# Attachment D

# **SUDORS Data Elements**

# **NVDRS Variables Also Collected in SUDORS**

There are no standard paper data collection forms to be used by states because states will be abstracting information from electronic or paper vital statistics or Coroner and Medical Examiner (CME) records into the CDC web-based data system. This is a list of data elements that NVDRS is already designed to collect and that will be collected by the SUDORS system for drug overdose deaths.

## **Incident Information**

Date of addition/change Version of software Incident type Case status Number of source documents in incident Number of persons in incident Number of weapons in incident Date supervisor checked incident Date supervisor rechecked incident Supervisor note field Number of non-fatally shot persons in incident Narrative of the incident

# **Document notes**

Document type Person who entered record Source agency requested from Date record requested/expected/sought Date record re-requested/re-searched Date record received Date record abstracted/imported Date entered data checked Document determined to be unavailable Document notes field

# **Person Information (Victim)**

Abstractor Assigned Manner of death Person type Age Age unit Sex White Black Asian Native Hawaiian or Pacific Islander American Indian Other Race Unspecified Race Hispanic/Latino/Spanish Country of residence

# **Victim Information**

County of residence City of residence Zip code of residence US Census block group of residence US Census tract of residence Birth place Country of birth if not listed Ever served in US armed forces (veteran) Marital status Place of death Place of death if other Date pronounced dead Date of death State of death Immediate cause of death text Cause leading to immediate cause text Next antecedent cause of death text Underlying cause of death text Underlying cause of death ICD-10 code ICD10 4<sup>th</sup> (character) ICD10 5<sup>th</sup> (character) Autopsy performed Person was pregnant Manner of death Date of injury Time of injury Type of location where injured Injured at work State of injury FIPS code County of injury City of injury FIPS code US Census block group of injury US Census tract of injury Survival time no. of units Unit of time used in survival time Education Number years of education Usual occupation code Usual occupation text Kind of business/industry code

State of residence

Usual industry text Multiple conditions on death certificate 1-10 Height Weight Transgender Sexual orientation Recent release from an institution

### **Victim Information (Continued)**

# Coroner/Medical Examiner ZIP code of injury At person's home EMS at scene Homeless status Current occupation Victim in custody when injured

#### Toxicology

Alcohol use suspected Date specimens were collected Time specimens were collected Name of poison Type of poison (Automatically generated) Code for poison (Automatically generated) Patient drug obtained for Cause of death

Summary Toxicology Testing for alcohol Alcohol test results Blood alcohol concentration results Testing for amphetamines Amphetamine test results Testing for antidepressants Antidepressant test results Testing for cocaine Cocaine test results Testing for marijuana Marijuana test results Testing for opiate(s) Opiate test results Testing for anticonvulsants Anticonvulsants test results Testing for antipsychotic Antipsychotic test results Testing for barbiturates Barbiturates test results Testing for benzodiazepines Benzodiazepines test results Testing for muscle relaxants Muscle relaxants test result Testing for carbon monoxide Carbon monoxide results Carbon monoxide source, if CO **Toxicology Comment** 

Suicide and Undetermined Circumstance Variables that Can Be Completed for Unintentional Drug **Overdoses (\*Indicates Crisis Information Collected** with Checkbox) ) Circumstances known Current depressed mood Current mental health problem\* Type of first metal illness diagnosed Type of second metal illness diagnosed Other mental health diagnosis Current treatment for mental illness Ever treated for mental illness Alcohol problem\* Other substance problem\* Other addiction\* Person left a suicide note Disclosed intent to commit suicide History of suicide attempts Crisis in past two weeks Physical health problem\* Intimate partner violence\* Intimate partner problem\* Family relationship problem\* Other relationship problem\* Job problem\* School problem\* Financial problem\* Suicide of friend or family\* Other death of friend or family Recent criminal legal problem\* Other legal problems\* Perpetrator of violence in the past month Victim of violence in the past month Anniversary of a traumatic event History of abuse as a child Eviction/loss of home\* Disclosed suicidal intent to whom History of expressed suicidal intent/thoughts Physical fight (2 people) Argument Timing of argument Disaster exposure Other circumstance

# **Hospital Information**

Victim seen in ED Victim admitted to inpatient care First external cause of injury code from hospital Second external cause of injury code from hospital

# Variables Collected Only by SUDORS

These variables are only collected on unintentional drug overdose deaths.

# **Type of Drug Poisoning**

Type of Drug Poisoning Date last seen alive Time last seen alive

### Substance Abuse

Previous drug overdose Treatment for substance abuse History of opioid/heroin abuse Recent opioid use relapse

#### Scene indications of drug abuse

Any evidence of drug use at scene Evidence of rapid overdose Tourniquet around arm Needle location Witness report of rapid overdose Other evidence of rapid overdose Evidence of injection drug use Track marks on victim Needles/syringes at scene Tourniquet at scene Filters at scene Cookers at scene Witness report of injection drug use Other evidence of injection drug use Evidence of snorting/sniffing Evidence of smoking Evidence of transdermal exposure Evidence of ingestion Evidence of suppository Evidence of sublingual Evidence of prescription drug use Drugs prescribed to victim Drugs not prescribed to victim Drugs with unknown prescription Pills/tablets at scene Patches at scene Prescription bottle at scene Liquid at scene Lozenges/lollipops at scene Prescription vial at scene Witness report of prescription drug use Other Evidence of prescription drug use Evidence of illicit drug use Powder at scene Witness report of illicit drug use Counterfeit pills at scene Tar at scene Crystal at scene Other illicit drug evidence

### **Response to Drug Overdose**

Naloxone/Opioid antagonist administered Naloxone administered by law enforcement Naloxone administered by EMS/fire Naloxone administered by hospital Naloxone administered by other source Naloxone administered by bystander Naloxone administered by person using drugs Naloxone administered by friend Naloxone administered by intimate partner Naloxone administered by roommate Naloxone administered by stranger Naloxone administered by other family member Number of naloxone doses by first responders Number of naloxone doses by bystanders Bystanders present at time of overdose

# Other

Treated for pain at time of injury

## **Prescription Information**

Use of prescription morphine Prescribed buprenorphine/methadone Number of opioid prescriptions in 30 days preceding injury Number of pharmacies dispensing opioids to decedent in 180 days preceding injury Number of doctors writing opioid prescriptions to the decedent in the 180 days preceding injury