	Field Length	Priority	Primacy
Surviv	Survival time no. of units:	Person	Number	3	O/O	DC/CME
Sunit	Unit of time used in survival time:	Person	Number	1	O/O	DC/CME

Response Options:

Surviv

999 Unknown

Sunit

1 Minutes

2 Hours

3 Days

4 Years

5 Months

8 Not applicable

9 Unknown

Data Standards or Guidelines

NVISS

Education: **Educ**
Number years education: **OldEduc**

Name	Definition
Educ	Person's education level
OldEduc	Number of years of education

Uses

The victim's educational level is an important indicator of socioeconomic status and is used in epidemiologic and other scientific analyses. For very young children who are not in school, code as 0.

Discussion

The options for the "Education" variable are those on the 2003 death certificate. Since not all states will have moved to the new format by 2003, the pre-2003 education format is provided in the "Number years education" variable. Only one of the two options has to be completed on the DC Main Elements screen. Vocational and trade school should be coded as "High school graduate".

Name	Label	Table	Type	Field Length	Priority	Primacy
Educ	Education:	Person	Number	1	O/O	DC/CME
OldEduc	Number years education:	Person	Number	2	O	DC

Response Options:

- Educ**
- 0 8th grade or less
 - 1 9th to 12th grade; no diploma
 - 2 High school graduate or GED completed
 - 3 Some college credit, but no degree
 - 4 Associate's degree (e.g., AA, AS)
 - 5 Bachelor's degree (e.g., BA, AB, BS)
 - 6 Master's degree (e.g., MA, MS, Mend, Med, MSW, MBA)
 - 7 Doctorate (e.g., PhD, EdD) or Professional degree
(e.g., MD, DDS, DVM, LLB, JD)
 - 9 Unknown
- OldEduc**
- 0 0 years
 - 1 1 year
 - 2 2 years
 - 3 3 years
 - 4 4 years
 - 5 5 years
 - 6 6 years

7	7 years
8	8 years
9	9 years
10	10 years
11	11 years
12	12 years
13	13 years
14	14 years
15	15 years
16	16 years
17	17 years
99	Unknown

Data Standards or Guidelines

U.S. standard death certificate

USUAL OCCUPATION

Usual occupation code:	UsuOcc
Usual occupation text:	UsOcTx
Kind of business/industry code:	Indust
Usual industry text:	IndTxt

Name	Definition
UsuOcc	Usual occupation of the victim as recorded on the death certificate
UsOcTx	Victim’s usual occupation text
Indust	Victim’s usual business or industry code
IndTxt	Victim’s usual business/industry text

Uses

The victim’s usual occupation is an indicator of socioeconomic status and may be associated with an increased risk of intentional injury. “Usual industry” is the kind of business or industry to which the victim’s occupation is related, such as insurance, farming, or government.

Discussion

Most states’ registry of vital records encodes the decedent’s usual occupation and industry on the death certificate. Usual occupation/industry is not necessarily the victim’s current occupation/industry. Provide information exactly as it appears in the death certificate data. If the text descriptor is recorded on the death certificate, and a numeric code is not provided, report only the text information and use the code “080” to indicate that the actual code is unavailable. The codes 999 for occupation and 090 for industry are assigned by the Occupation and Industry coder to indicate “blank, unknown, or NA”. These codes should only be used if they appear in the death certificate data. If text is provided describing the occupation and industry, but no code is provided, sites should not code the information themselves, as industry and occupation coding requires special training. If the death certificate is blank, use the code “080” to indicate unavailable and use the text field to indicate blank, unknown, or not available.

Name	Label	Table	Type	Field Length	Priority	Primacy
UsuOcc	Usual occupation code:	Person	Number	3	O	DC
UsOcTx	Usual occupation text:	Person	Text	50	O	DC
Indust	Kind of business/ industry code:	Person	Number	3	O	DC
IndTxt	Usual industry text:	Person	Text	50	O	DC

Response Options:

UsuOcc

UsOcTx

Indust

IndTxt

Data Standards or Guidelines

For occupation and industry codes: U.S. Bureau of the Census; Classified index of industries and occupations; 1990 Census of Population and Housing; First Edition; U.S. Government Printing Office, April 1992. For codes designating those without occupations (such as “student”): Centers for Disease Control and Prevention, National Center for Health Statistics. Public use data file Documentation: Multiple Cause of Death for ICD-9 1997 Data.

**Multiple conditions on Death Certificate 1-20:
 (Mult1001 through Mult1020)
 4th: (Mult1004D4 through Mult1020D4)
 5th: (Mult1004D5 through Mult1020D5)**

Name	Definition
Mult1001 through Mult 1020	Describes the nature of the injury and other conditions leading to death. Up to 20 multiple condition codes can be entered
Mult1004D4 through Mult1020D4	4th
Mult1004D5 through Mult1020D5	5th

Uses

The “nature of injury” (or “multiple condition”) codes assigned to the death certificate specify the anatomic location and nature of the injuries. This information may assist in evaluating emergency medical response.

Discussion

Multiple condition codes are assigned by the registry of vital records to death certificate records to indicate the nature of injuries and diseases leading to death. Codes are based on the International Classification of Diseases 10th edition coding protocols, thus “Mult10”. The underlying cause of death code is captured in a separate variable on the DC Main Elements screen. The Mult10 elements should be coded exactly as they are coded in the multiple cause of death fields in death certificate data. These codes can include both diagnosis codes (nature of injury and disease) and external cause of injury codes. Codes should be entered with decimal points in the fourth position. No more than 20 codes can be entered.

The fourth ICD-10 digit in the underlying cause of death code is used with external cause code categories W00 to Y34 (except for Y06. and Y07.) to identify the place of occurrence of the external cause where relevant. The fifth digit is provided for optional use in a supplementary character position with external cause categories W00 to Y34 to indicate the activity of the injured person at the time the event occurred. This subclassification should not be confused with, or be used instead of, the recommended fourth-character subdivisions provided to indicate the place of occurrence.

Name	Label	Table	Type	Field Length	Priority	Primacy
Mult1001	Multiple conditions on Death Certificate 1:	Person	Text	6	O	DC
Mult1002	Multiple conditions on Death Certificate 2:	Person	Text	6	O	DC
...through						
Mult1020	Multiple conditions on Death Certificate 20:	Person	Text	6	O	DC
Mult1001D4	4th	Person	Text	1	O	DC
...through						
Mult1020D4	4th	Person	Text	1	O	DC
Mult1001D5	5th	Person	Text	1	O	DC
...through						
Mult1020D5	5th	Person	Text	1	O	DC

Response Options:

Mult1001
thru
Mult1020

Mult1001D4
thru
Mult1020D4

Mult1001D5
thru
Mult1020D5

Format: L##.## (the first character must be a letter, followed by at least two and up to four digits)

L88.88 Not applicable*
L99.99 Unknown or missing*

*Not an ICD-10 code, but an added code (See page 4-17)

Data Standards or Guidelines

ICD-10: International Statistical Classification of Diseases and Related Health Problems: 10th Revision.

Section 5

ABTRACTOR (TYPE OF DEATH)

Death type: IncTyp

5-3

Death type: IncTyp

Name	Definition
IncTyp	Type of incident leading to the victim's injury (e.g., homicide, suicide) as assigned by the abstractor according to the NVDRS protocol

Uses

A coding system to differentiate victims of interpersonal violence, intentional self-harm, and unintentional injury is vital to any injury surveillance system because of the importance of intent type to prevention strategies. This variable provides a uniform protocol for categorizing intent type.

Discussion

The code is assigned by surveillance personnel based on reading CME reports and police information about the case. In some cases, Death Type may differ from the manner of death assigned by the medical examiner because of the slight difference in categories used and because medical examiner protocols for defining intent vary across jurisdictions and across individual CMEs. A clear unintentional shooting of one child by another, for example, may be categorized as an accident by one medical examiner and a homicide by another. The protocol for defining Death Type is included in the Definition section of the manual. Please read this section. If the facts of the case are clear and not in dispute, apply the NVDRS definitions in assigning Death Type. If the facts of the case are unclear or in dispute, default to the CME's determination of manner. For example, if the record states, "Two 13-year-old adolescents were playing around with a gun that they thought was unloaded when one unintentionally shot the other," even if the coroner classified the case as a homicide, code "IncTyp" as "4-Unintentional, inflicted by other person". However, if the record stated "A 13-year-old teenager shot another 13-year-old; conflicting reports exist as to whether the shooting was intentional," default to the CME's classification of manner of death. The purpose of this variable is not to second guess the CME or to enable an abstractor to come to his or her own conclusion about the case; rather the purpose is to characterize the conclusions of the official death investigation about the intent type of the incident by using a uniform set of definitions of each intent type code.

Name	Label	Table	Type	Field Length	Priority	Primacy
IncTyp	Death type:	Person	Number	1	LR	SYS

Response Options:

IncTyp

- 1 Suicide or intentional self-harm
- 2 Homicide
- 3 Unintentional – self-inflicted
- 4 Unintentional – inflicted by other person
- 5 Unintentional – unknown who inflicted

Person/Abstractor

- 6 Legal intervention (by police or other authority)
- 7 Terrorism homicide
- 8 Terrorism suicide
- 9 Undetermined intent

Data Standards or Guidelines

Based on International Classification of Diseases, 10th Revision, broad “external cause of injury” categories.

Section 6
CORONER/MEDICAL EXAMINER
MAIN ELEMENTS

Person attempted suicide after incident: Suic	6-3
ZIP code of injury: Zip	6-5
At person's home: Reside	6-6
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Current occupation: Occup	6-9
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Date specimens were collected: SpcDt	6-12
Time specimens were collected: SpcTme	
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WOUND LOCATION	6-19

Person attempted suicide after incident: Suic

Name	Definition
Suic	Suspect attempted (or completed) suicide during the incident

Uses

Although the incident-based nature of NVDRS enables researchers to identify cases involving murder/suicide, there may be a scenario when a suspect injures himself but survives. This data element, therefore enables researchers to capture the range of murder/suicide and murder/attempted suicide incidents. Murder/suicides are a violence subtype prominent in cases of intimate partner violence and mass public shootings.

Discussion

This variable is suspect specific. Code as “Yes” if a suspect attempted (or completed) suicide during the incident.

Name	Label	Table	Type	Field Length	Priority	Primacy
Suic	Person attempted suicide after incident:	Person	Checkbox	1	LR/LR	CME/PR

Response Options:

Suic

- 0 No, Not Collected, Not Available, Unknown
- 1 Yes

Data Standards or Guidelines

NVISS

Date of death:	DthDt
Manner of death:	Manner
Place of death:	Dthplace
Place of death if other:	PDthTx
State of death:	DthState
State of injury FIPS code:	InjState
County of Injury:	County
City of injury FIPS code:	InjPlace
Street and number of injury site:	InjAddress
Injured at work:	AtWork
Type of location where injured:	LocTyp
Time of injury:	ITime
Date of injury:	Date
Survival time no. of units:	Surviv
Unit of time used in survival time:	SUnit
Birth place:	BthPlc
Country of birth if not listed:	BthTxt
Marital status:	MarStat
Person was pregnant:	Preg
Education:	Educ
Autopsy performed:	Autpsy

See Person/DC/Main Elements section for information regarding variables appearing above.

ZIP code of injury: Zip

Name	Definition
Zip	Zip code in which injury occurred

Uses

The address of the incident is used to determine the agency responsible for potential public health interventions; to gain information about the socioeconomic status (SES) of the neighborhoods in which injuries occur (via U.S. Census data); to map incidents; and to conduct analyses of the case distribution by SES and geographic area. See the Introduction section of this manual for a discussion about handling variables that can identify individual persons or agencies. It is okay to look up the zip code in a directory if it is not provided.

Discussion

Name	Label	Table	Type	Field Length	Priority	Primacy
Zip	ZIP code of injury:	Person	Number	5	O/O	CME/PR

Response Options:

Zip
 99999 Unknown

Data Standards or Guidelines

Federal Information Processing Standards (FIPS); National Institute of Standards and Technologies; U.S. Postal Service

At person’s home: Reside

Name	Definition
Reside	Incident occurred at the person’s residence

Uses

Data about whether the incident occurred in the person’s residence can be used to further characterize the injury incident, and may be valuable for planning and evaluating injury prevention programs. It can be used, for example, to evaluate the impact of laws or policies regulating the use of firearms in public versus private locations, or to inform domestic violence interventions.

Discussion

This variable is completed for each victim in an incident and is person-specific. For example, if a man shot his wife and his wife’s sister at the sister’s house, Reside is “No” for the wife, but “Yes” for the sister.

Name	Label	Table	Type	Field Length	Priority	Primacy
Reside	At person’s home:	Person	Number	1	LR/LR	CME/PR

Response Options:

Reside

0	No
1	Yes
9	Unknown

Data Standards or Guidelines

NVISS

EMS at scene: EMS

Name Definition

EMS	Were emergency medical services present at the scene of the injury incident?
-----	--

Uses

EMS status can be used to describe the involvement of emergency medical services in violent injury cases. This may assist in planning and evaluating EMS services and in capturing costs associated with violence.

Discussion

Code only to indicate the presence of EMS at the scene, not to indicate whether any medical services were delivered.

Name	Label	Table	Type	Field Length	Priority	Primacy
EMS	EMS at scene:	Person	Number	1	O/O	CME/PR

Response Options:

EMS	
0	No, EMS not at scene
1	Yes, EMS at scene
9	Unknown

Data Standards or Guidelines

NVISS

Homeless status: Homles

Name Definition

Homles	Was person homeless at the time of the incident?
--------	--

Uses

This variable helps to describe how frequently the homeless are victims of violence.

Discussion

Homeless is defined here as having no fixed address and living in a shelter, on the street, in a car, or in makeshift quarters in an outdoor setting. A person who has no home of their own, but is staying indefinitely with friends or family is not considered homeless here. Marking this variable “Yes” means that there was some positive statement about being homeless such as living in a car. Use the “Unknown” option when the residential address is stated as unknown. Otherwise, mark this variable “No”.

Name	Label	Table	Type	Field Length	Priority	Primacy
Homles	Homeless status:	Person	Number	1	O/O	CME/PR

Response Options:

Homles

0	No
1	Yes
9	Unknown

Data Standards or Guidelines

NVISS

Current occupation: Occup

Name	Definition
Occup	Victim’s employment status, and, if employed, current occupation

Uses

Employment status and occupation are indicators of socioeconomic status. Certain occupations may also be associated with an increased risk of suicide or homicide.

Discussion

Report the occupation in a text field exactly as it appears on the CME report or other report. The information can later be coded at the national level using Standard Occupational Classifications. Note that “current occupation” is different from “usual occupation”, which is recorded on the death certificate. If the person is not employed, enter one of the standard text options listed below. These are not currently available on a drop-down menu, so please be careful to enter them exactly as they appear below and not in an abbreviated version. People who work 17.5 hours or more per week are considered employed; people who work less than that are not.

Name	Label	Table	Type	Field length	Priority	Primacy
Occup	Current occupation:	Person	Text	50	O/O	CME/PR

Response Options:

Occup

Enter person’s current occupation in free text, or enter:

- Unemployed
- Homemaker
- Retired
- Student
- Disabled
- NA (under age 14)
- Unknown

Victim in custody when injured: Custody

Name	Definition
Custody	Person was in public custody when injury occurred

Uses

Violent injuries that occur while a victim is in public custody are an issue of public concern and a potential indicator of systemic problems that require change.

Discussion

A person is in public custody if they are under arrest, in foster care, or remanded by law to an institution, such as a jail, prison, detention center, psychiatric ward, psychiatric hospital, or other institution. Custody is coded on the basis of when the injury was inflicted or when the death occurred. If the injury was inflicted while the person was not in custody, but they died in custody, code Custody as “Yes”. An example of such a scenario is a robber who is shot by a storeowner, arrested, and dies two days later from the shooting. The code “Committed to mental hospital or ward” covers involuntary commitments and involuntary observations at psychiatric wards within standard hospitals or at psychiatric institutions. People who voluntarily commit themselves should not be coded as in custody. The code “In jail or prison” also covers incarcerations in juvenile detention facilities and other detention facilities.

Name	Label	Table	Type	Field Length	Priority	Primacy
Custody	Victim in custody when injured:	Person	Number	1	O/O	PR/CME

Response Options:

- Custody
- 0 Not in custody
 - 1 In jail or prison
 - 2 Under arrest but not in jail
 - 3 Committed to mental hospital or ward
 - 4 Resident of other state institution
 - 5 In foster care
 - 6 Injured prior to arrest
 - 9 Unknown

Alcohol use suspected: Intox

Name	Definition
Intox	Victim's suspected alcohol use in the hours preceding the incident

Uses

This variable can be used to explore the role of alcohol use among victims of violent death. The other alcohol variables (AlchRs and BAC) summarize results from toxicology tests conducted as part of the death investigation. This variable uses a broader definition of suspected alcohol use to capture information. It should be noted, however, that because circumstantial evidence is considered sufficient for coding "suspected alcohol use," there will be some false positives.

Discussion

"Alcohol use" can be coded as "Yes" based on witness or investigator reports (e.g., police note that the victim "had been drinking heavily"), or circumstantial evidence (e.g., empty six pack scattered around suicide victim). This variable refers only to alcohol use and not drug use. Therefore, if a person was said to have been smoking crack on the day of the incident, but they tested negative for alcohol and there is no evidence that they were drinking, "Intox" should be coded as "No". The phrase "in the hours preceding the incident" can be interpreted relatively broadly. For example, if friends report that a suicide victim was drinking heavily at a party and returned home that evening and killed himself sometime later that night, "Intox" should be coded as "Yes". If there is no evidence of intoxication, code this variable as "No". Use the "Unknown" option only if the source does not have a narrative that could provide the evidence of intoxication.

Name	Label	Table	Type	Field Length	Priority	Primacy
Intox	Alcohol use suspected:	Person	Number	1	LR/LR	CME/PR

Response Options:

Intox

0	No
1	Yes
8	Not Applicable
9	Unknown

Data Standards or Guidelines

NVISS

Date specimens were collected: SpcDt
Time specimens were collected: SpcTme

Name	Definition
SpcDt	Date on which body specimens were collected for toxicologic screen
SpcTme	Time at which body specimens were collected for toxicologic screen

Uses

Date and time of collection of body specimens, in conjunction with date and time of death and injury, can be used to assess the validity of alcohol and drug testing results and the possible contribution of drugs or alcohol to the injury. For example, blood specimens drawn long after death will not accurately reflect intoxication level at the time of death.

Discussion

Time is in the military time format HHMM. For example, if blood was drawn at 10:30 p.m., code as 2230; code midnight as 0000. See the Introduction section of this manual for a discussion about handling variables that can identify individual persons or agencies. The date of the postmortem exam can be used as the date specimens were collected in the absence of other information.

Name	Label	Table	Type	Field Length	Priority	Primacy
SpcDt	Date specimens were collected:	Person	Text	10	LR	CME
SpcTme	Time specimens were collected:	Person	Text	4	LR	CME

Response Options:

SpcDt	
MM/DD/YYYY	Date specimens were collected
88/88/8888	Not applicable (no specimens collected)
99/99/9999	Unknown
SpcTme	
0000...2359	Military time
7777	Not collected by reporting site
8888	Not applicable
9999	Unknown

Testing for alcohol: AlchTs
Alcohol test results: AlchRs

Name	Definition
AlchTs	Victim’s blood was tested for presence of alcohol
AlchRs	Results of blood alcohol test

Uses

Alcohol intoxication is a risk factor in many types of injury deaths. Identifying victims for whom objective evidence of alcohol ingestion exists will be useful to those researchers exploring the role of alcohol in violent injury.

Discussion

Coding should be based on toxicologic screening of blood samples conducted as part of the CME’s investigation. Breathalyzer or hospital-based test results should not be reflected in this variable, nor should results based on urine specimens. This information will be most useful in jurisdictions that routinely analyze blood alcohol levels in victims of homicide and/or suicide, as opposed to those that only sporadically do so.

Name	Label	Table	Type	Field Length	Priority	Primacy
AlchTs	Testing for alcohol:	Person	Number	1	LR	CME
AlchRs	Alcohol test results:	Person	Number	1	LR	CME

Response Options:

AlchTs

- 1 Tested
- 2 Not tested
- 9 Unknown

AlchRs

- 1 Present
- 2 Not present
- 8 Not applicable
- 9 Unknown

Data Standards or Guidelines

NVISS

Blood alcohol concentration results: BAC

Name	Definition
BAC	Blood alcohol level

Uses

This variable enables researchers to categorize victims by blood alcohol level. These data will assist in exploring the relationship between alcohol intoxication and violent death when interpreted in conjunction with data on time of injury, time of death, and time at which body specimens were drawn.

Discussion

Blood alcohol levels are coded in terms of percent by volume (serum %). Percent by volume equals the milligrams of alcohol found per deciliter of blood (mg/dl) divided by 1000. For example, a level of 30 mg/dl would be 0.03% alcohol. How labs report blood alcohol concentrations (BAC) varies. Many use the format used here (serum %), while others report BAC as milligrams of alcohol per deciliter of blood (mg/dl) — as in 30 mg/dl. To convert mg/dl results to serum % results, divide by 1,000. Only BAC levels should be entered here; levels based on other body fluids such as vitreous fluid should not. Use caution when interpreting BAC levels because variation in the time elapsed between ingestion of substances, time of death, and time of drawing body specimens for toxicological analysis will affect the outcome. BACs reported as “<0.01%” are below the detection limit of 0.01%. This should be reported as 0.00% and interpreted as “Not present” in the alcohol test results field. Alcohol that appears in the blood as a result of decomposition rather than ingestion does not generally measure more than 0.04%. BAC results reported as “Trace” should be recorded as 0.01%. BACs reported as <0.01% or “Nondetectable” should be reported as 0.00%, and Alcohol Test Results should be reported as “Not Present”.

Name	Label	Table	Type	Field Length	Priority	Primacy
BAC	Blood alcohol concentration results:	Person	Number	3	LR	CME

Response Options:

- BAC
- 0.88 Not applicable, no testing
 - 0.99 Unknown
- Format: 0.##

Data Standards or Guidelines

NVISS

TOXICOLOGY TESTING

Testing for amphetamines:	AmphTs
Testing for antidepressants:	AntiTs
Testing for cocaine:	CokeTs
Testing for marijuana:	MarjTs
Testing for opiate(s):	OpiaTs
Testing for other substances:	OtDrTs

Name	Definition
AmphTs	Toxicologic screening for amphetamines conducted
AntiTs	Toxicologic screening for antidepressants conducted
CokeTs	Toxicologic screening for cocaine conducted
MarjTs	Toxicologic screening for marijuana conducted
OpiaTs	Toxicologic screening for opiate(s) conducted
OtDrTs	Toxicologic screening for other substances conducted

Uses

This set of variables identifies victims whose bodily fluids were tested during the death investigation for drugs.

Discussion

These variables indicate whether the victim's blood, urine, vitreous humor (ocular fluid), bile, or other tissues were tested for a variety of drugs or their metabolites by any standard toxicologic screening method.

Name	Label	Table	Type	Field Length	Priority	Primacy
AmphTs	Testing for amphetamines:	Person	Number	1	LR	CME
AntiTs	Testing for antidepressants:	Person	Number	1	LR	CME
CokeTs	Testing for cocaine:	Person	Number	1	LR	CME
MarjTs	Testing for marijuana:	Person	Number	1	LR	CME
OpiaTs	Testing for opiate(s):	Person	Number	1	LR	CME
OtDrTs	Testing for other substances:	Person	Number	1	LR	CME

Person/CME/Main Elements

Response Options:

AmphTs

thru

OtDrTs

- | | |
|---|------------|
| 1 | Tested |
| 2 | Not tested |
| 9 | Unknown |

Data Standards or Guidelines

NVISS

TOXICOLOGY RESULTS

Amphetamine test results:	AmphRs
Antidepressant test results:	AntiRs
Cocaine test results:	CokeRs
Marijuana test results:	MarjRs
Opiate test results:	OpiaRs
Other drug/substance test results:	OtDrRs
Type of other substance:	OthDrg

Name	Definition
AmphRs	Amphetamines test results
AntiRs	Antidepressants test results
CokeRs	Cocaine test results
MarjRs	Marijuana test results
OpiaRs	Opiate test results
OtDrRs	Other drug/substance test results
OthDrg	Type of other substance for which person tested positive

Uses

This set of variables identifies whether the tests for various drugs or their metabolites were positive or negative. Findings can assist in exploring the relationship between recreational drug use and violent death. The variables can also be used to document the presence of certain psychiatric medications among suicide victims in jurisdictions that test for these substances. The drug variables will be most useful in jurisdictions that routinely run toxicology tests on victims, as opposed to those that only sporadically do so.

Discussion

Drug/substance test results can be coded based on results from any body fluid; it is not restricted to blood only, as is the case for reporting blood alcohol levels. Many labs report test results by reporting both the specific substance that a person tested positive for and the class that the substance falls under. Some, however, report only the substance. In those cases, use the drug/substance list provided in the training manual to identify which broad categories the substance falls under. The drug/substance test result variables can be coded as “Yes” if the lab report or CME summary notes the substance as “positive,” “presumptive presence,” or having a numeric level greater than 0. If there is testing for a drug/substance that does not fall into any of these categories, code “Other” and record the name of the drug/substance in “Type of other substance”. Enter the names of all other

drugs/substances that tested positive. Do not enter the names of other drugs/substances that tested negative. The presence of a metabolite for a drug/substance being tested can be considered sufficient evidence that the drug/substance itself was present. Questions about whether a chemical is a metabolite can be referred to CDC. If whether testing was done is “Unknown”, code the results fields as “Not applicable” rather than “Unknown”.

Name	Label	Table	Type	Field Length	Priority	Primacy
AmphRs	Amphetamine test results:	Person	Number	1	LR	CME
AntiRs	Antidepressant test results:	Person	Number	1	LR	CME
CokeRs	Cocaine test results:	Person	Number	1	LR	CME
MarjRs	Marijuana test results:	Person	Number	1	LR	CME
OpiaRs	Opiate test results:	Person	Number	1	LR	CME
OtDrRs	Other drug/substance test results:	Person	Number	1	LR	CME
OthDrg	Type of other substance:	Person	Text	200	LR	CME

Response Options:

AmphRs

thru

OtDrRs

- 1 Present
- 2 Not present
- 8 Not applicable
- 9 Unknown

OthDrg

Data Standards or Guidelines

NVISS

WOUND LOCATION

Number of wounds:	NumWou
Number of bullets that hit victim:	NumBul
Wound to the head:	Head
Wound to the face:	Face
Wound to the neck:	Neck
Wound to the upper extremity:	UpExt
Wound to the spine:	Spine
Wound to the thorax:	Thorax
Wound to the abdomen:	Abdomn
Wound to the lower extremity:	LowExt

Name	Definition
NumWou	Number of wounds to the victim
NumBul	Number of bullets that hit the victim
Head	Presence of wound to the head
Face	Presence of wound to the face (e.g., mouth, nose, eyes, ears)
Neck	Presence of wound to the neck
UpExt	Presence of wound in the upper extremities (shoulders, arms, hands)
Spine	Presence of wound to the spine
Thorax	Presence of wound to the thorax, chest, or upper back
Abdomn	Presence of wound to the abdomen, pelvic contents (including genital area), or lower back
LowExt	Presence of wound to the lower extremities (feet, hips, legs)

Uses

These codes help describe the relationship between incident circumstance and wound location.

Discussion

These data elements apply to firearm injuries and sharp instrument wounds only. For “NumWou,” code the total number of penetrating wounds on the victim. For “NumBul” (for gunshot wound victims only), code the total number of bullets that hit the victim. (See figure on next page for body regions.) For example, if one bullet entered the cheek and exited the back of the head, code “NumWou” as 2, “NumBul” as 1, “Head” as

“Present” and “Face” as “Present”. Code the wound locations of penetrating wounds only; do not code the locations of superficial grazing wounds or blunt trauma wounds. Code only the location of the external entrance or exit wound. When determining the number of wounds and bullets for shotgun injuries, treat each shotgun blast as one injury and each shotgun shell as one bullet. For victims injured by both a gun and a knife, count all wounds from both weapon types and code all wound locations. If the record refers only to a “wound” in the singular, the number of wounds is 1. If it refers only to “wounds,” the number of wounds is “Multiple, unspecified”.

Name	Label	Table	Type	Field Length	Priority	Primacy
NumWou	Number of wounds:	Person	Number	2	O/O	CME/PR
NumBul	Number of bullets that hit victim:	Person	Number	2	O/O	CME/PR
Head	Wound to the head:	Person	Number	1	O/O	CME/PR
Face	Wound to the face:	Person	Number	1	O/O	CME/PR
Neck	Wound to the neck:	Person	Number	1	O/O	CME/PR
UpExt	Wound to the upper extremity:	Person	Number	1	O/O	CME/PR
Spine	Wound to the spine:	Person	Number	1	O/O	CME/PR
Thorax	Wound to the thorax:	Person	Number	1	O/O	CME/PR
Abdomn	Wound to the abdomen:	Person	Number	1	O/O	CME/PR
LowExt	Wound to the lower extremity:	Person	Number	1	O/O	CME/PR

Response Options:

NumWou and NumBul

- 75 75 or more
- 76 Multiple, unspecified
- 88 Not applicable
- 99 Unknown

Head
thru
LowExt

- 0 Absent (not wounded)
- 1 Present (wounded)
- 8 Not applicable
- 9 Unknown

Data Standards and Guidelines

NVISS

Section 7

SUICIDE OR UNDETERMINED CIRCUMSTANCES

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Circumstances known: Circ

Name	Definition
Circ	Indicates if any information is available about the circumstances associated with the incident

Uses

This variable operates as a stem question.

Discussion

Do not code this variable as “No” until you have reviewed all of the data from this source that you intend to review for this case.

Name	Label	Table	Type	Field Length	Priority	Primacy
Circ	Circumstances known:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR

Response Options:

Circ	0	No
	1	Yes

Current depressed mood: Depres

Name	Definition
Depres	Current depressed mood

Uses

Identifies suicide victims who were documented as having a current depressed mood. A family member frequently reports that the suicide victim “had been depressed lately,” but the record does not supply information about whether the person was diagnosed with a depressive disorder. Rather than coding such a victim as suffering from depression (which may or may not be true), this variable captures the available information more appropriately.

Discussion

Code this variable as “Yes” if the victim was perceived by self or others to be depressed. Other words that can trigger coding this variable besides “depressed” are sad, despondent, down, blue, low, unhappy, etc. Words that should not trigger coding this variable are upset, up and down, agitated, angry, mad, anxious, overwrought, etc. The depressed mood may be part of a clinical depression or a short-term sadness. Depressed mood should not be inferred by the coder based on the circumstances; rather it must be noted in the record.

Case Examples

Yes

- Mother reports that victim has been depressed for the past few months.
- Husband states that his wife was suffering from depression at the time she took her life.
- Decedent was saddened by his brother’s death a year ago and had not been himself since.

No

- Victim was agitated over news that he may receive a pink slip at work.
- Victim was upset because he had just discovered his girlfriend was cheating on him.
- Elderly victim lived alone, was facing foreclosure, was in failing health, and had learned that her grown son was going to prison. (The victim may well have been depressed, given the sad circumstances, but without an affirmative statement in the record about her mood, the variable should not be coded as “Yes”.)

Name	Label	Table	Type	Field Length	Priority	Primacy
Depres	Current depressed mood:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR

Response Options:

Depres

- 0 No, Not Available, Unknown
- 1 Yes

Data Standards or Guidelines

NVISS

Current mental health problem: Mental

Name	Definition
Mental	Current mental health problem

Uses

This variable can be used to examine the role of mental health problems as risk factors for suicide.

Discussion

Code a victim as “Yes” for “Mental” if he or she has been identified as having a mental health problem. Mental health problems include those disorders and syndromes listed in the DSM-IV (Diagnostic and Statistical Manual of Mental Disorders, Fourth Revision) with the exception of alcohol and other substance dependence (as these are captured in separate variables). Examples of disorders qualifying as mental health problems include not only diagnoses such as major depression, schizophrenia, and generalized anxiety disorder, but developmental disorders (such as mental retardation, autism, attention-deficit hyperactivity disorder), eating disorders, personality disorders, and organic mental disorders such as Alzheimer’s and other dementias. Also indicate “Yes” if it is mentioned in the CME report that the victim was being treated for a mental health problem, even if the nature of the problem is unclear (e.g., “was being treated for various psychiatric problems”). It is acceptable to endorse this variable on the basis of past treatment of a mental health problem, unless it is specifically noted that the problem has been resolved. For example, if the record states “Victim was hospitalized twice in the past for mental problems,” that is adequate basis for coding “Mental” as “Yes”. It is also acceptable to endorse if a mental health problem is noted, but the timeframe is unclear (as in “victim has history of depression”), or if the victim was seeking mental health treatment or someone was seeking treatment on his or her behalf (e.g., “Family was attempting to have him hospitalized for psychiatric problems”). “Mental” should also be coded as “Yes” if the victim has a prescription for an antidepressant or other psychiatric medication. The drug list provided in the training notebook identifies drugs that can be considered psychiatric medications. We have separate questions for substance abuse, “alcohol dependence”, and “other substance dependence” questions. Therefore, do not include substance abuse as a “current mental health problem”.

Case Examples

Yes

- Toxicology report from CME indicates that the victim tested positive for sertraline (an antidepressant).
- Victim had PTSD — or, Post-traumatic stress disorder.
- History of depression.
- Was under the care of a psychiatrist.

No

- A neighbor indicates that the victim was not acting normally.
- Victim was depressed over a recent break-up.
[Code “Current depressed mood”.]

Person/CFR-CME-PR/Circumstance Elements/
Suicide or Undetermined Circumstances

Name	Label	Table	Type	Field Length	Priority	Primacy
Mental	Current mental health problem:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR

Response Options:

Mental

- 0 No, Not Available, Unknown
- 1 Yes

Data Standards or Guidelines

NVISS

Diagnostic and Statistical Manual of Mental Disorders, Fourth Revision

DIAGNOSIS

Type of first mental illness diagnosis: **MDiag1**
Type of second mental illness diagnosis: **MDiag2**
Other mental health diagnosis: **MenTxt**

Name	Definition
MDiag1	Type of mental illness diagnosis
MDiag2	Additional type of mental illness diagnosis
MenTxt	Other type of mental illness diagnosis

Uses

For victims who were noted as having a mental health problem, and whose mental health problem has been assessed by a mental health practitioner, these variables identify the victim's diagnoses.

Discussion

These variables indicate the nature of the victim's mental health problem (their diagnosis), if available. Code up to two diagnoses. If a diagnosis is not on the code list, code "Other" and record the diagnosis in the text field, "MenTxt". If the record indicates more than two diagnoses, note the additional diagnoses in "MenTxt". For cases in which the victim was noted as being treated for a mental health problem, but the actual diagnosis is not documented, code "MDiag1" as "Unknown". If the victim had a mental health problem ("Mental" = "Yes"), but the nature of the problem has not been diagnosed (e.g., "victim was hearing voices and having paranoid delusions; family was attempting to have victim committed"), code "MDiag1" as "Not applicable" since he had not been treated or diagnosed. Do not attempt to apply a diagnosis based on reading the symptoms. While it is acceptable to endorse "Mental health problem" based on the victim's prescription for a psychiatric medication, please do not infer a specific diagnosis based on the medication.

Name	Label	Table	Type	Field Length	Priority	Primacy
MDiag1	Type of first mental illness diagnosis:	Person	Number	2	O/LR/LR	CFR/CME/PR
MDiag2	Type of second mental illness diagnosis:	Person	Number	2	O/LR/LR	CFR/CME/PR
MenTxt	Other mental health diagnosis:	Person	Text	50	O/LR/LR	CFR/CME/PR

Person/CFR-CME-PR/Circumstance Elements/
Suicide or Undetermined Circumstances

Response Options:

MDiag1

and

MDiag2

- 1 Depression/dysthymia
- 2 Bipolar disorder
- 3 Schizophrenia
- 4 Anxiety disorder
- 5 Post-traumatic stress disorder
- 6 ADD or hyperactivity disorder
- 7 Eating disorder
- 8 Obsessive-compulsive disorder
- 66 Other (specify in diagnosis text), including mental retardation,
autism, personality disorders, Alzheimer's, etc.
- 88 Not applicable
- 99 Unknown

MenTxt

Current treatment for mental illness: TxMent
Ever treated for mental illness: HistMental

Name	Definition
TxMent	Currently in treatment for a mental health problem
HistMental	History of ever being treated for a mental health problem

Uses

This variable can be used to assess the proportion of suicide victims who were currently or formerly in mental health treatment. The information can be helpful in planning and delivering mental health services and in evaluating quality of care.

Discussion

The variable “TxMent” (current mental health treatment) should be coded “Yes” if the victim was in current treatment (that is, had a current prescription for a psychiatric medication or saw a mental health professional within the past two months.) Treatment includes seeing a psychiatrist, psychologist, medical doctor, therapist, or other counselor for a mental health or substance abuse problem; receiving a prescription for an antidepressant or other psychiatric medicine (see training notebook for list of psychiatric drugs); attending anger management classes; or residing in an inpatient or halfway house facility for mental health problems.

The variable “HistMental” indicates whether the victim was noted as ever having received professional treatment for a mental health problem, either at the time of death or in the past. If a victim is in current treatment, by definition “HistMental” (ever in treatment) should be endorsed. If a decedent died as the result of an overdose from multiple medications and it is not clear whether the medications were his or her own (as in a victim swallowing everything in the family’s medicine cabinet), the existence of an antidepressant or other psychiatric medication in the victim’s bloodstream is not sufficient evidence of mental health treatment. For victims who die by other means than drug overdose (e.g., shooting, hanging), toxicologic test results indicating the presence of a psychiatric medication is sufficient evidence of mental health treatment.

Case Examples

Current treatment for mental illness

Yes

- A recently filled, unopened prescription belonging to the victim for an antidepressant is found in the medicine cabinet.
- The victim has been in treatment for depression for the last 10 years.
- The victim was released from inpatient care for bipolar disorder a week ago.

No

- Victim was taking St. John’s Wort (non-prescription herb) for depression because of a magazine article he had read.
- Victim was taking sleeping pills for insomnia.

Person/CFR-CME-PR/Circumstance Elements/
Suicide or Undetermined Circumstances

Ever treated for mental illness

Yes

- Several years ago the victim was treated for bipolar disorder.
- The decedent had begun seeing a psychiatrist recently, but had previously never been in treatment.

Name	Label	Table	Type	Field Length	Priority	Primacy
TxMent	Current treatment for mental illness:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR
HistMental	Ever treated for mental illness:	Person	Checkbox	1	O/O/O	CFR/CME/PR

Response Options:

TxMent

None

HistMental

0 No, Not Available, Unknown

1 Yes

Data Standards or Guidelines

NVISS

Alcohol problem: **Alcoh**
Other substance problem: **Subst**

Name	Definition
Alcoh	Person has alcohol dependence or alcohol problem
Subst	Person has substance abuse problem

Uses

Can be used to assess the proportion of suicide victims who were identified as having alcohol, drug, or other substance abuse problems. The information can be helpful in exploring the role of substance abuse in suicide and planning substance abuse services delivery.

Discussion

Code a victim as “Yes” for “Alcoh” or “Subst” if the victim was perceived by self or others to have a problem with, or to be addicted to, alcohol or other drugs. A victim who is noted as participating in a drug or alcohol rehabilitation program or treatment — including self-help groups and 12-step programs — should be coded as “Yes” for “Subst” or “Alcoh” respectively even if the victim was noted as being currently clean and sober. A problem from the past (i.e., five years or more ago) that has resolved and no longer appears to apply should not be coded. Do not code “Alcoh” as “Yes” if victim was using alcohol in the hours preceding the incident and there is no evidence of dependence or a problem (these cases should be coded “Yes” for “Intox”).

“Subst” can be endorsed if a victim was noted as using illegal drugs (such as heroin or cocaine), abusing prescription medications (such as pain relievers or Valium), or regularly using inhalants (e.g., sniffing gas). If the victim is mentioned as using illegal drugs — even if addiction or abuse is not specifically mentioned — code “Subst” as “Yes”. The exception to this is marijuana use. For marijuana, the use must be noted as chronic, abusive, or problematic (e.g., “victim smoked marijuana regularly,” “victim’s family indicated he had been stoned much of the past month”). A victim who takes methadone can be assumed to be in treatment for heroin addiction. The phrase “history of drug abuse” is sufficient to justify endorsing “Subst”, unless it is noted that the victim is no longer a drug user. Previously attempting suicide via overdose is not sufficient justification for endorsing “Subst” in the absence of other information. If marijuana was used at the time of the incident, and there is no evidence of regular use, addiction, or abuse, code to “Other suicide circumstance”.

Case Examples

Alcoh

Yes

- CME report indicates the patient was in an alcohol rehabilitation program last year.
- Called AA sponsor the day before the incident.
- Noted in CME report that the victim had been drinking a lot lately and family was concerned.

Person/CFR-CME-PR/Circumstance Elements/
Suicide or Undetermined Circumstances

No

- CME report indicates that 20 years ago the victim had trouble with drugs and alcohol as a teenager, but not since then.

Subst

Yes

- CME report indicates that the victim abuses his own painkiller prescription.
- Victim made regular visits to a methadone clinic.
- Victim had track marks and drug paraphernalia at his apartment.
- Shot himself after a fight with his wife over his drug use and mounting debts.

No

- Victim smoked marijuana occasionally.
- Victim attempted suicide via medication overdose on two previous occasions. No evidence of substance use or abuse.

Name	Label	Table	Type	Field Length	Priority	Primacy
Alcoh	Alcohol problem:	Person	Checkbox	1	O/O/O	CFR/CME/PR
Subst	Other substance problem:	Person	Checkbox	1	O/O/O	CFR/CME/PR

Response Options:

Alcoh

and

Subst

- 0 No, Not Available, Unknown
- 1 Yes

Data Standards or Guidelines

NVISS

Person left a suicide note: SNote

Name	Definition
SNote	Victim left a suicide note

Uses

A suicide note is a marker for an intentional suicide.

Discussion

Code “SNote” as “Yes” if the victim left a note, e-mail, video, or other written communication that they intended to commit suicide. A will or folder of financial papers near the victim does not constitute a suicide note. If the record states the person left a “note”, you can infer it was a suicide note in the absence of information indicating that the note had some other purpose.

Case Examples

Yes

- The victim left a letter to her son indicating that she was ending her life.
- “The pain stops today. Goodbye” was the message scrawled on the mirror next to the victim.

No

- A woman is terminally ill. She writes and signs her will. The next day she commits suicide.

Name	Label	Table	Type	Field Length	Priority	Primacy
SNote	Person left a suicide note:	Person	Checkbox	1	O/O/O	CFR/CME/PR

Response Options:

SNote

- 0 No, Not Available, Unknown
- 1 Yes

Data Standards or Guidelines

Medical College of Wisconsin Firearm Injury Reporting System

Disclosed intent to commit suicide: SuiInt

Name	Definition
SuiInt	Victim disclosed to another person their intention to commit suicide

Uses

This variable can be used to identify the subset of suicides for which opportunities to intervene and prevent the death may have been present. It is also useful for exploring stated intent as a risk factor for suicide.

Discussion

Code “SuiInt” as “Yes” if the victim had previously expressed suicidal feelings to another person, whether explicitly (e.g., “I’m considering killing myself”) or indirectly (e.g., “I think everyone would be better off without me” or “I know how to put a permanent end to this pain”). Code this variable as “Yes” if there was opportunity to intervene between the time the person disclosed their intent and the injury event. Do not code this variable as “Yes” if the victim disclosed their intention to kill themselves only at the moment of the suicide (i.e., when there was no opportunity to intervene to stop the suicide). Also, do not endorse this variable if the victim had talked about suicide some-time in the distant past, but had not disclosed their current intent to commit suicide to anyone. When the police, or CME document whether the victim stated their intent to commit suicide, they are doing so less for the purpose of documenting a missed opportunity for intervention and more for the purpose of indicating why the death is being treated as a suicide and not a potential homicide. Therefore, the records may be unclear about timing. For example, the record may state, “Victim has spoken of suicide in the past,” and it is not entirely clear whether the talk about suicide was only in the past or was related to the current incident. This will frequently be a gray area for coding. If the record indicates disclosure of intent in the past but affirmatively states that there was no disclosure for the current incident, code “SuiInt” as “No”. If the record indicates disclosure of intent, but is unclear about the timeframe, code “SuiInt” as “Yes”. This will sometimes be incorrect; however the specificity to allow precise coding is too often missing in the records to justify using a narrower interpretation.

Case Examples

Yes

- The victim told his wife that he was planning to end his suffering and was going to stop being a burden on her.
- The victim has mentioned on and off to friends that he was considering suicide; no one thought he would do it.

No

- The victim has spoken of suicide in the past, but not in the past few months when things seemed to be going better for him.
- Family members were unaware of any suicidal feelings. During a heated argument over being grounded, the young victim shouted, “I’m gonna blow my head off, and it’s your fault.” He left the room and shot himself.

Name	Label	Table	Type	Field Length	Priority	Primacy
SuiInt	Disclosed intent to commit suicide:	Person	Checkbox	1	O/O/O	CFR/CME/PR

Response Options:

SuiInt

0 No, Not Available, Unknown

1 Yes

Data Standards or Guidelines

NVISS

Person/CFR-CME-PR/Circumstance Elements/
Suicide or Undetermined Circumstances

History of suicide attempts: SuiHst

Name	Definition
------	------------

SuiHst	Victim has a history of attempting suicide
--------	--

Uses

This variable is useful for exploring suicide attempts as a risk factor for completed suicides and as an opportunity for preventive intervention.

Discussion

Code SuiHst as “Yes” if the victim was known to have made previous suicide attempts, regardless of the severity of those attempts.

Name	Label	Table	Type	Field Length	Priority	Primacy
SuiHst	History of suicide attempts:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR

Response Options:

SuiHst

0 No, Not Available, Unknown

1 Yes

Data Standards or Guidelines

Medical College of Wisconsin Firearm Injury Reporting System

Crisis in past 2 wks: Crisis

Name	Definition
Crisis	Victim experienced a crisis within two weeks of the suicide, or a crisis was imminent within two weeks of the suicide

Uses

This variable can be used to identify suicides that appear to involve an element of impulsivity.

Discussion

The variable “Crisis” identifies those cases in which a very current crisis or acute precipitating event appears to have contributed to the suicide (e.g., the victim was just arrested; the divorce papers were served that day; the victim was about to be laid off; they had a major argument with their spouse the night before). Coding a case as being related to a crisis does not mean that there aren’t also chronic conditions that have contributed to the victim’s decision to end their life. Examples of crises include a very recent or impending arrest, job loss, argument or fight, relationship break-up, police pursuit, financial loss, loss in social standing, eviction, or other loss. “Crisis” is in the eyes of the victim. This is particularly relevant for young victims whose crises — such as a bad grade or a dispute with parents over a curfew — may be relatively minor.

The qualifier “recent” means that the crisis either occurred within the past two weeks or is expected to occur within the next two weeks. An actual time period is unlikely to be mentioned in the records, so use language as a clue. For example, “decedent was experiencing financial difficulties after losing his job” would not trigger coding a recent crisis because the timeframe is unclear, whereas “decedent had just received a pink slip at work” would be clear. A patient whose chronic health problem is worsening should not trigger coding “Crisis” as “Yes”; however a person who just received the news that he or she has a terminal illness should be regarded as having experienced a recent crisis. A homicide-suicide should always be coded as “Yes” for “Crisis” unless the two deaths were both clearly consensual and planned in advance (in effect, a double suicide). Release from a jail, prison, or hospital within the past two weeks should be coded as a “Crisis”. If you check that a crisis has occurred, you must also indicate the type of crisis by checking at least one of the circumstances below it on the list, e.g., physical health or job problem.

Yes

- The victim’s husband announced that day that he was divorcing her.
- A 15-year-old adolescent had a heated argument with his mother, stormed out of the room, and shot himself.
- The decedent killed his ex-wife and then himself.
- A few days prior to the suicide, the victim was questioned about his suspected sexual abuse of his two nephews by police.
- The victim was about to be returned to prison in a few days.
- After a recent break-up, the decedent went to his girlfriend’s house to attempt a reconciliation. She refused, and he shot himself in her driveway.

Person/CFR-CME-PR/Circumstance Elements/
Suicide or Undetermined Circumstances

- An elderly man fell in the bathtub the week before, breaking his hip. The day before this, his doctor told him that he would need to go to a nursing home.
- Police were pursuing a suspect. As they drew near, the man turned the gun on himself and fired.
- Victim had just received a lay-off notice at work.
- Victim was released from jail earlier that day.

No

- A 45-year-old man was unemployed and experiencing financial difficulties. (Had this statement been added to his case, “was to be evicted from his apartment the following weekend” the case would qualify as a “Yes”.)
- The victim had emphysema and the condition was worsening.
- The victim was in the process of divorcing her husband.
- The decedent was despondent over recent job loss. (Timeframe is non-specific; job loss could have been a week or six months ago.)

Name	Label	Table	Type	Field Length	Priority	Primacy
Crisis	Crisis in past 2 wks:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR

Response Options:

Crisis

- 0 No, Not Available, Unknown
- 1 Yes

Data Standards or Guidelines

NVISS

Physical health problem: Health

Name	Definition
Health	Physical health problems appear to have contributed to the suicide

Uses

This variable identifies suicides that are health-related. Identifying the specific circumstances that play a precipitative role in suicide will assist in identifying, developing, and evaluating preventive interventions.

Discussion

The victim was experiencing physical health problems (e.g., terminal disease, debilitating condition, chronic pain) that were relevant to the suicide event. If the precipitants are known, endorse this variable only if a health problem is noted as contributing to the suicide. CME reports generally include the decedent’s existing medical problems. The simple mention of a health problem, therefore, should not trigger coding the suicide as health-related, unless there is some indication that the suicide is linked in part to the health problem or concern. There are some exceptions to this rule, however. If there is no information in the record about why the victim killed him or herself, but it is noted that they had a terminal or very debilitating illness, it is acceptable to endorse Health. Health conditions are coded from the perspective of the victim.

Case Examples

Yes

- The victim was recently diagnosed with pancreatic cancer and was told that she had two months to live.
- An elderly man fell in the bathtub the week before, breaking his hip. He feared that this injury would require him to sell his house and move into a nursing home.
- The victim suspected he might have AIDS and killed himself before he received his test results.
- The victim is still in pain from injuries sustained in a car crash five years ago.

No

- Victim was fleeing from police. He ran into a restroom and shot himself. He has a history of arrests for violent crime, and his health history indicates diabetes. (No mention of health condition being related to the suicide.)

Name	Label	Table	Type	Field Length	Priority	Primacy
Health	Physical health problem:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR

Response Options:

Health

- 0 No, Not Available, Unknown
- 1 Yes

Data Standards or Guidelines

NVISS

Intimate partner problem: IPProb

Name	Definition
IPProb	Problems with a current or former intimate partner that appear to have contributed to the suicide

Uses

This variable identifies suicides that are related to friction or conflict between intimate partners. Identifying specific circumstances that appear to play a precipitative role in suicide will help identify, develop, and evaluate preventive interventions.

Discussion

Code “IPProb” as “Yes” if at the time of the incident the victim was experiencing problems with a current or former intimate partner, such as a divorce, break-up, argument, jealousy, conflict, or discord. The burden of caring for an ill spouse should not be coded as an intimate partner problem unless there is also evidence of relationship problems. These should be coded as “Other” (SuiOth). Phrases such as “victim was having relationship problems” can be assumed to indicate intimate partner problems. If a victim kills or attacks his or her current or former intimate partner, code “IPProb” as “Yes”. The only exception to this rule is if the death was clearly a consensual act, as in a mercy killing followed by homicide. Extreme caution should be used when identifying a case as a mercy killing; see discussion of the variable Mercy (mercy killing).

Case Examples

Yes

- The victim goes to his old house, shoots his estranged wife, and then shoots himself.
- The victim was engaged in a bitter custody dispute with her ex-husband.
- Police arrested the victim a week ago for violating a restraining order that his girl friend had filed.
- A wife reports that she and the victim had been arguing, and she spent the night at her mother’s.
- The victim was having relationship problems.

No

- The CME report indicates that the victim is a divorced, 50-year-old white male with two grown children; he was recently arrested on his third drunk driving offense and hung himself the day he was released from jail.
- Victim was lonely and felt isolated.

Name	Label	Table	Type	Field Length	Priority	Primacy
IPProb	Intimate partner problem:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR

Response Options:

IPProb

- | | |
|---|----------------------------|
| 0 | No, Not Available, Unknown |
| 1 | Yes |

Data Standards or Guidelines

NVISS

Other relationship problem: Relat

Name	Definition
Relat	Problems with a family member, friend, or associate (other than an intimate partner) that appear to have contributed to the suicide

Uses

This variable identifies suicides that are related to friction or conflict with friends and family. Identifying the specific circumstances that appear to play a precipitative role in suicide will help to identify, develop, and evaluate preventive interventions.

Discussion

Code “Relat” as “Yes” if at the time of the incident the victim was experiencing an interpersonal problem with someone other than an intimate partner (e.g., a family member, friend, or schoolmate). Problems with a person at work should be coded as job problems, not “Relat”. If the report indicates that the victim was “having relationship problems”, these should be assumed to be intimate partner problems, and not problems with other friends or family.

Case Examples

Yes

- A teenager was arguing with his parents because they refused to let him go on a weekend ski trip with his friends.
- A 20 year-old had recently been kicked out of his house by his parents because of arguments and drug use.

No

- Victim was having relationship problems. (Code as intimate partner problem).

Name	Label	Table	Type	Field Length	Priority	Primacy
Relat	Other relationship problem:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR

Response Options:

Relat

- 0 No, Not Available, Unknown
- 1 Yes

Data Standards or Guidelines

NVISS

Job problem: Job

Name Definition

Job	Job problems appear to have contributed to the suicide
-----	--

Uses

This variable identifies suicides that are related to job problems. Identifying specific circumstances that appear to play a precipitative role in suicide will help to identify, develop, and evaluate preventive interventions.

Discussion

Code “Job” as “Yes” if at the time of the incident the victim was either experiencing a problem at work (such as tensions with a co-worker, poor performance reviews, increased pressure, feared layoff) or was having a problem with joblessness (e.g., recently laid off, having difficulty finding a job). Do not endorse Job if a person left their job as part of their suicide plan (e.g., “Victim left work four days ago and checked into a hotel; the body was found after co-workers contacted the victim’s family to try to locate him”).

Case Examples

Yes

- The victim was in the midst of a sexual harassment action at work.
- The victim was recently laid off at work.

No

- A 66-year-old retired man was found dead in the garage from carbon monoxide poisoning. There is no information available about the circumstances.

Name	Label	Table	Type	Field Length	Priority	Primacy
Job	Job problem:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR

Response Options:

Job

- | | |
|---|----------------------------|
| 0 | No, Not Available, Unknown |
| 1 | Yes |

Data Standards or Guidelines

NVISS

School problem: School

Name	Definition
School	Problems at school appear to have contributed to the suicide

Uses

This variable identifies suicides that are related to problems at school. Identifying specific circumstances that appear to play a precipitative role in suicide will help to identify, develop, and evaluate preventive interventions.

Discussion

Code “School” as “Yes” if at the time of the incident the victim was experiencing a problem such as poor grades, bullying, social exclusion at school, or performance pressures.

Case Examples

Yes

- A graduate student with a history of alcoholism and depression was feeling overwhelmed by academic pressure.
- Rumors were circulating at the school about the victim, and she had recently lost her circle of friends as a result of the rumors.
- A ninth grader killed himself after bringing home a report card that showed a drop in his grades.
- A student was skipping school, but there is no other evidence suggesting any problems related to the student not attending school.

Name	Label	Table	Type	Field Length	Priority	Primacy
School	School problem:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR

Response Options:

School

- 0 No, Not Available, Unknown
- 1 Yes

Data Standards or Guidelines

NVISS

Financial problem: **FinProb**

Name	Definition
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FinProb	Financial problems appear to have contributed to the suicide
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Uses

This variable identifies suicides that are related to financial problems. Identifying specific circumstances that appear to play a precipitative role in suicide will help to identify, develop, and evaluate preventive interventions.

Discussion

Code "FinProb" as "Yes" if at the time of the incident the victim was experiencing a problem such as bankruptcy, overwhelming debts, or foreclosure of a home or business.

Case Examples

Yes

- The victim had a gambling problem and mounting debts.
- The bank was in the process of foreclosing on the victim's home.
- The victim and his wife were arguing about money problems.

Name	Label	Table	Type	Field Length	Priority	Primacy
FinProb	Financial problem:	Person	Checkbox	1	O/O/O	CFR/CME/PR

Response Options:

FinProb

- | | |
|---|----------------------------|
| 0 | No, Not Available, Unknown |
| 1 | Yes |

Data Standards or Guidelines

NVISS

Suicide of friend or family in past five years: RecSui

Name	Definition
RecSui	Suicide of a family member or friend within the past five years appears to have contributed to the suicide

Uses

This variable identifies suicides that are related to other suicides. This may be useful for identifying suicide clusters. Identifying specific circumstances that appear to play a precipitative role in suicide will help to identify, develop, and evaluate preventive interventions.

Discussion

Code “RecSui” as “Yes” if at the time of the incident the victim was distraught over, or reacting to, a relatively recent (within five years) suicide of a friend or family member.

Case Examples

Yes

- The victim had been depressed since the death of his brother who committed suicide a year ago.

No

- The victim is a 36-year-old woman. Her mother committed suicide when she was 12 years old. (Code as “Other suicide circumstance”).

Name	Label	Table	Type	Field Length	Priority	Primacy
RecSui	Suicide of friend or family in past five years:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR

Response Options:

RecSui	0	No, Not Available, Unknown
	1	Yes

Data Standards or Guidelines

NVISS

Other death of friend or family: FamDeath

Name	Definition
FamDeath	Death of a family member or friend within the last five years that appears to have contributed to the suicide

Uses

This variable identifies suicides that are related to the loss of a loved one through means other than suicide. Identifying the specific circumstances that appear to play a precipitative role in suicide will help to identify, develop, and evaluate preventive interventions.

Discussion

Code "FamDeath" as "Yes" if at the time of the incident the victim was distraught over, or reacting to, a relatively recent (within five years) death of a friend or family member.

Case Examples

Yes

- The victim had been depressed since the death of his wife two years ago.
- The victim was a high school student diagnosed with bipolar disorder; a friend had died in a car crash the month before, and the victim was distraught over his loss.

No

- The victim was a widow who was living with her grown daughter. (No mention of timeframe or relationship of the death to the suicide decision.)

Name	Label	Table	Type	Field Length	Priority	Primacy
FamDeath	Other death of friend or family:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR

Response Options:

FamDeath

- | | |
|---|----------------------------|
| 0 | No, Not Available, Unknown |
| 1 | Yes |

Data Standards or Guidelines

NVISS

Recent criminal legal problem: RecCrm

Name	Definition
RecCrm	Criminal legal problems appear to have contributed to the suicide

Uses

This variable identifies suicides that are related to criminal problems. Identifying the specific circumstances that appear to play a precipitative role in suicide will help to identify, develop, and evaluate preventive interventions.

Discussion

Code “RecCrm” as “Yes” if at the time of the incident the victim was facing criminal legal problems (recent or impending arrest, police pursuit, impending criminal court date, etc.). Include military crimes such as AWOL here too. Committing a crime alone is not sufficient basis for endorsing RecCrm; there must be evidence of negative legal or law enforcement consequences that appear to be associated with the suicide. Criminal legal problems, as opposed to civil legal problems, are those resulting from conduct considered so harmful to society as a whole that it is prohibited by statute and prosecuted by the government.

Case Examples

Yes

- The victim has been convicted of a crime and is awaiting his court appearance for sentencing.
- The victim was in jail on a drunk driving arrest.
- Police were in pursuit of the victim who was suspected in a recent robbery.

No

- The evening before the victim killed himself he went to his ex-girlfriend’s house and sexually assaulted her. (No mention of actual or impending criminal legal or law enforcement problems arising from the criminal activity.)

Name	Label	Table	Type	Field Length	Priority	Primacy
RecCrm	Recent criminal legal problem:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR

Response Options:

RecCrm

- 0 No, Not Available, Unknown
- 1 Yes

Data Standards or Guidelines

NVISS

Other legal problems: Legal

Name	Definition
Legal	Legal (non-criminal) problems appear to have contributed to the suicide

Uses

This variable identifies suicides that are related to legal problems. Identifying the specific circumstances that appear to play a precipitative role in suicide will help to identify, develop, and evaluate preventive interventions.

Discussion

Code “Legal” as “Yes” if at the time of the incident the victim was facing civil legal problems, such as a custody dispute or civil lawsuit, or legal problems that were unspecified as either criminal or civil.

Case Examples

Yes

- The victim is in the midst of a heated custody battle with his ex-wife.
- The victim is being sued by a former business partner.
- The suicide note refers to the victim’s legal problems. (Legal Problem is endorsed rather than Criminal Problem since it is unclear whether the problems are criminal or civil.)

No

- The victim has been arrested for driving while intoxicated. (Code as a Criminal Problem.)

Name	Label	Table	Type	Field Length	Priority	Primacy
Legal	Other legal problems:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR

Response Options:

Legal

- 0 No, Not Available, Unknown
- 1 Yes

Data Standards or Guidelines

NVISS

Perpetrator of interpersonal violence past mo.: PIPV

Name	Definition
PIPV	Victim was a perpetrator of interpersonal violence within the past month

Uses

This variable can be helpful in exploring whether violence perpetration is a risk factor for suicide.

Discussion

The victim of the suicide was also the perpetrator of violent crime or interpersonal violence during the month prior to death. “PIPV” should also be coded “Yes” if a restraining order has been filed against the victim within the past month.

Case Examples

Yes

- The suicide victim was also the suspect in the homicide of his wife.
- The victim was being sought by police for a string of robberies and assaults.
- The decedent was distraught over a recent break-up with his girlfriend; she had a restraining order against him.

No

- The police report indicates no recent arrests; although victim was arrested three years ago on an assault charge. (Not recent and no mention of a link to the suicide.)

Name	Label	Table	Type	Field Length	Priority	Primacy
PIPV	Perpetrator of interpersonal violence past mo.:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR

Response Options:

PIPV

- 0 No, Not Available, Unknown
- 1 Yes

Data Standards or Guidelines

NVISS

Victim of interpersonal violence past mo.: PIPVVict

Name	Definition
PIPVVict	Suicide victim was a victim of interpersonal violence in the past month

Uses

This variable can be helpful in exploring whether violence victimization is a risk factor for suicide.

Discussion

The victim was a current or recent (within the past month) victim of interpersonal violence.

Case Examples

Yes

- A teenage girl had been the victim of repeated sexual assaults by her stepfather before she took her life.
- The victim was being abused by her spouse.

No

- A 30-year-old victim had been abused as a child.

Name	Label	Table	Type	Field Length	Priority	Primacy
PIPVVict	Victim of interpersonal violence past mo.:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR

Response Options:

PIPVVict

- | | |
|---|----------------------------|
| 0 | No, Not Available, Unknown |
| 1 | Yes |

Data Standards or Guidelines

NVISS

Other suicide circumstance: SuiOth

Name	Definition
SuiOth	Other specified problems contributed to the victim’s suicide

Uses

“SuiOth” serves as a check on the reporting system; if a high proportion of suicide cases endorse “SuiOth”, the reporting system may not have codes that adequately capture the major precipitative circumstances associated with suicide.

Discussion

“SuiOth” should only be used if a noted contributory circumstance is not already covered by existing variables in the reporting system. Be sure to describe the circumstance in the text field provided.

Case Examples

Yes

- The victim died from starvation during a hunger strike for a political cause.
- The victim was attacked by three men last summer and was in treatment for PTSD; family states he has been unable to sleep through the night since that incident.
- A parent of the victim committed suicide when the deceased was a child (i.e., the parent’s suicide occurred more than five years ago).
- The victim used marijuana at the time of the incident, and there is NO evidence of regular use, addiction, or abuse.

No

- The victim is a teenage boy whose friends have ostracized him. (The case can be coded as Other Relationship Problem and therefore does not need an “other” code.)
- The victim’s body was not discovered for two weeks. Hikers found the body and a helicopter was flown in to remove the body. (These details do not describe a precipitative circumstance.)
- The victim used marijuana at the time of the incident and there is evidence of regular use, addiction, or abuse.

Name	Label	Table	Type	Field Length	Priority	Primacy
SuiOth	Other suicide circumstance:	Person	Text	50	O/LR/LR	CFR/CME/PR

Response Options:

SuiOth

Data Standards or Guidelines

NVISS

Section 8

HOMICIDE CIRCUMSTANCES

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Circumstances known: Circ

Name	Definition
Circ	Indicates if any information is available about the circumstances associated with the incident

Uses

This variable operates as a stem question.

Discussion

Do not code this variable as “No” until you have reviewed all of the data from this source that you intend to review for this case.

Name	Label	Table	Type	Field Length	Priority	Primacy
Circ	Circumstances known:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR

Response Options:

Circ	0	No
	1	Yes

Precipitated by another crime: Crime

Name	Definition
Crime	The homicide was precipitated by another serious crime (e.g., drug dealing, robbery)

Uses

This variable identifies the proportion of homicides that are related to other criminal activity. The criminology literature often divides homicides into two broad categories: felony-related (e.g., stemming from a felony such as robbery or drug-trafficking) and non-felony-related (e.g., stemming from interpersonal issues such as arguments, insults, abuse, jealousy, mental illness). This variable identifies those that fall into the first category. It uses a somewhat broader definition than that used by the Supplementary Homicide Report system — which counts felony-related homicides as only those that occur while another felony is in progress.

Discussion

Code a victim as “Yes” for “Crime” if the incident occurred as the result of another serious crime. Serious crimes, such as drug trafficking, robbery, burglary, motor vehicle theft, arson, and witness intimidation/elimination are felonies. These are crimes that carry a sentence of one or more years in prison. Misdemeanors such as traffic infractions, shoplifting, petty larceny (e.g., stealing someone’s jacket), public drunkenness, and minor assaults (no injury or deadly weapon involved) are not considered serious crimes. This variable uses a broader definition of felony-related than is used in the SHR and includes homicides committed in revenge over a previous felony or to protect ongoing criminal activity. The simple existence of an additional crime other than the homicide in an incident is not sufficient grounds for endorsing “Crime”, as homicide suspects are frequently charged with more than one crime (e.g., carrying a gun without a permit, destroying evidence). The other crime must be a precipitative factor in order for a “Crime” to be endorsed.

Case Examples

Yes

- A robbery of a convenience store is in progress and one of the customers is shot.
- A man kills the person who murdered his brother to avenge his death.
- A drug dealer kills a rival dealer who was encroaching on his territory.
- A drug dealer kills the man who robbed him last week to dissuade other would-be robbers.
- An arsonist torched an apartment building and an elderly woman dies in the blaze.
- A man is attempting to rob a couple. One of them pulls out a gun and shoots him.

No

- A woman killed her husband during an argument; she then set the house on fire in an attempt to cover up the crime. (While intentionally setting fire to property is a felony, the arson was not a precipitative event.)
- A youth shot another boy after having accused him of stealing his gym shoes. (While the suspected theft was a precipitative factor, it was not a serious crime.)
- The suspect violated a restraining order, broke into his ex-wife's house, tortured her over a period of several hours, and then shot her with a stolen gun. (While there are many crimes going on in this incident, all of the offenses were part of the violence itself. There was not a separate crime type like a robbery or a drug deal that lead to the homicide. The precipitative factor was the intimate partner violence itself.)

Name	Label	Table	Type	Field Length	Priority	Primacy
Crime	Precipitated by another crime:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR

Response Options:

Crime

- 0 No, Not available, Unknown
- 1 Yes

Data Standards or Guidelines

NVISS

Nature of first other crime: NtCrM1

Nature of second other crime: NtCrM2

Name	Definition
NtCrM1	Nature of the first crime that precipitated the homicide (Applies only to crime-related homicides)
NtCrM2	Nature of the second crime that precipitated the homicide (Applies only to crime-related homicides with more than one precipitative crime)

Uses

For cases in which the homicide was precipitated by another serious crime, these two variables identify the specific type of crime involved. The information is used to better characterize the types of criminal violence that lead to homicide.

Discussion

Code definitions:

Drug trade – The buying, selling, or passing of drugs from one person to another in exchange for goods or money.

Robbery – Taking, or attempting to take, anything of value from another person or persons by force or threat of force or violence. If money or goods are stolen without force or threat of force (e.g., a bookkeeper stealing money from a company, thieves stealing equipment from a loading dock), the theft is not a robbery, but larceny, and should be coded as “Other”.

Burglary – The unlawful entry into a building or other structure without the owner’s consent with the intent to commit a felony or a theft.

Motor vehicle theft – The theft or attempted theft of a motor vehicle, includes the stealing of automobiles, trucks, buses, motorcycles, motorscooters, snowmobiles, etc. Does not include taking a motor vehicle for temporary use by those persons having lawful access, nor does it include stealing motor vehicle parts. Stealing motor vehicle parts without force or the threat of force is larceny and should be coded as “Other”.

Arson – To unlawfully and intentionally damage, or attempt to damage, any building, real estate, or personal property by fire or incendiary device. This code will generally be used for deaths that occur when an arsonist or building owner burns down a building for economic advantage and someone dies in the fire. The victims are considered victims of a criminal homicide even if their deaths were not intended. This code also applies when “firebugs” set fire to a building or property for kicks and someone dies in the blaze. It does not apply when arson is used to cover up a homicide (because the arson was not a precipitative event).

Rape, sexual assault – Sexual contact without consent. Includes sex with a minor with or without consent. Ranges from the non-consensual touching of an intimate part of the body to forced, manipulated, or coerced penetration. It can involve verbal coercion and threats, physical restraint, intimidation, or violence.

Gambling – To play games of chance for money or other stakes with the hope of gaining something beyond the amount played. This includes dealing, operating, or maintaining any game.

Assault/homicide – An unlawful fatal or nonfatal attack by one person upon another. To qualify as a serious crime, the assault should be an aggravated assault (one that involves bodily injury or threat with a deadly weapon). The following cases would qualify as Crime-Related, and “NtCrm1” should be coded as Assault/homicide: gang kills a rival gang member in retaliation for a previous homicide (the current homicide was precipitated in part by the previous homicide); police shoot a man who is stabbing a woman (the aggravated assault on the woman precipitated the officer shooting). The following case would NOT qualify as Crime-Related: two men are engaged in a fistfight; the fight escalates and one man shoots the other. (In an incident involving mutual assault that escalates to homicide, the initial assault is an integral part of the incident and not a separate precipitative crime).

Witness intimidation/elimination – To prevent a witness from providing information to the authorities about a crime either by killing, harming, or removing the witness, or by intentionally saying or doing something that would cause the witness to be fearful of providing information.

Name	Label	Table	Type	Field Length	Priority	Primacy
NtCrm1	Nature of first other crime:	Person	Number	2	O/LR/LR	CFR/CME/PR
NtCrm2	Nature of second other crime:	Person	Number	2	O/LR/LR	CFR/CME/PR

Response Options:

NtCrm1
and
NtCrim2

- 1 Drug trade
- 2 Robbery
- 3 Burglary
- 5 Motor vehicle theft
- 6 Arson
- 7 Rape, sexual assault
- 9 Gambling
- 10 Assault, homicide
- 11 Witness intimidation/elimination
- 66 Other (specify in narrative)
- 88 Not applicable
- 99 Unknown

Data Standards or Guidelines

FBI Uniform Crime Reporting Program, Supplementary Homicide Report

First other crime in progress: InProg

Name	Definition
InProg	The precipitative crime was in progress at the time of the homicide

Uses

For homicides that are precipitated by criminal activity such as drug dealing and robbery, InProg identifies whether the associated crime was in progress. The Supplementary Homicide Report system defines felony-related homicides only in terms of in-progress felonies. Because NVDRS uses a broader definition, this variable identifies only those that qualify as felony-related using the narrower definition.

Discussion

An in-progress crime is one that is being committed or attempted at the time of the homicide. This includes fleeing the scene.

Name	Label	Table	Type	Field Length	Priority	Primacy
InProg	First other crime in progress:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR

Response Options:

InProg	0	No, Not Available, Unknown
	1	Yes

Data Standards or Guidelines

NVISS

Argument over money/property: Argue

Name	Definition
Argue	An argument or conflict over money or property led to the homicide

Uses

This variable distinguishes homicide incidents that involve conflicts over money or property from more general interpersonal conflicts. This is useful for specifying the context in which drug-related homicides occur.

Discussion

Code when an interpersonal conflict between a victim and suspect involves conflict over money, property, or drugs.

Case Examples

Yes

- The victim and suspect are overheard arguing about who owns a sofa that belonged to the victim, but was left in the suspect’s apartment.
- The victim and suspect argue about how to divide up the cocaine they just purchased.
- The victim owed the suspect money.

No

- The victim and the suspect, who were cousins, were heard arguing. The subject of the argument is unknown.

Name	Label	Table	Type	Field Length	Priority	Primacy
Argue	Argument over money/property:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR

Response Options:

Argue

- 0 No, Not Available, Unknown
- 1 Yes

Data Standards or Guidelines

FBI Supplementary Homicide Report

Jealousy (lovers' triangle): Jealous

Name	Definition
Jealous	Identifies cases in which jealousy or distress over an intimate partner's relationship or suspected relationship with another person lead to the homicide

Uses

This variable will better specify the nature of violence between intimate partners and sexual rivals, for more accurate characterization of these incidents.

Discussion

In general, assume that if an incident involves sexual rivals; "Jealous" should be coded as "Yes" unless the circumstances clearly do not involve jealousy.

Case Examples

Yes

- An ex-wife is getting married to new boyfriend. Ex-husband waits for them to leave ex-wife's apartment, then shoots both.
- A woman stabs her boyfriend after learning that he has been cheating on her.

No

- An ex-boyfriend is buying drugs from his ex-girlfriend's new boyfriend when the new boyfriend is shot. Records indicate that the homicide was drug-related and do not indicate jealousy as a factor.

Name	Label	Table	Type	Field Length	Priority	Primacy
Jealous	Jealousy (lovers' triangle):	Person	Checkbox	1	O/LR/LR	CFR/CME/PR

Response Options:

Jealous

- 0 No, Not Available, Unknown
- 1 Yes

Data Standards or Guidelines

FBI Supplementary Homicide Report

Intimate partner violence related: IPV

Name	Definition
IPV	Identifies cases in which a homicide is related to conflict between current or former intimate partners

Uses

This variable will (1) track homicides in which one intimate partner kills another and (2) track deaths that are associated with intimate partner conflict/violence but are not deaths of the intimate partners themselves. It will be used to evaluate policies and programs aimed at reducing domestic violence.

Discussion

An intimate partner is defined as a current or former girlfriend/boyfriend, date, or spouse. If other people are also killed (a child, friend of the victim, a bystander) or if the intimate partner is not (the child of the intimate partner is the victim), code “Yes” for those victims as well. It will be apparent in the Victim-Suspect Relationship variable whether the victim and suspect were intimate partners or not. The definition of intimate partner includes first dates.

Case Examples

Yes

- A woman and her lawyer are getting into a car; the woman’s ex-boyfriend walks up to the woman and shoots her and the lawyer. (Code “Yes” for both the woman and the lawyer.)
- A man and his boyfriend are out at a party. The ex-boyfriend of the man is outraged that he would show up at a party with his new boyfriend. The ex-boyfriend pulls out a gun and shoots both. (Also code “Jealous” as “Yes”.)
- A man and woman are out on their first date. They go back to her apartment after the date. The man tries to force the woman into bed and strangles her to death.
- A man shoots the child of his ex-girlfriend to get back at her for leaving him. The woman is not killed.
- A man is beating his ex-girlfriend. The son of the woman intervenes and stabs the boyfriend to death.

No

- A man administers an overdose to his terminally-ill wife in a mercy killing. Wife leaves note indicating her request that her husband end her life.

Name	Label	Table	Type	Field Length	Priority	Primacy
IPV	Intimate partner violence related:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR

Response Options:

IPV

- 0 No, Not Available, Unknown
- 1 Yes

Data Standards or Guidelines

NVISS

Other argument, abuse, conflict: OthArg

Name	Definition
OthArg	An argument or other interpersonal conflict such as abuse, insult, grudge, or personal revenge that precipitated the killing. Excludes arguments over money/property (Argue), intimate partner violence (IPV), and jealousy between intimate partners (Jealous)

Uses

In conjunction with Argue, IPV, and Jealous, this variable can be used to assess how often violence-related deaths are associated with interpersonal conflict or abuse.

Discussion

This variable is designed to capture all other types of interpersonal conflicts, arguments or abuse that are not already covered by “Argument over money,” “Jealousy,” or “Intimate partner violence related.” Cases that appear to involve child abuse, elder abuse, and abuse by a caretaker should be coded “Yes” for “OthArg”. It may seem awkward not to have a specific variable called “abuse.” However, different practitioners in the various fields of abuse prevention apply different definitions of abuse. For example, some definitions require that the suspect be a caretaker of the victim (information that is captured in the variable, CareTk) and some require that there be a history of ongoing abuse (captured in the variable Abuse), both of which are in the victim-suspect relationship table. Using a combination of OthArg, CareTk, Victim-suspect relationship, and Abuse should give analysts flexibility in identifying cases that appear to be abuse-related according to a variety of definitions.

Case Examples

Yes

- The suspect was trying to quiet a crying baby when he lost his temper and shook the baby to death. Also indicate whether there was evidence of ongoing abuse on the victim-suspect relationship table.
- The victim and suspect were arguing over a parking spot.
- The victim is killed by an acquaintance in retaliation for a dispute they had on the basketball court earlier in the evening.

No

- The victim is shot by an acquaintance for an unknown reason.

Name	Label	Table	Type	Field Length	Priority	Primacy
OthArg	Other argument, abuse, conflict:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR

Response Options:

OthArg	0	No, Not Available, Unknown
	1	Yes

Data Standards or Guidelines

NVISS

Drug involvement: Drug

Name	Definition
Drug	Drug dealing or illegal drug use is suspected to have played a role in precipitating the homicide

Uses

Identifying drug involvement homicides will assist in more fully measuring the social costs of drug activity and evaluating the impact of policies and programs aimed at reducing drug trafficking and use.

Discussion

Code “Drug” as “Yes” if the homicide was related to illegally trafficking a controlled substance (e.g., drug deal gone bad, drug market turf battle, theft of drugs or money from a dealer during a drug deal, etc.) or drug use (e.g., addict committing robbery to obtain money for drugs, arguments over drugs). This variable can be coded based on suspicion of drug-relatedness. For example, if the victim’s body was found in a crack house or the victim had illegal drugs on their person at the time of death, code “Drug” as “Yes” unless it is noted in the record that the precipitative circumstance was not drug-related.

Case Examples

Yes

- A drug purchaser argues with a drug dealer about being cheated on the last deal and the dealer shoots him.
- A young dealer kills his grandmother because she will not allow him to sell drugs out of her home.
- A drug dealer has a rival drug dealer murdered because he has been encroaching on the first dealer’s territory.
- A crack addict robs someone on the street for money to buy drugs.
- A 16 year-old addict kills his mother during a fight after she flushes his drugs down the toilet.
- Two men break into the apartment of a drug dealer because they know he’s holding on to a large sum of cash from a recent deal; they kill him and take the money.
- A homicide victim is found in his car with a large quantity of crack cocaine on the seat next to him; no other information is available about what precipitated the homicide.

No

- A known drug dealer is murdered by his girlfriend after she discovers that he has been sleeping with another woman. (Although he is a known drug dealer, the facts of the case are known to be related to sexual jealousy and intimate partner violence, not drug dealing.)

Name	Label	Table	Type	Field Length	Priority	Primacy
Drug	Drug involvement:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR

Response Options:

Drug

0 No, Not available, Unknown

1 Yes

Data Standards or Guidelines

NVISS

Gang related: Gang

Name	Definition
Gang	Gang rivalry or gang activities that are suspected to have played a role in precipitating the homicide

Uses

This variable identifies the proportion of homicides that are attributable to gang activity. It can be used to evaluate the impact of programs or policies aimed at redirecting gang activity or reducing gang membership.

Discussion

Gang members are persons who are members of an association or organization that has, as one of its purposes, the commission of crime. Gangs include both youth gangs and organized crime gangs. Code “Gang” as “Yes” if the police or CME report indicates that the homicide resulted, or is suspected to have resulted, from gang rivalry or gang activity. Do not endorse “Gang” if the victim or suspect is a gang member, but the homicide did not appear to result from gang activity.

Case Examples

Yes

- A gang member shoots a rival gang member in revenge over an earlier shooting.
- A member of a gang that controls drug trafficking in the neighborhood shoots a man who robbed one of their dealers.

No

- A man shoots another young man over an insult the young man made about the suspect’s girlfriend. The victim is a gang member. (Although the victim is a gang member, the incident is not related to gang activity. Indicate in the narrative that the victim is a gang member.)

Name	Label	Table	Type	Field Length	Priority	Primacy
Gang	Gang related:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR

Response Options:

Gang

- | | |
|---|----------------------------|
| 0 | No, Not available, Unknown |
| 1 | Yes |

Data Standards or Guidelines

FBI Uniform Crime Reporting Program, Supplementary Homicide Report

OTHER HOMICIDE PRECIPITATING CIRCUMSTANCE

Hate crime:	Hate
Brawl (mutual physical fight):	Brawl
Terrorist attack:	Terror
Victim was a bystander:	Bystd
Victim was a police officer on duty:	PolOff
Victim was intervener assisting crime victim:	Interv
Mercy killing:	Mercy
Other homicide circumstance (specify):	Other

Name	Definition
Hate	The homicide was precipitated by a hate crime (specify type in incident narrative)
Brawl	A mutual physical fight preceded the homicide
Terror	The homicide resulted from a terrorist attack
Bystd	The victim was a bystander, not the intended target of the homicide
PolOff	The victim was a law enforcement officer killed in the line of duty
Interv	An intervener other than a law enforcement officer was killed while assisting a crime victim
Mercy	The victim requested that his or her life be brought to an end so the suspect committed the act to bring about the victim's death
Other	A circumstance not covered by the existing variables was a precipitative factor in the homicide

Uses

These data elements characterize the precipitants of violent deaths and help to identify trends in subtypes of violence over time. They will aid in planning and evaluating prevention programs targeted at specific subtypes of violence.

Discussion

Hate – A crime of aggravated assault, arson, burglary, criminal homicide, motor vehicle theft, robbery, sexual assault, or crime involving bodily injury in which the victim was intentionally selected because of their actual or perceived race, gender, religion, sexual orientation, ethnicity, or disability. Specify the type of hate crime in the Incident Narrative.

Brawl – Persons were involved in a mutual, physical fight. The brawl may or may not escalate to involve weapons. Do not code Brawl if the attack was one-sided (e.g., a group beats a single victim to death). Do not code as Brawl if only two people were fighting.

Terror – The victim was injured in a terrorist attack, whether with conventional, chemical, biological, or other weapons. This would include those who died while assisting in rescue operations from the attack. The NVDRS uses the FBI definition of terrorism: “Injuries resulting from the unlawful use of force or violence against persons or property to intimidate or coerce a government, the civilian population, or any segment thereof, in furtherance of political or social objectives.” Terrorism is not limited to terrorism by foreign nationals but includes domestic terrorism as well (e.g., abortion clinic bombing, anti-war bombing).

Bystd – The victim was a bystander and not directly involved in the incident (e.g., pedestrian walking past a gang fight, customer in a convenience store at the time of a robbery). Also code the precipitative event (e.g., gang-related, robbery).

PolOff – At the time of the incident, the victim was a law enforcement officer killed in the line of duty. Also code the precipitative event.

Interv – The victim was attempting to assist a crime victim at the time of the incident. Also code the crime in which the victim was intervening. Examples: A woman was being beaten by her boyfriend; her child intervened and the boyfriend killed the child. A firefighter dies from smoke inhalation while trying to put out a fire set by an arsonist.

Mercy – The suspect acts to bring about immediate death allegedly in a painless way and based on a clear indication that the dying person wished to die because of a terminal or hopeless disease or condition. Do not assume that a murder/suicide by a sick, elderly couple is a mercy killing. Code “Mercy” as “Yes” only when there is documentation that the victim wanted to be killed (e.g., left a note, told a relative or friend) and the police are not charging the suspect with an intentional homicide.

Other –

Mentally ill suspect – The suspect’s attack on the victim is believed to be the direct result of the suspect’s mental illness (e.g., the suspect attacks a woman on the street and claims that an angel told him the woman was one of Satan’s minions).

Random violence – The victim was killed by a random act of violence. A random act is one in which the suspect is not concerned with who is being harmed, just that someone is being harmed, such as a person who shoots randomly at passing cars from a highway bridge or opens fire in a crowded shopping mall. This code should not be used for unsolved homicides. It should also not be used for cases in which the overall target was chosen intentionally (such as a white supremacist group opening fire in a daycare center that serves children of color, or a suspect returning to the job from which he was recently fired and kills several people; while the actual individuals may have been selected at random, the place was intentionally targeted).

Drive-by – A drive-by shooting is one in which the suspect or group of suspects drives near an intended victim or target and shoots while driving. Code “Drive-by” even if the actual victim was a bystander and not the intended victim. Drive-by is the mechanism by which the victim was shot; also choose a precipitative circumstance code to document why the drive-by occurred, if known.

Other – Code “Other” only if a precipitative circumstance does not fall under existing circumstance codes. This code should be used infrequently and should not be used for unknown circumstances. Specify the circumstance in the Incident Narrative.

Name	Label	Table	Type	Field Length	Priority	Primacy
Hate	Hate crime:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR
Brawl	Brawl (mutual physical fight):	Person	Checkbox	1	O/O/O	CFR/CME/PR
Terror	Terrorist attack:	Person	Checkbox	1	O/O/O	CFR/CME/PR
Bystd	Victim was a bystander:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR
PolOff	Victim was a police officer on duty:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR
Interv	Victim was intervener assisting crime victim:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR
Mercy	Mercy killing:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR
Other	Other homicide circumstance (specify):	Person	Number	1	O/O/O	CFR/CME/PR

Response Options:

- Hate thru Mercy
 - 0 No, Not Available, Unknown
 - 1 Yes
- Other
 - 1 Mentally ill suspect
 - 2 Random violence
 - 3 Drive-by shooting
 - 8 Other

Data Standards or Guidelines

NVISS; FBI Uniform Crime Reporting Program, Supplementary Homicide Report

Justifiable self defense/law enforcement: Defens

Name	Definition
Defens	The homicide was committed by a law enforcement officer in the line of duty or was committed by a civilian in legitimate self-defense or in defense of others

Uses

This variable identifies the subset of homicides that involve socially-sanctioned use of lethal force.

Discussion

Justifiable homicides include those that are committed by a law enforcement officer in the line of duty or by a civilian in self-defense or in defense of others. Self-defense is defined as the right of a civilian to repel by force, even to the taking of life, or in defense of his person or property against anyone who attempts by violence or surprise to commit a forcible felony. Essential elements of self-defense are that the civilian does not provoke difficulty and that there must be impending peril without a convenient or reasonable mode of escape. Sufficient evidence is required to support coding a case as a defensive or justifiable act. It is not enough that the police record notes that the suspect claims his or her life was in danger. Acceptable evidence is that either the SHR codes the case as a justifiable homicide or police records indicate that police and prosecutors have classified the case as a justifiable homicide. If a case is coded as “Yes” for “Defens”, be sure to code the precipitative event that led to the killing as well. Any killing by a law enforcement officer in the line of duty is considered a justifiable homicide with the exception of an intentional murder.

Case Examples

Yes

- An armed suspect enters a gas station to commit a robbery; the clerk pulls a gun out from under the counter and kills the suspect.
- An officer is attempting to apprehend a robbery suspect; the suspect pulls a gun and fires at the officer, and the officer returns fire, shooting the suspect.
- An officer stops a man erroneously believed to be a suspect in a robbery. The man reaches for his wallet to prove his identity, but the officer mistakes this as going for a gun and shoots the man. (Whether the killing was truly justifiable is not something that the coder should interpret; because the officer was acting in the line of duty, it should be coded as “Yes”.)

No

- The victim and suspect are arguing and begin shoving one another; the victim pulls out a knife; the suspect pulls out his gun and shoots the victim. The suspect is charged with second-degree murder.
- A woman kills her boyfriend against whom she has a restraining order. She claims self-defense, but she is charged with murder. (Although she may eventually be acquitted of the charges, code based on the current police-designated status of the case.)

- An on-duty police officer drives to his wife’s place of work and kills her. He is arrested for her murder. (Although he is on duty at the time, the killing was not in the line of duty.)

Name	Label	Table	Type	Field Length	Priority	Primacy
Defens	Justifiable self defense/ law enforcement:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR

Response Options:

Defens

- 0 No, Not Available, Unknown
- 1 Yes

Data Standards or Guidelines

FBI Uniform Crime Reporting Program, Supplementary Homicide Report

Victim used weapon: UsedWeap

Name	Definition
UsedWeap	The victim used a weapon during the course of the incident

Uses

This variable identifies the subset of homicides that involve armed victims who used their weapon during the course of the incident.

Discussion

Code “UsedWeap” as “Yes” if the victim was armed with a weapon such as a gun, knife, or blunt instrument and used the weapon either to attack or to defend against the suspect or another person during the incident. Please also code this variable as “Yes” when a person made an attempt to use a weapon. For example, if a person made an attempt to pull a gun, but did not actually fire a round.

Case Examples

Yes

- Two men are arguing; one goes after the other with a knife. The suspect shoots the man with the knife.
- A police officer stops a man for a routine traffic violation; the man attempts to run the officer down with his vehicle and the officer shoots the man. (The car is considered a weapon in this scenario.)

No

- At the murder scene, investigators find the victim’s pistol in his shoulder holster.

Name	Label	Table	Type	Field Length	Priority	Primacy
UsedWeap	Victim used weapon:	Person	Checkbox	1	O/O/O	CFR/CME/PR

Response Options:

UsedWeap	
0	No, Not Available, Unknown
1	Yes

Data Standards or Guidelines

NVISS

Section 9

UNINTENTIONAL CIRCUMSTANCES

Circumstances known: Circ	9-3
CONTEXT OF INJURY	9-4
MECHANISM OF INJURY	9-6

Circumstances known: Circ

Name	Definition
Circ	Indicates if any information is available about the circumstances associated with the incident

Uses

This variable operates as a stem question.

Discussion

Do not code this variable as “No” until you have reviewed all of the data from this source that you intend to review for this case.

Name	Label	Table	Type	Field Length	Priority	Primacy
Circ	Circumstances known:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR

Response Options:

Circ	0	No
	1	Yes

CONTEXT OF INJURY

Hunting:	Hunt
Target shooting:	Miss
Self-defensive shooting:	SelfDef
Celebratory firing:	Celeb
Loading/unloading gun:	LoadGun
Cleaning gun:	Clean
Showing gun to others:	Show
Playing with gun:	Play
Other context of injury:	OthAcc

Name	Definition
Hunt	Occurred while hunting or on a hunting trip
Miss	Occurred while target shooting
SelfDef	Self-injury occurred while defending against a suspected aggressor
Celeb	Occurred while firing celebratory shots
LoadGun	Occurred while loading or unloading a gun
Clean	Occurred while cleaning a gun
Show	Occurred while showing a gun to others
Play	Occurred while playing or “fooling around” with a gun
OthAcc	Occurred within a context other than the above categories

Uses

These variables identify the contexts within which an unintentional shooting occurs. It can be used to identify trends in subtypes of unintentional shootings over time and will aid in planning and evaluating prevention programs targeted at improving gun design, reducing child access to guns, teaching gun safety, and other strategies.

Discussion

Hunting – Code “Hunt” as “Yes” if an unintentional firearm injury occurred while the shooter or victim was hunting or on a hunting trip. Include any incident that occurs after leaving home and before returning home from hunting. The shooting itself need not have been during an active hunt to be considered hunting-related. For example, a hunter who has finished hunting and accidentally shoots himself while loading his rifle in the truck for the return trip home is considered a hunting accident. If an injury occurs before or after the hunting trip (e.g., while cleaning a gun in preparation for a hunting trip), the incident should not be coded as hunting-related.

Target Shooting – Code “Miss” as “Yes” if the shooter is aiming for a target and unintentionally hits a person. Target shooting can occur either in the setting of a formal shooting range or in an informal “backyard” setting (e.g., teenagers shooting at signposts on a fence).

Self-Defense – Code “SelfDef” as “Yes” when a victim is attempting to defend him or herself with a gun and inadvertently shoots themselves. Endorse “SelfDef” only if the shooting was self-inflicted. Shootings of one person by another that occur during a self-defensive shooting (e.g., when a store clerk unintentionally shoots a customer while aiming for a robber) should be coded as “homicide” for Type of Death.

Celebratory – Code “Celeb” as “Yes” when the shooter was firing the gun upward in a celebratory manner with no intention of threatening or endangering others (e.g., revelers on New Year’s Eve shooting their guns in the air at midnight). Firing warning shots in the air (for example to break up a fight) should not be coded as celebratory if the shot unintentionally strikes a bystander, but should be coded as homicide for Type of Death (since the gun was used in a threatening manner to control others).

Loading/unloading – Code “LoadGun” as “Yes” if the firearm discharges while the shooter is loading or unloading ammunition from the gun.

Cleaning – Code “Clean” as “Yes” if the shooter pulls the trigger or the gun discharges while a person is cleaning the gun.

Showing – Code “Show” as “Yes” if the shooter was showing the gun to another person when the gun discharged or the trigger was pulled. An example is a teenager who was showing his father’s new gun to his friend.

Playing – Code “Play” as “Yes” if the shooter and one or more others are playing with a gun. Other phrases that would trigger coding this context include “horsing around” and “fooling around.” This variable is not limited to children. A case example would be two teenaged brothers playing a game of quick draw with their father’s revolvers. They are unaware that one of the guns has a bullet in the cylinder.

Other – Code “OthAcc” as “Yes” if the shooting occurs during some context other than those described by the existing codes.

Person/CFR-CME-PR/Circumstance Elements/Unintentional Circumstances

Name	Label	Table	Type	Field Length	Priority	Primacy
Hunt	Hunting:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR
Miss	Target shooting:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR
SelfDef	Self-defensive shooting:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR
Celeb	Celebratory firing:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR
LoadGun	Loading/unloading gun:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR
Clean	Cleaning gun:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR
Show	Showing gun to others:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR
Play	Playing with gun:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR
OthAcc	Other context of injury:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR

Response Options:

Hunt
thru
OthAcc
0 No, Not Available, Unknown
1 Yes

Data Standards or Guidelines

NVISS

MECHANISM OF INJURY

Thought safety was engaged:	Safety
Thought unloaded, magazine disengaged:	UnlMg
Thought gun was unloaded, other:	Unloa
Unintentionally pulled trigger:	Pull
Bullet ricochet:	Richo
Gun defect or malfunction:	Defct
Fired while holstering/unholstering:	Holst
Dropped gun:	DropGun
Fired while operating safety/lock:	Engag
Gun mistaken for toy:	Toy
Other mechanism of injury:	FOth

Name	Definition
Safety	Shooter thought the gun was inoperable because the safety was engaged
UnlMg	Shooter thought the gun was unloaded because the magazine was disengaged
Unloa	Shooter thought the gun was unloaded (other or unspecified reason)
Pull	Shooter unintentionally pulled the trigger
Richo	The bullet ricocheted and unintentionally struck the victim
Defct	The gun had a defect or malfunctioned
Holst	Shooter unintentionally fired the gun while holstering or unholstering the gun or removing it from or replacing it in his or her clothing
DropGun	The gun discharged when it was dropped
Engag	Shooter unintentionally fired the gun while operating the safety lock
Toy	The gun was mistaken for a toy
FOth	Other mechanism of injury

Uses

The variables identify the specific mechanism by which the gun was fired and hit another person unintentionally. They can be used to identify trends in subtypes of unintentional shootings over time and will aid in planning and evaluating prevention programs targeted at improving gun design, reducing child access to guns, teaching gun safety, and other strategies.

Discussion

Safety – Code “Safety” as “Yes” if the shooter thought the safety was on and the firearm would not discharge.

Magazine disengaged – Code “UnlMg” as “Yes” if the shooter believed the gun was unloaded because the magazine was disengaged. This circumstance would not apply to revolvers, derringers, or certain long guns that do not use a magazine. Frequently when the magazine is removed from a semi-automatic pistol, the gun handler believes it is unloaded when in fact a cartridge may remain in the firing chamber.

Unloaded – Code “Unloa” as “Yes” if the shooter thought the gun was unloaded for a reason other than the magazine was disengaged or for an unspecified reason. Examples are a child who had previously played with the gun when it was unloaded and assumed it still was, or a sports shooter who always left his gun unloaded was unaware that his son had borrowed it and left it loaded.

Pulled trigger – Code “Pull” as “Yes” if a person unintentionally pulled the trigger, for example while grabbing for a falling gun or while reaching for the gun or holding it too tightly with the finger on the pull.

Ricochet – Code “Richo” as “Yes” if a bullet ricocheted off course from its intended target and struck the victim.

Defect – Code “Defct” as “Yes” if the shooting resulted from a gun defect or malfunction. Because it is difficult for a non-expert to judge whether a shooting resulted from operator error vs. a true defect or malfunction, this code should be based on a finding by a trained firearm and toolmark examiner.

Holstering – Code “Holst” as “Yes” if the gun is being placed in or removed from its holster or clothing (e.g., the gun fires when a victim is pulling it from the waistband of his pants).

Dropped – Code “DropGun” as “Yes” if the gun accidentally discharges when it is dropped or when something is dropped on it. This code applies to situations in which the impact of the crash causes the gun to discharge. It does not apply to situations in which a gun starts to fall and is fired when the handler grabs for it and unintentionally pulls the trigger. That situation should be coded as Pull.

Engaging lock – Code “Engag” as “Yes” if the shooting occurred while the gun handler was attempting to open or close the lock and unintentionally fired the gun (e.g., while attempting to pull the cable lock free of the trigger, the victim unintentionally pulled the trigger) This variable will be important in detecting any unintended injuries that result from using safety equipment.

Mistaken for toy – Code “Toy” as “Yes” if a person (usually a child) thought the gun was a toy and was firing it without understanding the danger. This code applies to the shooter’s understanding of the gun that he or she was handling. It does not apply to situations in which a person kills another person because they thought the victim was aiming a gun (in reality, a toy) at them. These situations would be coded as homicides.

Other – Code “FOth” as “Yes” if the shooting occurred as the result of a mechanism not already described by one of the existing codes.

Name	Label	Table	Type	Field Length	Priority	Primacy
Safety	Thought safety was engaged:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR
UnlMg	Thought unloaded, magazine disengaged:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR
Unloa	Thought gun was unloaded, other:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR
Pull	Unintentionally pulled trigger:	Person	Checkbox	1	O/O/O	CFR/CME/PR
Richo	Bullet ricochet:	Person	Checkbox	1	O/O/O	CFR/CME/PR
Defct	Gun defect or malfunction:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR
Holst	Fired while holstering/unholstering:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR
DropGun	Dropped gun:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR
Engag	Fired while operating safety/lock:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR
Toy	Gun mistaken for toy:	Person	Checkbox	1	O/LR/LR	CFR/CME/PR
FOth	Other mechanism of injury:	Person	Checkbox	1	O/O/O	CFR/CME/PR

Response Options:

Safety
 thru
 FOth

0 No, Not Available, Unknown
 1 Yes

Data Standards or Guidelines

NVISS

Section 10
POLICE REPORT
MAIN ELEMENTS
CIRCUMSTANCES

Date of injury:	Idate
Time of injury:	Itime
State of injury FIPS code:	InjState
County of injury:	County
City of injury FIPS code:	InjPlace
Street and number of injury site:	InjAddress
State of death:	DthState
Injured at work:	AtWork
Type of location where injured:	LocTyp

See Person/DC/Main Elements section for information regarding variable(s) appearing above.

ZIP code of injury:	Zip
At person's home:	Reside
EMS at scene:	EMS
Homeless status:	Homles
Current occupation:	Occup
Victim in custody when injured:	Custody
Alcohol use suspected:	Intox
Number of wounds:	NumWou
Number of bullets that hit victim:	NumBul
Wound to the head:	Head
Wound to the face:	Face
Wound to the neck:	Neck
Wound to the upper extremity:	UpExt
Wound to the spine:	Spine
Wound to the thorax:	Thorax
Wound to the abdomen:	Abdomn
Wound to the lower extremity:	LowExt
Person attempted suicide after incident:	Suic

See Person/CME/Main Elements section for information regarding variable(s) appearing above.

Suicide Circumstances
Homicide Circumstances
Unintentional Circumstances

*For all Person/PR/Circumstance Elements
see Person/CFR-CME-PR/Circumstance Elements.*

Section 11

SUPPLEMENTARY HOMICIDE REPORT

SHR circumstance: SCirc	11-3
SHR situation: Situat	11-5
SHR homicide type: HomTyp	11-6
SHR justifiable homicide circumstance: JustSCirc	11-7

SHR circumstance: SCirc

Name	Definition
SCirc	This data element indicates the circumstance leading to homicides for deaths reported on the Supplementary Homicide Report (SHR) or the National Incident Based Reporting System (NIBRS)

Uses

This data element assists in describing the precipitants of homicides and identifies trends in subtypes of violence over time. It will aid in planning and evaluating prevention programs targeted at specific subtypes of violence and unintentional injury.

Discussion

This variable provides the information supplied by the SHR about the circumstances precipitating a homicide. It should be completed for all victims in the SHR reports. Codes should be entered exactly as they appear in the SHR database, even if the abstractor believes an individual code was chosen in error. If your state uses codes in addition to the standard FBI code list for circumstance, find out from your state Uniform Crime Reports (UCR) coordinator how that code will be mapped to the standard FBI list and enter that code. If the SHR is not available, code the case as 88.

Name	Label	Table	Type	Field Length	Priority	Primacy
SCirc	SHR circumstance:	Person	Number	2	O	SHR

Response Options:

SCirc	
2	Rape
3	Robbery
5	Burglary
6	Larceny
7	Motor vehicle theft
9	Arson
10	Prostitution and commercialized vice
17	Other sex offense
18	Narcotic drug laws
19	Gambling
26	Other felony type – not specified
32	Abortion
40	Lovers' triangle
41	Child killed by babysitter
42	Brawl due to influence of alcohol
43	Brawl due to influence of narcotics
44	Argument over money or property
45	Other arguments
46	Gangland killings
47	Juvenile gang killings

Person/SHR

48	Institutional killings
49	Sniper attack
50	Victim shot in hunting accident
51	Gun-cleaning death, other than self-inflicted
52	Children playing with gun
53	Other negligent handling of gun
59	All other manslaughter by negligence except traffic deaths
60	Other non-felony type homicide
70	Suspected felony type
80	Felon killed by private citizen
81	Felon killed by police
88	Not applicable
99	Circumstances undetermined

Data Standards or Guidelines

FBI Uniform Crime Reporting Program, Supplementary Homicide Report

SHR situation: Situat

Name	Definition
Situat	Indicates type of homicide (murder/nonnegligent manslaughter or manslaughter by negligence) and whether single or multiple victims and offenders were involved in the incident

Uses

This data element is used to better describe the incident. It is useful for classifying types and situations of homicide for developing and evaluating prevention programs.

Discussion

None

Name	Label	Table	Type	Field Length	Priority	Primacy
Situat	SHR situation:	Person	Number	1	O	SHR

Response Options:

Situat

- 1 A – Single victim/single offender
- 2 B – Single victim/unknown offender(s)
- 3 C – Single victim/multiple offenders
- 4 D – Multiple victims/single offender
- 5 E – Multiple victims/multiple offender
- 6 F – Multiple victim/unknown offenders
- 8 Not applicable
- 9 Unknown

Data Standards or Guidelines

FBI Uniform Crime Reporting Program, Supplementary Homicide Report

SHR homicide type: HomTyp

Name	Definition
HomTyp	Indicates type of homicide (murder/nonnegligent manslaughter or manslaughter by negligence) and whether single or multiple victims and offenders were involved in the incident

Uses

This data element is used to better describe the incident. It is useful for classifying types and situations of homicide for developing and evaluating prevention programs.

Discussion

The variables “Situat” and “HomTyp” provide information supplied by the SHR. It should be completed on all victims appearing in the SHR reports. The coding system mirrors that used by the national SHR. The homicide type (offense code) indicates whether the homicide was classified as a murder/nonnegligent manslaughter (i.e., interpersonal violence-related) or a manslaughter by negligence (e.g., an accidental shooting death as in a child playing with a gun or a hunting accident).

Name	Label	Table	Type	Field Length	Priority	Primacy
HomTyp	SHR homicide type:	Person	Number	1	O	SHR

Response Options:

HomTyp	
1	Murder/nonnegligent manslaughter
2	Manslaughter by negligence
8	Not applicable
9	Unknown

Data Standards or Guidelines

FBI Uniform Crime Reporting Program, Supplementary Homicide Report

SHR justifiable homicide circumstance: JustSCirc

Name	Definition
JustSCirc	Captures additional details about the circumstances associated with justifiable shootings of one person by another as coded in the Supplementary Homicide Report (SHR)

Uses

This data element describes the use of deadly force for self-defense or in the line of law enforcement duty.

Discussion

This variable provides the information supplied by the SHR about the circumstances precipitating a justifiable homicide. Codes should be entered exactly as they appear in the SHR database (subcircumstance variable), even if the abstractor believes an individual code was chosen in error. If your state uses codes in addition to the standard FBI code list for circumstance, find out from your state Uniform Crime Reports (UCR) coordinator how that code will be mapped to the standard FBI list and enter that code.

Name	Label	Table	Type	Field Length	Priority	Primacy
JustSCirc	SHR justifiable homicide circumstance:	Person	Number	2	O	SHR

Response Options:

- JustSCirc
- 1 Felon attacked police officer
 - 2 Felon attacked fellow police officer
 - 3 Felon attacked civilian
 - 4 Felon attempted flight from a crime
 - 5 Felon killed in commission of a crime
 - 6 Felon resisted arrest
 - 7 Not enough information to determine
 - 9 Not a justifiable homicide
 - 88 Not applicable (e.g., accident, suicide)
 - 99 Missing

Data Standards or Guidelines

FBI Supplementary Homicide Report

Section 12

HOSPITAL INFORMATION

Victim admitted to inpatient care:	Hosp	12-3
Victim seen in ED:	EmDep	

First external cause of injury code from hospital:	HECd9a	12-4
Second external cause of injury code from hospital:	HECd9b	

Victim admitted to inpatient care: Hosp
Victim seen in ED: EmDep

Name	Definition
Hosp	Victim admitted to inpatient care at an acute care hospital?
EmDep	Victim seen in emergency department?

Uses

These variables are useful for both medical care planning and surveillance system planning and for describing the burden of violent injury.

Discussion

Victims who arrived at the emergency department should be coded as “Yes,” regardless of whether they were dead or alive on arrival and regardless of whether they received treatment. If a victim was seen in the emergency department, admitted for an “observation only” overnight stay and not admitted as an inpatient, code “EmDep” as “Yes” and “Hosp” as “No”. If the victim was admitted to the hospital, code both “EmDep” and “Hosp” as “Yes”. If the victim was noted as having been in the operating room, code “EmDep” and “Hosp” as “Yes”, even if the patient died in the operating room.

Name	Label	Table	Type	Field Length	Priority	Primacy
Hosp	Victim admitted to inpatient care:	Person	Checkbox	1	O	HOSP
EmDep	Victim seen in ED:	Person	Number	1	O	ED

Response Options:

Hosp

- 0 No, Not Collected, Not Available, Unknown
- 1 Yes

EmDep

- 0 No
- 1 Yes
- 9 Unknown

First external cause of injury code from hospital: HECd9a
Second external cause of injury code from hospital: HECd9b

Name	Definition
HECd9a	First “External cause of injury” code assigned by hospital
HECd9b	Second “External cause of injury” code assigned by hospital

Uses

These variables are used to classify the case as unintentional, intentionally self-inflicted, or assault-related.

Discussion

These variables should be coded as they appear in the hospital discharge data, or, if unavailable, in the emergency department records. E-codes are assigned by the medical records department using the International Classification of Diseases, 9th Revision, Clinical Modification, to describe the external cause of an injury. Do not use trailing zeros after the decimal point (unless a true zero is part of the actual code).

Name	Label	Table	Type	Field Length	Priority	Primacy
HECd9a	First external cause of injury code from hospital:	Person	Text	5	O	HOSP
HECd9b	Second external cause of injury code from hospital:	Person	Text	5	O	HOSP

Response Options:

HECd9a
 and
 HECd9b

Format: ###.#

- 000.7 Not collected by reporting site
- 000.8 Not applicable
- 000.9 Unknown or missing

Data Standards or Guidelines

International Classification of Diseases, 9th Revision, 6th ed.

Section 13
CHILD FATALITY REVIEW
MAIN ELEMENTS
HOUSEHOLD AND COMMITTEE INFORMATION
CIRCUMSTANCES

CFR records available on victim: KCFR	13-3
VICTIM ILLNESS OR DISABILITY (CFR)	13-4
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CIRCUMSTANCES (CFR)	13-32

CFR records available on victim: KCFR

Name	Definition
KCFR	Describes whether Child Fatality Review (CFR) records are available for this victim

Uses

Will be used as a branch question so that negative answers will trigger “Not applicable” to be filled in for all data elements that are part of the CFR Module. It will also provide an estimated frequency with which CFR records are available for child violent deaths in NVDRS sites that collaborate with CFR programs.

Discussion

Code KCFR as “No” if the records have been requested for a child victim and the CFR program either does not have a record for the victim or is unable to supply the record.

Name	Label	Table	Type	Field Length	Priority	Primacy
KCFR	CFR records available on victim:	Person	Number	1	O	CFR

Response Options:

- KCFR
- 0 No
 - 1 Yes
 - 7 Not collected by local CFR team
 - 8 Not applicable
 - 9 Unknown

VICTIM ILLNESS OR DISABILITY (CFR)

Victim had a physical illness at time of incident:	KIllness2
If yes, specify diagnosis:	KIllTxt
Victim had disability at time of incident:	KDisable2
If yes, disability was physical:	KDisPhy2
If yes, disability was developmental:	KDisDev2
If yes, disability was sensory:	KDisSens2

Name	Definition
KIllness2	Victim had an acute or chronic illness at the time of the incident
KIllTxt	Free text field to indicate diagnosis if victim was ill at the time of the incident
KDisable2	Victim had a disability at the time of the incident
KDisPhy2	Victim’s disability was physical (e.g. paraplegic, cerebral palsy)
KDisDev2	Victim’s disability was developmental (e.g. mentally retarded, autistic)
KDisSens2	Victim’s disability was sensory (e.g. blind, deaf)

Uses

Information regarding the victim’s state of health at the time of the fatal incident can be helpful for determining potential risk factors for violent death. The stress of caring for an acutely or chronically ill child can be a contributing factor to abusive behavior on the part of a caregiver. Chronic illness can also be associated with depression, low self-esteem, and substance abuse among older children, resulting in a potentially higher risk for suicidal and homicidal behavior. This data element will help inform intervention and prevention efforts.

Discussion

Physical illness may be acute (e.g., viral gastroenteritis, pneumonia) or chronic (e.g., diabetes, asthma, sickle cell anemia), however, if the chronic illness did not impose increased care demands at the time of the incident, do not code “Yes.” For example, if a child had a history of asthma, but had no acute exacerbation at the time of the incident, code “No.” The severity of the illness should not be considered when coding KIllness2; any mention in the record of the victim being physically ill at the time of the incident is sufficient to warrant coding KIllness2 as “Yes”. Physical disability implies a chronic physical impairment that has a substantial, long-term effect on the child’s day-to-day function (e.g., cerebral palsy). Developmental disability implies a chronic cognitive or developmental deficit that has a substantial, long-term effect on the child’s day-to-day function (e.g., autism, mental retardation). Sensory disability implies a chronic sensory deficit that has a substantial, long-term impact on the child’s day-to-day functioning (e.g., blindness, deafness). Prematurity in and of itself should not be considered an

illness or a disability unless it resulted in a condition that fits into one of those categories (e.g., chronic lung disease, visual impairment). Please see Prenatal History variables to code for prematurity (KPNPrem). If a child was not specifically diagnosed with or documented to have one of the listed disabilities, answer “No.” The answer “No” may thereby include Missing and Unknown and “Known not to be present.” The information used to complete this data element may come from parental history (as per law enforcement or CPS records), medical records, and/or autopsy.

Name	Label	Table	Type	Field Length	Priority	Primacy
KIllness2	Victim had a physical illness at time of incident:	Person	Checkbox	1	O	CFR
KIllTxt	If yes, specify diagnosis:	Person	Text	40	O	CFR
KDisable2	Victim had disability at time of incident:	Person	Checkbox	1	O	CFR
KDisPhy2	If yes, disability was physical:	Person	Checkbox	1	O	CFR
KDisDev2	If yes, disability was developmental:	Person	Checkbox	1	O	CFR
KDisSens2	If yes, disability was sensory:	Person	Checkbox	1	O	CFR

Response Options:

- KIllness2
 - 0 No, Unknown, Missing
 - 1 Yes
- KIllTxt
 - None
- KDisable2 thru KDisSens2
 - 0 No, Unknown, Missing
 - 1 Yes

PRENATAL HISTORY OF INFANTS

Infants: Prenatal care prior to the 3rd trimester:	KPNCare
Infants: Maternal recreational drug use:	KPNSubs
Infants: Maternal alcohol use:	KPNAIcoh
Infants: Maternal tobacco use:	KPNTob
Infants: Victim born prematurely:	KPNPrem

Name	Definition
KPNCare	Victim’s mother received prenatal care prior to 3 rd trimester
KPNSubs	Victim was exposed to recreational drugs in utero
KPNAIcoh	Victim was exposed to alcohol in utero
KPNTob	Victim was exposed to tobacco in utero
KPNPrem	Victim was born prematurely

Uses

These data elements are collected only on victims less than one year old. The prenatal history variables will help to elucidate the relationship between the presence and duration of prenatal care and violent child death. Lack of adequate prenatal care may be a proxy for a variety of risk factors that may relate to violent child death (e.g., neglect, educational level, investment in the concept of wellness care, etc.). Information gathered from all of these data elements will provide indirect information about the psychosocial environment of the child and medical information. Certain conditions resulting from lack of prenatal care and/or exposure to toxins in utero, place the child at increased risk of developmental delay and other long-term sequelae which may place them at higher risk for violent death.

Discussion

Prenatal care is defined as pregnancy-related medical care delivered by a doctor, nurse, or other healthcare professional with the goal of monitoring the pregnancy, providing education, and increasing the likelihood of a positive maternal and fetal outcome. Answer “Yes” only if there are documented prenatal visits before the third trimester. Maternal recreational drug use includes all drugs (except alcohol and tobacco) that are either non-prescription, or are being used in a manner inconsistent with safe prescribing practices. Answer “Yes” only if there is documented evidence or clear reports of substance, alcohol or tobacco use during pregnancy with the victim. Despite history of maternal substance, alcohol, and/or tobacco use with prior pregnancies, if it is not documented or evident during her pregnancy with the victim, the data element should be coded “No.” For KPNPrem, prematurity is defined as an estimated gestational age less than 37 weeks.

Name	Label	Table	Type	Field Length	Priority	Primacy
KPNCare	Infants: Prenatal care prior to the 3 rd trimester:	Person	Number	1	O	CFR
KPNSubs	Infants: Maternal recreational drug use:	Person	Number	1	O	CFR
KPNAlcoh	Infants: Maternal alcohol use:	Person	Number	1	O	CFR
KPNTob	Infants: Maternal tobacco use:	Person	Number	1	O	CFR
KPNPrem	Infants: Victim born prematurely:	Person	Number	1	O	CFR

Response Options:

- KPNCare
- thru
- KPNPrem
- 0 No
- 1 Yes
- 7 Not collected by local CFR team
- 8 Not applicable
- 9 Unknown

PRIOR CPS CONTACTS (EVER)

Prior CPS report on the victim’s household:	KCPSRept
If yes, CPS report filed on whom:	KCPSWho
If yes, report substantiated:	KCPSTrue
Physical abuse substantiated:	KCPSPhys
Sexual abuse substantiated:	KCPSSex
Neglect substantiated:	KCPSNeg
CPS case opened on other children due to this death:	KCPSOpen

Name	Definition
KCPSRept	Prior CPS report was filed on the victim’s household
KCPSWho	Person on behalf of whom or against whom a CPS report was filed
KCPSTrue	At least one prior CPS report filed on the victim’s household was substantiated
KCPSPhys	At least one substantiated CPS report filed on the victim’s household was for physical abuse
KCPSSex	At least one substantiated CPS report filed on the victim’s household was for sexual abuse
KCPSNeg	At least one substantiated CPS report filed on the victim’s household was for neglect
KCPSOpen	A CPS case was opened on other children as a result of this death

Uses

Information regarding prior reports on the victim and/or another child in the victim’s household as victims of maltreatment will help characterize the environment in which the decedent was living. A history of maltreatment is also a risk factor for homicidal and suicidal behaviors in youth. Information from these data elements may give feedback on systems issues and may elucidate opportunities for secondary prevention at a systems level.

Discussion

All of the questions except for KCPSOpen refer to CPS contacts prior to the current incident, and *not* contacts that resulted from the current case. “Household” is defined as the residence where the victim lived the majority of the time when the fatal incident occurred. “Household” was chosen as the unit for this question in an attempt to characterize the victim’s environment. However, in the case of a victim living with a foster family or in an institution at the time of the fatal incident, answer regarding the family of origin. If known maltreatment existed in the foster family, describe in incident narrative. Please note that a report or referral can be in reference to a child or an adult living in the

household. When the only information available is that a report was filed on the household, indicate “Unknown” for KCPSWho. If a report was not made on behalf of a child in the household, but a report was filed against an adult who currently lives in the household (e.g., no reports against the victim’s mother, but the mother’s boyfriend was previously investigated for abuse), code KCPSWho as “adult in household.” Any substantiation ever should be coded as “Yes” even if some of the reports/referrals were substantiated and others were not.

Name	Label	Table	Type	Field Length	Priority	Primacy
KCPSRept	Prior CPS report on the victim’s household:	Person	Number	1	O	CFR
KCPSWho	If yes, CPS report filed on whom:	Person	Number	1	O	CFR
KCPSTrue	If yes, report substantiated:	Person	Number	1	O	CFR
KCPSPhys	Physical abuse substantiated:	Person	Number	1	O	CFR
KCPSSex	Sexual abuse substantiated:	Person	Number	1	O	CFR
KCPSNeg	Neglect substantiated:	Person	Number	1	O	CFR
KCPSOpen	CPS case opened on other children due to this death:	Person	Number	1	O	CFR

Response Options:

KCPSRept

- 0 No
- 1 Yes
- 7 Not collected by local CFR team
- 8 Not applicable
- 9 Unknown

KCPSWho

- 1 Victim
- 2 Other child in household
- 3 Both
- 4 Adult in household
- 6 Other, or unspecified
- 7 Not collected by local CFR team
- 8 Not applicable
- 9 Unknown

KCPSTrue thru KCPSOpen

- 0 No
- 1 Yes
- 7 Not collected by local CFR team
- 8 Not applicable
- 9 Unknown

PRIOR SYSTEM CONTACTS

Victim contact with police:	KLawVict2
Household's contact with police:	KLawHous2
Victim contact with juvenile justice system:	KJuv2
Victim contact with the health care system:	KHealth2
Victim contact with mental health services:	KMHServ2
Victim/primary caregiver contact with social services:	KSocial2
Primary caregiver on welfare/financial assistance:	KWelfare2
Victim/primary caregiver contact with WIC:	KWIC2
Victim/primary caregiver contact with Medicaid:	KMedicaid2

Name	Definition
KLawVict2	Victim had contact with police in the past 12 months
KLawHous2	Household had contact with police in the past 12 months
KJuv2	Victim had contact with juvenile justice system in the past 12 months
KHealth2	Victim had contact with health care system in the past 12 months
KMHServ2	Victim had contact with mental health services in the past 12 months
KSocial2	Victim/primary caregiver had contact with social services in the past 12 months
KWelfare2	Primary caregiver was on welfare/financial assistance in the past 12 months
KWIC2	Victim/primary caregiver had contact with WIC in the past 12 months
KMedicaid2	Victim/primary caregiver had contact with Medicaid in the past 12 months

Uses

Contacts with the system may occur at many different points. Each contact instance is a potential opportunity for preventing violent death. The information collected in this data element will demonstrate where children who suffer from different types of violent death tend to come into contact with the system. That pattern recognition may serve as a guide for allocating resources for prevention.

Discussion

KLawVict2, KJuv2, KHealth2, and KMHServ2 all refer to whether the child/victim had contact with these points in the system prior to the fatal incident. KSocial2, KWIC2 and KMedicaid2 ask if either the child or the primary caregiver had contact with these points in the system in the year prior to the incident. The social services system can include health educator home visits or voluntary services, such as parenting support or respite services. And KWelfare2 refers to whether the primary caregiver of the victim was on welfare or receiving governmental financial assistance. KLawHous2 refers to the household’s history of contact with law enforcement (e.g., police being called by neighbors secondary to domestic disturbance).

Name	Label	Table	Type	Field Length	Priority	Primacy
KLawVict2	Victim contact with police:	Person	Checkbox	1	O	CFR
KLawHous2	Household’s contact with police:	Person	Checkbox	1	O	CFR
KJuv2	Victim contact with juvenile justice system:	Person	Checkbox	1	O	CFR
KHealth2	Victim contact with the health care system:	Person	Checkbox	1	O	CFR
KMHServ2	Victim contact with mental health services:	Person	Checkbox	1	O	CFR
KSocial2	Victim/primary caregiver contact with social services:	Person	Checkbox	1	O	CFR
KWelfare2	Primary caregiver on welfare/financial assistance:	Person	Checkbox	1	O	CFR
KWIC2	Victim/primary caregiver contact with WIC:	Person	Checkbox	1	O	CFR
KMedicaid2	Victim/primary caregiver contact with Medicaid:	Person	Checkbox	1	O	CFR

Response Options:

KLawVict2
 thru
 KMedicaid2
 0 No
 1 Yes

SUSPECT INFORMATION

Specific person suspected:	SusIdent
Suspect arrested as perp in this death:	SArrest
Suspect charged as perp in this death:	SusChg
Suspect prosecuted:	SusPros
Suspect convicted:	SConvict
Suspect convicted of original charge:	SOriginal
CPS report or referral ever filed on the suspect:	CPSRepFil
Suspect ever charged with a prior homicide:	SusPrHomi

Name	Definition
SusIdent	Law enforcement identified the suspect by name
SArrest	Suspect was arrested as a perpetrator in this death
SusChg	Suspect was charged as a perpetrator in this death
SusPros	Suspect was prosecuted as a perpetrator in this death
SConvict	Suspect was convicted as a perpetrator in this death
SOriginal	Suspect was convicted of original charge
CPSRepFil	Child Protective Service report had previously been filed on this suspect
SusPrHomi	Suspect had ever been charged with a prior homicide

Uses

Information regarding the legal ramifications for the suspects (i.e. arrests, charges, prosecution and convictions) will be helpful for evaluating law enforcement and criminal justice system response to violent deaths. Information about the suspects' past violent behavior will help highlight system issues and opportunities for improvement.

Discussion

Code "Yes" to SusIdent if a specific person was identified by law enforcement as a suspect. If law enforcement does not know the identity (i.e., name) of the suspect, or if they only have a physical description, code "No". When answering suspect arrested, suspect charged, suspect prosecuted, suspect convicted, and suspect convicted or original charge, consider whether the suspect was arrested, charged, prosecuted and/or convicted as a perpetrator in this death (i.e., not only charged with lesser offenses such as the possession of a firearm without a permit, or reckless endangerment). "CPS report or referral ever filed" refers to a prior Child Protective Services report filed on the suspect as a perpetrator of child abuse or neglect. "Suspect ever charged with a prior homicide" refers to charges of homicide perpetration prior to this victim, regardless of outcome.

Name	Label	Table	Type	Field Length	Priority	Primacy
SusIdent	Specific person suspected:	Person	Number	1	O	CFR
SArrest	Suspect arrested as perp in this death:	Person	Number	1	O	CFR
SusChg	Suspect charged as perp in this death:	Person	Number	1	O	CFR
SusPros	Suspect prosecuted:	Person	Number	1	O	CFR
SConvict	Suspect convicted:	Person	Number	1	O	CFR
SOriginal	Suspect convicted of original charge:	Person	Number	1	O	CFR
CPSRepFil	CPS report or referral ever filed on the suspect:	Person	Number	1	O	CFR
SusPrHomi	Suspect ever charged with a prior homicide:	Person	Number	1	O	CFR

Response Options:

- SusIdent
- and
- SArrest
 - 0 No
 - 1 Yes
 - 7 Not collected by local CFR team
 - 8 Not applicable
 - 9 Unknown
- SusChg
- and
- SusPros
 - 0 No
 - 1 Yes
 - 3 Pending/In progress
 - 7 Not collected by local CFR team
 - 8 Not applicable
 - 9 Unknown
- SConvict
 - 0 Acquitted
 - 1 Convicted
 - 3 Pending, in progress
 - 7 Not collected by local CFR team
 - 8 Not applicable
 - 9 Unknown

Person/CFR/Main Elements

SOriginal

- 0 No, convicted of lesser charge
- 1 Yes, convicted of original charge
- 7 Not collected by local CFR team
- 8 Not applicable
- 9 Unknown

CPSRepFil
and

SusPrHomi

- 0 No
- 1 Yes
- 7 Not collected by local CFR team
- 8 Not applicable
- 9 Unknown

HOUSEHOLD INFORMATION

Type of residence where victim lived:	KResType
Length of time in residence:	KResTime
Unrelated adult living in victim's household:	KAdultUn
Other children <18 yrs in household:	KKids

Name	Definition
KResType	Victim's type of primary residence
KResTime	Length of time in residence
KAdultUn	Unrelated adult living in victim's household?
KKids	Presence of other children under 18 living in the victim's household

Uses

The role of these data elements is to provide information about the type and stability of residence at the time of fatal incident. In addition, these variables will provide information about risk factors for child maltreatment in the home (such as having an unrelated adult living in the victim's home) and whether there were other children in the home.

Discussion

These questions are to be asked of all child victims. Primary residence is the place where the victim lived the majority of the time when the incident occurred (not at the time of death if the residences were different). For example, if a child is injured in their own family home and dies four months later in the hospital, answer questions regarding their own family home.

"Victim's family home" is defined as victim's self-identified family where applicable; this may be biologic parents, other relatives, adoptive or stepparents. "On own" indicates that the decedent was living separately from his/her family (e.g., living with boyfriend or peers). If the victim was known to be moving from place to place without a permanent residence (i.e., "on the run"), or if the victim was a newborn who was still in the hospital, code as "Not applicable" and describe in the incident narrative. For KResTime, code the approximate length of time that the victim had been living at the residence indicated in KResType. All time frames listed are with respect to the timing of the fatal incident. For example, if victim was known to have come back to live with family of origin after foster care stay and commits suicide within two weeks of returning, code "Within the past month." KAdultUn and KKids apply to children who lived with their own family, on their own, or with a foster family at the time of the fatal incident. An unrelated adult is defined as a person 18 years or older who was living in the household at the time of the incident, including primary caregivers (e.g., mother's boyfriend, stepmother, friend of family, tenant, nanny, etc.). Adoptive parents should not be considered unrelated. If the victim lived in an institution (e.g., shelter, school, juvenile detention facility) at the time of the fatal incident, mark "Not applicable." If there were circumstances in the decedent's

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household at the time of death that contributed to the child’s death, explain that separately in the incident narrative. For example, if a child is in a vegetative state secondary to shaken baby syndrome and dies of pneumonia three years later, answer KAdultUn and KKids regarding the household at the time of the shaking. However, if something about the quality of the child’s foster care at the time of death was also contributory to its death, note that in the incident narrative.

Name	Label	Table	Type	Field Length	Priority	Primacy
KResType	Type of residence where victim lived:	Person	Number	2	O	CFR
KResTime	Length of time in residence:	Person	Number	1	O	CFR
KAdultUn	Unrelated adult living in victim’s household:	Person	Number	1	O	CFR
KKids	Other children <18 yrs in household:	Person	Number	1	O	CFR

Response Options:

KResType

- 1 Victim’s family’s home
- 2 Foster family home
- 3 On own, e.g., living w boyfriend
- 4 Residential group home
- 5 Shelter
- 6 Juvenile detention facility, jail, prison
- 7 School/college
- 66 Other
- 77 Not collected by local CFR team
- 88 Not applicable (homeless or adult)
- 99 Unknown

KResTime

- 0 One week or less
- 1 Within the past month
- 2 Within the past 6 months
- 3 Between 6 months and 1 year
- 4 Between 1 to 5 years
- 5 More than 5 years
- 6 Other
- 7 Not collected by local CFR team
- 8 Not applicable
- 9 Unknown

KAdultUn and KKids

- 0 No
- 1 Yes
- 7 Not collected by local CFR team
- 8 Not applicable
- 9 Unknown

Marital relationship of victim’s biological parents: KMarital

Name	Definition
KMarital	Marital relationship of victim’s biological parents at the time of incident

Uses

Establish the marital relationship of victim’s biological parents to one another at the time of the fatal incident.

Discussion

Code the response option that best fits the marital relationship of the victim’s biological parents to one another at the time of the fatal incident. For example, if the victim’s biological mother and father were never married, but the biological father was married to another woman at the time of the fatal incident, KMarital should be coded as “Never married”.

Name	Label	Table	Type	Field Length	Priority	Primacy
KMarital	Marital relationship of victim’s biological parents:	Person	Number	1	O	CFR

Response Options:

- KMarital
- 1 Married
- 2 Never married
- 3 Widowed
- 4 Divorced
- 5 Married, but separated
- 6 Single, not otherwise specified
- 7 Not collected by local CFR team
- 8 Not applicable
- 9 Unknown

DOMESTIC VIOLENCE AND SUBSTANCE ABUSE

Intimate partner violence in victim’s household:	KDV
Substance abuse in victim’s household:	KSubs
Intimate partner violence in victim’s foster home:	KDVFos
Substance abuse in victim’s foster home:	KSubsFos

Name	Definition
KDV	Evidence of intimate partner violence in victim’s household
KSubs	Evidence of substance abuse in victim’s household
KDVFos	Evidence of intimate partner violence in victim’s foster family (if applicable)
KSubsFos	Evidence of substance abuse in victim’s foster family (if applicable)

Uses

These variables elucidate the child’s exposure to violence and substance abuse (including alcohol, prescription and recreational drugs) in the home.

Discussion

Domestic violence refers to intimate partner violence. Substance abuse refers to all drugs (including alcohol) that are either non-prescription or being used in a manner inconsistent with safe prescribing practices. KDV and KSubs are to be asked about all children regarding their household at the time of the fatal incident. For children who lived with their families or who were institutionalized (either temporarily or permanently) answer the questions regarding the family of origin. For permanently institutionalized children with no family to return to, the answer will be “Not applicable”. For children in foster care at the time of the fatal incident, answer the questions regarding both the foster home (KDVFos and KSubsFos) and the family of origin (KDV and KSubs). In any kind of household, if the victim was a substance abuser, but no one else in the household was, code “No” to KSubs and/or KSubsFos. However, if anyone else in the household was abusing substances, including other children <18, code “Yes” for KSubs and/or KSubsFos. If there were circumstances in the decedent’s household at the time of death that contributed to the child’s death, explain that separately in the incident narrative. For example, if a child is in a vegetative state secondary to shaken baby syndrome and dies of pneumonia three years later, answer the following household questions regarding the time of the shaking. However, if something about the quality of the child’s foster care at the time of death was also contributory to death, note that in the incident narrative.

Name	Label	Table	Type	Field Length	Priority	Primacy
KDV	Intimate partner violence in victim's household:	Person	Number	1	O	CFR
KSubs	Substance abuse in victim's household:	Person	Number	1	O	CFR
KDVFos	Intimate partner violence in victim's foster home:	Person	Number	1	O	CFR
KSubsFos	Substance abuse in victim's foster home:	Person	Number	1	O	CFR

Response Options:

- KDV
- thru
- KSubsFos
- 0 No
- 1 Yes
- 7 Not collected by local CFR team
- 8 Not applicable
- 9 Unknown

SUPERVISION

Perpetrator was supervisor:	KSupPerp
Quality of supervision a factor:	KSuperv
Supervisor’s relationship to victim:	KSupRel
Supervisor’s age:	KSupAge
Supervisor’s sex:	KSupSex
No supervision:	KSupNo
Supervisor drug/alcohol-impaired:	KSupDrug
Supervisor distracted or asleep:	KSupBusy
Other supervisory factor:	KSupOther

Name	Definition
KSupPerp	Perpetrator responsible for supervision at time of incident?
KSuperv	Did the quality of supervision contribute to the death of the victim?
KSupRel	Relationship of supervisor to the victim
KSupAge	Age of supervisor
KSupSex	Sex of supervisor
KSupNo	No supervision of the victim
KSupDrug	The supervisor was drug- or alcohol-impaired
KSupBusy	The supervisor was distracted or asleep
KSupOther	Other supervisory factor contributed to victim’s death

Uses

Inadequate supervision can increase the likelihood of unintentional firearm injuries, suicide, and homicide. This association is especially true for younger children. Information gathered from this group of variables will help describe the inadequacy *only when* it played a role in the victim’s violent injury, thereby informing prevention efforts.

Discussion

If the perpetrator/suspect was responsible for the victim’s direct supervision at the time of the incident (i.e., in the case of a homicide), then code KSupPerp “Yes” and code the rest of the supervision variables as “Not applicable”. Likewise, if the quality of the supervision did *not* contribute to the child’s death (as determined by the CFRT, see Page 13-21) or it is unknown, code “No” or “Unknown” and the remainder of the supervisor variables as “Not applicable”.

The supervisor is the person with the primary responsibility for the care and control of the child at the time of the fatal injury. If there were two supervisors at the time of the fatal incident, but one clearly had primary responsibility, code the person with the primary responsibility. If the responsibility of supervision was equally divided between two people, code the person who's supervision quality seemed most contributory to the child's death.

Determining supervision adequacy is purposefully left to the Child Fatality Review Team (CFRT) by this group of data elements. "Quality of supervision" refers specifically to the quality of supervision at the time the fatal injury occurred, not to parenting style in general. "No supervision present" should be indicated if no arrangements for supervision were apparently made (e.g., leaving a 3 year old unattended for half an hour). If an inappropriately young or old supervisor was appointed, specify the circumstances under "Other". Any additional exceptional circumstances may be coded by endorsing KSupOther and including a description in the CFR incident narrative. All of the variables are based on the CFRT's findings, even though the information to support the CFRT's findings may well originate from multiple sources.

Name	Label	Table	Type	Field Length	Priority	Primacy
KSupPerp	Perpetrator was supervisor:	Person	Number	1	O	CFR
KSuperv	Quality of supervision a factor:	Person	Number	1	O	CFR
KSupRel	Supervisor's relationship to victim:	Person	Number	1	O	CFR
KSupAge	Supervisor's age:	Person	Number	3	O	CFR
KSupSex	Supervisor's sex:	Person	Number	1	O	CFR
KSupNo	No supervision:	Person	Checkbox	1	O	CFR
KSupDrug	Supervisor drug/alcohol-impaired:	Person	Checkbox	1	O	CFR
KSupBusy	Supervisor distracted or asleep:	Person	Checkbox	1	O	CFR
KSupOther	Other supervisory factor:	Person	Checkbox	1	O	CFR

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Response Options:

KSupPerp

- 0 No
- 1 Yes
- 7 Not collected by local CFR team
- 8 Not applicable
- 9 Unknown

KSuperv

- 0 No, supervision was appropriate
- 1 Yes, supervisor was not the perpetrator
- 2 Yes, supervisor was the perpetrator
- 3 Supervision not needed/expected
- 4 CFRT could not determine
- 7 No collected by local CFR team
- 8 Not applicable
- 9 Unknown

KSupRel

- 1 Primary caregiver
- 2 Other adult relative
- 3 Babysitter/child care provider
- 4 Primary caregiver's boy/girlfriend
- 5 Sibling/step-sibling
- 6 Other, specify in incident narrative
- 7 Not collected by local CFR team
- 8 Not applicable
- 9 Unknown

KSupAge

- 777 Not collected by local CFR team
- 888 Not applicable
- 999 Unknown

KSupSex

- 1 Male
- 2 Female
- 7 Not collected by local CFR team
- 8 Not applicable
- 9 Unknown

KSupNo

thru

KSupOther

- 0 No, Not collected by local CFR team, Unknown
- 1 Yes

**PARENT/CAREGIVER 1
PARENT/CAREGIVER 2**

Primary caregiver is a victim or suspect in the incident:	GPerson1/GPerson2
If yes, caregiver's ID in the incident:	GPersID1/GPersID2
Relationship to victim:	GRel1/GRel2
Person lived with victim:	GCohabit1/GCohabit2
Age at time of incident:	GAge1/GAge2
Sex:	GSex1/GSex2
Had legal custody of victim at time of death	GCustody1/GCustody2
Had documented history of maltreating:	GCAN1/GCAN2
Had a previous child die in his/her care:	GDeath1/GDeath2

Name	Definition
GPerson1 GPerson2	Is the victim's primary caregiver a victim or suspect in the incident?
GPersID1 GPersID2	Caregiver's Person ID in the incident
GRel1 GRel2	Caregiver's relationship to the victim
GCohabit1 GCohabit2	Caregiver lived with victim at the time of the incident?
GAge1 GAge2	Age of Caregiver at the time of the incident
GSex1 GSex2	Sex of Caregiver
GCustody1 GCustody2	Caregiver had legal custody of the victim at time of death
GCAN1 GCAN2	Caregiver had documented history of maltreating a child
GDeath1 GDeath2	Caregiver had a previous child die in his/her care

Uses

Information (including relationship, age, gender, and legal custody status) regarding the victim's parents or other primary caregiver(s) may provide insight into potential risk factors for violent death among children.

Discussion

The victim's primary caregiver is defined as the person or persons (up to two) who had responsibility for the care, custody, and control of the child the majority of the time. The primary caregiver(s) may be the child's parent or parents (biological, step, adoptive parents) or another relative. If the child was living with his/her biological or adoptive parents, assume that they were the primary caregivers and had legal custody of the decedent unless otherwise specified in the records. The primary caregiver(s) may also be the state child protective services agency/foster parent(s) or another institution in some cases. In the instances when the child is residing in foster care or an institution, complete this information for the primary caregiver(s) in the family of origin if known (not for the foster family or institutional caregivers). In the case of neonaticide, assume that the biological mother was the primary caregiver unless there is evidence that another person (e.g., father, grandmother) had assumed control of the child as a caregiver at the time of the incident. If the primary caregiver(s) at the time of death was different from the primary caregiver(s) at the time of the incident, answer regarding the primary caregiver(s) at the time of the incident. For example, if a baby is shaken by its biological mother as an infant and survives in a vegetative state in foster care until three years of age, code the biological mother. "Documented history of child maltreatment" indicates a substantiated CPS report/referral or rights termination.

Name	Label	Table	Type	Field Length	Priority	Primacy
GPerson1 GPerson2	Primary caregiver is a victim or suspect in the incident:	Person	Number	1	O	CFR
GPersID1 GPersID2	If yes, caregiver's ID in the incident:	Person	Number	5	O	CFR
GRel1 GRel2	Relationship to victim:	Person	Number	1	O	CFR
GCohabit1 GCohabit2	Person lived with victim:	Person	Number	1	O	CFR
GAge1 GAge2	Age at time of incident:	Person	Number	3	O	CFR
GSex1 GSex2	Sex:	Person	Number	1	O	CFR
GCustody1 GCustody2	Had legal custody of victim at time of death:	Person	Number	1	O	CFR
GCAN1 GCAN2	Had documented history of maltreating:	Person	Number	1	O	CFR
GDeath1 GDeath2	Had a previous child die in his/her care:	Person	Number	1	O	CFR

Response Options:

GPerson1 and

GPerson2

- 0 No
- 1 Yes
- 7 Not collected by local CFR team
- 8 Not applicable
- 9 Unknown

GPersID1 and

GPersID2

None

GRel1 and

GRel2

- 1 Biologic parent
- 2 Stepparent
- 3 Adoptive parent
- 4 Other relative
- 5 Parent's intimate partner
- 6 Other non-relative

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7	Not collected by local CFR team
8	Not applicable
9	Unknown
GCohabit1 and GCohabit2	
0	No
1	Yes
7	Not collected by local CFR team
8	Not applicable
9	Unknown
GAge1 and CAge2	
	None
GSex1 and GSex2	
1	Male
2	Female
9	Unknown
GCustody1 and GCustody2	
0	No
1	Yes
7	Not collected by local CFR team
8	Not applicable
9	Unknown
GCAN1 and GCAN2	
0	No
1	Yes
7	Not collected by local CFR team
8	Not applicable
9	Unknown
GDeath1 and GDeath2	
0	No
1	Yes
7	Not collected by local CFR team
8	Not applicable
9	Unknown

COMMITTEE RECORDS

C/ME records:	KRecME
SS/CPS records:	KRecCPS
Police/Law Enforcement records:	KRecLaw
School records:	KRecEdu
EMS records:	KRecEMS
Health Provider/Hospital records:	KRecMD
Public Health Department records:	KRecDOH
Mental Health Records:	KRecPsy
Juvenile Justice records:	KRecJuv
Death Certificate:	KRecDC
Other records:	KRecOth
Specify (what other records):	KRecTxt

Name	Definition
KRecME	Coroner/Medical Examiner records were consulted in the CFRT review of victim's death
KRecCPS	Social service/CPS records were consulted in the CFRT review of victim's death
KRecLaw	Police records were consulted in the CFRT review of victim's death
KRecEdu	School records were consulted in the CFRT review of victim's death
KRecEMS	EMS records were consulted in the CFRT review of victim's death
KRecMD	Health records were consulted in the CFRT review of victim's death
KRecDOH	Public health department records were consulted in the CFRT review of victim's death
KRecPsy	Mental health records were consulted in the CFRT review of victim's death
KRecJuv	Juvenile Justice records were consulted in the CFRT review of victim's death
KRecDC	Death certificate records were consulted in the CFRT review of victim's death
KRecOth	Other records were consulted in the CFRT review of victim's death
KRecTxt	Free text field to note other records consulted in the CFRT review of victim's death

Uses

Information about the primary data sources consulted during the review of the victim’s death indicates its comprehensiveness. It will also verify the primary data sources consulted to arrive at decisions regarding adequacy of supervision and preventability.

Discussion

The primary data sources used to review a child death vary from CFR program to program and often from death to death. Code the data source as “Yes” if the records were consulted about the death, even if the given agency ended up having no information about the victim. Do not code a source as “Yes” if the only information gathered was secondary (e.g., the DSS records indicate that law enforcement performed an investigation, but the actual law enforcement records were not consulted).

Name	Label	Table	Type	Field Length	Priority	Primacy
KRecME	C/ME records:	Person	Checkbox	1	O	CFR
KRecCPS	SS/CPS records:	Person	Checkbox	1	O	CFR
KRecLaw	Police/Law Enforcement records:	Person	Checkbox	1	O	CFR
KRecEdu	School records:	Person	Checkbox	1	O	CFR
KRecEMS	EMS records:	Person	Checkbox	1	O	CFR
KRecMD	Health Provider/Hospital records:	Person	Checkbox	1	O	CFR
KRecDOH	Public Health Department records:	Person	Checkbox	1	O	CFR
KRecPsy	Mental Health records:	Person	Checkbox	1	O	CFR
KRecJuv	Juvenile Justice records:	Person	Checkbox	1	O	CFR
KRecDC	Death Certificate:	Person	Checkbox	1	O	CFR
KRecOth	Other records:	Person	Checkbox	1	O	CFR
KRecTxt	Specify (what other records):	Person	Text	50	O	CFR

Response Options:

KRecME
 thru
 KRecOth
 0 No, Not collected by local CFR team, Unknown
 1 Yes
 KRecTxt
 None

COMMITTEE DECISIONS

CFR conclusion matches Death Certificate:	KConclud
If no, manner the CFR designation:	KManner
Text to specify other manner:	KMannTxt
Action taken to change the official manner:	KAction
Result of action:	KResult
CFR determination of preventability:	KPrevent

Name	Definition
KConclud	Did the CFR designation of the child’s manner of death match the death certificate manner?
KManner	Manner of death designated by the CFR
KMannTxt	Text field for CFR manner of death if “other”
KAction	If not, was action taken by the CFR to change the manner of death?
KResult	Result of action taken by the CFR to change the manner of death
KPrevent	CFR conclusions regarding the preventability of the death

Uses

CFRT review results can be inconsistent with the death certificate. The information gathered from these variables will help estimate the frequency and nature of, and response to such inconsistency. Many CFRTs assess the preventability of a given child death as a way of conceptualizing interventions that are likely to prevent a similar death in the future. While CFRTs may use differing definitions of preventability, it will be helpful to get a thumbnail sketch of the relative frequency of potentially preventable child violent deaths.

Discussion

The CFRT’s conclusions are being compared with the officially-designated manner of death as *originally* specified on the death certificate (or, if the death certificate was unavailable to the committee at the time of their review, the coroner/medical examiner report). Code KConclud as “Yes” if the CFRT’s manner of death matched the manner of death originally designated on the death certificate. Code KConclud as “No” if the CFRT determined that the manner of death was something other than that assigned in the death certificate data. Supply the manner chosen by the CFRT in KManner. “Could not be determined” under KManner refers to the affirmative designation of undetermined as the CFRT’s manner of death. “Unknown” is to be used if the information is not available at the time of data entry. Please use the text box to explain coding “Other” for KManner. KAction and KResult will be enabled only if KConclud is coded as “No.”

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Some CFRTs designate the degree to which a child’s death was preventable (e.g., “definitely preventable”, “probably preventable”, “probably not preventable”, etc.). Respondents should collapse the levels they use to answer the question as “Probably not preventable,” “Possibly preventable” or “Unable to determine”. If the teams indicate any possibility of prevention then code “Possibly preventable.” “Unable to determine preventability” is an affirmative designation (i.e. it is specifically noted on the CFRT form) otherwise, code “Unknown”.

Name	Label	Table	Type	Field Length	Priority	Primacy
KConclud	CFR conclusion matches Death Certificate:	Person	Number	1	O	CFR
KManner	If no, manner the CFR designated:	Person	Number	2	O	CFR
KMannTxt	Text to specify other manner:	Person	Text	30	O	CFR
KAction	Action taken to change the official manner:	Person	Number	1	O	CFR
KResult	Result of action:	Person	Number	1	O	CFR
KPrevent	CFR determination of preventability:	Person	Number	1	O	CFR

Response Options:

- KConclud
 - 0 No
 - 1 Yes
 - 7 Not collected/CFR team does not make this comparison
 - 8 Not applicable
 - 9 Unknown
- KManner
 - 1 Natural
 - 2 Accident
 - 3 Suicide
 - 4 Homicide
 - 5 Pending investigation
 - 6 Could not be determined
 - 66 Other
 - 77 Not collected/CFR team does not designate manner
 - 88 Not applicable
 - 99 Unknown
- KMannTxt
 - None

KAction	
0	No
1	Yes
7	Not collected/CFR team does not make this comparison
8	Not applicable
9	Unknown
KResult	
0	No change
1	Manner changed to agree with CFRT
3	Pending
6	Other
7	Not collected by local CFR team
8	Not applicable
9	Unknown
KPrevent	
0	Probably not preventable
1	Possibly preventable
2	Unable to determine preventability
7	Not collected/CFR team does not determine preventability
8	Not applicable
9	Unknown

CIRCUMSTANCES (CFR)

History of inpatient psychiatric treatment: HstPsyTr
Taking psychiatric medication at time of death: PsyMed
Barriers to accessing mental health care: BarAcsTr

Name	Definition
HstPsyTr	Victim has ever been treated as an inpatient for psychiatric problems
PsyMed	Victim had a current prescription for a psychiatric medication at the time of the incident
BarAcsTr	Victim experienced barriers to accessing mental health care (applicable only to victims coded as having a mental health problem and not being in treatment)

Uses

These variables will provide more in depth information about mental health treatment for children who commit suicide than is currently collected by the main reporting system for adult victims. HstPsyTr can be used as an indicator of the severity of the mental health disorder, and PsyMed, when used in conjunction with toxicology results, may be useful for identifying patients in current treatment who were not in compliance. BarAcsTr will be helpful for identifying potential problems in accessing mental health care.

Discussion

These variables supplement the basic Suicide Circumstances related to mental health. Indicate that the child received inpatient psychiatric care if there is a documented history of inpatient psychiatric treatment ever, not just at the time of death. This includes an overnight or longer stay at a psychiatric hospital or institution, psychiatric halfway house, or psych unit within an acute care hospital. PsyMed refers to whether the patient had an active prescription for psychiatric medication at the time of death. They need not have actually been taking the medication. When available, toxicology results will help assess whether the decedent was taking the medication prescribed.

If a child victim was noted as having a mental health problem and as not being in mental health treatment, the BarPsyTr variable will document whether any evidence in the record indicates that the victim encountered barriers in accessing mental health treatment. Code “Yes” if there were specific obstacles or if it was known that treatment was either recommended by a health professional and/or identified by the family yet care was not received. Examples of specific obstacles include lack of insurance coverage, transportation problems, or long waiting lists. Another example would be parental awareness of their child’s suicidal ideation, but inability to establish care because of immigration status. Please describe the nature of the barrier in the Incident Narrative.

Name	Label	Table	Type	Field Length	Priority	Primacy
HstPsyTr	History of inpatient psychiatric treatment:	Person	Checkbox	1	O	CFR
PsyMed	Taking psychiatric medication at time of death:	Person	Checkbox	1	O	CFR
BarAcTr	Barriers to accessing mental health care:	Person	Checkbox	1	O	CFR

Response Options:

HstPsyTr

thru

BarAcTr

0 No

1 Yes

Section 14

VICTIM SUSPECT RELATIONSHIP

Coroner/Medical Examiner and Police Report

Victim to suspect relation 1: Rela1 14-3

Victim to suspect relation 2: Rela2

Caretaker of victim: CareTk 14-5

History of abuse: Abuse

Supplementary Homicide Report

Victim to suspect relationship: SRelat 14-6

Victim to Suspect relation 1: Rela1
Victim to Suspect relation 2: Rela2

Name	Definition
Rela1	Description of relationship of the victim to the suspect
Rela2	Description of second relationship of the victim to the suspect

Uses

Data describing the relationship between the victim and the suspect are useful for developing and evaluating prevention programs and for characterizing various forms of family and intimate violence.

Discussion

This variable will be assigned by the abstractor for each victim-suspect (V-S) pair in an incident based on review of the CME report. The NVDRS software automatically “populates” the V-S Relation Table with victim-suspect pairs. Each person with a PType of 1 or 3 (“Victim” or “both”) is paired with each person with a PType of 2 or 3 (“Suspect” or “both”). In complex incidents (which will be relatively rare), there will be times when a suspect in an incident is not a suspect for a particular victim. For example, if a young man stabs a bartender and is then shot himself by a police officer, there are two victims in the incident (the bartender and the young man) and two suspects (the young man and the police officer). Code the relationship between the bartender and the police officer as 88 (Not applicable) since the police officer wasn’t a suspect in the first killing. Up to two codes can be selected for each victim-suspect pair. Use the second variable for cases such as when a victim is both a schoolmate and a rival gang member.

Use the following sentence as a guide for selecting the appropriate description of the relationship: the victim is the _____ of the suspect. For example, when a parent kills a child, the relationship is “Child” not “Parent.” (“The victim is the child of the suspect.”) Homosexual relationships should be coded in the same way as heterosexual relationships (e.g., “Girlfriend” or “Boyfriend”). The homosexual or heterosexual nature of the relationship will be inferred by the sex of the victim and suspect.

For this data element, an acquaintance is someone with or about whom the victim has had some prior interaction or knowledge. A stranger is someone with whom the victim has had no prior interaction before the event that culminated in the violent injury. For example, code the following scenario as “Stranger”: two individuals who do not know each other play pool together, argue, then one stabs the other.

When more than one offender is working in concert in an incident (as in a drive-by shooter and his or her driver), code the victim’s relationship to each offender. Do not use 88s in this situation to identify the offender who did not actually fire the weapon because all offenders working in concert are considered offenders on the Supplementary Homicide Report and in police reports. If the nature of the relationship is unknown, code “Rela1” as 99. If all relevant information regarding the relationship is captured in “Rela1”, then code “Rela2” as 88 for: “All relevant information about relationship is already provided in Relation 1 “Not applicable.”

Name	Label	Table	Type	Field Length	Priority	Primacy
Rela1	Victim to Suspect Relation 1:	SV_Relation	Number	2	LR/LR	PR/CME
Rela2	Victim to Suspect Relation 2:	SV_Relation	Number	2	LR/LR	PR/CME

Response Options:

Rela1
and
Rela2

- 1 Spouse
- 2 Ex-spouse
- 3 Girlfriend or boyfriend
- 7 Ex-girlfriend or ex-boyfriend
- 8 Girlfriend or boyfriend, unspecified whether current or ex
- 10 Parent
- 11 Child
- 12 Sibling
- 13 Grandchild
- 14 Grandparent
- 15 In-law
- 16 Stepparent
- 17 Stepchild
- 18 Child of suspect's boyfriend/girlfriend
(e.g., child killed by mom's boyfriend)
- 19 Intimate partner of suspect's parent
(e.g., teenager kills his mother's boyfriend)
- 20 Foster child
- 21 Foster parent
- 29 Other family member (e.g., cousin, uncle, etc.)
- 30 Babysitter (e.g., child killed by babysitter)
- 31 Acquaintance
- 32 Friend
- 33 Roommate (not intimate partner)
- 34 Schoolmate
- 35 Current or former work relationship
(e.g., co-worker, employee, employer)
- 36 Rival gang member
- 44 Other person, known to victim
- 45 Stranger
- 50 Victim was injured by law enforcement officer
- 51 Victim was law enforcement officer injured in the line of duty
- 88 Suspect is not a suspect for this victim
- 99 Relationship unknown

Data Standards or Guidelines

NVISS

Caretaker of victim: CareTk
History of abuse: Abuse

Name	Definition
CareTk	Was this suspect a caretaker of this victim
Abuse	History of abuse

Uses

These variables will help identify deaths resulting from intimate partner abuse, child abuse, elder abuse, and other forms of caretaker violence.

Discussion

CareTk: After indicating the relationship for each victim-suspect pair (Rela1 from previous page), determine whether the offender was a caretaker for the victim. Examples of caretakers include a parent who kills their child, a babysitter who kills his or her charge, a nursing home attendant who kills a patient, and an adult who kills a dependent elderly parent. This variable is included because some definitions of child abuse and elder abuse are based solely on whether the offender was the victim's caretaker.

Abuse: For each victim-suspect pair in which (1) the offender was a caretaker of the victim or (2) the offender was a current or ex-intimate partner, indicate whether the data sources document a history (or suspected history) of abuse of this victim by the suspect. The evidence of ongoing abuse may be suspected but not confirmed. For example, if the CME report states: "Husband shot wife after learning that she was having an affair. No history of previous police visits to the residence or restraining orders; neighbors indicate no previous problems," code Abuse as "No" to indicate that there is no evidence in the record of ongoing abuse. If the CME report states: "Stepparent killed child during an altercation. Family investigated by Child Protective Services last year," code Abuse as "Yes". Autopsy evidence reported as an indication of previous abuse is enough to endorse the Abuse variable.

Name	Label	Table	Type	Field Length	Priority	Primacy
CareTk	Caretaker of victim:	SV_Relation	Checkbox	1	LR/LR	CME/PR
Abuse	History of abuse:	SV_Relation	Checkbox	1	O/O	CME/PR

Response Options:

CareTk
and
Abuse

0 No, Not Collected, Not Available, Unknown
1 Yes

Data Standards or Guidelines

NVISS

Victim to suspect relationship: SRelat

Name	Definition
SRelat	Social relationship of victim to suspect reported in SHR

Uses

Data describing the relationship between the victim and the person who caused the injury are useful for developing and evaluating prevention programs and for characterizing various forms of family and intimate partner violence.

Discussion

“SRelat” should capture the victim-suspect relationship exactly as it appears in the Supplementary Homicide Report (SHR). Codes should be entered exactly as they appear in the source database, even if the abstractor believes an individual code was chosen in error. If your state uses any codes for relationship that do not appear in the standard FBI code list below, find out from your state UCR office how it will be mapped to the standard national codes, and enter that code. If the SHR is not available, code the case as 88 (Not applicable). The SHR also captures the link between each victim and suspect in an incident. That information can be recorded here. It may be useful if the SHR is the only source of such information for an incident. For homicides with more than one victim or suspect recorded on the SHR, the victim-suspect relationship is frequently inaccurate. Law enforcement may list the relationship between the first victim and the first suspect as the relationship with all subsequent victims or suspects. States should check to see whether each relationship is accurately coded in their state. They may prefer to use this information when there is only one victim and one suspect.

Name	Label	Table	Type	Field Length	Priority	Primacy
SRelat	Victim to suspect relationship:	SV_Relation	Number	2	O	SHR

Response Options:

SRelat

- 1 Husband
- 2 Wife
- 3 Common-law husband
- 4 Common-law wife
- 5 Mother
- 6 Father
- 7 Son
- 8 Daughter
- 9 Brother
- 10 Sister
- 11 In-law
- 12 Stepfather
- 13 Stepmother

14	Stepson
15	Stepdaughter
16	Other Family
17	Neighbor
18	Acquaintance
19	Boyfriend
20	Girlfriend
21	Ex-husband
22	Ex-wife
23	Employee
24	Employer
25	Friend
26	Homosexual Relationship
27	Other – Known to Victim
28	Stranger
88	Not applicable
99	Relationship Unknown

Data Standards or Guidelines

FBI Uniform Crime Reporting Program, Supplementary Homicide Report

Section 15

ABTRACTOR (WEAPON TYPE)

Weapon type:	Wtype	15-3
Other weapon information:	OthWeap	

Weapon type: WType
Other weapon information: OthWeap

Name	Definition
WType	Type of weapon or means used to inflict the injury
OthWeap	Text field to indicate the weapon type if WType is coded as "Other"

Uses

Abstractors should use this field to decide the appropriate weapon type. The field exists because records about the incident may not agree about the weapon type used yet a weapon type must be selected to activate the appropriate weapon fields in the application.

Discussion

Weapon type reports the broad category of weapon(s) used to inflict the injury. "Sharp instrument" refers not only to knives, but also to razors, machetes, or pointed instruments (e.g., chisel, broken glass). "Blunt instrument" refers to clubs, bats, etc. "Personal weapons" include fists, feet, hands. "Fall" covers both being pushed (as in a homicide) or jumping (as in a suicide). When faced with choosing multiple possible force weapon types, e.g., a person who drives their car off a bridge, falls to the river below, and dies by drowning, pick the weapon that exerted the most force to the body or deprived it of essentials such as oxygen. In this example, the only weapon would be drowning because the motor vehicle and the fall did not exert the most force to the body. In contrast, when a person deliberately drives their car into an abutment, the only weapon is motor vehicle.

Name	Label	Table	Type	Field Length	Priority	Primacy
WType	Weapon type:	Weapon	Number	2	ER	SYS
OthWeap	Other weapon information:	Weapon	Text	100	O	SYS

Response Options:

WType

- 1 Firearm
- 5 Non-powder gun
- 6 Sharp instrument
- 7 Blunt instrument
- 8 Poisoning
- 9 Hanging, strangulation, suffocation
- 10 Personal weapons
- 11 Fall
- 12 Explosive
- 13 Drowning
- 14 Fire or burns
- 15 Shaking, (e.g., shaken baby syndrome)

Weapon/Abstractor

- 16 Motor Vehicle, including buses, motorcycles
- 17 Other transport vehicle, (e.g., trains, planes, boats)
- 18 Intentional neglect, (e.g., starving a baby)
- 19 Biological weapons
- 66 Other
- 99 Unknown

OthWeap

Data Standards or Guidelines

NVISS

Section 16

WEAPON

Firearm information known: FKnown	16-3
EVIDENCE RECOVERED	16-4
Firearm type: FType	16-5
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Make or NCIC code: Make	16-7
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YOUTH ACCESS	16-14
TYPE OF POISON	16-16
SOURCE OF POISON	16-31
WEAPON (Police Report)	16-33
Firearm trace attempted: Trace	16-34
WEAPON (Crime Laboratory)	16-35

Firearm information known: FKnown

Name	Definition
FKnown	Indicates available information about the physical characteristics of the gun

Uses

This variable is used as a stem question to flag incidents in which no gun information is available. If no information is available, the remaining firearm variables will be Unknown or Not applicable as appropriate.

Discussion

If a death investigator within the agency has viewed or examined the gun itself or a bullet, or spent casing from the gun and has additional information about the weapon, answer "Yes". If the only additional information available about the gun is based on a statement from a witness (e.g., a bystander who witnessed a homicide told police they thought the gun looked like a revolver), do not answer "Yes". The additional information must be based on a death investigator viewing physical evidence.

Name	Label	Table	Type	Field Length	Priority	Primacy
FKnown	Firearm information known:	Weapon	Checkbox	1	O/LR/LR	LAB/CME/PR

Response Options:

FKnown	0	No, Not Collected, Not Available, Unknown
	1	Yes

Data Standards or Guidelines

NVISS

EVIDENCE RECOVERED

Gun recovered: **GunRec**
Bullet recovered: **Bullet**
Casing recovered: **CaseRem**

Name	Definition
GunRec	Firearm has been viewed, examined, or logged into evidence by investigator
Bullet	Bullet has been viewed, examined, or logged into evidence by investigator
CaseRem	Cartridge has been viewed, examined, or logged into evidence by investigator

Uses

Data on the type of firearm physical evidence (bullets vs. cartridges) can be useful in assessing the degree of confidence one can put in the information gathered about firearm characteristics.

Discussion

“Recovered” evidence is that which an investigator within the agency has either viewed, examined, or logged as evidence. The examiner need not have physical custody of the evidence (e.g., code “GunRec” as “Yes” if, for example, a coroner’s deputy viewed a suicide gun at the death scene but left the gun with the family). Bullets count as evidence if they were retrieved from the victim or the crime scene and were clearly used during the incident (e.g., a bullet lodged in the wall behind a victim with a through-and-through wound). Pellets retrieved from a shotgun wound count as a recovered bullet. Consider only spent casings that are believed to be from the injury gun as recovered casings. A bullet recovered from a body upon autopsy and described as an “artifact” bullet is one that was retained in the body from a previous shooting. If this is the only bullet recovered, this variable should be coded “No”.

Name	Label	Table	Type	Field Length	Priority	Primacy
GunRec	Gun recovered:	Weapon	Checkbox	1	O/O/O	LAB/CME/PR
Bullet	Bullet recovered:	Weapon	Checkbox	1	O/O/O	LAB/CME/PR
CaseRem	Casing recovered:	Weapon	Checkbox	1	O/O/O	LAB/CME/PR

Response Options:

GunRec
 thru
 CaseRem
 0 No, Not Collected, Not Available, Unknown
 1 Yes

Firearm type: FType
Other firearm type text: TyTxt

Name	Definition
FType	Specific type of firearm used to inflict injury
TyTxt	Free text field to indicate type of firearm if FType is coded as "Other"

Uses

Data on firearm type are used to describe the injury-producing event and to document the extent to which handguns, long guns, and automatic weapons are involved in gun deaths.

Discussion

The Firearm Type code list is the standard used by the National Crime Information Center. It is very detailed, and many abstractors will not have the technical expertise to know, for example, whether a shotgun is a pump action or bolt action based on reading the gun's make and model. In such cases, use the "Unknown" option.

Name	Label	Table	Type	Field Length	Priority	Primacy
FType	Firearm type:	Weapon	Number	2	O/LR/LR	LAB/CME/PR
TyTxt	Other firearm type text:	Weapon	Text	30	O/O/O	LAB/CME/PR

Response Options:

FType

- 1 Submachine Gun
- 2 Handgun, Unknown Type
- 3 Handgun, Pistol- Bolt Action
- 4 Handgun, Pistol- Derringer
- 5 Handgun, Pistol- Single Shot
- 6 Handgun, Pistol- Semi-automatic
- 7 Handgun, Revolver
- 8 Rifle, Unknown Type
- 9 Rifle, Automatic
- 10 Rifle, Bolt Action
- 11 Rifle, Lever Action
- 12 Rifle, Pump Action
- 13 Rifle, Semi-automatic
- 14 Rifle, Single Shot
- 15 Rifle-Shotgun Combination
- 16 Shotgun, Unknown Type
- 17 Shotgun, Automatic
- 18 Shotgun, Bolt Action
- 19 Shotgun, Double Barrel (Over/Under, Side by Side)

Weapon/CME

20	Shotgun, Pump Action
21	Shotgun, Semi-automatic
22	Shotgun, Single Shot
23	Long gun, Unknown type
66	Other (e.g., handmade gun)
99	Unknown

TyTxt

Data Standards or Guidelines

National Crime Information Center coding system

Make or NCIC code: Make
Other firearm make text: MkTxt

Name	Definition
Make	Manufacturer of the firearm used to inflict the injury
MkTxt	Text field to indicate manufacturer of the firearm if “Make” is coded as “Other”

Uses

Data on the make of the firearm are used to identify the manufacturers of firearms used in fatalities.

Discussion

This data element uses 3-character manufacturer codes developed by the National Crime Information Center (NCIC) of the Federal Bureau of Investigation. A code list covering make and model is supplied in a separate document in the software’s Help utility, and is also available at www.vendata.com. The NVDRS software includes a list for the NCIC make codes. If a manufacturer does not appear in the code list, enter the manufacturer in “MkTxt”. Use “Unknown” when make is unknown.

Name	Label	Table	Type	Field Length	Priority	Primacy
Make	Make or NCIC code:	Weapon	Text	3	O/LR/LR	LAB/CME/PR
MkTxt	Other firearm make text:	Weapon	Text	40	O/O/O	LAB/CME/PR

Response Options:

Make

666 Other make of firearm
888 Not applicable
999 Unknown

MkTxt

666 Other make of firearm
888 Not applicable
999 Unknown

Data Standards or Guidelines

National Crime Information Center Code Manual. 7th Edition, December 1998. Vendata Inc., info@vendata.com.

Firearm model: Model
Firearm model text: MoTxt

Name	Definition
Model	Model of the firearm that was used to inflict the injury
MoTxt	Free text field to indicate model of the firearm if Model was coded as "Other"

Uses

Data on the model of the firearm are used to identify the models used in gun deaths. Because pieces of legislation in various jurisdictions have outlawed the production, sale, and importation of particular classes of guns (e.g., so-called "assault" weapons or "junk guns") by features of the gun or by listing particular models, this variable can help to identify models affected by legislation.

Discussion

These data elements are coded using a list of models (sorted by manufacturer) included in the software's Help utility. A combination of make and model must be used to uniquely identify the model. Some models are made by more than one manufacturer. If a specific model is not known, choose Unknown. Capitalize all text, avoid using dashes and decimals, and omit spaces. Completely spell out the models name; do not use abbreviations. Use "Unknown" when model is unknown.

Name	Label	Table	Type	Field Length	Priority	Primacy
Model	Firearm model:	Weapon	Text	40	O/LR/LR	LAB/CME/PR
MoTxt	Firearm model text:	Weapon	Text	40	O/O/O	LAB/CME/PR

Response Options:

Model

- 66666 Other model of firearm
- 88888 Not applicable
- 99999 Unknown

MoTxt

- 66666 Other model of firearm
- 88888 Not applicable
- 99999 Unknown

CALIBER

Cartridge specification: Cartr
Firearm caliber: Calib
Firearm gauge: Gauge

Name	Definition
Cartr	Cartridge type of recovered cartridge
Calib	Caliber of the firearm used to inflict the injury
Gauge	Gauge of firearm used to inflict the injury

Uses

These data can be used to identify trends in smaller- and larger-caliber weapons use. They may be useful (when coupled with data on nonfatal injuries) for assessing case fatality rates by certain weapon and ammunition classes.

Discussion

These variables are designed to capture the caliber or estimated caliber of the firearm used in the fatal event. The codes correspond to calibers, measured in fractions of an inch or in millimeters, or gauges in the case of shotguns. In addition, a free text field captures the cartridge specification (when available). Recovered cartridge casings, the firearm itself, and the bullet are sources for indicating or estimating the firearm caliber.

Some firearms will fire more than one type of cartridge. For example, firearms designed to fire the .357 Magnum will also fire .38 (Smith & Wesson) Special cartridges. Unless a cartridge casing is recovered, it may be impossible to tell which cartridge type was involved in the incident. Consequently, this field should be coded from cartridge casings when they are available, from the markings stamped onto the firearm when cartridge casings are not recovered, and from recovered bullets when neither a casing nor a firearm is recovered. A special code (38357) has been created for cases when a bullet has been recovered and the absence of a cartridge or firearm makes it impossible to determine the difference between a .38 or a .357.

Calib (caliber): The caliber of a rifle or handgun is the diameter of the bore before the rifling grooves were cut. Caliber may also be given in terms of bullet, land, or groove diameter. In some cases, the caliber specification associated with particular cartridge types is neither accurate nor consistent. For example, the caliber of the .38 Special cartridge is actually .357, not .38 as the cartridge type suggests.

Gauge: The term “gauge” is used to describe the size of the bore of a shotgun. The term refers to the number of lead balls of the given bore diameter that make up a pound. In a 12-gauge, for example, it takes 12 bore-diameter lead balls to make up a pound. The most common exception to this nomenclature is the .410, which has a bore diameter of 0.410 inches.

Weapon/CME

Cartridge: Cartridge types are commonly expressed in calibers (fractions of an inch), or in millimeters. In some cases, the same cartridge has both an English and Metric type designation. For example, the .308 Winchester is also known as the 7.62 X 51mm NATO (Vendata 1999). The former designation is typically stamped onto weapons originally designed for civilian use, whereas the latter designation is common on weapons designed for military use. Record whichever caliber is stamped on the firearm or the base of the cartridge casing. Conventionally, weapon manufacturers name cartridge types they develop after the company. Care should be taken not to confuse the manufacturer associated with a cartridge type with the make of the firearm. For example, the .38 Smith & Wesson (S&W) special cartridge was developed by Smith & Wesson, but many companies manufacture weapons chambered for this cartridge type (Vendata 1999).

Name	Label	Table	Type	Field Length	Priority	Primacy
Cartr	Cartridge specification:	Weapon	Text	40	O/O/O	LAB/CME/PR
Calib	Firearm caliber:	Weapon	Number	4	O/LR/LR	LAB/CME/PR
Gauge	Firearm gauge:	Weapon	Number	3	O/LR/LR	LAB/CME/PR

Response Options:

Cartr

None

Calib

556 5.56 millimeters
 6 6 millimeters
 635 6.35 millimeters
 65 6.5 millimeters
 7 7 millimeters
 735 7.35 millimeters
 75 7.5 millimeters
 762 7.62 millimeters
 763 7.63 millimeters
 765 7.65 millimeters
 8 8 millimeters
 9 9 millimeters
 10 10 millimeters
 11 11 millimeters
 17 .17 inches
 22 .22 inches
 221 .221 inches
 222 .222 inches
 223 .223 inches
 243 .243 inches
 25 .25 inches
 250 .250 inches
 256 .256 inches
 257 .257 inches
 264 .264 inches

270	.270 inches
280	.280 inches
284	.284 inches
30	.30 inches
300	.300 inches
303	.303 inches
308	.308 inches
32	.32 inches
338	.338 inches
35	.35 inches
351	.351 inches
357	.357 inches
36	.36 inches
375	.375 inches
38	.38 inches
380	.380 inches
40	.40 inches
401	.401 inches
405	.405 inches
41	.41 inches
44	.44 inches
444	.444 inches
45	.45 inches
455	.455 inches
458	.458 inches
460	.460 inches
50	.50 inches
54	.54 inches
58	.58 inches
60	.60 inches
1000	Undetermined whether .38 or .357
1001	Small, unspecified (≤ 32)
1002	Medium, unspecified ($>32, <10\text{mm}/.40$)
1003	Large, unspecified ($\geq 10\text{mm}/.40$)
6666	Other
8888	Not applicable (shotgun or unknown gun type)
9999	Unknown

Gauge

10	10 gauge
12	12 gauge
16	16 gauge
20	20 gauge
28	28 gauge
410	.410
666	Other
888	Not applicable
999	Unknown

Data Standards or Guidelines

NVISS

Firearm serial number: Serial

Name	Definition
Serial	Serial number of the firearm that was used to inflict the injury

Uses

The serial number of the firearm can be used to trace its use in an incident from the first purchaser to the gun dealer from which it was purchased. The serial number is considered a local data element and is not forwarded to the national database.

Discussion

The serial number for firearms is not unique across gun manufacturers and is not designed to identify the type or characteristics of the firearm. Serial numbers are used to trace firearms. This data element is coded exactly as the serial number recorded on the firearm. Serial numbers can include both letters and numbers.

Name	Label	Table	Type	Field Length	Priority	Primacy
Serial	Firearm serial number:	Weapon	Text	12	O/LR/LR	LAB/CME/PR

Response Options:

Serial	666666666666	Serial number totally or partially obliterated
	999999999999	Unknown

Firearm stolen: Stoln**Name Definition**

Stoln Firearm listed or reported as stolen

Uses

This information is useful for determining the source of guns used in fatalities.

Discussion

Code "Stoln" as "Yes" if the gun was formally reported as stolen in ATF trace results, police records, or if the police or CME learned that the gun had been stolen during the course of the death investigation. If a household member takes a gun from another household member and uses it without his or her permission (e.g., son takes father's weapon from his drawer and shoots himself), do not code that gun as stolen unless the owner had reported the gun as stolen to the police.

Name	Label	Table	Type	Field Length	Priority	Primacy
Stoln	Firearm stolen:	Weapon	Number	1	O/O/O	PR/ATF/CME

Response Options:**Stoln**

- 0 No
- 1 Yes
- 8 Not applicable
- 9 Unknown

YOUTH ACCESS

Gun owner: Owner
Gun stored loaded: Loaded
Gun stored locked: Locked
Youth gun access narrative: YthNarr

Name	Definition
Owner	Owner of the firearm
Loaded	Was the firearm stored loaded?
Locked	Was the firearm stored locked?
YthNarr	Narrative providing details about youth access to the firearm used to inflict the injury

Uses

This set of variables can be used to better understand how youths gain access to the guns they use to injure themselves or others.

Discussion

The Youth Access variables are to be completed on guns used by youths 17 years of age and younger who shoot themselves or another person in the incident. In the narrative, include a brief summary of where and from whom the firearm was obtained and whether the youth had authorized access to the firearm. The Youth Access variables can be completed for people ages 18 or more if desired.

Name	Label	Table	Type	Field Length	Priority	Primacy
Owner	Gun owner:	Weapon	Number	2	LR/LR	CME/PR
Loaded	Gun stored loaded:	Weapon	Number	1	LR/LR	CME/PR
Locked	Gun stored locked:	Weapon	Number	1	LR/LR	CME/PR
YthNarr	Youth gun access narrative:	Weapon	Text	100	O/O	CME/PR

Response Options:

Owner

- 1 Shooter
- 2 Parent of shooter
- 3 Other family member of shooter
- 6 Friend/acquaintance of shooter
- 7 Stranger to shooter

	66	Other (specify in youth access narrative)
	99	Unknown
Loaded		
	0	Unloaded
	1	Loaded
	6	Other (specify in youth access narrative)
	8	Not applicable
	9	Unknown
Locked		
	0	Not locked
	1	Locked (stored with trigger lock on or in locked enclosure like closet)
	6	Other (specify in youth access narrative)
	8	Not applicable
	9	Unknown
YthNarr		

Data Standards or Guidelines

NVISS

TYPE OF POISON

Type of poison: **Poison**
Code for poison: **PCode**
Name of poison: **PoisonTxt**

Name	Definition
Poison	Broad type of poison used to inflict injury
PCode	Code for poison used to inflict injury
PoisonTxt	Name of poison used to inflict injury if PCode is "Other"

Uses

These variables describe the types of poisons used in violent deaths, especially in suicides and deaths of undetermined intent.

Discussion

Only poisons known or suspected to be involved should be included in the incident. For a person who ingests multiple drugs, each drug constitutes a separate "Weapon" record. Using poison codes avoids problems with variant spellings of the same drug and variant names for the same chemical. Poison codes ("PCodes") have been assigned only to the more common poisons, primarily drugs. A list of the poison codes can be found in the coding training binder. They have not yet been incorporated into the software. The poison code list includes a column that will indicate whether the drug is used for psychiatric problems and a column that will indicate the type of poison, e.g., over-the-counter versus prescription. For Type of poison, use "Pharmaceutical-Prescription" if the drug is usually obtained through prescription even if the victim was not the person for whom the drug was prescribed. The "Prescription" category should include drugs of abuse such as oxycontin and methadone because these are usually prescribed. It should not include other drugs such as cocaine and methamphetamines because these are usually manufactured illicitly rather than prescribed. These should be categorized as "Street/recreational drugs."

Name	Label	Table	Type	Field		
				Length	Priority	Primacy
Poison	Type of poison:	Weapon	Number	2	LR/LR	CME/PR
PCode	Code for poison:	Weapon	Number	5	LR	CME
PoisonTxt	Name of poison:	Weapon	Text	50	LR	CME

Response Options:

Poison

- 1 Street/recreational drugs
- 2 Alcohol
- 3 Pharmaceuticals – prescription
- 4 Pharmaceuticals – over-the-counter
- 5 Pharmaceuticals – unknown
- 6 Carbon monoxide or other gas, vapor
- 66 Other poison (e.g., rat poison, insecticide, lye)
- 88 Not applicable (not a poisoning)
- 99 Unknown

PCode (See Below for Complete List of PCode)

- 22222 Alcohol/alcoholic beverages
- 66666 Other
- 99999 Unknown

PoisonTxt

Poison Drug List Coding listed on the following pages:**Values:**

Psychiatric Drug

- 0 No
- 1 Yes
- 9 Could be either

Poison Type

- 1 Street/recreational drug
- 2 Alcohol
- 3 Pharmaceuticals—Prescription
- 4 Pharmaceuticals—Over-the-counter
- 5 Pharmaceuticals—Unknown
- 6 Carbon monoxide or other gas, vapor
- 66 Other poison (e.g., rat poison, pesticide)
- 88 Not applicable (not a poisoning)
- 99 Unknown

Weapon/CME/Poison

Code	Informal or Trade Name	Chemical Name	Category	Psychiatric Drug	Poison Type
1	Acetaminophen	Acetaminophen	Other	0	4
1	Tylenol	Acetaminophen	Other	0	4
2	Acetaminophen with Codeine	Acetaminophen with Codeine	Opiate	0	3
2	Tylenol with Codeine	Acetaminophen with Codeine	Opiate	0	3
3	Acetone	Acetone	Other	0	66
4	Alprazolam	Alprazolam	Other	1	3
4	Xanax	Alprazolam	Other	1	3
5	Amitriptyline	Amitriptyline	Antidepressant	1	3
5	Endep	Amitriptyline	Antidepressant	1	3
6	Amitriptyline/Chlordiazepoxide	Amitriptyline/Chlordiazepoxide	Other	1	3
6	Limbitrol	Amitriptyline/Chlordiazepoxide	Other	1	3
7	Amitriptyline/Perphenazine	Amitriptyline/Perphenazine	Other	1	3
7	Etrafon	Amitriptyline/Perphenazine	Other	1	3
7	Triavil	Amitriptyline/Perphenazine	Other	1	3
8	Amlodipine Besylate	Amlodipine Besylate	Other	0	3
8	Norvasc	Amlodipine Besylate	Other	0	3
9	Amobarbital	Amobarbital	Other	0	3
9	Amytal	Amobarbital	Other	1	3
10	Amobarbital/Secobarbital	Amobarbital/Secobarbital	Other	0	3
10	Tuinal	Amobarbital/Secobarbital	Other	0	3
11	Amoxapine	Amoxapine	Antidepressant	1	3
11	Ascendin	Amoxapine	Antidepressant	1	3
12	Amphetamine	Amphetamine - Unspecified	Amphetamine	0	3
13	Amphetamine Complex	Amphetamine Complex	Amphetamine	0	3
14	Amphetamine Mixtures	Amphetamine Mixtures	Amphetamine	0	3
15	Adderall	Amphetamine Sulfate	Amphetamine	0	3
15	Amphetamine Sulfate	Amphetamine Sulfate	Amphetamine	0	3
16	Elavil	Amtriptyline	Antidepressant	1	3

Code	Informal or Trade Name	Chemical Name	Category	Psychiatric Drug	Poison Type
17	Antidepressant	Antidepressant - Unspecified	Antidepressant	1	3
18	Atorvastatin Calcium	Atorvastatin Calcium	Other	9	3
18	Lipitor	Atorvastatin Calcium	Other	0	3
19	BEME	Benzoy-lecgonine Methylester	Cocaine	0	1
19	Benzoy-lecgonine	Benzoy-lecgonine	Cocaine	0	1
19	Benzoy-lecgonine Methylester	Benzoy-lecgonine Methylester	Cocaine	0	1
20	Bupropion	Bupropion	Antidepressant	1	3
20	Wellbutrin	Bupropion	Antidepressant	1	3
21	Buspar	Buspirone	Other	1	3
21	Buspirone	Buspirone	Other	1	3
22	Butalbital Compound	Butalbital Compound	Other	0	3
22	Fioricet	Butalbital Compound	Other	0	3
22	Fiorinal	Butalbital Compound	Other	0	3
23	Carbamazepine	Carbamazepine	Other	9	3
23	Tegretol	Carbamazepine	Other	9	3
24	Carbon Monoxide (CO)	Carbon Monoxide	Other	0	6
24	CO	Carbon Monoxide	Other	0	6
25	Carboxy-hemoglobin (COHb)	Carboxy-hemoglobin	Other	0	6
26	Carisoprodol	Carisoprodol	Other	0	3
26	Soma	Carisoprodol	Other	0	3
27	Celebrex	Celecoxib	Other	0	3
27	Celecoxib	Celecoxib	Other	0	3
28	Chloral Hydrate	Chloral Hydrate	Other	0	3
29	Chlordiazepoxide	Chlordiazepoxide	Other	1	3
29	Librium	Chlordiazepoxide	Other	1	3

Code	Informal or Trade Name	Chemical Name	Category	Psychiatric Drug	Poison Type
30	Chlorpheniramine	Chlorpheniramine	Other	0	3
31	Chlorpromazine	Chlorpromazine	Other	1	3
31	Thorazine	Chlorpromazine	Other	1	3
32	Celexa	Citalopram	Antidepressant	1	3
32	Citalopram	Citalopram	Antidepressant	1	3
33	Anafranil	Clomipramine	Antidepressant	1	3
33	Clomipramine	Clomipramine	Antidepressant	1	3
34	Clonazepam	Clonazepam	Other	9	3
34	Klonopin	Clonazepam	Other	9	3
35	Clorazepate	Clorazepate	Other	1	3
35	Tranxene	Clorazepate	Other	1	3
36	Clozapine	Clozapine	Other	1	3
36	Clozaril	Clozapine	Other	1	3
37	Cocaethylene	Cocaethylene	Cocaine	0	1
38	Cocaine	Cocaine	Cocaine	0	1
39	Codeine	Codeine	Opiate	0	3
39	Robitussin A-C	Codeine	Opiate	0	4
40	Codeine Phosphate	Codeine Phosphate	Opiate	0	3
41	Codeine Sulfate	Codeine Sulfate	Opiate	0	3
42	Colchicine	Colchicine	Other	0	3
43	Conjugated Estrogens	Conjugated Estrogens	Other	0	3
43	Premarin	Conjugated Estrogens	Other	0	3
44	Cotinine	Cotinine	Other	0	66
45	Cyclobenzaprine Hydrochloride	Cyclobenzaprine Hydrochloride	Other	0	3
45	Flexeril	Cyclobenzaprine Hydrochloride	Other	0	3
46	Cannabinoids	Delta-9-tetrahydrocannabinol	Marijuana	0	1
46	Delta-9-tetrahydrocannabinol	Delta-9-tetrahydrocannabinol	Marijuana	0	1
47	Desipramine	Desipramine	Antidepressant	1	3
47	Norpramin	Desipramine	Antidepressant	1	3
48	Focalin	Dexmethylphenidate	Other	0	3

Code	Informal or Trade Name	Chemical Name	Category	Psychiatric Drug	Poison Type
49	Dextroamphetamine	Dextroamphetamine	Amphetamine	0	3
50	Dexedrine	Dextroamphetamine Sulfate	Amphetamine	0	3
50	Dextroamphetamine Sulfate	Dextroamphetamine Sulfate	Amphetamine	0	3
51	Dextromethorphan	Dextromethorphan	Other	0	4
52	Dextromethorphan Hydrobromide	Dextromethorphan Hydrobromide	Other	0	4
53	Diacetylmorphine	Diacetylmorphine	Opiate	0	1
53	Heroin	Diacetylmorphine	Opiate	0	1
54	Centrax	Diazepam	Other	1	3
54	Diazepam	Diazepam	Other	1	3
54	Dizac	Diazepam	Other	1	3
54	Prazepam	Diazepam	Other	1	3
54	Valium	Diazepam	Other	1	3
54	Valrelease	Diazepam	Other	1	3
54	Zetran	Diazepam	Other	1	3
55	Diethylpropion	Diethylpropion	Other	0	3
55	Tenuate	Diethylpropion	Other	0	3
56	Cardizem	Diltiazem Hydrochloride	Other	0	3
56	Dilacor	Diltiazem Hydrochloride	Other	0	3
56	Diltiazem Hydrochloride	Diltiazem Hydrochloride	Other	0	3
57	Benadryl	Diphenhydramine Hydrochloride	Other	0	4
57	Diphenhydramine Hydrochloride	Diphenhydramine Hydrochloride	Other	0	4
57	Sominex	Diphenhydramine Hydrochloride	Other	0	4
58	Depakote	Divalproex Sodium	Other	9	3

Weapon/CME/Poison

Code	Informal or Trade Name	Chemical Name	Category	Psychiatric Drug	Poison Type
58	Divalproex Sodium	Divalproex Sodium	Other	9	3
59	Doxepin	Doxepin	Antidepressant	1	3
59	Sinequan	Doxepin	Antidepressant	1	3
60	Doxylamine Succinate	Doxylamine Succinate	Other	0	4
61	Triamterene	Dyazide	Other	0	3
62	Ecgonine	Ecgonine	Cocaine	0	1
63	Ecgonine Methyl Ester	Ecgonine Methyl Ester	Cocaine	0	1
63	EME	Ecgonine Methyl Ester	Cocaine	0	1
64	Estazolam	Estazolam	Other	0	3
64	Prosom	Estazolam	Other	0	3
65	Amidate	Etomidate	Other	0	3
65	Anesthesia	Etomidate	Other	0	3
65	Etomidate	Etomidate	Other	0	3
66	Actiq	Fentanyl	Opiate	0	3
66	Duragesic Patch	Fentanyl	Opiate	0	3
66	Fentanyl	Fentanyl	Opiate	0	3
66	Sublimaze	Fentanyl	Opiate	0	3
67	Allegra	Fexofenadine Hydrochloride	Other	0	3
67	Fexofenadine Hydrochloride	Fexofenadine Hydrochloride	Other	0	3
68	Finasteride	Finasteride	Other	0	3
68	Proscar	Finasteride	Other	0	3
69	Flunitrazepam	Flunitrazepam	Other	0	1
69	Rohypnol	Flunitrazepam	Other	0	1
70	Fluoxetine	Fluoxetine	Antidepressant	1	3
70	Prozac	Fluoxetine	Antidepressant	1	3
70	Sarafem	Fluoxetine	Antidepressant	1	3
71	Fluphenazine	Fluphenazine	Other	1	3
71	Prolixin	Fluphenazine	Other	1	3
72	Dalmane	Flurazepam	Other	0	3
72	Flurazepam	Flurazepam	Other	0	3
73	Fluvoxamine	Fluvoxamine	Antidepressant	1	3
73	Luvox	Fluvoxamine	Antidepressant	1	3
74	Gamma-Hydroxybutyrate	Gamma-Hydroxybutyrate	Other	0	1
74	GHB	Gamma-Hydroxybutyrate	Other	0	1

Code	Informal or Trade Name	Chemical Name	Category	Psychiatric Drug	Poison Type
75	Halazepam	Halazepam	Other	1	3
75	Paxipam	Halazepam	Other	1	3
76	Haldol	Haloperidol	Other	1	3
76	Haloperidol	Haloperidol	Other	1	3
77	6-acetyl-morphine	Heroin	Opiate	0	1
77	MAM	Heroin	Opiate	0	1
77	Monoacetyl-morphine	Heroin	Opiate	0	1
78	Humulin	Humulin	Other	0	3
78	Insulin	Humulin	Other	0	3
79	Hydrochlorothiazide	Hydrochlorothiazide	Other	0	3
80	Dyazide	Hydrochlorothiazide/ Triamterene	Other	0	3
81	Hydrocodone Bitartrate	Hydrocodone Bitartrate	Opiate	0	3
81	Lortab	Hydrocodone Bitartrate	Opiate	0	3
81	Vicodin	Hydrocodone Bitartrate	Opiate	0	3
82	Hydrocortisone	Hydrocortisone	Other	0	3
83	Dilaudid	Hydromorphone Hydrochloride	Opiate	0	3
83	Hydromorphone Hydrochloride	Hydromorphone Hydrochloride	Opiate	0	3
84	Atarax	Hydroxyzine	Other	0	3
84	Hydroxyzine	Hydroxyzine	Other	0	3
84	Vistaril	Hydroxyzine	Other	0	3
85	Imipramine	Imipramine	Antidepressant	1	3
85	Tofranil	Imipramine	Antidepressant	1	3
86	Accutane	Isotretinoin	Other	0	3
86	Isotretinoin	Isotretinoin	Other	0	3
87	Ketalar SV	Ketamine	Other	0	3
87	Ketamine	Ketamine	Other	0	3
88	Toradol	Ketorolac	Other	0	3
89	Digoxin	Lanoxin	Other	0	3
89	Lanoxin	Lanoxin	Other	0	3
90	Arava	Leflunomide	Other	0	3
90	Leflunomide	Leflunomide	Other	0	3
91	Eskalith	Lithium	Other	1	3

Weapon/CME/Poison

Code	Informal or Trade Name	Chemical Name	Category	Psychiatric Drug	Poison Type
91	Lithane	Lithium	Other	1	3
91	Lithium	Lithium	Other	1	3
91	Lithobid	Lithium	Other	1	3
91	Lithonate	Lithium	Other	1	3
91	Lithotabs	Lithium	Other	1	3
92	Claritin	Loratadine	Other	0	4
92	Loratadine	Loratadine	Other	0	4
93	Ativan	Lorazepam	Other	1	3
93	Lorazepam	Lorazepam	Other	1	3
94	Cozaar	Losartan Potassium	Other	0	3
94	Losartan Potassium	Losartan Potassium	Other	0	3
95	Loxapine	Loxapine Succinate	Other	1	3
95	Loxitane	Loxapine Succinate	Other	1	3
96	Lysergic Acid Diethylamide	Lysergic Acid Diethylamide	Other	0	1
97	Ludiomil	Maprotiline	Antidepressant	1	3
97	Maprotiline	Maprotiline	Antidepressant	1	3
98	Marijuana	Marijuana	Marijuana	0	1
99	Demerol	Meperidine Hydrochloride	Opiate	0	3
99	Meperidine Hydrochloride	Meperidine Hydrochloride	Opiate	0	3
100	Equinal	Meprobamate	Other	9	3
100	Meprobamate	Meprobamate	Other	9	3
100	Meprospan	Meprobamate	Other	9	3
100	Miltown	Meprobamate	Other	9	3
100	Neuramate	Meprobamate	Other	9	3
101	Mesoridazine	Mesoridazine	Other	1	3
101	Serentil	Mesoridazine	Other	1	3
102	Glucophage	Metformin Hydrochloride	Other	0	3
102	Metformin Hydrochloride	Metformin Hydrochloride	Other	0	3
103	Dolophine	Methadone	Opiate	0	3
103	Methadone	Methadone	Opiate	0	3
104	Metham- phetamine	Metham- phetamine	Amphetamine	0	1
105	Metham- phetamine Hydrochloride	Metham- phetamine Hydrochloride	Amphetamine	0	1
106	Methaqualone	Methaqualone	Other	0	1

Code	Informal or Trade Name	Chemical Name	Category	Psychiatric Drug	Poison Type
106	Quaalude	Methaqualone	Other	0	1
106	Sopor	Methaqualone	Other	0	1
107	MDA	Methylene-dioxyamphetamine	Amphetamine	0	1
108	Ecstasy	Methylene-dioxymethamphetamine	Amphetamine	0	1
108	MDMA	Methylene-dioxymethamphetamine	Amphetamine	0	1
108	Methylene-dioxymethamphetamine	Methylene-dioxymethamphetamine	Amphetamine	0	1
109	Concerta	Methylphenidate	Other	0	3
109	Metadate	Methylphenidate	Other	0	3
109	Methylin	Methylphenidate	Other	0	3
109	Methylphenidate	Methylphenidate	Other	1	3
110	Methylphenidate Hydrochloride	Methylphenidate Hydrochloride	Other	1	3
110	Ritalin	Methylphenidate Hydrochloride	Other	1	3
110	Ritalin LA	Methylphenidate Hydrochloride	Other	1	3
110	Ritalin SR	Methylphenidate Hydrochloride	Other	1	3
111	Midazolam Hydrochloride	Midazolam Hydrochloride	Other	0	3
111	Versed	Midazolam Hydrochloride	Other	0	3
112	Mirtazapine	Mirtazapine	Antidepressant	1	3
112	Remeron	Mirtazapine	Antidepressant	1	3
113	Moban	Molindone Hydrochloride	Other	1	3
113	Molindone Hydrochloride	Molindone Hydrochloride	Other	1	3
114	Duramorph	Morphine Sulfate	Opiate	0	3

Code	Informal or Trade Name	Chemical Name	Category	Psychiatric Drug	Poison Type
114	Morphine	Morphine Sulfate	Opiate	0	3
114	MS Contin	Morphine Sulfate	Opiate	0	3
114	MSIR	Morphine Sulfate	Opiate	0	3
114	Oramorph SR	Morphine Sulfate	Opiate	0	3
114	Roxanol	Morphine Sulfate	Opiate	0	3
115	Nabumetone	Nabumetone	Other	0	3
115	Relafen	Nabumetone	Other	0	3
116	Naprosyn	Naproxen	Other	0	4
116	Naproxen	Naproxen	Other	0	4
117	Serzone	Nefazodone	Antidepressant	1	3
118	Nefazodone Hydrochloride	Nefazodone Hydrochloride	Antidepressant	1	3
119	Nifedipine	Nifedipine	Other	0	3
119	Procardia	Nifedipine	Other	0	3
120	Aventyl	Nortriptyline	Antidepressant	1	3
120	Nortriptyline	Nortriptyline	Antidepressant	1	3
120	Pamelor	Nortriptyline	Antidepressant	1	3
121	Olanzapine	Olanzapine	Other	1	3
121	Zydis	Olanzapine	Other	1	3
121	Zyprexa	Olanzapine	Other	1	3
121	Zyprexa Zydis	Olanzapine	Other	1	3
122	Daypro	Oxaprozin	Other	0	3
122	Oxaprozin	Oxaprozin	Other	0	3
123	Oxazepam	Oxazepam	Other	1	3
123	Serax	Oxazepam	Other	1	3
124	Lorcet	Oxycodone Hydrochloride	Opiate	0	3
124	Oxycodone Hydrochloride	Oxycodone Hydrochloride	Opiate	0	3
124	Oxycontin	Oxycodone Hydrochloride	Opiate	0	3
124	Percocet	Oxycodone Hydrochloride	Opiate	0	3
124	Percodan	Oxycodone Hydrochloride	Opiate	0	3
124	Roxicet	Oxycodone Hydrochloride	Opiate	0	3
124	Tylox	Oxycodone Hydrochloride	Opiate	0	3
125	Numorphan	Oxymorphone	Opiate	0	3

Code	Informal or Trade Name	Chemical Name	Category	Psychiatric Drug	Poison Type
126	Papaverine Hydrochloride	Papaverine Hydrochloride	Other	0	3
126	Pavabid	Papaverine Hydrochloride	Other	0	3
127	Paroxetine	Paroxetine	Antidepressant	1	3
127	Paxil	Paroxetine	Antidepressant	1	3
128	Cylert	Pemoline	Other	0	3
128	Pemoline	Pemoline	Other	0	3
129	Pentazocine	Pentazocine	Opiate	0	3
129	Talwin	Pentazocine	Opiate	0	3
130	Nembutal	Pentobarbital Sodium	Other	0	3
130	Pentobarbital	Pentobarbital Sodium	Other	0	3
131	Perphenazine	Perphenazine	Other	1	3
131	Trilafon	Perphenazine	Other	1	3
132	Angel Dust	Phencyclidine	Other	0	1
132	Phencyclidine	Phencyclidine	Other	0	1
133	PCP	Phencyclidine Hydrochloride	Other	0	1
133	Phencyclidine Hydrochloride	Phencyclidine Hydrochloride	Other	0	1
134	Nardil	Phenelzine Sulfate	Antidepressant	1	3
134	Phenelzine Sulfate	Phenelzine Sulfate	Antidepressant	1	3
135	Phenobarbital	Phenobarbital Sodium	Other	0	3
135	Phenobarbital Sodium	Phenobarbital Sodium	Other	0	3
136	Adipex-P	Phentermine Hydrochloride	Other	0	3
136	Fastin	Phentermine Hydrochloride	Other	0	3
136	Phentermine Hydrochloride	Phentermine Hydrochloride	Other	0	3
137	Dilantin	Phenytoin Sodium	Other	0	3
137	Phenytoin Sodium	Phenytoin Sodium	Other	0	3
138	Orap	Pimozide	Other	1	3
138	Pimozide	Pimozide	Other	1	3
139	Pravachol	Pravastatin Sodium	Other	0	3
139	Pravastatin Sodium	Pravastatin Sodium	Other	0	3

Code	Informal or Trade Name	Chemical Name	Category	Psychiatric Drug	Poison Type
140	Phenergan	Promethazine	Other	0	3
140	Promethazine	Promethazine	Other	0	3
141	Darvocet	Propoxyphene and Acetaminophen	Opiate	0	3
142	Darvon	Propoxyphene Hydrochloride	Opiate	0	3
142	Propoxyphene Hydrochloride	Propoxyphene Hydrochloride	Opiate	0	3
143	Protriptyline	Protriptyline	Antidepressant	1	3
143	Vivactil	Protriptyline	Antidepressant	1	3
144	Pseudoephedrine	Pseudoephedrine	Other	0	4
145	Quetiapine	Quetiapine	Other	1	3
145	Seroquel	Quetiapine	Other	1	3
146	Accupril	Quinapril Hydrochloride	Other	0	3
146	Quinapril Hydrochloride	Quinapril Hydrochloride	Other	0	3
147	Risperdal	Risperidone	Other	1	3
147	Risperidone	Risperidone	Other	1	3
148	Secobarbital	Secobarbital	Other	0	3
148	Seconal	Secobarbital	Other	0	3
149	Sertraline	Sertraline	Antidepressant	1	3
149	Zoloft	Sertraline	Antidepressant	1	3
150	Meridia	Sibutramine Hydrochloride Monohydrate	Other	0	3
150	Sibutramine Hydrochloride Monohydrate	Sibutramine Hydrochloride Monohydrate	Other	0	3
151	Sildenafil Citrate	Sildenafil Citrate	Other	0	3
151	Viagra	Sildenafil Citrate	Other	0	3
152	Flomax	Tamsulosin Hydrochloride	Other	0	3
152	Tamsulosin Hydrochloride	Tamsulosin Hydrochloride	Other	0	3
153	Restoril	Temazepam	Other	0	3
153	Temazepam	Temazepam	Other	0	3
154	Hytrin	Terazosin	Other	0	3
154	Terazosin	Terazosin	Other	0	3
155	THC	Tetrahydrocannabinol	Marijuana	0	1

Code	Informal or Trade Name	Chemical Name	Category	Psychiatric Drug	Poison Type
156	THC-9-Carboxylic Acid	Tetrahydrocannabinol 9-Carboxylic Acid	Marijuana	0	1
157	Aminophylline	Theophylline	Other	0	3
157	Slo-bid	Theophylline	Other	0	3
157	Slo-phyllin	Theophylline	Other	0	3
157	Theophylline	Theophylline	Other	0	3
158	Thiopental	Thiopental	Other	0	3
159	Mellaril	Thioridazine	Other	1	3
160	Thioridazine Hydrochloride	Thioridazine Hydrochloride	Other	1	3
161	Navane	Thiothixene	Other	1	3
161	Thiothixene	Thiothixene	Other	1	3
162	Tramadol Hydrochloride	Tramadol Hydrochloride	Other	0	3
162	Ultram	Tramadol Hydrochloride	Other	0	3
163	Parnate	Tranlycypromine Sulfate	Antidepressant	1	3
163	Tranlycypromine Sulfate	Tranlycypromine Sulfate	Antidepressant	1	3
164	Desyrel	Trazodone	Antidepressant	1	3
164	Trazodone	Trazodone	Antidepressant	1	3
164	Halcion	Triazolam	Other	0	3
165	Triazolam	Triazolam	Other	0	3
166	Stelazine	Trifluoperazine	Other	1	3
166	Trifluoperazine	Trifluoperazine	Other	1	3
167	Bactrim	Trimethoprim Sulfamethoxazole	Other	0	3
167	Septra	Trimethoprim Sulfamethoxazole	Other	0	3
167	Trimethoprim Sulfamethoxazole	Trimethoprim Sulfamethoxazole	Other	0	3
168	Surmontil	Trimipramine	Antidepressant	1	3
168	Trimipramine	Trimipramine	Antidepressant	1	3
169	Valacyclovir Hydrochloride	Valacyclovir Hydrochloride	Other	0	3

Weapon/CME/Poison

Code	Informal or Trade Name	Chemical Name	Category	Psychiatric Drug	Poison Type
169	Valtrex	Valacyclovir Hydrochloride	Other	0	3
170	Depakene	Valproic Acid	Other	9	3
170	Valproic Acid	Valproic Acid	Other	9	3
171	Effexor	Venlafaxine Hydrochloride	Antidepressant	1	3
171	Venlafaxine Hydrochloride	Venlafaxine Hydrochloride	Antidepressant	1	3
172	Sonata	Zaleplon	Other	0	3
172	Zaleplon	Zaleplon	Other	0	3
173	Geodon	Ziprasidone	Other	1	3
173	Ziprasidone	Ziprasidone	Other	1	3
174	Ambien	Zolpidem	Other	0	3
174	Zolpidem	Zolpidem	Other	0	3
175	Benzo-diazepine Unspecified	Benzo-diazepine Unspecified	Other	9	3
176	Lidocaine	Lidocaine Hydrochloride	Other	1	3
177	Nicotine	Nicotine	Other	0	66
178	Opiate - Unspecified	Opiate - Unspecified	Opiate	0	1
179	Salicylate	Salicylate	Other	0	4
180	Cialis	Tadalafil	Other	0	3
180	Tadalafil	Tadalafil	Other	0	3
181	Levitra	Vardenafil	Other	0	3
181	Vardenafil	Vardenafil	Other	0	3
182	Lexapro	Escitalopram	Antidepressant	1	3
182	Escitalopram	Escitalopram	Antidepressant	1	3
22222	Alcohol/ alcoholic beverage	Alcohol	Other	0	2
66666	Other	Other			66
99999	Unknown	Unknown			99

SOURCE OF POISON

Patient drug obtained for: Patnt
Carbon monoxide source, if CO: COSrc

Name	Definition
Patnt	Who was the patient that the drug was obtained for?
COSrc	Source of the carbon monoxide

Uses

This set of variables can be used to better understand how the victim or suspect obtained the poison. The information may be used to modify prescription practices to prevent suicides.

Discussion

Please record the person for whom the drug(s) taken was/were prescribed, if this information is available.

Name	Label	Table	Type	Field Length	Priority	Primacy
Patnt	Patient drug obtained for:	Weapon	Number	2	LR	CME
COSrc	Carbon monoxide source, if CO:	Weapon	Number	1	LR	CME

Response Options:

Patnt	
1	Self
2	Spouse
3	Ex-spouse
4	Girlfriend or boyfriend
7	Ex-girlfriend or ex-boyfriend
8	Girlfriend or boyfriend, unspecified whether curre
10	Parent of victim
11	Child of victim
12	Sibling
13	Grandchild of victim
14	Grandparent of victim
15	In-law
16	Stepparent of victim
17	Stepchild of victim
18	Child of victim's boyfriend/girlfriend
19	Intimate partner of victim's parent

Weapon/CME/Poison

- 29 Other family member (e.g., cousin, uncle)
- 30 Babysitter of victim
- 31 Acquaintance
- 32 Friend
- 33 Roommate (not intimate partner)
- 34 Schoolmate
- 35 Current or former work relationship (e.g., coworker)
- 44 Other person, known to victim
- 45 Stranger
- 88 Not applicable
- 99 Relationship unknown

COSrc

- 1 Car, truck, bus
- 2 Other
- 8 Not applicable
- 9 Unknown

WEAPON (POLICE REPORT)

Firearm information known:	Fknown
Gun recovered:	GunRec
Bullet recovered:	Bullet
Casing recovered:	CaseRem
Firearm type:	FType
Other firearm type text:	TyTxt
Make or NCIC code:	Make
Other firearm make text:	MkTxt
Firearm model:	Model
Firearm model text:	MoTxt
Cartridge specification:	Cartr
Firearm caliber:	Calib
Firearm gauge:	Gauge
Firearm serial number:	Serial
Firearm stolen:	Stoln
Gun owner:	Owner
Gun stored loaded:	Loaded
Gun stored locked:	Locked
Youth gun access narrative:	YthNarr
Type of poison:	Poison

See Weapon/CME Elements for information regarding variable(s) appearing above.

Firearm trace attempted: Trace

Name	Definition
Trace	Identifies whether an ATF trace was attempted on the firearm(s) involved in the case

Uses

This data element will be used by sites working with a local police agency and the ATF to receive trace results on guns used in fatalities. It will identify whether a gun was submitted for a trace and, if submitted, whether the trace succeeded or failed.

Discussion

None

Name	Label	Table	Type	Field Length	Priority	Primacy
Trace	Firearm trace attempted:	Weapon	Number	1	O	PR

Response Options:

Trace

- 0 No trace done: gun manufactured before 1969
- 1 No trace done: other reason
- 2 Traced successfully
- 3 Traced not successful
- 8 Not applicable
- 9 Unknown

WEAPON (CRIME LABORATORY)

Firearm information known:	Fknown
Gun recovered:	GunRec
Bullet recovered:	Bullet
Casing recovered:	CaseRem
Firearm type:	FType
Other firearm type text:	TyTxt
Make or NCIC code:	Make
Other firearm make text:	MkTxt
Firearm model:	Model
Firearm model text:	MoTxt
Cartridge specification:	Cartr
Firearm caliber:	Calib
Firearm gauge:	Gauge
Firearm serial number:	Serial

See Weapon/CME Element for information regarding variable(s) appearing above.

Section 17

ATF TRACE INFORMATION

Date of firearm first purchase:	FPDate	17-3
State of firearm first purchase:	FPSt	17-4
City of firearm first purchase:	FpurPI	
IMPORTER		17-6

Date of firearm first purchase: FPDate

Name	Definition
FPDate	Date the firearm was first purchased, according to trace results

Uses

This data element will be used by sites that work with a local police agency and the ATF to receive trace information about guns used in fatalities. The date the gun was first purchased can be used, for example, to help identify the “time to incident” (the length of time between the first purchase of a gun and its use in a homicide or other fatality).

Discussion

The data entry program will accept partially unknown dates (e.g., 99/99/1989). Note: A variable (First Purchaser) that documents whether the victim or suspect was the first purchaser of the gun is described in the Weapon-Person Relation section.

Name	Label	Table	Type	Field Length	Priority	Primacy
FPDate	Date of firearm first purchase:	Weapon	Text	10	O	ATF

Response Options:

FPDate	88/88/8888	Not applicable (no trace done)
	99/99/9999	Unknown

Data Standards or Guidelines

NVISS

State of firearm first purchase: FPSt
City of firearm first purchase: FPurPI

Name	Definition
FPSt	State where the firearm was first purchased, according to trace results
FPurPI	City where the firearm was first purchased, according to trace results

Uses

These data elements will be used by sites that work with a local police agency and the ATF to receive trace results on guns used in fatalities. The city and state where the gun was first purchased can be used, for example, to track the number of guns whose sale originated locally vs. out of state.

Discussion

City is coded using FIPS 5-digit place codes. See the discussion of FIPS place codes that accompany the variable "Place" (person's city of residence).

Name	Label	Table	Type	Field Length	Priority	Primacy
FPSt	State of firearm first purchase:	Weapon	Number	2	O	ATF
FPurPI	City of firearm first purchase:	Weapon	Number	5	O	ATF

Response Options:

FPSt

- 1 Alabama
- 2 Alaska
- 4 Arizona
- 5 Arkansas
- 6 California
- 8 Colorado
- 9 Connecticut
- 10 Delaware
- 11 District of Columbia
- 12 Florida
- 13 Georgia
- 15 Hawaii
- 16 Idaho
- 17 Illinois
- 18 Indiana
- 19 Iowa
- 20 Kansas
- 21 Kentucky

- 22 Louisiana
- 23 Maine
- 24 Maryland
- 25 Massachusetts
- 26 Michigan
- 27 Minnesota
- 28 Mississippi
- 29 Missouri
- 30 Montana
- 31 Nebraska
- 32 Nevada
- 33 New Hampshire
- 34 New Jersey
- 35 New Mexico
- 36 New York
- 37 North Carolina
- 38 North Dakota
- 39 Ohio
- 40 Oklahoma
- 41 Oregon
- 42 Pennsylvania
- 43 Puerto Rico
- 44 Rhode Island
- 45 South Carolina
- 46 South Dakota
- 47 Tennessee
- 48 Texas
- 49 Utah
- 50 Vermont
- 51 Virginia
- 53 Washington
- 54 West Virginia
- 55 Wisconsin
- 56 Wyoming
- 88 Not applicable
- 99 Unknown

FPurPl

99999 Unknown

IMPORTER

Firearm importer's name: ImpNm

Firearm importer's state: ImpSt

Firearm importer's city: ImpCt

Name	Definition
ImpNm	Name of importer
ImpSt	State of import
ImpCt	City of import

Uses

The importer's name, city and state is needed to conduct a trace by the Bureau of Alcohol, Tobacco and Firearms (ATF) for firearms that are imported into the United States from other countries. Imported guns typically have this information stamped on them.

Discussion

This information is supplied by the law enforcement or criminal justice agency requesting the ATF trace. "ImpCt" is coded using FIPS 5-digit place codes. See the discussion of FIPS place codes that accompany the variable "Place" (person's city of residence).

Name	Label	Table	Type	Field Length	Priority	Primacy
ImpNm	Firearm importer's name:	Weapon	Text	30	O	ATF
ImpSt	Firearm importer's state:	Weapon	Number	2	O	ATF
ImpCt	Firearm importer's city:	Weapon	Number	5	O	ATF

Response Options:

ImpNm

88 Not applicable

99 Unknown

ImpSt

1 Alabama

2 Alaska

4 Arizona

5 Arkansas

6 California

8 Colorado

9	Connecticut
10	Delaware
11	District of Columbia
12	Florida
13	Georgia
15	Hawaii
16	Idaho
17	Illinois
18	Indiana
19	Iowa
20	Kansas
21	Kentucky
22	Louisiana
23	Maine
24	Maryland
25	Massachusetts
26	Michigan
27	Minnesota
28	Mississippi
29	Missouri
30	Montana
31	Nebraska
32	Nevada
33	New Hampshire
34	New Jersey
35	New Mexico
36	New York
37	North Carolina
38	North Dakota
39	Ohio
40	Oklahoma
41	Oregon
42	Pennsylvania
43	Puerto Rico
44	Rhode Island
45	South Carolina
46	South Dakota
47	Tennessee
48	Texas
49	Utah
50	Vermont
51	Virginia
53	Washington
54	West Virginia
55	Wisconsin
56	Wyoming
88	Not applicable
99	Unknown

ImpCt

Weapon/ATF Trace Information

Firearm stolen: Stolen

See Weapon/CME for information regarding variable appearing above.

Section 18

PERSON TO WEAPON RELATIONSHIP

Person used this weapon to kill:	WUser	18-3
Weapon killed this person:	WusedOn	
First purchaser: Fpurc		18-4

Person used this weapon to kill: WUser
Weapon killed this person: WUsedOn

Name	Definition
WUser	Did this person use this weapon (either against another person or against him or herself)?
WUsedOn	Was the weapon used to kill this person?

Uses

“WUser” links the person with the weapon or weapon type they chose. “WUsedOn” links the victim to the weapon used to kill the victim. The variables also indirectly link victims to suspects.

Discussion

The intention of “WUsedOn” is to capture the use of weapons by both suspects and suicide victims. In the case of a single suicide, indicate the victim. If the incident involves multiple suspects, it may be difficult to determine which suspect actually used the weapon or weapon type to cause the injury. In this case, code unknown for “WUser”. Record the person-weapon variables for all manners of death, including suicide.

Name	Label	Table	Type	Field Length	Priority	Primacy
WUser	Person used this weapon to kill:	PW_Relation	Number	1	LR/LR/O	PR/CME/SHR
WUsedOn	Weapon killed this person:	PW_Relation	Number	1	LR/LR/O	PR/CME/SHR

Response Options:

- WUser
- and
- WUsedOn
- 0 No
- 1 Yes
- 8 Not applicable
- 9 Unknown

First purchaser: Fpurc

Name	Definition
Fpurc	Identifies whether the person (victim or suspect) was the first purchaser of the gun

Uses

This data element will be used by sites working with a law enforcement agency and the Bureau of Alcohol, Tobacco and Firearms (ATF) to conduct traces on guns used in fatalities. Traces establish the first purchaser and the place of purchase. The data element summarizes trace results by identifying whether the victim or suspect in a case was the first purchaser of the gun. The data can be used, for example, to help identify shooters who obtained their guns from the secondary market. It can identify victims who used their own guns to kill a suspected criminal in self-defense or whose own guns were used against them in a homicide.

Discussion

This variable is triggered only in cases in which a trace has been successfully completed. It is completed for each person in the case to indicate whether they or a person sharing their surname or address was the first purchaser.

Name	Label	Table	Type	Field Length	Priority	Primacy
Fpurc	First purchaser:	PW_Relation	Number	1	O/O	ATF/PR

Response Options:

- Fpurc
 - 0 Person was not the 1st purchaser
 - 1 Person was 1st purchaser (match on full name)
 - 2 Person shares surname and address of 1st purchaser
 - 3 Person shares only address of 1st purchaser
 - 4 Person shares only surname of 1st purchaser
 - 8 Not applicable
 - 9 Unknown

Data Standards or Guidelines

NVISS

Section 19

VALIDATION RULES

Rule_Number	FieldList	Rule_Logic	Rule_Text	IsError
0001	Age, AgeTyp, PType	If (AgeTyp>1 or (AgeTyp=1 and Age <5)), then (PType <> 2 or 3)	People under 5 years old are unlikely to be suspects.	0
0002	Age	Warning if ((AgeTyp=1 and (Age >115) and (Age <> 999))	Ages must be less than 115 years or Unknown (999).	0
0003	Age, AgeTyp, IncTyp	If (AgeTyp >1 or (AgeTyp=1 and Age <5)), then (IncTyp <> 3)	Persons under age 5 cannot commit suicide.	0
0004	Age, AgeTyp, Educ	If (AgeTyp >1 or (AgeTyp=1 and Age <5)), then (Educ = 0 or blank)	Persons under age 5 have completed no education (Veduc).	0
0005	Age, AgeTyp, CareTk	If (AgeTyp >1 or (AgeTyp=1 and Age <5)), then (CareTk <> 1)	Persons under age 5 are unlikely to be caretakers.	0
0006	Age, AgeTyp, Rela1	If (AgeTyp >1 or (AgeTyp=1 and Age <14)), then (Rela1 <> 1,2,3,7,8,10,14,16,19, or 51)	Persons under age 14 are too young to be in the indicated relationship.	0
0007	Age, AgeTyp, Job	If (AgeTyp >1 or (AgeTyp=1 and Age <14)), then (Job <> 1)	Persons under age 14 are usually too young to be employed.	0
0008	LocTyp, Reside	If (Reside=1), then (LocTyp =1,19,23-26, 66, or blank)	The incident location you entered elsewhere is not compatible with this being the person's residence.	0
0009	AlchRs, Intox	Warning if (AlchRs=1) and (Intox <> 1 or blank)	The toxicology test indicated the presence of alcohol. Are you sure the person was not intoxicated?	0
0010	DthDt, IDate	Warning if (IDate > DthDt)	The injury date must precede or be the same as the death date unless a date is unknown.	0
0011	IDate, ITime	If (IDate day, month, or year=99), then (ITime=99:99)	If day, month, or year is Unknown (99), time must be Unknown (9999) too.	0

Validation Rules

Rule_Number	FieldList	Rule_Logic	Rule_Text	IsError
0012	DthDt	Warning if (DthDt < 01/01/2002)	Only dates in 2002 or later preceding the current date are allowed.	0
0013	DthDt	Error if (DthDt >current date)	The date of death cannot occur in the future.	1
0014	DthDt	Error if (DthDt >=01/01/9999)	The year of death cannot be Unknown (9999).	1
0015	Sunit, Surviv	If (Sunit=1), then (Surviv <120, 777, or 999)	If survival time unit is minutes, survival time must be less than 120, Not collected (777), or Unknown (999).	0
0016	Sunit, Surviv	If (Sunit=2), then (Surviv >=2 and <=47, 777, or 999)	If survival time unit is hours, survival time must be 2 to 47, Not collected (777), or Unknown (999).	0
0017	Sunit, Surviv	If (Sunit=3), then (Surviv >=2 and <=365, 777, or 999)	If survival time unit is days, survival time must be 2–365 days, Not collected (777), or Unknown (999).	0
0018	JustSCirc, SCirc	If (JustSCirc=1–6) then (SCirc=80, or 81)	If SHR justifiable homicide circumstance indicates a justifiable homicide (1–6), SHR circumstance should also indicate justifiable homicide (80,81).	0
0019	Countr, Place	If (Countr <> USA), then (Place=88888)	If the country of residence is not the USA, FIPS codes do not apply and 88888 must be entered for the city/town code.	0
0020	Countr, ResState	If (Countr <> USA), then (ResState=88)	If the country of residence is not the USA, FIPS codes do not apply and 88 must be entered for the state code.	0

Rule_Number	FieldList	Rule_Logic	Rule_Text	IsError
0021	Countr, ResCounty	If (Countr <> USA), then (ResCounty=888)	If the country of residence is not the USA, FIPS codes do not apply and 888 must be entered for the county code.	0
0022	Countr, ResZip	If (Countr <> USA), then (ResZip=88888)	If the country of residence is not the USA, zip codes do not apply and 88888 must be entered for the zip code.	0
0023	Countr, CensSt	If (Countr <> USA), then (CensSt=8888.88)	If the country of residence is not the USA, census tract codes do not apply and 8888.88 must be entered for the county code.	0
0024	Countr, CensBl	If (Countr <> USA), then (CensBl=8)	If the country of residence is not the USA, census block codes do not apply, and 8 must be entered for the block code.	0
0025	BthPlc, BthTxt	If (BthPlc <> 59), then (BthTxt='')	Enter birthplace text only if birthplace code is Other (59).	0
0026	Preg, Sex	If (Sex <> 2), then (Preg=8)	A nonfemale individual cannot be pregnant. Either change the sex or change "Person was pregnant" to 8.	0
0029	Dthplace, PDthTx	If (Dthplace <> 66), then (PDthTx='')	Enter Place of death text only if Place of death code is Other (66).	0
0030	Head, WType	If (WType <> 1 or 6), then (Head=8)	This wound variable should not be completed when weapon type is not firearm or sharp instrument.	0

Validation Rules

Rule_Number	FieldList	Rule_Logic	Rule_Text	IsError
0031	Face, WType	If (WType <> 1 or 6), then (Face=8)	This wound variable should not be completed when weapon type is not firearm or sharp instrument.	0
0032	Neck, WType	If (WType <> 1 or 6), then (Neck=8)	This wound variable should not be completed when weapon type is not firearm or sharp instrument.	0
0033	Thorax, WType	If (WType <> 1 or 6), then (Thorax=8)	This wound variable should not be completed when weapon type is not firearm or sharp instrument.	0
0034	Abdomn, WType	If (WType <> 1 or 6), then (Abdomn=8)	This wound variable should not be completed when weapon type is not firearm or sharp instrument.	0
0035	Spine, WType	If (WType <> 1 or 6), then (Spine=8)	This wound variable should not be completed when weapon type is not firearm or sharp instrument.	0
0036	LowExt, WType	If (WType <> 1 or 6), then (LowExt=8)	This wound variable should not be completed when weapon type is not firearm or sharp instrument.	0
0037	UpExt, WType	If (WType <> 1 or 6), then (UpExt=8)	This wound variable should not be completed when weapon type is not firearm or sharp instrument.	0

Rule_Number	FieldList	Rule_Logic	Rule_Text	IsError
0038	NumWou, WType	If (WType <> 1 or 6), then (NumWou=88)	If weapon type is not firearm or sharp instrument, the number of wounds is Not applicable (88).	0
0039	NumWou, WType	If Type=1 or 6, then NumWou <> 88	If weapon type is firearm or sharp instrument, the number of wounds should be something other than Not applicable (88).	0
0040	NumBul, WType	If (WType <> 1), then (NumBul=88)	If weapon type is not firearm, the number of bullets is Not applicable (88).	0
0041	NumBul, WType	If (WType=1), then (NumBul <> 88)	If weapon type is firearm, the number of bullets should be a value other than "Not applicable".	0
0042	AlchRs, BAC	If (AlchRs=0), then (BAC=0.00)	If the alcohol test is reported as negative, the blood alcohol level must be recorded as 0.00.	0
0043	AlchRs, BAC	If (AlchRs=1), then (BAC >0.00 and BAC <=0.50)	If the alcohol test is reported as positive, the blood alcohol level must be recorded as a number greater than zero and less than 0.5.	0
0044	AlchRs, BAC	If (AlchRs=9), then BAC=0.99	If the alcohol test result is Unknown, the blood alcohol level must also be Unknown.	0
0045	OthDrg, OthDrRs	If (OthDrRs <>1), then (OthDrg='')	Enter name of other drug only if other drug test results are present.	0
0046	AlchRs, SpCd	If (AlchRs=1), then (SpCd <> 88/88/8888 and SpCd <> 99/99/9999 and SpCtme <> 99:99)	If you know the result of a test is positive, it assumed that the date and time the specimen was collected would be known.	0

Validation Rules

Rule_Number	FieldList	Rule_Logic	Rule_Text	IsError
0047	CokeRs, SpCd	If (CokeRs=1), then (SpCd <> 88/88/8888 and SpCd <> 99/99/9999 and SpTme <> 99:99)	If you know the result of a test is positive, it is assumed that the date and time the specimen was collected would be known.	0
0048	MarjRs, SpCd	If (MarjRs=1), then (SpCd <> 88/88/8888 and SpCd <> 99/99/9999 and SpTme <> 99:99)	If you know the result of a test is positive, it is assumed that the date and time the specimen was collected would be known.	0
0049	OpiaRs, SpCd	If (OpiaRs=1), then (SpCd <> 88/88/8888 and SpCd <> 99/99/9999 and SpTme <> 99:99)	If you know the result of a test is positive, it is assumed that the date and time the specimen was collected would be known.	0
0050	AntiRs, SpCd	If (AntiRs=1), then (SpCd <> 88/88/8888 and SpCd <> 99/99/9999 and SpTme <> 99:99)	If you know the result of a test is positive, it is assumed that the date and time the specimen was collected would be known.	0
0051	AmphRs, SpCd	If (AmphRs=1), then (SpCd <> 88/88/8888 and SpCd <> 99/99/9999 and SpTme <> 99:99)	If you know the result of a test is positive, it is assumed that the date and time the specimen was collected would be known.	0
0052	OtDrRs, SpCd	IF (OtDrRs=1), then (SpCd <> 88/88/8888 and SpCd <> 99/99/9999 and SpTme <> 99:99)	If you know the result of a test is positive, it is assumed that the date and time the specimen was collected would be known.	0
0053	SpCd, SpTme	If (SpCd=99/99/9999), then (SpTme=99:99)	If the date a specimen was drawn is unknown, then the time is likely unknown, too.	0
0054	EmDep, HECd9a, HECd9b, Hosp	If (EmDep <> 1 and Hosp <> 1), then HECd9a=000.8	If the patient was admitted to neither an ED nor a hospital, the discharge diagnosis code must be 000.8.	0

Rule_Number	FieldList	Rule_Logic	Rule_Text	IsError
0055	HECd9a, HECd9b	If (HECd9a=000.8), then (HECd9b=000.8)	If the first diagnosis code is 000.8, the second must be 000.8.	0
0056	HECd9a, HECd9b	If (HECd9a <> 000.8), then HECd9a <> HECd9b	Unless both diagnosis codes are 000.8, the codes must be different.	0
0057	Circ, IncTyp	If (IncTyp=66 or 99), then (Circ=0)	If the death type is Other or Unknown, the “Circumstances known” question must be “No”.	0
0058	Mental, TxMent	If (Mental=1), then (TxMent=1)	If the person had mental illness, it is unlikely that they did not have current treatment for mental illness.	0
0059	TxMent, MDiag1	If (Mental <> 1), then (MDiag1=88 and is disabled)	If the person had no mental health problem, they shouldn’t have a mental health diagnosis, so this field should be completed, “Not applicable”.	0
0060	MDiag1, MDiag2	If (MDiag1 <> 1,2,3,4,5, 6,7,8 and 66), then (MDiag2=88 or 99)	If the first diagnosis was Not collected or is Not applicable, the second diagnosis should be “Not applicable” or “Unknown”.	0
0061	MDiag1, MDiag2	If (MDiag1=1,2,3,4,5, 6,7,8), then MDiag2 <> MDiag1	The two diagnoses should be different unless they are both Other (66) or both Not applicable (88) or both Unknown (99).	0
0062	MenTxt, MDiag1, MDiag2	If ((MDiag1 <> 66) and (MDiag2 <> 1,2,3,4,5, and 66)), then (MenTxt=“)	This field can be completed only if the diagnoses were “Other;” or if there were more than 2 diagnoses.	0

Validation Rules

Rule_Number	FieldList	Rule_Logic	Rule_Text	IsError
0063	Mental, TxMent	If (TxMent=1), then (Mental=1)	If the person is being treated for mental illness, they should be coded as having mental illness.	0
0064	Crisis, Health, IPProb, Relat, Job, School, ...	If (Crisis=1), then ((Health=1) or (IPProb=1) or (Relat=1) or (Job=1) or (School=1) or (FinProb=1) or (RecSui=1) or (FamDeath=1) or (RecCrm=1) or (Legal=1) or (PIPV=1) or (PIPVVict=1) or (SuiOth=1))	If the person is reported to have had an acute life crisis, one of the specific types of crises must be checked.	0
0065	NtCrm1, NtCrm2	If (NtCrm1 <> 66), then (NtCrm1 <> NtCrm2)	If the type of crime is not "Other," the types of crimes must differ.	0
0066	Crime, NtCrm1	If (Crime=0 or 9), then (NtCrm1=88)	If there is no crime relation, types of crime should be Not applicable (88).	0
0067	NtCrm2	If (NtCrm1=88 or NtCrm1=99), then (NtCrm2=88)	If the first crime is "Not applicable" or "Unknown", the second crime should be "Not applicable".	0
0068	NtCrm2	If (Crime=0 or 9), then (NtCrm2=88)	If there is no crime relation, types of crime should be Not applicable (88).	0
0069	TyTxt	If (FType <> 66), then (TyTxt='')	Enter other firearm type text only if firearm type code is Other (66).	0
0070	MkTxt	If (Make <> 666), then (MkTxt='')	Enter other firearm make text only if make or NCIC code is Other (666).	0
0071	MoTxt	If (Model <> 66666), then (MoTxt='')	Enter other firearm model text only if firearm model code is Other (66666).	0

Rule_Number	FieldList	Rule_Logic	Rule_Text	IsError
0072	Gauge, FType	If (FType=1–14 or 23, 66,77,99), then (Gauge=888)	If firearm is not a shotgun, gauge is Not applicable (888).	0
0073	Calib, FType	If (FType=15–23 or 66, 77,99), then (Calib=8888)	If firearm is a shotgun, caliber is Not applicable (8888).	0
0074	ImpNm, Trace	If (Trace=8), then (ImpNm=88)	If firearm was not recovered, this variable is Not applicable (88).	0
0075	ImpCt, Trace	If (Trace=8), then (ImpCt=88)	If firearm was not recovered, this variable is Not applicable (88).	0
0076	ImpSt, Trace	If (Trace=8), then (ImpSt=88)	If firearm was not recovered, this variable is Not applicable (88).	0
0077	Fpurc	If (Fpurc=1), then (only 1 person/weapon can be first purchaser)	Only one person can be coded as the First purchaser of the firearm.	0
0078	Owner, Locked	If (Owner=1), then (Locked=8)	If the gun user was the gun owner, the “Gun stored locked” question is Not applicable (8).	0
0079	Owner, Loaded	If (Owner=1), then (Loaded=8)	If the gun user was the gun owner, the “Gun stored loaded” question is Not applicable (8).	0
0080	Trace, FPSt	If (Trace=0,1,3,8, or 9), then (FPSt=88)	If the firearm was not traced, this variable is Not applicable (88).	0
0081	Trace, FPSt	If (Trace=2), then (FPSt <> 8)	If the firearm was successfully traced, the state of the importer cannot be “Not applicable”.	0
0082	Rela1, Rela2	If (Rela1=88 or Rela1=99), then (Rela2=88)	If the first relationship is “Not Applicable” or “Unknown”, the second must be “Not applicable”.	0
0083	Rela1	If (Rela1 <> 88 and Rela1 <> 99), then (Rela1 <> Rela2)	Unless relationships are Not applicable, the first relation must be different from the second.	0

Validation Rules

Rule_Number	FieldList	Rule_Logic	Rule_Text	IsError
0084	Age, AgeTyp, Rela1, Rela2	If victim's age < suspect's age, then (Rela1 and Rela2) <> 10 or 14	If the victim is younger than the suspect, the victim cannot be the parent or grandparent of the suspect.	0
0085	Age, AgeTyp, Rela1, Rela2	If victim's age > suspect's age, then (Rela1 and Rela2) <> 11, 13	If the victim is older than the suspect, the victim cannot be the child or grandchild of the suspect.	0
0086	Age, AgeTyp, Rela1, Rela2	If victim's age < suspect's age then ((Rela1 <> 16 or 19) and (Rela2 <> 16 or 19))	If the victim is younger than the suspect, the specified relationship is unlikely.	0
0087	Age, AgeTyp, Rela1, Rela2	If victim's age > suspect's age then ((Rela1 <> 17 or 18) and (Rela2 <> 17 or 18))	If the victim is older than the suspect, the specified relationship is unlikely.	0
0088	Age, AgeTyp, Rela2	If (AgeTyp >1) or (AgeTyp=1 and Age <14), then (Rela2 <> 1,2,3,7,8,10, 14,16,19, and 51)	This relationship is unlikely for a child under age 14.	0
0089	KCFR, KResType	If (KCFR=0), then (KResType=88)	If CFR is not available, then victim's primary residency should be Not applicable (88).	0
0090	KCFR, KResNew	If (KCFR=0), then (KResNew=8)	If CFR is not available, then victim's new living situation should be Not applicable (8).	0
0091	KResType, KResNew	If (KResType=1), then (KResNew=8)	If the primary residency is the victim's home, then the new living situation should be Not applicable (8).	0
0092	KAdult1, KAdult2, KAdult3, KAdult4, KResType	If (KResType=4,5,6, or 7), then ((KAdult1=88) and (KAdult2=88) and (KAdult3=88) and (KAdult4=88))	If the primary residence of the victim is not a home, then the Household adults should be Not applicable (88).	0

Rule_Number	FieldList	Rule_Logic	Rule_Text	IsError
0093	KAdult1, KAdult2, KAdult3, KAdult4, KCFR	If (KCFR=0), then ((KAdult1=88) and (KAdult2=88) and (KAdult3=88) and (KAdult4=88))	If CFR is not available, then Adults in the victim's household should be Not applicable (88).	0
0094	KKids, KResType	If (KResType=3,4,5,6, or 7), then (KKids=8)	If the primary residence of the victim is not a home, then the other children in the household should be Not applicable (8).	0
0095	KCFR, KKids	If (KCFR=0), then (KKids=8)	If CFR is not available, then other children in the victim's household should be Not applicable (8).	0
0096	KCFR, KDV	If (KCFR=0), then (KDV=8)	If CFR is not available, then Intimate partner violence in the victim's household should be Not applicable (8).	0
0097	KCFR, KSubs	If (KCFR=0), then (KSubs=8)	If CFR is not available, then evidence of substance abuse in the victim's household should be Not Applicable (8).	0
0098	KCFR, KDVfos	If (KCFR=0), then (KDVfos=8)	If CFR is not available, then Intimate partner violence in the victim's foster home should be Not applicable (8).	0
0099	KDVfos, KResType	If (KResType <> 2), then (KDVfos=8)	If the primary residency of the victim is not foster family home, then Intimate partner violence in the victim's foster home should be Not applicable (8).	0
0100	KCFR, KSubsFos	If (KCFR=0), then (KSubsFos=8)	If CFR is not available, then evidence of substance abuse in the victim's foster home should be Not applicable (8).	0

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Rule_Number	FieldList	Rule_Logic	Rule_Text	IsError
0101	KResType, KSubsFos	If (KResType <> 2), then (KSubsFos=8)	If the primary residency of the victim is not foster family home, then evidence of substance abuse in the victim's foster home should be Not applicable (8).	0
0102	KCFR, KSuperv	If (KCFR=0), then (KSuperv=8)	If CFR is not available, then the quality of supervision that contributed to the victim's death should be Not applicable (8).	0
0103	KCFR, KSupRel	If (KCFR=0), then (KSupRel=8)	If CFR is not available, then the Supervisor's relationship to the victim should be Not applicable (8).	0
0104	KSuperv, KSupRel	If (KSuperv=1 or 2), then (KSupRel <> 8)	If the quality of supervision contributed to the victim's death, then Supervisor's relationship to the victim should be something other than "Not applicable".	0
0105	KSuperv, KSupRel	If (KSuperv <> 1 and 2), then (KSupRel=8)	If the quality of supervision did not contribute to the victim's death, then Supervisor's relationship to the victim should be "Not applicable".	0
0106	KCFR, KSupAge	If (KCFR=0), then (KSupAge=888)	If CFR is not available, then the Supervisor's age at the time of incident should be Not applicable (888).	0
0107	KSuperv, KSupAge	If (KSuperv=1 or 2), then (KSupAge <> 888)	If the quality of supervision contributed to the victim's death, then Supervisor's age should be something other than "Not applicable".	0

Rule_Number	FieldList	Rule_Logic	Rule_Text	IsError
0108	KSuperv, KSupAge	If (KSuperv <> 1 and 2), then (KSupAge=888)	If the quality of supervision did not contribute to the victim's death, then Supervisor's age should be "Not applicable".	0
0109	KCFR, KSupSex	If (KCFR=0), then (KSupSex=8)	If CFR is not available, then the Supervisor's sex should be Not applicable (8).	0
0110	KSupSex, KSuperv	If (KSuperv <> 1 and 2), then (KSupSex=8)	If the quality of supervision did not contribute to the victim's death, then Supervisor's sex should be "Not applicable".	0
0111	KSupSex, KSuperv	If (KSuperv=1 or 2), then (KSupSex <> 8)	If the quality of supervision contributed to the victim's death, then Supervisor's sex should be something other than "Not applicable".	0
0112	KCFR, KSupNo	If (KCFR=0), then (KSupNo=8)	If CFR is not available, then no supervision present should be Not applicable (8).	0
0113	KSuperv, KSupNo	If (KSuperv=1), then (KSupNo <> 8)	If the quality of supervision contributed to the victim's death, then No supervision present should be something other than "Not applicable".	0
0114	KCFR, KSupHaz	If (KCFR=0), then (KSupHaz=8)	If CFR is not available, then the supervisor's failure to protect from known hazard should be Not applicable (8).	0

Validation Rules

Rule_Number	FieldList	Rule_Logic	Rule_Text	IsError
0115	KSuperv, KSupHaz	If (KSuperv=1), then (KSupHaz <> 8)	If the quality of supervision contributed to the victim's death, then the supervisor's failure to protect from known hazard should be something other than "Not applicable".	0
0116	KCFR, KSupDrug	If (KCFR=0), then (KSupDrug=8)	If CFR is not available, then supervisor was drug-impaired should be Not applicable (8).	0
0117	KSuperv, KSupDrug	If (KSuperv=1), then (KSupDrug <> 8)	If the quality of supervision contributed to the victim's death, then supervisor was drug-impaired should be something other than "Not applicable".	0
0118	KCFR, KSupEtOH	If (KCFR=0), then (KSupEtOH=8)	If CFR is not available, then supervisor was alcohol-impaired should be Not applicable (8).	0
0119	KSuperv, KSupEtOH	If (KSuperv=1), then (KSupEtOH <> 8)	If the quality of supervision contributed to the victim's death, then supervisor was alcohol-impaired should be something other than "Not applicable".	0
0120	KCFR, KSupPsych	If (KCFR=0), then (KSupPsych=8)	If CFR is not available, then supervisor had mental illness should be Not applicable (8).	0
0121	KSuperv, KSupPsych	If (KSuperv=1), then (KSupPsych <> 8)	If the quality of supervision contributed to the victim's death, then supervisor had mental illness should be something other than "Not applicable".	0
0122	KCFR, KSupMr	If (KCFR=0), then (KSupMr=8)	If CFR is not available, then supervisor had mental retardation should be Not applicable (8).	0

Rule_Number	FieldList	Rule_Logic	Rule_Text	IsError
0123	KSuperv, KSupMr	If (KSuperv=1), then (KSupMr <> 8)	If the quality of supervision contributed to the victim's death, then supervisor had mental retardation should be something other than "Not applicable".	0
0124	KCFR, KSupDis	If (KCFR=0), then (KSupDis=8)	If CFR is not available, then supervisor had physical disability should be Not applicable (8).	0
0125	KSuperv, KSupDis	If (KSuperv=1), then (KSupDis <> 8)	If the quality of supervision contributed to the victim's death, then supervisor had physical disability should be something other than "Not applicable".	0
0126	KCFR, KSupBusy	If (KCFR=0), then (KSupBusy=8)	If CFR is not available, then supervisor was distracted/preoccupied should be Not applicable (8).	0
0127	KSuperv, KSupBusy	If (KSuperv=1), then (KSupBusy <> 8)	If the quality of supervision contributed to the victim's death, then supervisor was distracted/preoccupied should be something other than "Not applicable".	0
0128	KCFR, KSupDoze	If (KCFR=0), then (KSupDoze=8)	If CFR is not available, then supervisor was asleep should be Not applicable (8).	0
0129	KSupDoze, KSuperv	If (KSuperv=1), then (KSupDoze <> 8)	If the quality of supervision contributed to the victim's death, then supervisor was asleep should be something other than "Not applicable".	0
0130	KCFR, KIllness	If (KCFR=0), then (KIllness=8)	If CFR is not available, then the victim's physical illness should be Not applicable (8).	0

Validation Rules

Rule_Number	FieldList	Rule_Logic	Rule_Text	IsError
0131	KCFR, KIITxt	If (KCFR=0), then (KIITxt=8).	If CFR is not available, then the victim's diagnosis for physical illness should be Not applicable (8).	0
0132	KCFR, KDisable	If (KCFR=0), then (KDisable=8)	If CFR is not available, then the victim's disability at the time of the incident should be Not applicable (8).	0
0133	KCFR, KDisPhy	If (KCFR=0), then (KDisPhy=8)	If CFR is not available, then the victim's physical disability should be Not Applicable (8).	0
0134	KDisable, KDisPhy	If (KDisable <> 1), then (KDisPhy=8)	If the victim was not disabled at the time of the incident, then the victim's physical disability should be Not applicable (8).	0
0135	KCFR, KDisDev	If (KCFR=0), then (KDisDev=8)	If CFR is not available, then the victim's developmental disability should be Not applicable (8).	0
0136	KDisable, KDisDev	If (KDisable <> 1), then (KDisDev=8)	If the victim was not disabled at the time of the incident, then the victim's developmental disability should be Not applicable (8).	0
0137	KCFR, KDisSens	If (KCFR=0), then (KDisSens=8)	If CFR is not available, then the victim's sensory disability should be Not applicable (8).	0
0138	KDisable, KDisDev	If (KDisable <> 1), then (KDisSens=8)	If the victim was not disabled at the time of the incident, then the victim's sensory disability should be Not applicable (8).	0
0139	KCFR, KPNSubs	If (KCFR=0), then (KPNSubs=8)	If CFR is not available, then the victim's maternal recreational drug use should be Not applicable (8).	0

Rule_Number	FieldList	Rule_Logic	Rule_Text	IsError
0140	Age, KPNSubs	If (AgeTyp=1 and Age >1), then (KPNSubs=8)	If the victim is older than 1 year, then the victim's maternal recreational drug use should be Not applicable (8).	0
0141	KCFR, KPNAcoh	If (KCFR=0), then (KPNAcoh=8)	If CFR is not available, then the victim's maternal alcohol use should be Not applicable (8).	0
0142	Age, KPNAcoh	If (AgeTyp=1 and Age >1), then (KPNAcoh=8)	If the victim is older than 1 year, then the victim's maternal alcohol use should be Not applicable (8).	0
0143	KCFR, KPNTob	If (KCFR=0), then (KPNTob=8)	If CFR is not available, then the victim's maternal tobacco use should be Not applicable (8).	0
0144	Age, KPNTob	If (AgeTyp=1 and Age >1), then (KPNTob=8)	If the victim is older than 1 year, then the victim's maternal tobacco use should be Not applicable (8).	0
0145	KCFR, KPNCare	If (KCFR=0), then (KPNCare=8)	If CFR is not available, then the victim's mother's prenatal care prior to the 3rd trimester should be Not applicable (8).	0
0146	Age, KPNCare	If (AgeTyp=1 and Age >1), then (KPNCare=8)	If the victim is older than 1 year, then the victim's mother's prenatal care prior to the 3rd trimester should be Not applicable (8).	0
0147	KCFR, KCPSRept	If (KCFR=0), then (KCPSRept=8)	If CFR is not available, then the CPS report or referral filed on the victim's household prior to the incident should be Not applicable (8).	0
0148	KCFR, KCPSRept, KCPSWho	If (KCFR=0) or (KCPSRept <> 1), then KCPSWho=8	If CFR is not available, then the household member that the CPS report was filed on should be Not applicable (8).	0

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Rule_Number	FieldList	Rule_Logic	Rule_Text	IsError
0149	KCFR, KCPSTrue	If (KCFR=0), then (KCPSTrue=8)	If CFR is not available, then the report substantiation by CPS on the victim's household should be Not applicable (8).	0
0150	KCPSRept, KCPSTrue	If (KCPSRept <> 1), then (KCPSTrue=8)	If the CPS report or referral filed on the victim's household prior to the incident is something other than "Yes" then the substantiation by CPS of the report should be Not applicable (8).	0
0151	KCFR, KCPSPHys	If (KCFR=0), then (KCPSPHys=8)	If CFR is not available, then the CPS report substantiation of maltreatment as physical abuse should be Not applicable (8).	0
0152	KCPSRept, KCPSPHys	If (KCPSRept <> 1), then (KCPSPHys=8)	If the CPS report or referral filed on the victim's household prior to the incident is something other than "Yes" then the CPS report substantiation of maltreatment as physical abuse should be Not applicable (8).	0
0153	KCPSPHys, KCPSTrue	If (KCPSTrue=1), then (KCPSPHys <> 8)	If CPS substantiates the report or referral; then the substantiation of maltreatment as physical abuse should be something other than Not applicable (8).	0
0154	KCPSPHys, KCPSTrue	If (KCPSTrue <> 1), then (KCPSPHys=8)	If CPS does not substantiate the report or referral; then the substantiation of maltreatment as physical abuse should be Not applicable (8).	0

Rule_Number	FieldList	Rule_Logic	Rule_Text	IsError
0155	KCFR, KCPSSex	If (KCFR=0), then (KCPSSex=8)	If CFR is not available, then the CPS report substantiation of maltreatment as sexual abuse should be Not applicable (8).	0
0156	KCPSSex, KCPSSRept	If (KCPSSRept <> 1), then (KCPSSex=8)	If the CPS report or referral filed on the victim's household prior to the incident is something other than "Yes" then the CPS report substantiation of maltreatment as sexual abuse, should be Not applicable (8).	0
0157	KCPSSex, KCPSTrue	If (KCPSTrue=1), then (KCPSSex <> 8)	If CPS substantiates the report or referral; then the substantiation of maltreatment as sexual abuse should be something other than Not applicable (8).	0
0158	KCPSSex, KCPSTrue	If (KCPSTrue <> 1), then (KCPSSex=8)	If CPS did not substantiate the report or referral; then the substantiation of maltreatment as sexual abuse should be Not applicable (8).	0
0159	KCFR, KCPSTNeg	If (KCFR=0), then (KCPSTNeg=8)	If CFR is not available, then the CPS report substantiation of maltreatment as neglect should be Not applicable (8).	0
0160	KCPSTNeg, KCPSTRept	If (KCPSTRept <> 1), then (KCPSTNeg=8)	If the CPS report or referral filed on the victim's household prior to the incident is something other than "Yes" then the CPS report substantiation of maltreatment as neglect should be Not applicable (8).	0

Validation Rules

Rule_Number	FieldList	Rule_Logic	Rule_Text	IsError
0161	KCPSTNeg, KCPSTTrue	If (KCPSTTrue=1), then (KCPSTNeg <> 8)	If CPS substantiates the report or referral; then the substantiation of maltreatment as neglect should be something other than Not applicable (8).	0
0162	KCPSTNeg, KCPSTTrue	If (KCPSTTrue <> 1), then (KCPSTNeg=8)	If CPS did not substantiate the report or referral; then the substantiation of maltreatment as neglect should be Not applicable (8).	0
0163	KCFR, KCPSOpen	If (KCFR=0), then (KCPSOpen=8)	If CFR is not available, then CPS case opened on other children due to this should be Not applicable (8).	0
0164	KCFR, KLawVict	If (KCFR=0), then (KLawVict=8)	If CFR is not available, then the victim's contact with law enforcement should be Not applicable (8).	0
0165	KCFR, KLawHous	If (KCFR=0), then (KLawHous=8)	If CFR is not available, then the household's contact with law enforcement should be Not applicable (8).	0
0166	KCFR, KJuv	If (KCFR=0), then (KJuv=8)	If CFR is not available, then the victim's contact with juvenile justice system should be Not applicable (8).	0
0167	KCFR, KHealth	If (KCFR=0), then (KHealth=8)	If CFR is not available, then the victim's contact with healthcare system should be Not applicable (8).	0
0168	KCFR, KMedicaid	If (KCFR=0), then (KMedicaid=8)	If CFR is not available, then the victim's contact with Medicaid should be Not applicable (8).	0

Rule_Number	FieldList	Rule_Logic	Rule_Text	IsError
0169	KCFR, KMHServ	If (KCFR=0), then (KMHServ=8)	If CFR is not available, then the victim's contact with mental health services should be Not applicable (8).	0
0170	KCFR, KSocial	If (KCFR=0), then (KSocial=8)	If CFR is not available, then the victim or primary caregiver's contact with social services should be Not applicable (8).	0
0171	KCFR, KWelfare	If (KCFR=0), then (KWelfare=8)	If CFR is not available, then the primary caregiver's contact with welfare/financial assistance should be Not applicable (8).	0
0172	KCFR, KWIC	If (KCFR=0), then (KWIC=8)	If CFR is not available, then the victim's contact with WIC should be Not applicable (8).	0
0173	KCFR, KRecME	If (KCFR=0), then (KRecME=8)	If CFR is not available, then Coroner/Medical Examiner Records were used to review victim's death should be Not applicable (8).	0
0174	KCFR, KRecCPS	If (KCFR=0), then (KRecCPS=8)	If CFR is not available, then Social Services/ Child Protective Services Records were used to review victim's death should be Not applicable (8).	0
0175	KCFR, KRecLaw	If (KCFR=0), then (KRecLaw=8)	If CFR is not available, then Police/Law Enforcement Records were used to review victim's death should be Not applicable (8).	0
0176	KCFR, KRecEdu	If (KCFR=0), then (KRecEdu=8)	If CFR is not available, then School Records were used to review victim's death should be Not applicable (8).	0

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Rule_Number	FieldList	Rule_Logic	Rule_Text	IsError
0177	KCFR, KRecEMS	If (KCFR=0), then (KRecEMS=8)	If CFR is not available, then EMS Records were used to review victim's death should be Not applicable (8).	0
0178	KCFR, KRecMD	If (KCFR=0), then (KRecMD=8)	If CFR is not available, then Health Provider/ Hospital Records were used to review victim's death should be Not applicable (8).	0
0179	KCFR, KRecDOH	If (KCFR=0), then (KRecDOH=8)	If CFR is not available, then Public Health Department Records were used to review victim's death should be Not applicable (8).	0
0180	KCFR, KRecPsy	If (KCFR=0), then (KRecPsy=8)	If CFR is not available, then Mental Health Records were used to review victim's death should be Not applicable (8).	0
0181	KCFR, KRecJuv	If (KCFR=0), then (KRecJuv=8)	If CFR is not available, then Juvenile Justice Records/probation were used to review victim's death should be Not applicable (8).	0
0182	KCFR, KRecDC	If (KCFR=0), then (KRecDC=8)	If CFR is not available, then Death Certificate Records were used to review victim's death should be Not applicable (8).	0
0183	KCFR, KRecOth	If (KCFR=0), then (KRecOth=8)	If CFR is not available, then other records were used to review victim's death should be Not applicable (8).	0
0184	KRecOth, KRecTxt	If (KRecOth=1), then (KRecTxt <> '')	If other records were used to review victim's death, then the text field for other records used should not be left blank.	0

Rule_Number	FieldList	Rule_Logic	Rule_Text	IsError
0185	KCFR, KConclud	If (KCFR=0), then (KConclud=8)	If CFR is not available, the CFRT conclusions consistent with official manner of death should be Not applicable (8).	0
0186	KCFR, KManner	If (KCFR=0), then (KManner=88)	If CFR is not available, then manner of death CFRT designated should be Not applicable (88).	0
0187	KConclud, KManner	If (KConclud=0), then (KManner <> 88)	If CFRT conclusions were not consistent with official manner of death, then CFRT designated manner of death should be something other than Not applicable (88).	0
0188	KConclud, KManner	If (KConclud <> 0), then (KManner=88)	If CFRT conclusions were consistent with official manner of death or CFRT does not make this comparison, then CFRT designated manner of death should be Not applicable (88).	0
0189	KManner, KMannTxt	If (KManner=6), then (KMannTxt <> '')	If CFRT designated manner of death is Other (6) then the text field for other manner should not be left blank.	0
0190	KAction, KCFR	If (KCFR=0), then (KAction=8)	If CFR is not available, then any action initiated to change the officially designated manner should be Not applicable (8).	0
0191	KAction, KConclud	If (KConclud=0), then (KAction <> 8)	If CFRT conclusions were not consistent with official manner of death, then any action initiated to change the officially designated manner should be something other than Not applicable (8).	0

Validation Rules

Rule_Number	FieldList	Rule_Logic	Rule_Text	IsError
0192	KAction, KConclud	If (KConclud <> 0), then (KAction=8)	If CFRT conclusions were consistent with official manner of death or CFRT does not make this comparison, then any action initiated to change the officially designated manner should be Not applicable (8).	0
0193	KCFR, KResult	If (KCFR=0), then (KResult=8)	If CFR is not available, then result of any action initiated to change the officially designated manner should be Not applicable (8).	0
0194	KAction, KConclud, KResult	If (KConclud=0) and (KAction=1), then (KResult <> 8)	If CFRT conclusions were not consistent with official manner of death, and action was initiated to change the officially designated manner, then result of action should be something other than Not applicable (8).	0
0195	KAction, KConclud, KResult	If (KConclud=0) and (KAction <> 1), then (KResult =8)	If CFRT conclusions were not consistent with official manner of death, and action was not initiated to change the officially designated manner, then result of action should be Not applicable (8).	0
0196	KCFR, KPrevent	If (KCFR=0), then (KPrevent=8)	If CFR is not available, then CFRT conclude that the death was preventable should be Not applicable (8).	0
0197	KCFR, GPerson1, GPerson2	If (KCFR=0), then (GPerson1=8) and (GPerson2=8)	If CFR is not available, then Primary caregiver should be Not applicable (8).	0
0198	KCFR, GPersID1, GPersID2	If (KCFR=0), then (GPersID1=0) and (GPersID2=0)	If CFR is not available, then Primary caregiver ID should be Not applicable (00000).	0

Rule_Number	FieldList	Rule_Logic	Rule_Text	IsError
0199	GPersID1, GPerson1, GPersID2, GPerson2	If (GPerson1=0), then (GPersID1=0); If (GPerson2=0), then (GPersID2=0)	If Primary caregiver is neither a suspect nor a victim in the incident, then the Primary caregiver number should be Not applicable (00000).	0
0200	KCFR, GRel1, GRel2	If (KCFR=0), then (GRel1=8) and (GRel2=8)	If CFR is not available, then the relationship of the Primary caregiver to the victim should be Not applicable (8).	0
0201	KCFR, GAge1, GAge2	If (KCFR=0), then (GAge1=888) and (GAge2=888)	If CFR is not available, then the Primary caregiver's age should be Not applicable (888).	0
0202	KCFR, GSex1, GSex2	If (KCFR=0), then (GSex1=8) and (GSex2=8)	If CFR is not available, then the Primary caregiver's sex should be Not applicable (8).	0
0203	KCFR, GCustody1, GCustody2	If (KCFR=0), then (GCustody1=8) and (GCustody2=8)	If CFR is not available, then whether the Primary caregiver had legal custody of the victim should be Not applicable (8).	0
0204	KCFR, GCAN1, GCAN2	If (KCFR=0), then (GCAN1=8) and (GCAN2=8)	If CFR is not available, then whether the Primary caregiver had documented maltreatment of the victim should be Not applicable (8).	0
0205	KCFR, GDeath1, GDeath2	If (KCFR=0), then (GDeath1=8) and (GDeath2=8)	If CFR is not available, then whether the Primary caregiver had a previous child die in their care should be Not applicable (8).	0
0206	ChldWit, Witness	If (Witness=1), then (ChldWit <> 8)	If there is a witness to the fatal incident, then the answer for "Any child witnesses" should not be "Not applicable" .	0

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Rule_Number	FieldList	Rule_Logic	Rule_Text	IsError
0207	ChldWit, Witness	If (Witness=0), then (ChldWit=0)	If there is no witness to the fatal incident, then the selection for "Any child witnesses" should be No (0).	0
0208	ChldWit, Witness	If (Witness=9), then (ChldWit=9)	If the witness to the fatal incident is unknown, then the selection for "Any child witnesses" should also be Unknown (9).	0
0209	BarAcsTr, Mental	If (Mental <> 1), then (BarAcsTr=8)	If the victim's mental history is "No, Not applicable, Not collected or Unknown" then Barriers to accessing care should be Not applicable (8).	0
0210	BarAcsTr, TxMent	If (TxMent=1), then (BarAcsTr=8)	If the victim has current treatment for a mental problem, then Barriers to accessing care should be Not applicable (8).	0
0211	SArrest, SusIdent	If (SusIdent <> 1), then (SArrest=8)	If the suspect has not been identified by name, then the suspect arrested as perpetrator in this death should be Not applicable (8).	0
0212	SArrest, SusIdent	If (SusIdent =1), then (SArrest <> 8)	If the suspect has been identified by name, then the suspect arrested as perpetrator in this death should not be Not applicable (8).	0
0213	SArrest, SusChg	If (SArrest <> 1), then (SusChg=8)	If the suspect has not been arrested, then suspect charged as perpetrator in this death should be Not applicable (8).	0
0214	SArrest, SusChg	If (SArrest=1), then (SusChg <> 8)	If the suspect has been arrested, then suspect charged as perpetrator in this death should not be Not applicable (8).	0

Rule_Number	FieldList	Rule_Logic	Rule_Text	IsError
0215	SusChg, SusPros	If (SusChg<>1), then (SusPros=8)	If the suspect has not been charged as perpetrator in this death, then case prosecuted should be "Not Applicable" (8)	0
0216	SusChg, SusPros	If (SusChg =1), then (SusPros<>8)	If the suspect has been charged as perpetrator in this death, then case prosecuted should not be "Not Applicable" (8)	0
0217	SConvict, SusPros	If (SusPros<>1), then (SConvict=8)	If the case has not been prosecuted, then conviction should be "Not Applicable" (8)	0
0218	SConvict, SusPros	If (SusPros=1), then (SConvict<>8)	If the case has been prosecuted, then conviction should not be "Not Applicable" (8)	0
0219	CPSRpFil, SusIdent	If (SusIdent<>1), then (CPSRpFil=8)	If the suspect has not been identified by name, then "CPS report or referral ever filed" should be "Not Applicable" (8)	0
0220	SusIdent, CPSRpFil	If (SusIdent=1), then (CPSRpFil<>8)	If the suspect has been identified by name, then "CPS report or referral ever filed" should not be "Not Applicable" (8)	0
0221	SusPrHomi, SusIdent	If (SusIdent<>1), then (SusPrHomi =8)	If the suspect has not been identified by name, then the suspect ever charged with a prior homicide should be "Not Applicable" (8)	0
0222	SusIdent, SusPrHomi	If (SusIdent=1), then (SusPrHomi <>8)	If the suspect has been identified by name, then the suspect ever charged with a prior homicide should not be "Not Applicable" (8)	0

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Rule_Number	FieldList	Rule_Logic	Rule_Text	IsError
0223	Age, AgeTyp, KFCR, PType	Warning If (PType=1 or 3) and (AgeTyp=1 and Age <18) and (KFCR=blank)	One or more of the victims in this incident is less than 18 years old. If you are a state testing or using the CFRT module, you should have completed the CFRT module.	0
0224	AmphTs, AmphRs	If (AmphTs=2) or (AmphTs=9), then (AmphRs=8)	If an amphetamine test was not performed, then test results should be Not applicable (8).	0
0225	AntiTs, AntiRs	If (AntiTs=2) or (AntiTs=9), then (AntiRs=8)	If an antidepressant test was not performed, then test results should be Not applicable (8).	0
0226	CokeTs, CokeRs	If (CokeTs=2) or (CokeTs=9), then (CokeRs=8)	If a cocaine test was not performed, then test results should be Not applicable (8).	0
0227	MarjTs, MarjRs	If (MarjTs=2) or (MarjTs=9), then (MarjRs=8)	If a marijuana test was not performed, then test results should be Not applicable (8).	0
0228	OpiaTs, OpiaRs	If (OpiaTs=2) or (OpiaTs=9), then (OpiaRs=8)	If an opiate test was not performed, then test results should be Not applicable (8).	0
0229	OtDrTs, OtDrRs	If (OtDrTs=2) or (OtDrTs=9), then (OtDrRs=8)	If testing for any drugs was not performed, then test results should be Not applicable (8).	0
0230	Calib, FType	If (Calib=9), then (FType=6)	If the caliber of the fire- arm is 9 mm the firearm type (FType) is most likely semi-automatic pistol.	0
0231	Calib, FType	If (Calib=25), then (FType=6)	If the caliber of the fire- arm is 25 mm the firearm type (FType) is most likely semi-automatic pistol.	0

Rule_Number	FieldList	Rule_Logic	Rule_Text	IsError
0232	Calib, FType	If (Calib=380), then (FType=6)	If the caliber of the fire- arm is 380 the firearm type (FType) is most likely semi-automatic pistol.	0
0233	Calib, FType	If (Calib=40), then (FType=6)	If the caliber of the fire- arm is 40 the firearm type (FType) is most likely semi-automatic pistol.	0
0234	Calib, FType	If (Calib=45), then (FType=6)	If the caliber of the fire- arm is 45 the firearm type (FType) is most likely semi-automatic pistol.	0
0235	Calib, FType	If (Calib=762), then (FType=13)	If the caliber of the fire- arm is 762 the firearm type (FType) is most likely semi-automatic rifle.	0
0236	Calib, FType	If (Calib=32), then (FType=6 or 7)	If the caliber is 32 Auto the firearm type (FType) is likely a semi-automatic pistol, if the caliber is 32 S&W then the firearm type (FType) is likely revolver.	0
0237	Calib, FType	If (Calib=357, 38, or 1000), then (FType=7)	If the caliber of the fire- arm is 357 or 38 the fire- arm type (FType) is most likely revolver.	0
0238	Calib, FType	If (Calib=44), then (FType=7)	If the caliber of the fire- arm is 44 the firearm type (FType) is most likely revolver. (Exception: IMI Desert Eagle is a semi-automatic pistol.	0
0239	Gauge, FType	If (Gauge=10, 12, 16, 20, 28, 410, 666, or 999), then (FType=16-22)	If the firearm has a gauge, the firearm type (FType) is shotgun.	0
0240	Make, FType	If (Make=AMJ), then (FType=4)	American Derringer manufactures primarily derringers.	

Validation Rules

Rule_Number	FieldList	Rule_Logic	Rule_Text	IsError
0241	Make, FType	If (Make=CLT), then (FType=2-7)	Colt manufactures primarily handguns.	0
0242	Make, FType	If (Make=MAR), then (FType=8-23)	Marlin manufactures primarily rifles and shotguns.	0
0243	Make, FType	If (Make=MOS), then (FType=8-23)	Mossberg manufactures primarily rifles and shot- guns.	0
0244	Make, FType	If (Make=SAV), then (FType=8-23)	Savage manufactures primarily rifles and shotguns.	0
0245	Make, FType	If (Make=REM), then (FType=8-23)	Remington manufactures primarily rifles and shotguns.	0
0246	Make, FType	If (Make=WIN), then (FType=8-23)	Winchester manufactures primarily rifles and shotguns.	0
0247	Make, Ftype	If (Make=BRY), then (Ftype=6)	Bryco Arms manufactures primarily semi-automatic pistols.	0
0248	Make, Ftype	If (Make=RAV). then (Ftype=6)	Raven Arms manufactures primarily semi-automaic pistols.	0
0249	Make, Ftype	If (Make=PHE), then (FType=6)	Phoenix Arms manufactures primarily semi-automatic pistols.	0
0250	Make, FType	If (Make=LCN). then (FType=6)	Lorcin Engineering manufacturers primarily semi-automatic pistols.	0
0251	Make, FType	If (Make=SIG), then (FType=6)	Sig Sauer manufactures primarily semi-automatic pistols.	0
0252	Make, FType	If (Make=SW), then (FType=2-7)	Smith & Wesson manufactures primarily semi-automatic pistols.	0