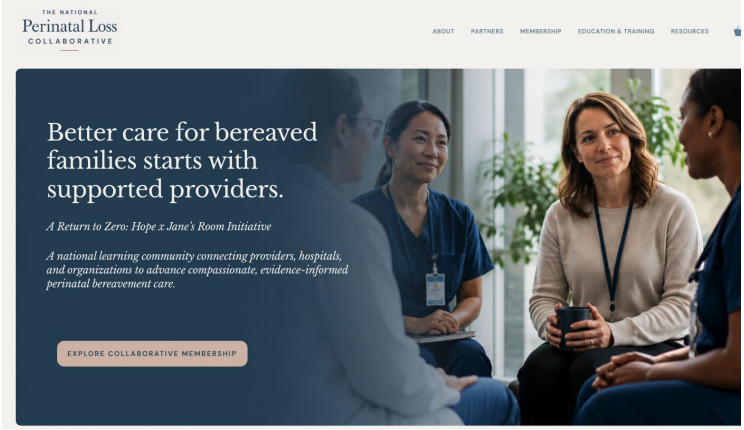
2026 Provider Webinar Series

The National Perinatal Loss Collaborative
A RTZ Hope x Jane's Room Initiative

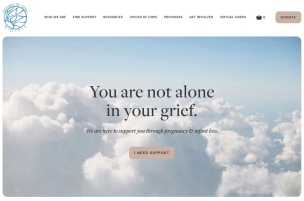
National Perinatal Loss Collaborative

A Return to Zero: Hope x Jane's Room Initiative

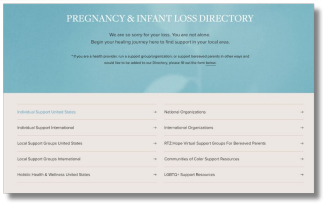


mynplc.org

RTZ Hope Parent Support Resources



Website



Provider Directories



Materials

rtzhope.org

Continuing Education

- 1.0 CE Contact Hours
- This continuing education activity was approved by the Illinois Department of Financial and Professional Regulation
  - Registered Nurse CE Sponsor #236.000230
  - Registered Social Workers CE Sponsor #159.001647

Upcoming Webinars

Competent and Compassionate Care in Pregnancy and Infant Loss

- Friday, September 4
- Dr. Alex Kaysin, MD, MPH

Register for the entire 2026 Webinar Series:
https://www.mynplc.org/webinar-series-2026

Funeral Service Foundation



funeralservicefoundation.org/resources-for-professionals/#_family-community

https://bit.ly/goodbye-comes-too-soon

Housekeeping

- This webinar is being recorded.
- You will receive a link to the recording and the slides.
- You will have 30 days to watch the recording and complete the evaluation for CEU credit.
- Post questions in the chat box at any time.
- Questions will be answered at the end of the presentation.
- If times runs out, we will send your questions to the speakers.

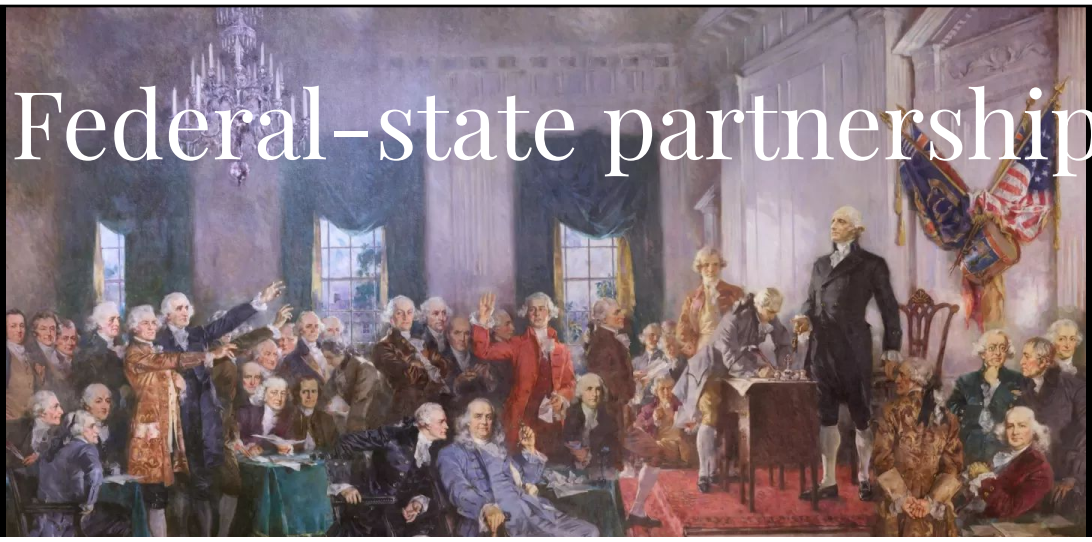
Fetal Death Certificates Explained

Jill Wieber Lens
Dorothy M. Willie Professor of Excellence
University of Iowa College of Law

Vital records.

Births, deaths (including *fetal*), marriages, divorces

Federal-state partnership



- 50 states, NYC, DC, and 5 territories track data
- Feds collect and publish (Nat'l Center for Vital Statistics, a division within the CDC)

dead bodies.

8. Stillborn children, or those dead at birth, shall be registered as births and also as deaths, and a certificate of both the birth and the death shall be filed with the local registrar in the usual form and manner; the certificate of birth to contain, in place of the name of the child, the word "stillbirth." The medical certificate of the cause of death shall be signed by the attending physician, if any, and shall state the cause of death as "stillborn," with the cause of the stillbirth, if known, whether a premature birth, and, if born prematurely, the period of uterogestation in months, if known, and a burial or removal permit in usual form shall be required. Midwives shall not sign certificates of death for stillborn

Registration of stillborn children.

(6) A stillborn child shall be registered as a birth and also as a death, and separate certificates of both birth and death shall be filed with the local registrar, in the usual form and manner, the certificate of birth to contain in the place of the name of the child, the word "stillbirth": *Provided,* that a certificate of birth and a certificate of death shall not be required for a child that has not advanced to the fifth month of uterogestation. The medical certificate of the cause of death shall be

982

Changes to (Suggested) Registration (Model Vital Statistics Act)

- Birth certificate and death certificate
- 1939: Stillbirth certificate
- 1955: Certificate of Fetal Death
- 1978: Standard Report of Fetal Death

Different State Approaches for Required Issuance

- If fetal weight exceeds 350 grams, or if weight unknown, if pregnancy was at 20 weeks or later
- If after the 20th week of pregnancy
- If after the 20th week of pregnancy, or if length of pregnancy unknown, if fetal weight exceeds 350 grams
- If after 16th week of pregnancy; if after 12th week of pregnancy; all fetal deaths

The Problem of Nonuniformity

- If fetal weight exceeds 350 grams, or if weight unknown, if pregnancy was at 20 weeks or later (Model Act)
- If after the 20th week of pregnancy
- If after the 20th week of pregnancy, or if length of pregnancy unknown, if fetal weight exceeds 350 grams
- If after 16th week of pregnancy; if after 12th week of pregnancy; all fetal deaths…

Fetal Deaths vs. (Live) Births vs. Abortions

Defining Fetal Death first

"Fetal death" means death prior to the complete expulsion or extraction from its mother of a product of human conception, irrespective of the duration of pregnancy and which is not an induced termination of pregnancy. The death is indicated by the fact that after such expulsion or extraction, the fetus does not breathe or show any other evidence of life, such as beating of the heart, pulsation of the umbilical cord, or definite movement of voluntary muscles. Heartbeats are to be distinguished from transient cardiac contractions; respirations are to be distinguished from fleeting respiratory efforts or gasps.

- "death prior to complete expulsion or extraction from its mother of a product of human conception"
- and isn't an "induced termination of pregnancy"
- (note that this defines fetal death, a different law would mandate registration of post 20 week fetal deaths)

Fetal Death or Live Birth?

"Live birth" means the complete expulsion or extraction from its mother of a product of human conception, irrespective of the duration of pregnancy, which, after such expulsion or extraction, breathes, or shows any other evidence of life, such as beating of the heart, pulsation of the umbilical cord, or definite movement of voluntary muscles, whether or not the umbilical cord has been cut or the placenta is attached. Heartbeats are to be distinguished from transient cardiac contractions; respirations are to be distinguished from fleeting respiratory efforts or gasps.

- "irrespective of the duration of pregnancy"
- "breathes, or shows any other evidence of life, such as the best of the heart, pulsation of the umbilical cord, or definite movement of voluntary"

Fetal Death or Abortion?

"Induced termination of pregnancy" means the purposeful interruption of an intrauterine pregnancy with the intention other than to produce a live-born infant, and which does not result in a live birth. This definition excludes management of prolonged retention of products of conception following fetal death.

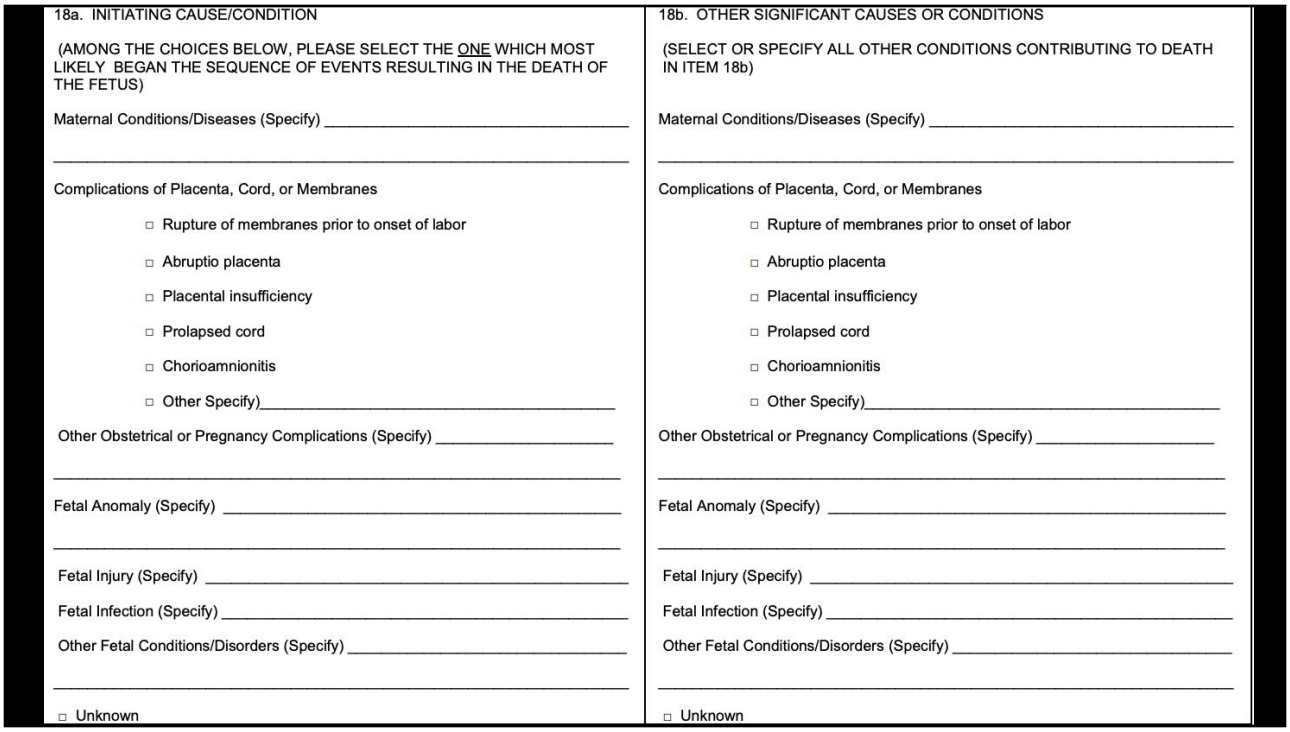
- "purposeful interruption" with the "intent[] other than to produce a live-born infant"
- "does not result in live birth"

Classifications exist, but this isn't always easy...

- maybe an inclination to *see* signs of life that aren't there
- suspect that some premature or short-lived live births are registered as fetal deaths
- pre-viability induced labor abortions without fetal demise first

Data Collected on FDC (page 1)

- Fetus name (if desired), sex if known
- Details of delivery (date, location)
- Mother's info (name, DOB, birthplace, address)
- Dad's info (name, DOB, birthplace)
- Method of disposition
- Medical attendant, who completing report
- Causes/Conditions contributing to fetal death
  - Initiating cause/condition
  - Other significant causes/conditions
- Fetal weight, gestational age, time of death (before assessment, before/during labor, unknown)
- Whether autopsy performed/planned, "histological" pathology performed/planned; whether results part of causes/conditions listed



18a. INITIATING CAUSE/CONDITION

(AMONG THE CHOICES BELOW, PLEASE SELECT THE ONE WHICH MOST LIKELY BEGAN THE SEQUENCE OF EVENTS RESULTING IN THE DEATH OF THE FETUS)

Maternal Conditions/Diseases (Specify) _____

_____

Complications of Placenta, Cord, or Membranes

- □ Rupture of membranes prior to onset of labor
- □ Abruptio placenta
- □ Placental insufficiency
- □ Prolapsed cord
- □ Chorioamnionitis
- □ Other Specify)_____

Other Obstetrical or Pregnancy Complications (Specify) _____

_____

Fetal Anomaly (Specify) _____

_____

Fetal Injury (Specify) _____

Fetal Infection (Specify) _____

Other Fetal Conditions/Disorders (Specify) _____

_____

□ Unknown

18b. OTHER SIGNIFICANT CAUSES OR CONDITIONS

(SELECT OR SPECIFY ALL OTHER CONDITIONS CONTRIBUTING TO DEATH IN ITEM 18b)

Maternal Conditions/Diseases (Specify) _____

_____

Complications of Placenta, Cord, or Membranes

- □ Rupture of membranes prior to onset of labor
- □ Abruptio placenta
- □ Placental insufficiency
- □ Prolapsed cord
- □ Chorioamnionitis
- □ Other Specify)_____

Other Obstetrical or Pregnancy Complications (Specify) _____

_____

Fetal Anomaly (Specify) _____

_____

Fetal Injury (Specify) _____

Fetal Infection (Specify) _____

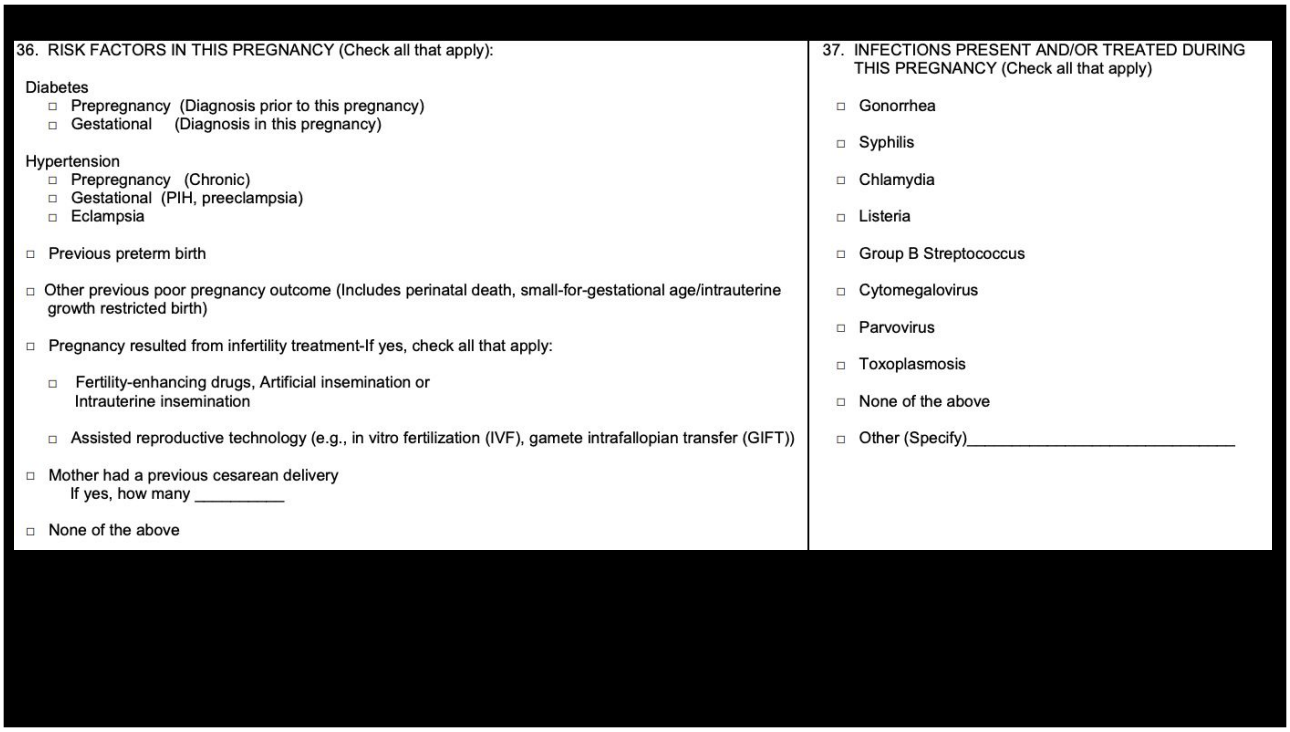
Other Fetal Conditions/Disorders (Specify) _____

_____

□ Unknown

Data Collected on FDC (page 2)

- Mother's education, race/ethnicity, marital status
- Details about prenatal care
- Mother's height, weight, whether got WIC food during pregnancy
- Pregnancy history (live births, other outcomes, children living/deceased)
- Cigarette smoking during pregnancy (and 3 months before)
- Presence of "risk factors" or infections
- Method of delivery, any maternal morbidity, any fetal congenital anomalies



36. RISK FACTORS IN THIS PREGNANCY (Check all that apply):

Diabetes
- □ Prepregnancy (Diagnosis prior to this pregnancy)
- □ Gestational (Diagnosis in this pregnancy)

Hypertension
- □ Prepregnancy (Chronic)
- □ Gestational (PIH, preeclampsia)
- □ Eclampsia

□ Previous preterm birth

□ Other previous poor pregnancy outcome (Includes perinatal death, small-for-gestational age/intrauterine growth restricted birth)

□ Pregnancy resulted from infertility treatment-If yes, check all that apply:

- □ Fertility-enhancing drugs, Artificial insemination or Intrauterine insemination
- □ Assisted reproductive technology (e.g., in vitro fertilization (IVF), gamete intrafallopian transfer (GIFT))

□ Mother had a previous cesarean delivery
If yes, how many _____

□ None of the above

37. INFECTIONS PRESENT AND/OR TREATED DURING THIS PREGNANCY (Check all that apply)

- □ Gonorrhea
- □ Syphilis
- □ Chlamydia
- □ Listeria
- □ Group B Streptococcus
- □ Cytomegalovirus
- □ Parvovirus
- □ Toxoplasmosis
- □ None of the above
- □ Other (Specify)_____

- Who completes?
- What if data is missing or inaccurate?

One more possible certificate for stillbirth that is *not* a vital record (but would be issued by vital records office)



Department of State of Health Services
Texas Vital Statistics

Certificate of Birth Resulting in Stillbirth

According to State Records Caleb Marcus Lens

Was Delivered on the 19th of June, 2017

In Waco, McLennan County, Texas

To Jill Ann Wieber and Joshua James Lens

Date Issued: 11/17/2017

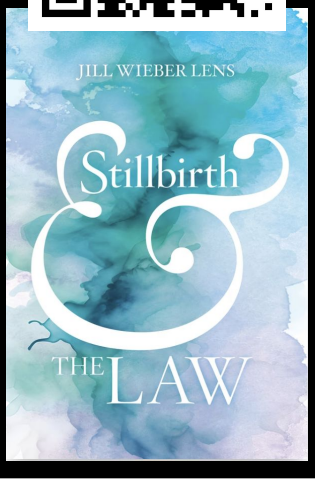
FD Number: 000784

This certificate is not proof of live birth.

This certificate has been issued in accordance to Texas Health and Safety Code Sec. §192.0022.

Thank you!

jill-lens@uiowa.edu
@jillwieberlens.bsky.social



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- Dr. Alex Kaysin, MD, MPH

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Post-Webinar

If you would like to receive 1 CEU for attending you will need to:

- Complete the Survey
- Complete the Quiz
  https://www.surveymonkey.com/r/WY9FL8T

Your CE certificate will be emailed to you.