Medical Certifier

In Missouri, medical certifiers are those who provide information about the cause and manner of someone’s death and certify a death record. The Missouri Electronic Vital Records (MoEVR) system, operated by the Missouri Department of Health and Senior Services – Bureau of Vital Records, exists to support the electronic registration of vital records, such as death certificates, in Missouri.

Specific data providers including funeral directors, attending physicians, medical examiners, coroners, among others, are granted access to MoEVR to aid in the collection and registration of the data necessary to file a vital record in Missouri.

A medical certifier may be a:

- Advanced practice registered nurse (APRN)
- Assistant physician (AP)
- Medical examiner or coroner
- Physician assistant (PA)
- Physician (MD/DO)

Medical certifiers fulfill an important final step in completing a patient’s care by providing cause of death for the death certificate. Families use these permanent legal records to settle the affairs of their loved ones and to obtain insurance, veteran, and retirement benefits, among other legal or personal purposes.

The cause of death on a death certificate is an invaluable source of information for state and national mortality statistics and helps guide decisions on which medical conditions receive research and development funding, sets public health goals, and allows the measurement of health statuses across local, state, national, and international levels.

A properly completed cause-of-death section provides an etiologic explanation of the order, type, and association of events resulting in death.

Public health data derived from death certificates is no more accurate than the information provided on the certificate. Therefore, ensuring these records are completed as accurately as possible is critical.

Training Resources


National Vital Statistics System

In the United States, the legal authority to register deaths lies within 57 jurisdictions (50 states, 2 cities, and 5 territories). The 57 jurisdictions share death record information with the National Vital Statistics System (NVSS) at the Centers for Disease Control and Prevention (CDC). The compiled national mortality statistics inform a variety of medical and health-related research efforts.

Local and state public health agencies use information from the death record to assess community health status and for disease surveillance (e.g., drug overdose deaths, influenza, and other infectious diseases).

Why Go Electronic?

The benefits of being an electronically registered certifier in MoEVR include:

- Quickly electronically certify a death certificate anywhere, anytime
- Real-time prompts, edits, and validations including mortality focused spellchecking, rare word identification, abbreviation validation, ICD code determination, medical edits, surveillance, rare cause, ill-defined/trivial cause, among other powerful validations
- Reduced registration lag times and decreased possibility of loss, theft, and fraud

Contact Bureau of Vital Records

The Missouri Bureau of Vital Records has field representative staff who travel the state training vital record data providers. Field staff can also arrange for telephone/web conference training calls.

If you are a vital record data provider (local county health agency, funeral home/director, hospital/licensed birthing center, county official, medical certifier, etc.) and would like to request a personalized training session or gain access to MoEVR, please call 573-751-6387, option 4.
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Death Certificate Electronic System

193.145. 1. A certificate of death for each death which occurs in this state shall be filed with the local registrar, or as otherwise directed by the state registrar, within five days after death and shall be registered if such certificate has been completed and filed pursuant to this section. All data providers in the death registration process, including, but not limited to, the state registrar, local registrars, the state medical examiner, county medical examiners, coroners, funeral directors or persons acting as such, embalmers, sheriffs, attending physicians and resident physicians, physician assistants, assistant physicians, advanced practice registered nurses, and the chief medical officers of licensed health care facilities, and other public or private institutions providing medical care, treatment, or confinement to persons, shall be required to use and utilize any electronic death registration system required and adopted under subsection 1 of section 193.265 within six months of the system being certified by the director of the department of health and senior services, or the director’s designee, to be operational and available to all data providers in the death registration process. However, should the person or entity that certifies the cause of death not be part of, or does not use, the electronic death registration system, the funeral director or person acting as such may enter the required personal data into the electronic death registration system and then complete the filing by presenting the signed cause of death certification to the local registrar, in which case the local registrar shall issue death certificates as set out in subsection 2 of section 193.265. Nothing in this section shall prevent the state registrar from adopting pilot programs or voluntary electronic death registration programs until such time as the system can be certified; however, no such pilot or voluntary electronic death registration program shall prevent the filing of a death certificate with the local registrar or the ability to obtain certified copies of death certificates under subsection 2 of section 193.265 until six months after such certification that the system is operational.

2. If the place of death is unknown but the dead body is found in this state, the certificate of death shall be completed and filed pursuant to the provisions of this section. The place where the body is found shall be shown as the place of death. The date of death shall be the date on which the remains were found.

3. When death occurs in a moving conveyance in the United States and the body is first removed from the conveyance in this state, the death shall be registered in this state and the place where the body is first removed shall be considered the place of death. When a death occurs on a moving conveyance while in international waters or air space or in a foreign country or its air space and the body is first removed from the conveyance in this state, the death shall be registered in this state but the certificate shall show the actual place of death if such place may be determined.

4. The funeral director or person in charge of final disposition of the dead body shall file the certificate of death. The funeral director or person in charge of the final disposition of the dead body shall obtain or verify and enter into the electronic death registration system:

   (1) The personal data from the next of kin or the best qualified person or source available;

   (2) The medical certification from the person responsible for such certification if designated to do so under subsection 5 of this section; and
(3) Any other information or data that may be required to be placed on a death certificate or entered into the electronic death certificate system including, but not limited to, the name and license number of the embalmer.

5. The medical certification shall be completed, attested to its accuracy either by signature or an electronic process approved by the department, and returned to the funeral director or person in charge of final disposition within seventy-two hours after death by the physician, physician assistant, assistant physician, advanced practice registered nurse in charge of the patient's care for the illness or condition which resulted in death. In the absence of the physician, physician assistant, assistant physician, advanced practice registered nurse or with the physician's, physician assistant's, assistant physician's, or advanced practice registered nurse's approval the certificate may be completed and attested to its accuracy either by signature or an approved electronic process by the physician's associate physician, the chief medical officer of the institution in which death occurred, or the physician who performed an autopsy upon the decedent, provided such individual has access to the medical history of the case, views the deceased at or after death and death is due to natural causes. The person authorized to complete the medical certification may, in writing, designate any other person to enter the medical certification information into the electronic death registration system if the person authorized to complete the medical certificate has physically or by electronic process signed a statement stating the cause of death. Any persons completing the medical certification or entering data into the electronic death registration system shall be immune from civil liability for such certification completion, data entry, or determination of the cause of death, absent gross negligence or willful misconduct. The state registrar may approve alternate methods of obtaining and processing the medical certification and filing the death certificate. The Social Security number of any individual who has died shall be placed in the records relating to the death and recorded on the death certificate.

6. When death occurs from natural causes more than thirty-six hours after the decedent was last treated by a physician, physician assistant, assistant physician, advanced practice registered nurse, the case shall be referred to the county medical examiner or coroner or physician or local registrar for investigation to determine and certify the cause of death. If the death is determined to be of a natural cause, the medical examiner or coroner or local registrar shall refer the certificate of death to the attending physician, physician assistant, assistant physician, advanced practice registered nurse for such certification. If the attending physician, physician assistant, assistant physician, advanced practice registered nurse refuses or is otherwise unavailable, the medical examiner or coroner or local registrar shall attest to the accuracy of the certificate of death either by signature or an approved electronic process within thirty-six hours.

7. If the circumstances suggest that the death was caused by other than natural causes, the medical examiner or coroner shall determine the cause of death and shall complete and attest to the accuracy either by signature or an approved electronic process the medical certification within seventy-two hours after taking charge of the case.

8. If the cause of death cannot be determined within seventy-two hours after death, the attending medical examiner, coroner, attending physician, physician assistant, assistant physician, advanced practice registered nurse, or local registrar shall give the funeral director, or person in charge of final disposition of the dead body, notice of the reason for the delay, and final disposition of the body shall not be made until authorized by the medical examiner,
coroner, attending physician, physician assistant, assistant physician, advanced practice registered nurse, or local registrar.

9. When a death is presumed to have occurred within this state but the body cannot be located, a death certificate may be prepared by the state registrar upon receipt of an order of a court of competent jurisdiction which shall include the finding of facts required to complete the death certificate. Such a death certificate shall be marked “Presumptive”, show on its face the date of registration, and identify the court and the date of decree.

10. (1) The department of health and senior services shall notify all physicians, physician assistants, assistant physicians, and advanced practice registered nurses licensed under chapters 334 and 335 of the requirements regarding the use of the electronic vital records system provided for in this section.

(2) On or before August 30, 2015, the department of health and senior services, division of community and public health shall create a working group comprised of representation from the Missouri electronic vital records system users and recipients of death certificates used for professional purposes to evaluate the Missouri electronic vital records system, develop recommendations to improve the efficiency and usability of the system, and to report such findings and recommendations to the general assembly no later than January 1, 2016.

Delayed Filing

193.155. 1. When a death occurring in this state has not been registered within the time period described by section 193.145, a certificate of death may be filed in accordance with department rules. Such certificate shall be registered subject to such evidentiary requirements as the department shall prescribe to substantiate the alleged facts of death.

2. Certificates of death registered one year or more after the date of death shall be marked “Delayed” and shall show on their face the date of the delayed registration.
Which deaths must be reported to the coroner?

Any death suspected of being caused by injury must be reported to the coroner, even if the injury occurred days, weeks, months, or years before the death. Even if an injury only contributes to an otherwise natural death, the death should still be reported. Reportable injuries include:

1. Falls
2. Blunt force of crushing injuries
3. Sharp force (cutting, stabbing, or chopping) injuries
4. Injuries from firearms (handguns, rifles, shotguns, or other)
5. Explosion
6. Electrocutations and lightning strikes
7. Asphyxia (suffocation, strangulation, hanging, exclusion of oxygen, poisoning by gases [carbon monoxide, poisoning by cyanide, or other])
8. Vehicular accidents (automobile, bus, railroad, motorcycle, bicycle, boat, aircraft, or other craft) including deaths of drivers, passengers, pedestrians, or non-occupants involved in the accidents
9. Drowning
10. Weather-related injuries (lightning, heat or cold exposure, tornado, or other)
11. Drug use, prescription or illicit
12. Poisoning or chemical ingestions
13. Burns (chemical, thermal, radiation, electrical, etc.)
14. Criminal abortions, including those self-induced (these include maternal or fetal deaths that may be caused from illegal interference with the pregnancy or from criminal activity)
15. Disease thought to be of a hazardous and contagious nature or which might constitute a threat to public health. (These include deaths caused by acute rapidly fatal illnesses, such as fulminant meningitis. Any death caused by highly infectious agents capable of causing an epidemic should be reported.) **Note:** Deaths due to Acquired Immunodeficiency Syndrome (AIDS) are usually not reportable.
16. Deaths that occur during employment or that are related to employment or deaths that occur in public places, such as buildings, streets, parks, or other similar areas must be reported.
17. When any person dies suddenly:
   a. **When in apparent good health.** These deaths include:
      i. Sudden and unexpected deaths
      ii. Deaths for which the attending physicians cannot supply adequate or reasonable explanations
      iii. Person found dead without obvious causes of death
   b. **When unattended by a physician, chiropractor, or an accredited Christian Science Practitioner, during the thirty-six hours that immediately precedes the death.** **Note:** Missouri Vital Records rules and statutes do not include a twenty-four hour time period in relation to reporting deaths due to trauma, unusual, sudden, or suspicious manner. A death occurring less than twenty-hour hours after hospital admission is not necessarily reportable, such as hospice or terminally ill cases.
c. While in the custody of the law, or while an inmate in a public institution.
   i. All deaths occurring in correctional institutions, reformatories, or other incarceration or detention areas are reportable.
   ii. Deaths of persons under police custody or police hold, regardless of the probable cause and manner are also reportable.

d. Deaths occurring in any unusual or suspicious manner. The following are also reportable:
   i. Deaths while under anesthesia, during the post-anesthetic period, or during induction of anesthesia, regardless of the interval between the original incident and the death.
   ii. Deaths during or following diagnostic or therapeutic procedures, if the deaths might be related to the procedures or the complications resulting from the procedures.
   iii. Deaths occurring under unknown circumstances, when there are no witnesses, or where there is little or no information concerning previous medical histories.
   iv. Deaths in which the treating physicians are unavailable or are unwilling to certify the cause of death.
   v. Whenever anatomic material suspected of being a part of a human body is found, such as bones, human organs, fetal parts, placentas, etc.

B. Who reports the death?

“The police, sheriff, law enforcement officer or official, or any person having knowledge of such a death shall immediately notify the office of the coroner of the known facts concerning the time, place, manner, and circumstances of the death. Immediately upon receipt of notification, the coroner or his designated assistant shall take charge of the dead body and fully investigate the essential facts concerning the medical cause of death.”

C. What about child deaths?

“When any person dies within a county and there are reasonable grounds to believe that such person was less than eighteen years of age, who was eligible to receive a certificate of live birth, the police, sheriff, law enforcement office or official or any person having knowledge of such death shall immediately notify the coroner of known facts concerning the time, place, manner and circumstances of the death. Under Missouri law, all child deaths, involving individuals below the age of eighteen years, must be reported.”

D. Who signs the death certificate?

The coroner or his deputy signs the death certificates in all cases where he/she has assumed jurisdiction. A private physician should sign the death certificate of his patient only if the patient has been under the care of this physician and the patient has died of natural causes. After receiving notification of a death and performing an initial investigation, the coroner or his deputy may elect to decline jurisdiction of the death. In that situation, the private physician may sign the death certificate.
Causes of Death Due To Trauma

Whenever circumstances suggest death was caused by other than natural causes the manner of death shall be determined by the medical examiner or coroner. They are also responsible for completing and signing the medical certification of the death certificate.

The following types of death can only be certified by the medical examiner or coroner:

A  Accidental death of any type
    Asphyxia, asphyxiation (choking, strangulation, smothering, etc.)
    Aspiration (choking) on food, foreign objects
    Assault

B  Beating
    Blunt Trauma

C  Crib death
    Crush injuries
    Cuts

D  Drowning
    Drug overdose or intoxication

E  Electrocution

F  Fire (including smoke inhalation)
    Firearms injuries
    Fractures (except for pathologic fractures)

G  Gunshot wounds

H  Homicide

I  Injuries
    Intoxication

J  Jail Deaths

M  Motor vehicle related

P  Poisoning

S  Sudden Infant Death Syndrome (SIDS)
    Suicide

T  Thermal injuries

U  Undetermined, Unknown
Ill Defined/Insufficient Terms for Cause of Death

Although records may be registered with the following terms as cause of death, they are in themselves insufficient and considered ill-defined unless etiology is also listed. If etiology is unknown, that must be stated with the term. In most cases, these terms actually describe the mechanism of death (how the lethal process manifested itself to result in death) and not the actual immediate cause of death. For the death certificate to be acceptable, the actual cause of death must be stated on the certificate.

The Bureau of Vital Records will attempt to collect additional information for ill-defined causes of death. Once a record is registered, this information can only be added or changed by the medical certifier through the Correction Affidavit process.

<table>
<thead>
<tr>
<th>Ill Defined Term</th>
<th>Insufficient Term</th>
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<tr>
<td>Anemia</td>
<td>Gastric aspiration</td>
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<td>Aneurysm (should state type and location)</td>
<td>Gastrointestinal bleeding or hemorrhage</td>
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<tr>
<td>Anoxia</td>
<td>Heart failure</td>
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<tr>
<td>Anoxic encephalopathy</td>
<td>Hemorrhage</td>
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<tr>
<td>Arrhythmia</td>
<td>Hepatic failure</td>
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<td>Aspiration</td>
<td>Hypoglycemia</td>
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<td>Aspiration pneumonia</td>
<td>Hypoxia</td>
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<tr>
<td>Brain death</td>
<td>Hypoxic encephalopathy</td>
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<tr>
<td>Cardiac arrest</td>
<td>Intracerebral hemorrhage</td>
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<tr>
<td>Cardiac arrhythmia</td>
<td>Intracranial hemorrhage</td>
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<td>Cardiac dysrhythmia</td>
<td>Liver failure</td>
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<td>Cardiopulmonary arrest or failure</td>
<td>Natural disease or causes</td>
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<td>Cardiorespiratory arrest or failure</td>
<td>Old age</td>
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<tr>
<td>Cerebral hemorrhage</td>
<td>Pulmonary congestion</td>
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<tr>
<td>Congestive heart failure</td>
<td>Pulmonary edema</td>
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<td>Congestive heart failure (should be used with one of the following causes listed)</td>
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<tr>
<td>Arteriosclerotic Heart Disease</td>
<td>Renal failure</td>
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<td>Myocardial infarction</td>
<td>Respiratory arrest or failure</td>
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<td>Coronary Occlusion</td>
<td>Senility</td>
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<td>Coronary thrombosis</td>
<td>Shock</td>
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<td>Myocardiitis</td>
<td>Subarachnoid hemorrhage</td>
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<td>Hypertensive Cardiovascular Disease</td>
<td>Subdural hemorrhage</td>
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<td>Coronary Artery Disease</td>
<td>Sudden death</td>
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<td>Valvular Disease</td>
<td>Ventricular arrhythmia or dysrhythmia</td>
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<td>Mitral or Aortic Stenosis</td>
<td>Ventricular fibrillation</td>
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<td>Mitral or Aortic Regurgitation</td>
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<td>Encephalopathy</td>
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<td>Exsanguination</td>
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12
MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
BUREAU OF VITAL RECORDS

AFFIDAVIT FOR CORRECTION OF A BIRTH OR DEATH RECORD

State File Number

Indicate below the type of certificate to be amended or corrected. PRINT or TYPE the information identifying the certificate and the item to be changed. This form must be signed in the presence of a Notary Public or the request cannot be processed and will be returned.

Please note:
1. Affidavits containing erasures, write-overs and/or white-out, faxed or reproduced copies of completed form will not be accepted.
2. An item which has been amended once by an affidavit cannot be amended again by an affidavit; it will require a Court Order.

Mail the completed form to: Missouri Department of Health and Senior Services
Bureau of Vital Records
P.O. Box 570
Jefferson City, MO 65102-0570

Before me appears ____________________________________________ who, upon his/her oath, states that the original record of birth/death for
Decedent's Name on Record ___________________________ born/died ___________________________ in the State of Missouri.
(Name as shown on record) (present legal name) (date of death) (month/day/year)

SHOULD BE CORRECTED AS FOLLOWS:

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<th>ITEM NO./ITEM NAME</th>
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FOR STATE USE ONLY

THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

AFFIANT SIGNATURE (MUST BE SIGNED IN PRESENCE OF NOTARY) ____________________________

Signed in front of notary ____________________________

RELATIONSHIP ____________________________

Job Title ____________________________

PRESENT ADDRESS (street, and/or P.O. BOX, city, state, zip) ____________________________

Complete work address ____________________________

NOTARY PUBLIC EMBOSSED SEAL ____________________________

STATE ____________________________

COUNTY ____________________________

SUBSCRIBED AND SWORN BEFORE ME, THIS ____________________________ DAY OF ____________________________ 20__

NOTARY PUBLIC SIGNATURE ____________________________

MY COMMISSION EXPIRES ____________________________

USE RUBBER STAMP IN CLEAR AREA BELOW

Must be completed by a notary ____________________________

NOTARY PUBLIC NAME (TYPED OR PRINTED) ____________________________

MO 580-0545 (4-13)
MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
BUREAU OF VITAL RECORDS

AFFIDAVIT FOR CORRECTION OF A BIRTH OR DEATH RECORD

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Mail the completed form to: Missouri Department of Health and Senior Services  
Bureau of Vital Records  
P.O. Box 570  
Jefferson City, MO 65102-0570

Before me appears ________________________ who, upon his/her oath, states that the original record of birth/death for 

(PRESENT LEGAL NAME) ________________________  

(NAME AS SHOWN ON RECORD) ________________________  

(born/died) ________________________ in the State of Missouri. 

(CIRCLE ONE)  

(CIRCLE ONE)  

(MONTH/DAY/YEAR)

SHOULD BE CORRECTED AS FOLLOWS:

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THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

AFFIANT SIGNATURE (MUST BE SIGNED IN PRESENCE OF NOTARY)

PRESENT ADDRESS (STREET, AND/OR P.O. BOX, CITY, STATE, ZIP)

NOTARY PUBLIC SEALS

STATE  
COUNTY  

SUBSCRIBED AND SWORN BEFORE ME, THIS  
DAY OF  

NOTARY PUBLIC SIGNATURE  
MY COMMISSION EXPIRES  

NOTARY PUBLIC NAME (TYPED OR PRINTED)

MO 580-06/15 (4-12)  
VS-110
AUTHORIZATION TO CREMATE TEMPLATE
PUT ON FUNERAL HOME LETTERHEAD

Date: ________________

Due to the family’s decision for cremation of __________________________, Missouri Revised Statutes (RSMo), Section 193.175.1 indicates, “…if the body is to be cremated, a completed death certificate shall be filed with the local registrar prior to cremation…”

Additionally, the Missouri Code of State Regulations indicates, “…if a completed death certificate cannot be filed because the cause of death has not been determined, a body shall not be cremated until written authorization from the…medical certifier is received by the funeral director…”

We would appreciate it if you would please sign the statement below that would authorize cremation until the official certificate of death is completed. Please fax it back to us at (___) ______________.

The statement will allow us to cremate in a timely manner according to the wishes of the family.

I, _________________________, do certify that I am the medical certifier of record and will PRINT NAME Complete the cause of death and sign the official Certificate of Death for NAME OF DECEASED.

This statement is to allow the family to proceed with the cremation and service plans.

Medical Certifier Signature __________________________ License Number (if applicable) __________________________
Where to Find Forms
The following forms can be found at https://health.mo.gov/IVrecords/

General Applications
- Application for a Vital Record – Birth/Death/Fetal/Stillbirth
- Application for a Vital Record – Statement of Marriage/Divorce

General Affidavits
- Affidavit for Correction of a Birth or Death Record
- Affidavit of Homeless or Unaccompanied Youth Status for Fee Exempt Certified Copy of Birth Certificate

Legitimation
- Affidavit When Father is Deceased
- Affidavit When Mother is Deceased
- Father’s Affidavit to Legitimate Birth Record
- Mother’s Affidavit to Legitimate Birth Record

Missouri Adoptee Rights Act (MARA)
- Application for Non-Certified Copy of Original (Pre-Adoptive) Birth Certificate by Adoptee, Adoptee’s Attorney or Birth Parent
- Application for Non-Certified Copy of Original (Pre-Adoptive) Birth Certificate by Lineal Descendant
- Adoptee Contact Preference Form
- Birth Parent Contact Preference Form
- Birth Parent Medical History Form

Paternity
- Affidavit Acknowledging Paternity Notice of Rights
- Father’s Affidavit Acknowledging Paternity
- Husband’s Denial of Paternity
- Mother’s Affidavit Acknowledging Paternity
- Rescission of Affidavit Acknowledging Paternity

Putative Father Registry
- Notice of Intent to Claim Paternity
- Request for Search of Putative Father Registry

For Professional Use Only
- Application/Report of Marriage
- Certificate of Live Birth
- Certificate of Decree of Adoption
- Complication Report for Post-Abortion Care
- Certificate of Death
- MoEVR User Access Request Form
- Report of Induced Termination of Pregnancy
Importance of Death Certificates

Families
- Handle final disposition of the body
- Closing out business affairs of the decedent
- Terminate benefits before an overpayment is made
- Gain access to bank accounts
- Utilize life insurance policies
- Transfer property ownership
- Provide closure

Public Health
- Leading cause of death
- Life expectancy
- Plan/evaluate programs

Medical Field
- Determine where future research funding should be allocated
- Measure progress of medical interventions
- Measure health outcomes
- Monitor prevalence of disease

Why We Do What We Do:
MO Electronic Vital Records (MoEVR)
Steps to Certify Medical Information

- Log into MoEVR: https://moevr.dhss.mo.gov/
- Click on process under actions for the decedent
- Go directly to tab 7
- Verify time and date of death
- Answer the was ME/Coroner contacted and autopsy questions
- Click next
- Enter cause of death on tab 8 (avoid ill-defined causes of death without etiology)
- Click next
- Answer tobacco question
- Answer pregnancy question (if of birthing age 10-65)
- Select manner of death
- **Click on Finish**
- **Click on Save as Pending**
- **Click Return to Record**
- Go directly to tab 11 case actions
- Check box beside Medical Information Ready to be Certified; this will open up box below
- Check box beside Certify Medical Information
- **Click on Finish**
- Click on Save as Pending (ignore any warnings for funeral homes and state users)
- Once returned to the main menu the record will be gone from the queue
MO Electronic Vital Records (MoEVR)
Steps to Decline to Certify Medical Information

- Log into MoEVR: https://moevr.dhss.mo.gov/
- Click on process under actions for the decedent
- Go directly to tab 11
- If you choose, you may enter in the “comments among users box” at the top left a reason for declining to certify. Such as “this is not my patient”. If you know the correct physician you can list that information here.
- Check box beside “Decline to Certify”
- Click on Finish
- Click on Save as Pending (ignore any warnings for funeral homes and state users)
- Once returned to the main menu the record will be gone from the queue
Website for MoEVR Login:  https://moevr.dhss.mo.gov/

Links & Information on this document can be found at:  https://health.mo.gov/data/vitalrecords/training/index.php

The purpose of the Missouri Electronic Vital Records (MoEVR) system is to support the registration of Missouri vital events for the Missouri Department of Health and Senior Services and other users such as funeral directors, attending physicians, medical examiners, and birthing facilities.

Therefore, **before utilizing MoEVR**, complete the following training modules.

- **Module 1:** Medical Certifier Rules and Regulations Training
- **Module 2:** MoEVR Login & Password Reset
- **Module 3:** MoEVR Medical Certification Process
- **Module 4:** Death Certificate Affidavit of Correction and Query Letters
- **Module 5:** MoEVR Knowledge Check

The Missouri Bureau of Vital Records has field representative staff who travel the state training vital record stakeholders. Field staff can also arrange for telephone/web conference training calls. If you are a vital record stakeholder (local county health agency, funeral home/director, hospital/licensed birthing center, county official, medical certifier, medical examiner/coroner, etc.) and would like to request personalized training or a private training session from the Missouri Bureau of Vital Records, call 573-751-6387, option 4.

According to the National Center for Health Statistics (NCHS), birth and death information is an important source of statistical data for identifying public health problems, monitoring progress in public health, informing the allocation of research and prevention funds, and conducting scientific research. For these reasons, complete, accurate, and standardized reporting of vital events is critical.

Therefore, **before completing vital event data in Missouri**, review the comprehensive training and instructional materials made available by the National Center for Health Statistics.
Website for MoEVR Login:  https://moevr.dhss.mo.gov/

MISSOURI ELECTRONIC VITAL RECORDS

The Missouri Electronic Vital Records (MoEVR) system is designed to support the registration of Missouri vital events for the Missouri Department of Health and Senior Services - Bureau of Vital Records. This system is for professional use only by entities such as hospitals/birthing facilities, attending physicians, funeral directors, medical examiners, coroners, and embalmers. This system may be used only for the purpose for which it is provided. Any attempt to file fraudulent certificates of live birth, death, or reports of fetal death is punishable in accordance with Missouri statutes.

By accessing this system, I agree to use this system only for the purpose of registering a Certificate of Live Birth, Certificate of Death, or Report of Fetal Death for events occurring within the State of Missouri.

I understand that failure to adhere to the above agreement will result in loss of access to the MoEVR system. Any unauthorized access, misuse, and/or disclosure of information may result in disciplinary action including, but not limited to, suspension or loss of individual or facility access privileges, an action for civil damages, or criminal charges.
# Bureau of Vital Records Contact List

930 WILDDO WOOD DRIVE, JEFFERSON CITY, MO 65109  www.health.mo.gov/vitalrecords

<table>
<thead>
<tr>
<th>TEAM MEMBER</th>
<th>TITLE/SERVICE AREA</th>
<th>PHONE</th>
<th>EMAIL</th>
</tr>
</thead>
<tbody>
<tr>
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<td>State Registrar</td>
<td>573-522-2808</td>
<td><a href="mailto:ken.palermo@health.mo.gov">ken.palermo@health.mo.gov</a></td>
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<td>Bureau Chief</td>
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<td><a href="mailto:joyce.luebbering@health.mo.gov">joyce.luebbering@health.mo.gov</a></td>
</tr>
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<tr>
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<td><a href="mailto:chris.bursnall@health.mo.gov">chris.bursnall@health.mo.gov</a></td>
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<tr>
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</tr>
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<td><a href="mailto:tamara.thrasher@health.mo.gov">tamara.thrasher@health.mo.gov</a></td>
</tr>
<tr>
<td>Breanna Werdehausen</td>
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<td><a href="mailto:breanna.werdehausen@health.mo.gov">breanna.werdehausen@health.mo.gov</a></td>
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Bureau of Vital Records Main Line  573-751-6387  VitalRecordsInfo@health.mo.gov  
Certification Unit  Issues Vital Records  573-751-6387, Opt 1  VitalRecordsInfo@health.mo.gov  
Amendment Unit  Corrects Vital Records  573-751-6387, Opt 2  VitalRecordsInfo@health.mo.gov  
Central Processing Unit  Registers Vital Records  573-751-6387, Opt 3  VitalRecordsInfo@health.mo.gov  
Field Representatives  MoEVR/Stakeholder Support  573-751-6387, Opt 4  MoEVRsupport@health.mo.gov  
LPHA/County Dedicated Email Support (15 minute response time)  VitalRecordsSupport@health.mo.gov  

ITSD  PROD/TN 3270 Help Desk  573-751-6388  

**To Order Supplies:**  Fax request on agency letterhead  573-526-3846
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Assigned Counties

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<tr>
<th>ERON 522-1712</th>
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Bureau of Vital Records Training Evaluation

1. Please rate the training you received today:
   Excellent          Above Average          Average          Below Average          Poor

2. Do you feel the training was helpful in educating you and/or your staff in relation to what was asked of the field representative to provide? Please provide comments so we understand where we can make changes in the training.
   Yes                     Somewhat                     No
   Comments:

3. Were your questions answered in this training? Please provide comments so we understand where we can make changes in the training.
   Yes                     Somewhat                     No
   Comments:

4. How can we improve this training to better suit your needs?

5. How can the Bureau of Vital Records better serve you?