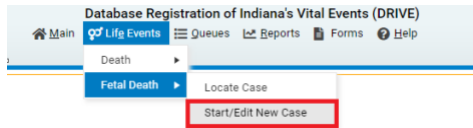


Funeral Homes: Steps for finding converted fetal death records

First – Click on Life Events – Fetal Death – Start / Edit New Case



Mandatory fields are highlighted in red. These must be filled correctly for search to work. Please complete these fields then click search in the bottom right.

Database Registration of Indiana's Vital Events (DRIVE)

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Fetal Death Start/Edit New Case

Did heart beat after delivery? **No** Was there movement of voluntary muscle? **No** Was a breath taken? **No**

Mother's Information

Mother's Current Legal First Name: Mother's Current Legal Last Name:

Mother's Birth Last Name:

Medical Record Number:

Fetus Information

Fetus First Name: **Christina** Fetus Last Name: **Reynolds** Date of Delivery: **APR-07-2022**

Sex: Case Id:

Place of Delivery Information

Place of Delivery Location Type: Location Name:

Facility:

Search **Clear**

The search results will be displayed below. Please click on the fetus's name to open the case.

Fetal Death Search Results

Case Id	Fetus Name	Date of Delivery	Sex	Place of Fetal Death	State File Number	Mother Maiden Last Name	Preview
5350610	REYNOLDS, COHEN CHRISTINA	APR-07-2022	Female	Porter	2022500084	Nyman	Preview

Total Records : 1

Start New Case **New Search**

Once you click on the fetus's name, the ownership window will pop up. Please click on OK to proceed.

****Ownership must be obtained by selecting OK if you want to Print or file Amendments in this case. ****

Database Registration of Indiana's Vital Events (DRIVE)

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Fetal Death Search Results

uat.davein.vitalchek.com says

The case you have selected does not have a personal owner. Press OK to assume personal ownership or Cancel to return to list

OK **Cancel**

Case Id	Fetus Name	Date of Delivery	Sex	Place of Fetal Death	State File Number	Mother Maiden Last Name	Preview
5350610	REYNOLDS, COHEN CHRISTINA	APR-07-2022	Female	Porter	2022500084	Nyman	Preview

Total Records : 1

Start New Case **New Search**

You should now have access to this case to make changes or print.

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Comments

5350610 2022500084 :COHEN CHRISTINA REYNOLDS APR-07-2022

/Personal Valid/Medical Valid/NA/Registered

Fetus

Fetus Name

First

Middle

Last

Suffix

COHEN

CHRISTINA

REYNOLDS

Date of Delivery

Time of Delivery

Sex

APR-07-2022

01:12 PM

Female

Number delivered in this pregnancy

If more than one, number in order of delivery

Single

Not Applicable

Clinical estimate of gestation at delivery (weeks)

Does mother/parent request disposition

32

Burial Transit Permit (BTP) Number

Less than 48 hours Cremation

Fetal Death Record Type

Override

Validate Page

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