



2017

Vital Statistics

133rd Report
Relating to the
Registry and
Return of
Births, Deaths,
Marriages,
Divorces, and
Dissolutions

Department of Health
Agency of Human Services

Vermont Vital Statistics Annual Report

2017

State of Vermont
Phil Scott, Governor

Agency of Human Services
Martha Maksym, Acting Secretary

Department of Health
Mark Levine, MD, Commissioner



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We gratefully acknowledge the contributions of the medical records staff, physicians and midwives, funeral directors, lawyers and court clerks for their help in collecting and providing us with this data.

We also recognize the 251 town and city clerks, who are our local registrars. Without them, these analyses of Vermont's vital statistics would not be possible.

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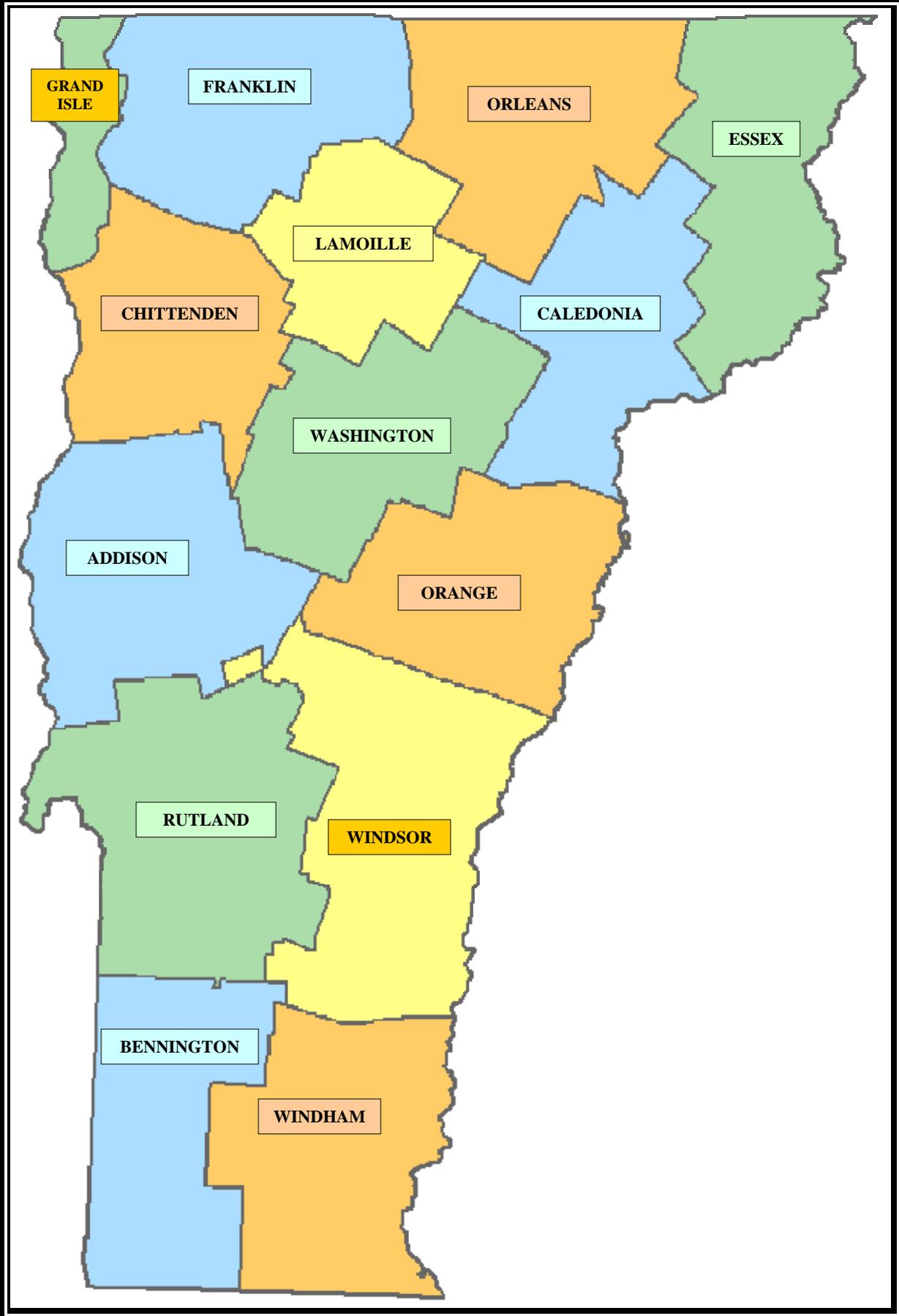
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Introduction

Figure 1 – Vermont County Map



THE VERMONT VITAL STATISTICS SYSTEM

Statewide vital registration began in Vermont in 1857, when the General Assembly passed a bill requiring that towns report to the Secretary of State all births, marriages, and deaths occurring in their jurisdiction. Prior to that time, some towns kept such records in order to resolve questions concerning the distribution and inheritance of property. Vital records, particularly death records, gradually became recognized as an important tool in studying the location and spread of epidemics. In 1896, the Legislature transferred responsibility for the vital statistics system to the newly formed Board of Health, the forerunner of the Vermont Department of Health. The Department of Health has retained this responsibility to the present day.

The Vermont vital statistics system monitors the following vital events: births, deaths, marriages, divorces and dissolutions, fetal deaths, and abortions. Each type of vital record follows a different path before being used to produce the statistics published here.

Births: When a birth occurs, the physician, midwife, or other birth attendant is required to complete a birth certificate and file it with the town clerk in the town of birth within 10 days. For hospital births, it is usually the medical records staff that enters the birth information into the Electronic Birth Registration System (EBRS) and prints the birth certificate. The birth certificate is recorded and filed in the town where the birth took place, and a certified copy is sent to the Department of Health.

Deaths: Although a physician is responsible for completing the death certificate, the job may be, and often is, delegated to the funeral director. Most of the information needed to complete the death certificate is obtained from the family of the deceased; however, the physician must complete and certify the cause of death information. Once a death record is completed in the Electronic Death Registration System (EDRS), it is registered and the death certificate is available to the town clerks for filing.

Marriages: When a couple wishes to marry in Vermont, they provide a town clerk with the information needed to complete the license. The couple takes the license to an officiant, who signs and dates it, and returns it to the town clerk. The town clerk records and files the certificate, and sends a certified copy to the Department of Health.

Divorces and dissolutions: A divorce certificate or certificate dissolving a civil union is initiated by a lawyer or other individual handling the divorce or dissolution. The certificate is filed with the court as part of the divorce or dissolution proceedings. The court keeps the certificate until the decree becomes final, usually three months after the court hearing. When the decree is final, the court clerk signs the certificate and sends it to the Department of Health for filing.

Fetal deaths and abortions: Reports of fetal death and induced termination of pregnancy (abortion) are sent directly to the Department of Health by the physician, hospital, or clinic that performs the procedure. By law, these reports are for statistical purposes only, are not public records, and are destroyed after five years.

The Department of Health also receives abstracts for Vermont resident births and deaths that occur in other states and in Canada. This allows the Department to do statistical analyses of vital events involving Vermont residents, including events which occurred outside of the state. All vital records received are data entered and stored electronically, and data from births and deaths which occur in Vermont is transmitted to the National Center for Health Statistics to become part of a national database.

EXPLANATORY NOTES

1. The tables in this bulletin were derived from records of vital events filed at the Vermont Department of Health for calendar year 2017.
2. Rates are based on the 2017 population estimates produced by the United States Census Bureau.
3. Caution must be used in comparing rates due to the small population in Vermont and the small number of events recorded.
4. In past reports rate comparisons were made to the U.S. white population rather than entire U.S. population because less than five percent of the Vermont population was non-white. However, starting with the 2011 report, comparisons are made to the total U.S. population.
5. If you have questions about the information found in this bulletin, you may contact a statistician at the Vermont Department of Health, 802-863-7300.
6. If you have questions about the population figures found in this bulletin, you may call the Vermont Department of Health to request a copy of The Population and Housing Estimates, which also provides information about age groups other than those presented in this publication.
7. The following is a list of Vermont's counties and the county abbreviations that are used in this bulletin.

Addison	ADD	Lamoille	LAM
Bennington	BEN	Orange	ORG
Caledonia	CAL	Orleans	ORL
Chittenden	CHI	Rutland	RUT
Essex	ESX	Washington	WAS
Franklin	FRA	Windham	WHM
Grand Isle	GI	Windsor	WSR

DEFINITIONS, RATES, AND RATIOS

ABORTION: The purposeful interruption of an intrauterine pregnancy with the intention other than to produce a live-born infant or other than to remove a dead fetus, and which does not result in a live birth.

ABORTION RATE: Number of resident abortions occurring in Vermont x 1000, divided by the total resident women ages 15 to 44.

ABORTION RATIO: Number of resident abortions occurring in Vermont x 1000, divided by the total resident live births.

AGE ADJUSTMENT: Age adjusting allows one to compare rates among populations having different age distributions by adjusting the crude rates in each population to a standard population base. In this bulletin, county rates are adjusted using the state population distribution as the standard.

The computation formula is: The sum of (age-specific rate for each age group x standard population in that age group) multiplied by 1000, and then divided by the total standard population.

AGE-SPECIFIC DEATH RATE: Number of resident deaths in a specific age group x 1000, divided by the total resident population in a specific age group (using population estimates as of July 1).

AGE-SPECIFIC FERTILITY RATE: Number of resident live births to mothers in a specific age group x 1000, divided by the total resident female population in a specific age group (using population estimates as of July 1).

AGE-SPECIFIC PREGNANCY RATE: Number of resident pregnancies to women in a specific age group x 1000, divided by the total resident female population in a specific age group (using population estimates as of July 1).

ANNULMENT: The invalidation or voiding of a marriage, or civil union, which confers on the parties the status of never having been married to each other.

CIVIL UNION: A civil union is a legal relationship that provides for same-sex couples in Vermont all the benefits, protections, and responsibilities under law as are granted to spouses in a marriage.

CIVIL UNION RATE: Total number of civil unions x 1000, divided by the total resident population (using population estimates as of July 1).

CRUDE BIRTH RATE: Number of resident live births x 1000, divided by the total resident population (using population estimates as of July 1).

CRUDE DEATH RATE: Number of resident deaths x 1000, divided by the total resident population (using population estimates as of July 1).

CUMULATIVE ROW PERCENT: The total number of cases in the current column plus each previous column in each row, expressed as a percentage of all cases in that row.

DEATH: The permanent disappearance of any evidence of life at any time after live birth.

DIVORCE: The final legal dissolution of a marriage.

DIVORCE RATE: The sum of the number of divorces and annulments x 1000; divided by the total resident population, (using population estimates as of July 1).

DISSOLUTION: The final legal dissolution of a civil union.

FERTILITY RATE: Number of resident live births to women ages 15 to 44 x 1000, divided by the total resident female population ages 15 to 44 (using population estimates as of July 1).

FETAL DEATH: A reportable fetal death is a death prior to the complete expulsion or extraction from the mother of a product of conception, which has passed through at least the 20th week of gestation or weighs more than 400 grams; 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.

FETAL DEATH RATE: Number of resident fetal deaths x 1000, divided by the total resident live births and resident fetal deaths.

FETAL DEATH RATIO: Number of resident fetal deaths divided by total resident live births.

INFANT DEATH: Death occurring in the first year of life.

INFANT DEATH RATE: Number of resident infant deaths x 1000, divided by the total resident live births.

LIVE BIRTH: The complete expulsion or extraction from the mother of a product of 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 the 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.

LOW BIRTH WEIGHT: A baby weighing less than 2,500 grams (5 pounds, 8 ounces) at birth.

LOW BIRTH WEIGHT PERCENT: The number of live births weighing less than 2,500 grams divided by the total number of live births.

MARRIAGE: The legal union of persons of opposite sex.

MARRIAGE RATE: Number of marriages x 1000, divided by the total resident population (using population estimates as of July 1).

NATURAL INCREASE: Occurs when the number of births is greater than the number of deaths.

NEONATAL DEATH: Death of a live-born infant before the infant becomes 28 days old (up to and including 27 days, 23 hours, 59 minutes from the moment of birth).

NEONATAL DEATH RATE: Number of resident neonatal deaths x 1000, divided by the total resident live births.

OCCURRENCE: The place where the event actually occurred.

PERINATAL DEATH: A fetal death or a death occurring before the infant becomes seven days old (up to and including six days, 23 hours, 59 minutes from the moment of birth).

PERINATAL DEATH RATE: Number of resident perinatal deaths x 1000, divided by the total resident live births and resident fetal deaths.

PLURALITY: The number of siblings born as a result of this pregnancy.

PREGNANCY RATE: Number of resident pregnancies in women ages 15 to 44 x 1000, divided by the total resident female population ages 15 to 44.

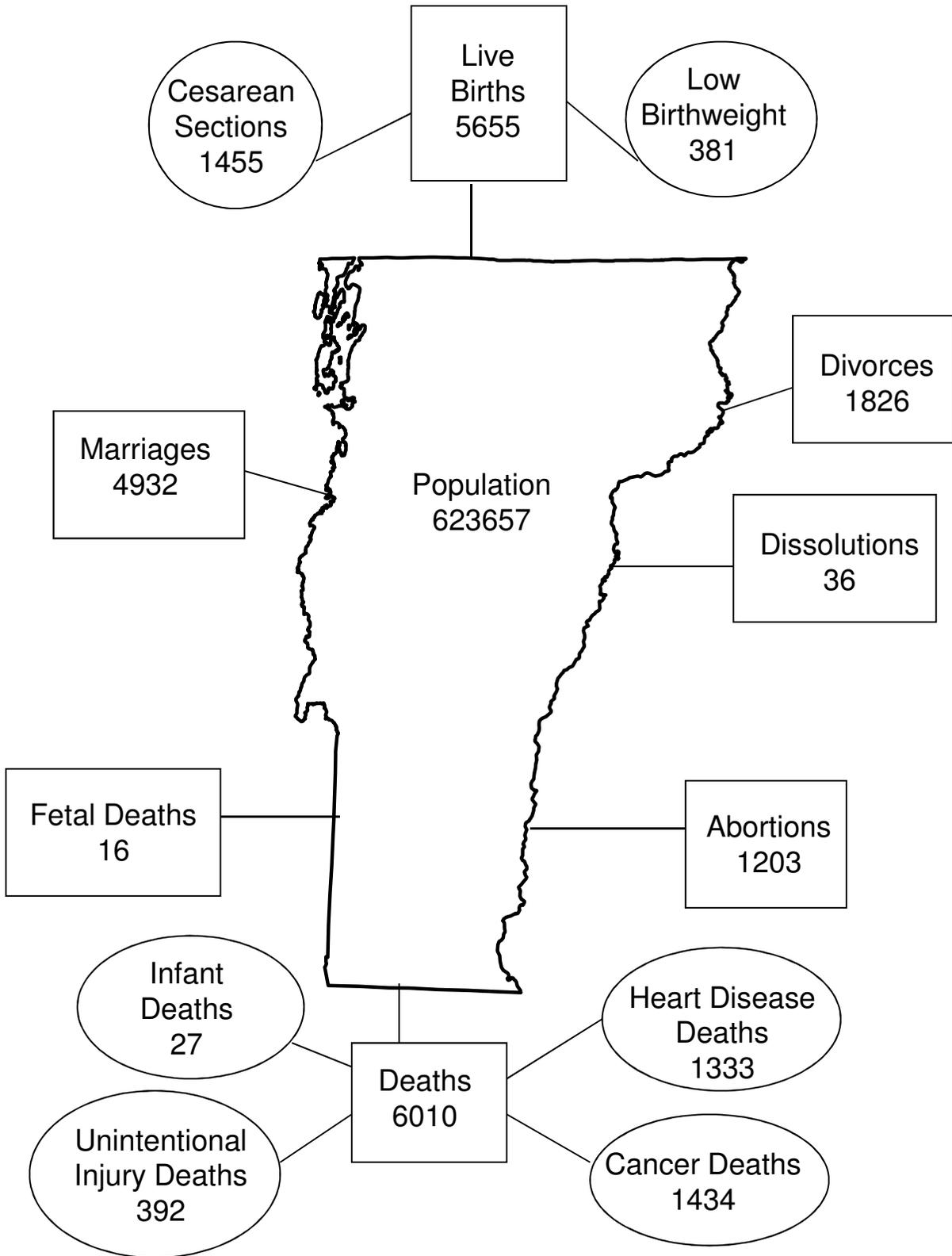
RESIDENCE: The usual place of residence for the person to whom the event occurred. For births and fetal deaths, residence is defined as the mother's usual place of residence.

ROW PERCENT: The number of cases in each row expressed as a percentage of all cases in that row.

WEEKS OF GESTATION: The number of weeks elapsed between the first day of the last menstrual period and the date of delivery.

Summary and Population

Figure 2.
Vermont Vital Events for 2017



Marriages, divorces, dissolutions and abortions displayed above are occurrence data.
 All other events are resident data.

SUMMARY STATISTICS

Occurrence statistics include all events recorded in Vermont, including those involving visitors living outside Vermont. **Resident** statistics are limited to the events involving people with legal residence in Vermont, including events occurring outside Vermont. In 2017, reports of births and deaths to Vermonters were received from 24 states.

SUMMARY OF 2017 VITAL EVENTS

	<u>Occurrence Number</u>	<u>Resident Number</u>	<u>Resident Rate</u>
Births	5,518	5,655	9.1/1,000 population
Deaths	5,775	6,010	9.6 /1,000 population
Natural Increase	N/A	-355	⁽³⁾
Infant Deaths	21	27	4.8 /1,000 live births
Fetal Deaths	22	16 ⁽¹⁾	2.8 /1,000 live births and fetal deaths
Abortions	1,203	992 ⁽¹⁾	8.7 /1,000 population (women ages 15 to 44)
Marriages	4,932	N/A	7.9 /1,000 population ⁽²⁾
Divorces	1,826	N/A	2.9 /1,000 population ⁽²⁾
Dissolutions	36	N/A	⁽³⁾

2017 population: 623,657

-
- (1) Does not include out-of-state occurrences
 - (2) Based on number of occurrences
 - (3) Rate less than 1 per 1,000

TABLE A-1
VITAL STATISTICS SUMMARY OF VERMONT ¹
1857- 2017

YEAR	POPULATION ²	LIVE BIRTHS		PREGNANCIES		LOW BIRTH WEIGHT	DEATHS		INFANT DEATHS		NEONATAL DEATHS		FETAL DEATHS		ABORTIONS	MARRIAGES		DIVORCES		CIVIL UNIONS			
		NUMBER	CRUDE RATE ³	FERT RATE ⁴	NUMBER ⁵		RATE ⁴	PERCENT	CRUDE NUMBER	RATE ³	NUMBER	RATE ⁶	NUMBER	RATE ⁶		NUMBER	RATIO ⁷	RATIO ⁷	NUMBER	RATE ³	NUMBER	RATE ³	NUMBER
1857 ^a	315,098 ⁽⁹⁾	6538 ⁽¹⁰⁾	(10)	(10)	6592	(10)		3458	(10)	450	(10)	UNKNOWN	54 ⁽¹⁰⁾	8.3 ⁽¹⁰⁾		1941 ⁽¹⁰⁾	(10)	UNKNOWN					
1880 ^b	332,286	6404	19.3	85.9	6632	89.0		5032	15.1	722	122.7	UNKNOWN	228	35.6		2697	8.1	129	0.4				
1900 ^b	343,641	7047	20.5	92.6	7356	96.6		5595	16.3	840	119.2	UNKNOWN	309	43.8		2905	8.5	235	0.7				
1920 ^b	352,428	7500	21.3	100.1	7778	103.8		5593	15.9	724	96.5	UNKNOWN	278	37.1		3720	10.6	541	1.5				
1930 ^b	359,611	6789	18.9	90.6	7004	93.5		4778	13.3	468	68.9	283	41.7		215	31.7	2866	8.0	372	1.0			
1940 ^b	359,231	6674	18.6	86.6	6874	89.2		4579	12.7	300	45.0	205	30.7		173	25.9	4906	13.7	428	1.2			
1945 ^b	368,500	6569	17.8	83.0	6706	84.7		3943	10.7	225	34.2	146	16.4		143	21.8	3569	9.4	678	1.8			
1950 ^b	377,747	8754	23.2	110.8	8897	112.6		4170	11.0	217	24.8	144	16.4		143	16.3	3569	9.4	678	1.8			
1955	383,800	9200	24.0	122.1	9344	124.0		4167	10.8	243	26.4	187	20.3		144	15.7	3378	8.8	533	1.4			
1960	389,881	9279	23.8	126.0	9395	127.6	7.0	4382	11.2	223	24.0	173	18.6		116	12.5	3253	8.3	460	1.2			
1965	408,500	7885	19.3	99.7	7993	101.5	7.4	4542	11.1	173	21.9	126	16.0		108	13.7	3646	8.9	591	1.4			
1970	444,732	8420	18.9	92.5	8532	93.7	7.4	4447	10.0	148	17.6	121	14.4		112	13.3	4517	10.1	1039	2.3			
1975	478,832	6714	14.0	63.6	8218	77.8	6.4	4255	8.9	92	13.7	70	10.4		55	8.2	215.8	4560	9.5	1958	4.1		
1980	511,456	7783	15.2	63.3	10360	84.2	5.9	4588	9.0	85	10.9	48	6.2		46	5.9	325.6	5239	10.2	2638	5.2		
1985	531,394	8027	15.1	62.4	10569	82.0	6.0	4657	8.8	68	8.5	42	5.2		50	6.2	310.5	5549	10.4	2355	4.4		
1990	562,758	8292	14.7	60.6	10566	77.1	5.3	4590	8.2	54	6.5	30	3.6		40	4.8	270.2	6189	11.0	2502	4.4		
1995	591,837	6783	11.5	50.2	8562	63.4	5.4	4949	8.4	41	6.0	29	4.3		24	3.5	258.7	6000	10.1	2520	4.3		
1996	597,194	6752	11.3	50.1	8471	63.0	6.2	4864	8.1	48	7.1	31	4.6		28	4.1	250.4	5957	10.0	2522	4.2		
1997	597,641	6602	11.0	49.6	8256	62.1	6.3	5041	8.4	40	6.1	28	4.2		28	4.2	246.3	5968	10.0	2673	4.5		
1998	600,269	6569	10.9	49.8	8103	61.5	6.6	4933	8.2	47	7.2	39	5.9		21	3.2	230.3	5934	9.9	2592	4.3		
1999	604,210	6560	10.9	50.0	8043	61.4	5.7	4983	8.2	37	5.6	21	3.2		29	4.4	221.6	6056	10.0	2652	4.4		
2000	608,827	6501	10.7	49.7	8007	61.2	6.1	5127	8.4	39	6.0	25	3.8		32	4.9	220.9	6271	10.3	2526	4.1	1704	2.8
2001	612,223	6367	10.4	48.4	7692	59.4	5.9	5202	8.5	35	5.5	23	3.6		22	3.4	209.5	5983	9.8	2637	4.3	1875	3.1
2002	615,442	6386	10.4	49.3	7820	60.9	6.4	5069	8.2	27	4.2	18	2.8		23	3.6	221.0	6011	9.8	2653	4.3	1707	2.8
2003	617,858	6589	10.7	51.0	8067	63.2	7.0	5122	8.3	33	5.0	30	4.6		21	3.2	221.1	5988	9.7	2495	4.0	1397	2.3
2004	619,920	6597	10.6	51.9	8119	64.1	6.4	4989	8.0	29	4.4	19	2.9		22	3.3	227.4	5836	9.4	2452	4.0	712	1.1
2005	621,215	6475	10.4	50.8	7949	63.4	6.2	5044	8.1	42	6.5	26	4.0		26	4.0	223.6	5532	8.9	2219	3.6	452	0.7
2006	622,892	6510	10.5	52.1	7996	64.4	6.8	5045	8.1	36	5.5	20	3.1		30	4.6	223.7	5355	8.6	2399	3.9	429	0.7
2007	623,481	6514	10.4	53.1	7938	64.8	6.2	5159	8.3	33	5.1	20	3.1		29	4.1	218.0	5320	8.5	2262	3.6	352	0.6
2008	624,451	6341	10.2	52.3	7725	64.0	7.0	5195	8.3	29	4.6	20	3.2		31	4.7	216.7	4937	7.9	2259	3.6	268	0.4
2009	624,817	6109	9.8	50.7	7316	61.3	6.8	5028	8.0	38	6.2	27	4.4		21	3.4	200.7	5434	8.7	2201	3.5	100	0.2
2010	625,741	6224	9.9	52.5	7445	62.9	6.2	5381	8.6	26	4.2	14	2.2		23	3.7	199.1	5811	9.3	2388	3.8	---	---
2011	626,431	6079	9.7	51.8	7321	62.4	6.7	5435	8.7	30	4.9	21	3.5		19	3.1	209.6	5198	8.3	2269	3.6	---	---
2012	626,011	6007	9.6	51.6	7211	61.9	6.2	5487	8.8	26	4.3	15	2.5		23	3.8	196.6	5217	8.3	2247	3.6	---	---
2013	626,630	5972	9.5	51.5	7147	61.4	6.7	5636	9.0	26	4.4	19	3.2		25	4.2	192.6	5778	9.2	2244	3.6	---	---
2014	626,562	6131	9.8	52.9	7302	62.7	7.0	5627	9.0	28	4.6	21	3.4		21	3.4	187.6	5455	8.7	2179	3.5	---	---
2015	626,042	5903	9.4	51.1	7023	60.5	6.6	5919	9.5	27	4.6	17	2.9		16	2.7	187.0	5119	8.2	1942	3.1	---	---
2016	624,594	5756	9.2	50.2	6892	60.1	6.9	5908	9.5	19	3.3	10	1.7		21	3.6	193.7	5190	8.3	1937	3.1	---	---
2017	623,657	5655	9.1	49.6	6593	58.3	6.7	6010	9.6	27	4.8	20	3.5		16	2.8	175.4	4932	7.9	1826	2.9	---	---

1. Resident data unless otherwise noted.
2. Population is the census population for those years when the census was taken and is the mid-year estimate for non-census years
NOTE: that mid-year population estimates are revised after each census is taken, so the 1991-1999 and 2001-2009 population figures and rates in this table differ from those presented in older publications.
3. Rate per 1000 population.
4. Rate per 1000 women ages 15-44.
5. Number of pregnancies includes Live Births and Fetal Deaths for 1857-1972, and Live Births, Fetal Deaths, and Abortions for 1973 – present.
6. Rate per 1000 Live Births.
7. Events per 1000 Live Births.
8. Data for these years is based on occurrence returns only.
9. 1857 population is the 1860 census population.
10. 1857 was the first year that town clerks were required to report vital events to the Secretary of State and returns for that year are incomplete.

TABLE A-2

2017 VERMONT ESTIMATED POPULATION BY AGE & SEX BY COUNTY

TOTAL												
COUNTY	< 1	1-4	5-14	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 +	TOTAL
ADDISON	316	1263	3537	6304	3703	3865	4980	5766	4375	1881	786	36776
BENNINGTON	337	1382	3787	4612	3382	3460	4802	5902	4483	2302	1145	35594
CALEDONIA	266	1165	3337	3885	3159	3417	3967	4895	3790	1602	681	30164
CHITTENDEN	1600	6325	16046	31343	22865	18622	20344	21607	13802	6493	3325	162372
ESSEX	60	239	598	607	517	613	908	1114	947	447	180	6230
FRANKLIN	559	2372	6126	5704	6101	6090	7097	7343	4699	2086	848	49025
GRAND ISLE	53	254	736	705	743	741	1023	1323	989	339	92	6998
LAMOILLE	255	1074	3025	3242	3090	3239	3515	3669	2573	1196	459	25337
ORANGE	251	1093	3038	3396	3091	3226	3987	5036	3714	1558	584	28974
ORLEANS	268	1061	2936	2977	2883	3000	3580	4225	3565	1627	719	26841
RUTLAND	495	2196	5872	7524	6348	5904	8220	9884	7690	3438	1516	59087
WASHINGTON	534	2245	6319	7474	6462	6992	8170	8996	6729	3006	1363	58290
WINDHAM	372	1574	4358	4867	4643	4503	5632	7508	5856	2432	1124	42869
WINDSOR	469	1957	5758	5530	5993	5979	7425	9561	7454	3524	1450	55100
TOTAL	5835	24200	65473	88170	72980	69651	83650	96829	70666	31931	14272	623657
MALE												
COUNTY	< 1	1-4	5-14	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 +	TOTAL
ADDISON	162	652	1865	3235	1906	1928	2449	2829	2194	888	279	18387
BENNINGTON	173	719	2013	2251	1715	1719	2302	2841	2166	1028	433	17360
CALEDONIA	135	589	1749	2098	1644	1693	1966	2358	1883	752	241	15108
CHITTENDEN	831	3342	8310	15607	11696	9244	9930	10612	6312	2704	1078	79666
ESSEX	30	123	314	310	257	299	447	545	502	232	74	3133
FRANKLIN	286	1216	3216	2884	3082	2993	3488	3662	2337	962	287	24413
GRAND ISLE	27	130	355	370	387	369	497	664	518	160	36	3513
LAMOILLE	131	556	1514	1670	1570	1616	1786	1777	1309	580	165	12674
ORANGE	127	577	1615	1858	1571	1620	1947	2473	1817	717	216	14538
ORLEANS	137	575	1452	1571	1556	1503	1820	2109	1775	766	242	13506
RUTLAND	254	1108	3044	3823	3283	2944	4106	4831	3724	1549	506	29172
WASHINGTON	274	1164	3227	4179	3189	3395	3990	4331	3268	1336	456	28809
WINDHAM	189	802	2251	2603	2321	2152	2675	3653	2857	1123	401	21027
WINDSOR	240	1017	2902	2844	2983	3009	3614	4550	3623	1654	514	26950
TOTAL	2996	12570	33827	45303	37160	34484	41017	47235	34285	14451	4928	308256
FEMALE												
COUNTY	< 1	1-4	5-14	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 +	TOTAL
ADDISON	154	611	1672	3069	1797	1937	2531	2937	2181	993	507	18389
BENNINGTON	164	663	1774	2361	1667	1741	2500	3061	2317	1274	712	18234
CALEDONIA	131	576	1588	1787	1515	1724	2001	2537	1907	850	440	15056
CHITTENDEN	769	2983	7736	15736	11169	9378	10414	10995	7490	3789	2247	82706
ESSEX	30	116	284	297	260	314	461	569	445	215	106	3097
FRANKLIN	273	1156	2910	2820	3019	3097	3609	3681	2362	1124	561	24612
GRAND ISLE	26	124	381	335	356	372	526	659	471	179	56	3485
LAMOILLE	124	518	1511	1572	1520	1623	1729	1892	1264	616	294	12663
ORANGE	124	516	1423	1538	1520	1606	2040	2563	1897	841	368	14436
ORLEANS	131	486	1484	1406	1327	1497	1760	2116	1790	861	477	13335
RUTLAND	241	1088	2828	3701	3065	2960	4114	5053	3966	1889	1010	29915
WASHINGTON	260	1081	3092	3295	3273	3597	4180	4665	3461	1670	907	29481
WINDHAM	183	772	2107	2264	2322	2351	2957	3855	2999	1309	723	21842
WINDSOR	229	940	2856	2686	3010	2970	3811	5011	3831	1870	936	28150
TOTAL	2839	11630	31646	42867	35820	35167	42633	49594	36381	17480	9344	315401

2017 VERMONT VITAL STATISTICS
SELECTED STATISTICS BY TOWN OF RESIDENCE & OCCURRENCE

	2017 ESTIMATED POPULATION	NUMBER OF BIRTHS		NUMBER OF DEATHS		NUMBER OF MARRIAGES	NUMBER OF DIVORCES TO RESIDENT	
		TO TOWN RESIDENTS	OCCURRING IN TOWN	TO TOWN RESIDENTS	OCCURRING IN TOWN	OCCURRING IN TOWN	PARTY A	PARTY B
STATE TOTALS	623657	5655	5518	6010	5775	4931	1766	1559
TOWN UNKNOWN	0	0	0	1	0	0	11	16
ADDISON COUNTY	36776	305	371	306	265	272	103	97
ADDISON	1341	10	0	13	6	16	7	4
BRIDPORT	1193	13	0	9	10	17	1	2
BRISTOL	3892	50	2	32	16	12	9	18
CORNWALL	1198	7	0	6	2	4	1	0
FERRISBURGH	2721	24	0	17	10	32	11	6
GOSHEN	160	1	0	1	0	9	1	0
GRANVILLE	306	3	0	1	1	3	3	2
HANCOCK	332	1	0	2	2	1	1	2
LEICESTER	1080	9	0	13	1	3	4	1
LINCOLN	1260	11	3	7	5	11	8	3
MIDDLEBURY	8598	58	363	99	151	54	13	14
MONKTON	2080	12	0	10	8	10	5	3
NEW HAVEN	1720	15	0	7	3	15	6	7
ORWELL	1234	10	0	13	8	4	4	4
PANTON	688	7	0	3	2	2	2	2
RIPTON	581	5	0	4	1	10	2	3
SALISBURY	1118	12	0	9	9	14	5	2
SHOREHAM	1247	7	1	8	5	7	6	3
STARSBORO	1762	15	1	12	5	14	4	3
VERGENNES	2558	23	0	29	15	30	7	12
WALTHAM	463	1	0	3	2	2	0	1
WEYBRIDGE	824	5	1	5	2	2	2	3
WHITING	420	6	0	3	1	0	1	2
BENNINGTON COUNTY	35594	324	480	476	480	381	120	94
ARLINGTON	2219	19	1	23	6	28	9	10
BENNINGTON	15003	147	475	221	352	116	60	47
DORSET	1946	8	0	24	13	25	7	3
GLASTENBURY	8	0	0	0	0	0	0	0
LANDGROVE	154	1	0	0	0	3	1	2
MANCHESTER	4249	25	0	64	43	136	12	10
PERU	356	2	0	5	1	1	2	1
POWNAL	3415	41	2	37	16	19	6	5
READSBORO	727	4	0	9	5	3	4	4
RUPERT	686	5	0	15	7	10	1	1
SANDGATE	391	5	1	6	2	4	2	1
SEARSBURG	108	2	0	2	2	0	0	0
SHAFTSBURY	3443	40	1	30	13	15	11	7
STAMFORD	811	10	0	10	5	4	1	1
SUNDERLAND	941	7	0	14	5	14	3	1
WINHALL	735	3	0	13	9	0	0	1
WOODFORD	402	5	0	3	1	3	1	0

2017 VERMONT VITAL STATISTICS
SELECTED STATISTICS BY TOWN OF RESIDENCE & OCCURRENCE

	2017 ESTIMATED POPULATION	NUMBER OF BIRTHS		NUMBER OF DEATHS		NUMBER OF MARRIAGES	NUMBER OF DIVORCES TO RESIDENT	
		TO TOWN RESIDENTS	OCCURRING IN TOWN	TO TOWN RESIDENTS	OCCURRING IN TOWN	OCCURRING IN TOWN	PARTY A	PARTY B
CALEDONIA COUNTY	30164	285	222	306	261	187	95	82
BARNET	1637	12	1	11	7	9	3	1
BURKE	1709	17	1	13	6	34	7	5
DANVILLE	2148	19	0	20	11	11	7	7
GROTON	980	8	0	7	4	8	3	2
HARDWICK	2867	33	2	27	15	22	19	14
KIRBY	488	4	0	1	2	2	0	1
LYNDON	5772	62	1	69	51	22	15	12
NEWARK	587	4	2	4	2	4	0	0
PEACHAM	722	3	1	10	4	2	2	2
RYEGATE	1107	13	0	10	2	4	2	2
SHEFFIELD	711	10	0	5	3	5	1	2
ST. JOHNSBURY	7209	64	213	73	120	45	22	24
STANNARD	217	3	0	2	2	0	0	0
SUTTON	1002	8	0	14	10	7	8	3
WALDEN	941	7	1	8	6	6	0	0
WATERFORD	1248	8	0	18	12	4	5	4
WHEELLOCK	819	10	0	14	4	2	1	3
CHITTENDEN COUNTY	162372	1449	2262	1149	1569	1052	386	339
BOLTON	1182	19	0	8	3	29	2	5
BUEL'S GORE	32	0	0	0	0	0	0	0
BURLINGTON	42239	322	2238	291	881	325	57	65
CHARLOTTE	3816	27	4	17	6	64	10	9
COLCHESTER	17287	149	3	109	360	72	56	32
ESSEX	21519	206	2	157	57	110	64	74
HINESBURG	4554	47	3	26	4	22	16	12
HUNTINGTON	1986	11	0	5	1	36	3	3
JERICHO	5047	55	2	33	13	34	10	7
MILTON	10940	124	1	83	38	28	29	27
RICHMOND	4140	42	2	21	7	38	10	3
SHELBURNE	7730	45	1	96	80	108	12	6
SOUTH BURLINGTON	19141	198	1	152	53	71	62	38
ST. GEORGE	718	7	0	7	2	1	2	2
UNDERHILL	3070	29	1	21	6	20	11	9
WESTFORD	2097	18	1	13	5	3	5	8
WILLISTON	9637	69	2	44	10	62	14	18
WINOOSKI	7237	81	1	66	43	29	23	21

2017 VERMONT VITAL STATISTICS
 SELECTED STATISTICS BY TOWN OF RESIDENCE & OCCURRENCE

	2017 ESTIMATED POPULATION	NUMBER OF BIRTHS		NUMBER OF DEATHS		NUMBER OF MARRIAGES	NUMBER OF DIVORCES TO RESIDENT	
		TO TOWN RESIDENTS	OCCURRING IN TOWN	TO TOWN RESIDENTS	OCCURRING IN TOWN	OCCURRING IN TOWN	PARTY A	PARTY B
ESSEX COUNTY	6230	41	2	85	38	26	15	18
AVERILL	25	0	0	1	0	0	0	0
BLOOMFIELD	224	6	0	0	0	1	0	2
BRIGHTON	1187	14	1	13	6	7	3	2
BRUNSWICK	115	0	0	2	1	0	0	0
CANAAN	932	4	0	11	1	8	1	1
CONCORD	1222	4	0	19	5	5	4	4
EAST HAVEN	296	3	0	4	4	0	2	2
FERDINAND	33	0	0	0	0	0	0	0
GRANBY	84	1	0	1	0	0	0	0
GUILDHALL	253	0	0	5	5	0	0	1
LEMINGTON	100	0	0	0	0	1	0	0
LUNENBURG	1332	9	1	16	7	2	5	5
MAIDSTONE	199	0	0	4	4	1	0	0
NORTON	161	0	0	6	4	1	0	1
VICTORY	63	0	0	3	1	0	0	0
WARREN'S GORE	4	0	0	0	0	0	0	0
FRANKLIN COUNTY	49025	547	383	451	362	273	171	148
BAKERSFIELD	1332	8	0	8	4	2	3	5
BERKSHIRE	1728	14	0	8	3	8	2	2
ENOSBURGH	2742	30	0	32	12	14	11	11
FAIRFAX	4669	60	1	36	9	20	20	22
FAIRFIELD	1919	26	0	16	5	8	4	1
FLETCHER	1334	10	1	3	1	5	1	3
FRANKLIN	1413	15	0	11	7	11	0	3
GEORGIA	4721	44	0	25	12	13	13	9
HIGHGATE	3654	30	0	26	8	20	6	6
MONTGOMERY	1200	9	0	5	6	25	6	4
RICHFORD	2301	29	0	31	19	23	9	7
SHELDON	2232	29	0	19	5	13	5	7
ST. ALBANS CITY	6795	95	381	70	134	38	27	22
ST. ALBANS TOWN	6442	69	0	87	106	36	45	23
SWANTON	6543	79	0	74	31	37	19	23

2017 VERMONT VITAL STATISTICS
SELECTED STATISTICS BY TOWN OF RESIDENCE & OCCURRENCE

	2017 ESTIMATED POPULATION	NUMBER OF BIRTHS		NUMBER OF DEATHS		NUMBER OF MARRIAGES	NUMBER OF DIVORCES TO RESIDENT	
		TO TOWN RESIDENTS	OCCURRING IN TOWN	TO TOWN RESIDENTS	OCCURRING IN TOWN	OCCURRING IN TOWN	PARTY A	PARTY B
GRAND ISLE COUNTY	6998	58	2	66	26	104	11	15
ALBURGH	2053	16	0	25	6	17	5	6
GRAND ISLE	2057	19	0	17	8	29	2	2
ISLE LA MOTTE	483	5	0	4	0	16	1	1
NORTH HERO	794	5	1	8	5	20	2	3
SOUTH HERO	1611	13	1	12	7	22	1	3
LAMOILLE COUNTY	25337	246	205	214	181	339	76	68
BELVIDERE	363	4	0	7	3	4	0	0
CAMBRIDGE	3838	47	1	22	11	58	9	8
EDEN	1375	14	0	7	3	6	4	1
ELMORE	868	12	2	9	5	11	3	1
HYDE PARK	2989	35	1	31	16	18	8	9
JOHNSON	3614	28	1	26	9	17	10	7
MORRISTOWN	5422	45	197	58	112	20	22	22
STOWE	4472	32	1	33	17	189	15	14
WATERVILLE	706	7	0	8	0	5	1	2
WOLCOTT	1690	22	2	13	5	11	4	4
ORANGE COUNTY	28974	260	177	271	169	224	70	66
BRADFORD	2709	33	1	27	11	14	8	8
BRAINTREE	1206	12	0	10	5	6	1	1
BROOKFIELD	1326	12	3	12	6	10	1	2
CHELSEA	1281	8	0	17	9	10	5	5
CORINTH	1415	16	0	7	3	9	7	5
FAIRLEE	983	7	0	7	5	27	1	2
NEWBURY	2166	20	1	27	12	15	7	4
ORANGE	1101	6	1	10	5	9	6	2
RANDOLPH	4693	39	170	50	54	22	12	10
STRAFFORD	1079	9	0	8	8	6	3	4
THETFORD	2561	23	0	20	11	24	7	4
TOPSHAM	1205	12	0	15	9	9	2	1
TUNBRIDGE	1324	18	0	10	4	15	1	4
VERSHIRE	741	2	0	9	3	1	0	2
WASHINGTON	1018	9	0	4	3	23	2	2
WEST FAIRLEE	675	5	0	5	5	9	0	0
WILLIAMSTOWN	3491	29	1	33	16	15	7	10

2017 VERMONT VITAL STATISTICS
SELECTED STATISTICS BY TOWN OF RESIDENCE & OCCURRENCE

	2017 ESTIMATED POPULATION	NUMBER OF BIRTHS		NUMBER OF DEATHS		NUMBER OF MARRIAGES	NUMBER OF DIVORCES TO RESIDENT	
		TO TOWN RESIDENTS	OCCURRING IN TOWN	TO TOWN RESIDENTS	OCCURRING IN TOWN	OCCURRING IN TOWN	PARTY A	PARTY B
ORLEANS COUNTY	26841	230	196	317	303	252	66	62
ALBANY	912	13	0	9	3	4	0	1
BARTON	2540	27	1	52	53	14	7	6
BROWNINGTON	959	14	0	13	3	8	5	1
CHARLESTON	993	7	0	7	4	8	2	2
COVENTRY	1051	4	0	11	4	6	2	1
CRAFTSBURY	1177	6	0	17	6	9	1	2
DERBY	4289	28	2	57	21	25	9	8
GLOVER	1095	2	1	20	21	5	2	1
GREENSBORO	710	4	0	11	15	7	1	1
HOLLAND	613	2	0	5	3	6	1	2
IRASBURG	1129	13	0	11	4	7	3	4
JAY	577	5	0	3	2	45	2	2
LOWELL	810	6	0	6	7	3	2	2
MORGAN	710	6	0	2	1	5	2	2
NEWPORT CITY	4288	51	191	54	138	27	14	17
NEWPORT TOWN	2637	16	0	16	9	10	6	5
TROY	1531	20	0	16	5	11	5	3
WESTFIELD	498	5	1	5	3	11	2	2
WESTMORE	322	1	0	2	1	41	0	0
RUTLAND COUNTY	59087	522	368	733	701	530	174	143
BENSON	1022	11	2	12	6	6	7	4
BRANDON	3790	55	2	43	18	43	12	11
CASTLETON	4609	32	0	34	12	27	9	5
CHITTENDEN	1201	8	1	9	3	147	5	2
CLARENDON	2450	15	0	18	10	5	4	3
DANBY	1310	10	0	11	5	6	0	2
FAIR HAVEN	2593	30	0	37	17	14	12	10
HUBBARDTON	675	7	0	5	2	4	0	1
IRA	432	1	0	1	2	2	0	1
KILLINGTON	771	7	0	2	1	57	4	2
MENDON	1013	7	0	9	6	10	3	3
MIDDLETOWN SPRINGS	749	10	2	7	5	5	4	2
MOUNT HOLLY	1243	9	1	11	4	7	3	4
MOUNT TABOR	259	0	0	2	1	0	1	0
PAWLET	1397	15	0	16	5	5	2	0
PITTSFIELD	549	2	0	4	2	13	2	1
PITTSFORD	2828	22	0	36	10	9	6	7
POULTNEY	3339	32	0	36	16	13	7	7
PROCTOR	1624	15	0	19	7	3	5	1
RUTLAND CITY	15440	151	358	272	488	75	61	51
RUTLAND TOWN	4076	13	1	69	45	18	6	2
SHREWSBURY	998	7	0	8	5	12	1	1
SUDBURY	542	4	1	5	3	2	1	1
TINMOUTH	605	5	0	4	3	5	3	2
WALLINGFORD	1988	17	0	21	7	29	6	7
WELLS	1154	12	0	13	6	5	2	4
WEST HAVEN	249	3	0	1	1	2	0	1
WEST RUTLAND	2181	22	0	28	11	6	8	8

2017 VERMONT VITAL STATISTICS
SELECTED STATISTICS BY TOWN OF RESIDENCE & OCCURRENCE

	2017 ESTIMATED POPULATION	NUMBER OF BIRTHS		NUMBER OF DEATHS		NUMBER OF MARRIAGES	NUMBER OF DIVORCES TO RESIDENT	
		TO TOWN RESIDENTS	OCCURRING IN TOWN	TO TOWN RESIDENTS	OCCURRING IN TOWN	OCCURRING IN TOWN	PARTY A	PARTY B
WASHINGTON COUNTY	58290	555	348	562	510	418	157	146
BARRE CITY	8659	108	2	109	79	36	35	31
BARRE TOWN	7723	81	2	86	31	22	18	20
BERLIN	2807	12	326	43	232	9	9	5
CABOT	1437	15	2	11	3	11	4	5
CALAIS	1597	12	4	7	4	10	6	4
DUXBURY	1320	14	0	13	12	23	1	3
EAST MONTPELIER	2576	17	0	18	6	8	4	4
FAYSTON	1335	6	0	11	6	2	1	1
MARSHFIELD	1501	19	1	16	9	11	3	4
MIDDLESEX	1747	13	0	14	8	7	6	4
MONTPELIER	7484	62	3	75	27	43	22	18
MORETOWN	1667	19	1	11	4	17	1	2
NORTHFIELD	6032	45	2	56	47	18	12	18
PLAINFIELD	1260	13	1	7	2	8	6	3
ROXBURY	706	6	1	3	2	8	1	1
WAITSFIELD	1708	20	0	14	5	98	7	6
WARREN	1682	8	1	13	7	43	6	5
WATERBURY	5142	59	1	40	18	35	12	10
WOODBURY	888	15	1	5	2	3	0	0
WORCESTER	1019	11	0	10	6	6	3	2
WINDHAM COUNTY	42869	379	339	472	384	379	132	105
ATHENS	439	3	0	2	1	1	2	2
BRATTLEBORO	11487	120	330	162	192	99	31	24
BROOKLINE	529	6	0	5	4	5	1	2
DOVER	1065	11	1	13	8	25	3	4
DUMMERSTON	1777	16	0	16	9	12	3	1
GRAFTON	677	3	0	5	5	35	3	2
GUILFORD	2118	23	1	10	4	10	12	6
HALIFAX	693	5	0	7	3	13	4	2
JAMAICA	1031	6	0	7	4	6	5	6
LONDONDERRY	1691	18	0	18	11	17	4	3
MARLBORO	1042	4	1	12	5	11	4	4
NEWFANE	1621	8	0	10	3	15	6	7
PUTNEY	2621	16	3	29	14	17	7	4
ROCKINGHAM	5047	48	1	69	28	29	17	10
SOMERSET	3	0	0	0	0	0	0	0
STRATTON	202	4	0	2	0	22	0	1
TOWNSHEND	1247	10	0	15	27	10	4	5
VERNON	2201	19	0	35	38	7	6	5
WARDSBORO	853	5	0	7	1	4	1	1
WESTMINSTER	3015	20	2	19	10	10	6	7
WHITINGHAM	1302	13	0	11	8	6	5	4
WILMINGTON	1806	19	0	16	7	24	8	5
WINDHAM	402	2	0	2	2	1	0	0

2017 VERMONT VITAL STATISTICS
SELECTED STATISTICS BY TOWN OF RESIDENCE & OCCURRENCE

	2017 ESTIMATED POPULATION	NUMBER OF BIRTHS		NUMBER OF DEATHS		NUMBER OF MARRIAGES	NUMBER OF DIVORCES TO RESIDENT	
		TO TOWN RESIDENTS	OCCURRING IN TOWN	TO TOWN RESIDENTS	OCCURRING IN TOWN	OCCURRING IN TOWN	PARTY A	PARTY B
WINDSOR COUNTY	55100	454	163	601	526	494	179	160
ANDOVER	473	4	0	5	3	2	0	2
BALTIMORE	247	1	0	5	3	0	0	0
BARNARD	918	3	1	6	5	16	2	0
BETHEL	1961	19	0	22	8	17	6	5
BRIDGEWATER	952	9	0	4	1	5	2	0
CAVENDISH	1393	12	0	13	7	22	5	3
CHESTER	3023	29	1	29	14	17	12	8
HARTFORD	9612	99	0	97	104	78	35	30
HARTLAND	3453	27	0	24	15	21	13	9
LUDLOW	1881	8	1	31	23	41	4	8
NORWICH	3317	18	1	21	6	9	6	11
PLYMOUTH	604	3	0	5	4	12	0	1
POMFRET	865	4	0	6	5	8	1	0
READING	644	5	0	11	5	9	3	2
ROCHESTER	1094	8	0	8	4	19	3	4
ROYALTON	2829	35	1	27	11	11	8	9
SHARON	1519	16	0	12	8	9	11	5
SPRINGFIELD	8924	82	157	114	139	27	33	30
STOCKBRIDGE	712	6	0	6	6	3	1	1
WEATHERSFIELD	2754	15	1	32	15	30	10	5
WEST WINDSOR	1050	4	0	12	5	12	3	5
WESTON	545	1	0	10	8	20	1	0
WINDSOR	3398	31	0	66	92	20	12	16
WOODSTOCK	2932	15	0	35	35	86	8	6

Births

Figure 3

**VERMONT 2017 RESIDENT BIRTHS
NAMES MOST FREQUENTLY GIVEN**

FEMALES

1	EVELYN	33
2	SOPHIA	29
3	CHARLOTTE	26
3	OLIVIA	26
5	EMMA	24
6	AMELIA	23
6	AVA	23
8	NORA	22
9	HARPER	21
9	ISABELLA	21

Spellings may vary.

MALES

1	OLIVER	32
2	WILLIAM	31
3	WYATT	30
4	LIAM	29
4	JACKSON	29
6	MASON	28
7	BENJAMIN	27
8	NOAH	26
9	OWEN	25
10	HENRY	24

Spellings may vary.

BIRTHS

On July 1, 2005 Vermont implemented a revised birth certificate based on the 2003 revision of the U.S. Standard Certificate of Live Birth. Comparisons of Vermont rates to U.S. rates are made when possible. As of 2017, all 50 states and the District of Columbia, and all territories except for American Samoa had adopted the revised birth certificate.

In 2017, 5,655 babies were born to Vermont residents. This represents a decrease of 101 births from 2016. The crude birth rate in 2017 is 9.1 per 1,000 Vermont residents, a small decrease from the 2016 rate of 9.2. The U.S. birth rate for 2017 was 11.8. The Vermont birth rate peaked in 1955 at 24 per 1,000 residents; it then dropped for two decades, remained relatively stable from the late 1970's through the 1980's, slowly and steadily decreased through the 1990's, and has continued a slow decline since.

FERTILITY

Although the crude birth rate is based on the total population, a better measure of birth patterns is the fertility rate which is based on the population of women ages 15 through 44, the peak child-bearing years. The 2017 Vermont fertility rate was 49.6 per 1,000 women ages 15 through 44 (Table B-6, Figure 4), a decrease from the 2016 rate of 50.2. The U.S. fertility rate was 60.3 in 2017. The fertility rate in Vermont peaked in 1960 at 126, declined through the 1960's and 1970's, leveled off slightly in the 1980's, steadily declined through the early 90's, and has remained fairly stable since 1995. Age-specific fertility rates have generally declined among the younger age groups (<30), and increased among the older age groups, with the largest increase among 35-44 year olds.

FIGURE 4
AGE-SPECIFIC FERTILITY RATES, SELECTED YEARS 1980-2017

AGES/ YEAR	1980	1990	2000	2010	2017
TOTAL	63.3	60.6	49.7	52.5	49.6
15 – 19	38.5	34.1	23.4	17.8	10.1
20 – 24	102.4	93.9	74.1	64.0	39.9
25 – 29	113.0	114.6	102.1	97.2	93.4
30 – 34	60.2	79.5	84.0	101.0	98.6
35 – 44	12.5	19.6	21.3	24.7	31.3

Forty-five percent of births in 2017 were to women in their twenties (Table B-5), down from 49.5 percent in 2010. Women age 30 and over accounted for nearly half (48.0%) of births, up from 44.1 in 2010 and 43.9 percent in 2000. Women age 15 through 19 accounted for 3.6 percent of births, down from 6.4 in 2010 and 8.0 percent in 2000.

BIRTH WEIGHT

The median birth weight for all resident births in 2017 was 3,402 grams (approximately 7 pounds 8 ounces). Low birth weight infants are those born weighing less than 2,500 grams (5 pounds 8 ounces). They are much more likely than heavier babies to suffer short and long-term disabilities, and to die in infancy. In 2017, 6.7 percent of Vermont resident births were low birth weight (Table B-12) and 1.1 percent were very low birth weight (under 1,500 grams or 3 pounds 5 ounces). The U.S. low birth weight rate for 2017 was 8.3 percent.

Low birth weight rates in Vermont varied by age group in 2017 (Table B-12), with the highest rates occurring in the youngest and oldest age groups. In 2017, the low birth weight rate among women under age 20 was 9.7 percent, compared to 6.6 percent of births among women age 20-29 and women age 30-39, and 7.3 percent of births to women age 40 and older.

Infant birth weight is also positively associated with maternal weight gain: mothers who do not gain adequate weight during pregnancy are more likely to deliver low birth weight infants. On the other hand, there are risks associated with gaining too much weight including delivery complications and maternal and infant obesity. Although the weight gained by 19.7 percent of Vermont mothers in 2017 fell below the range recommended by the Institute of Medicine, 48.9 percent gained above the recommended range (Table B-23). Please refer to Appendix B for further information on the guidelines.

The single most important preventable risk factor for low birth weight is smoking during pregnancy. The low birth weight rate among women who smoked cigarettes during their pregnancy was 13.6 percent compared to 5.5 percent among women who did not smoke during pregnancy (Table B-19). The rate of women who reported smoking during pregnancy in 2017 was 15.5 percent, the same as in 2016. Among those who smoked before pregnancy or during the first trimester, 26.5 percent quit, down slightly from the 2016 quit rate of 26.9.

PRENATAL CARE

Early, comprehensive, and high quality prenatal care is essential for a healthy pregnancy and birth. Through prenatal care, pregnant women are screened for medical conditions and counseled on nutrition, behavioral risks (such as using tobacco and alcohol), and domestic violence.

In 2017, 87.1 percent of the babies were born to mothers who began prenatal care in the first three months of pregnancy (Table B-14), up slightly from 86.9 percent in 2016. In general, the percentage of women receiving first trimester prenatal care has steadily increased since 1987.

The proportion of births in 2017 to Vermont mothers who delayed care to the third trimester or received no prenatal care was 1.9 percent, up from 1.8 in 2016. As in previous years, the age of the mother is closely associated with the time of entry to prenatal care with young women seeking care later than older women (Table B-15).

Based on the Adequacy of Prenatal Care Utilization (APNCU) Index, in 2017, 89.7 percent of Vermont resident mothers received at least adequate prenatal care, (Table B-25). The percent of Vermont mothers who received inadequate care was 5.7. Mothers age 45 and older (18.2 percent) and age 15 to 19 (11.4 percent) had the highest percent of inadequate care, while mothers age 30-34 had the highest percent of adequate plus intensive care (91.5 percent).

MEDICAL RISK FACTORS

Of those births with medical risk factors reported for the mother, the most common were gestational hypertension, gestational diabetes, and previous pre-term births. The most commonly reported characteristics of labor and delivery were spinal anesthesia during labor, augmentation of labor, induction of labor, fetal intolerance, and antibiotics received by mother during labor (Table B-21).

DELIVERIES

Of babies born in Vermont hospitals in 2017, 26.6 percent were delivered by cesarean section (Table B-18) compared to 32.0 percent for U.S. women in 2017. The primary cesarean section rate was 18.4 percent in Vermont for 2017, lower than the 21.9 percent for U.S. women in 2017. Of mothers delivering in Vermont hospitals in 2017 who had a previous delivery by cesarean section, 21.2 percent had vaginal births, compared to 12.8 percent for mothers in the U.S. in 2016.

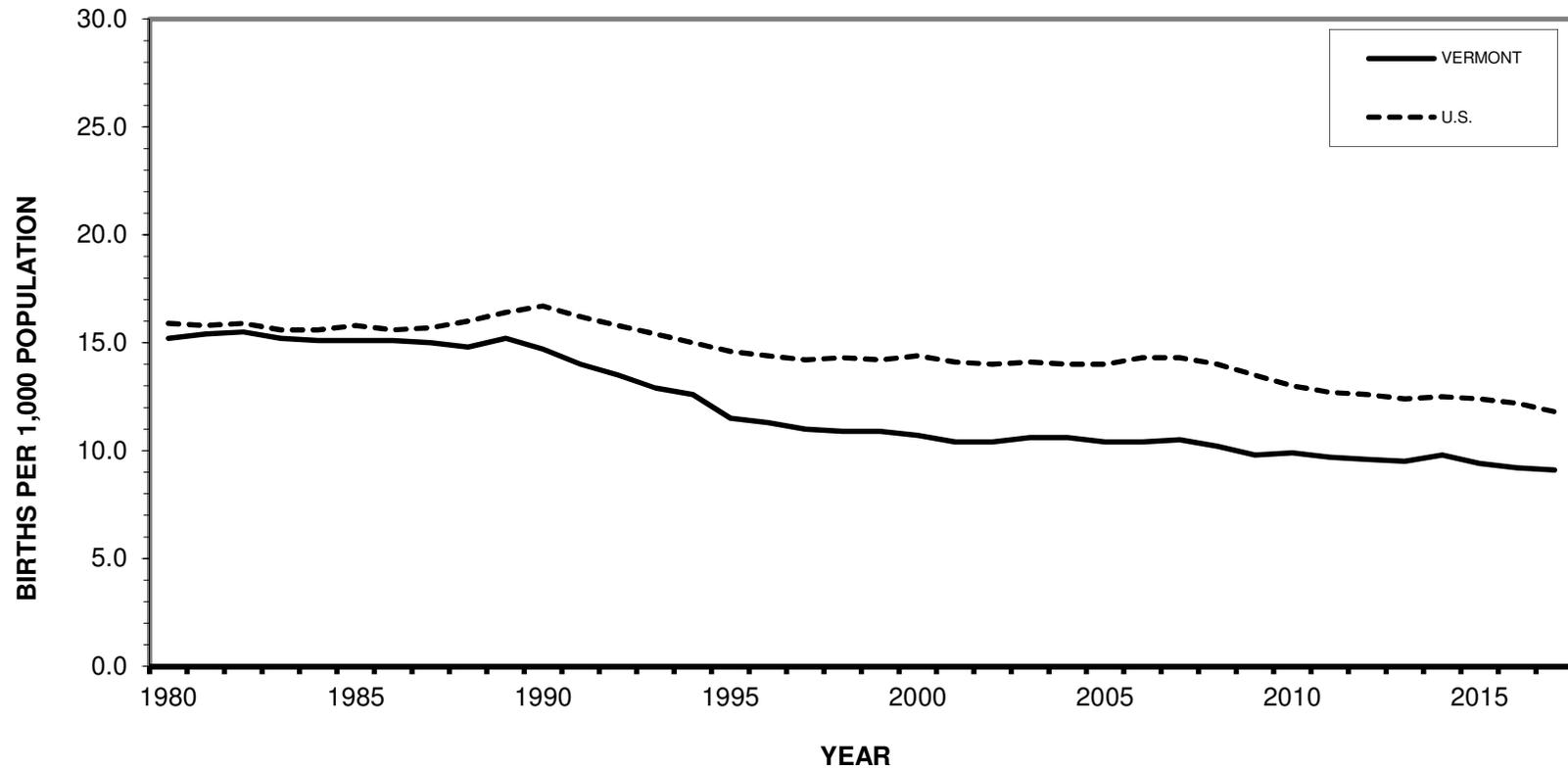
VERMONT RESIDENT PREGNANCIES

The pregnancy rate is derived by adding live births, fetal deaths and abortions. The pregnancy rates presented in this report underestimate the actual number of pregnancies for two reasons. First, Vermont resident abortions and fetal deaths that occur out of state are not reported to us. Second, by statute, fetal deaths prior to 20 weeks gestation are not reportable. Since residents of some counties may be more likely to use out-of-state services, the extent of these underestimates may differ among counties.

In 2017, the pregnancy rate in Vermont was 58.3 pregnancies per 1,000 women ages 15 to 44 (Table B-31), a decrease from 60.1 in 2016. Overall, the pregnancy rate peaked at 127.6 in 1960 then dropped steadily through the next four decades to a low of 58.7 in 2001 before moving back above 60 in 2002. The pregnancy rate has been fairly stable for the past decade (Table A-1).

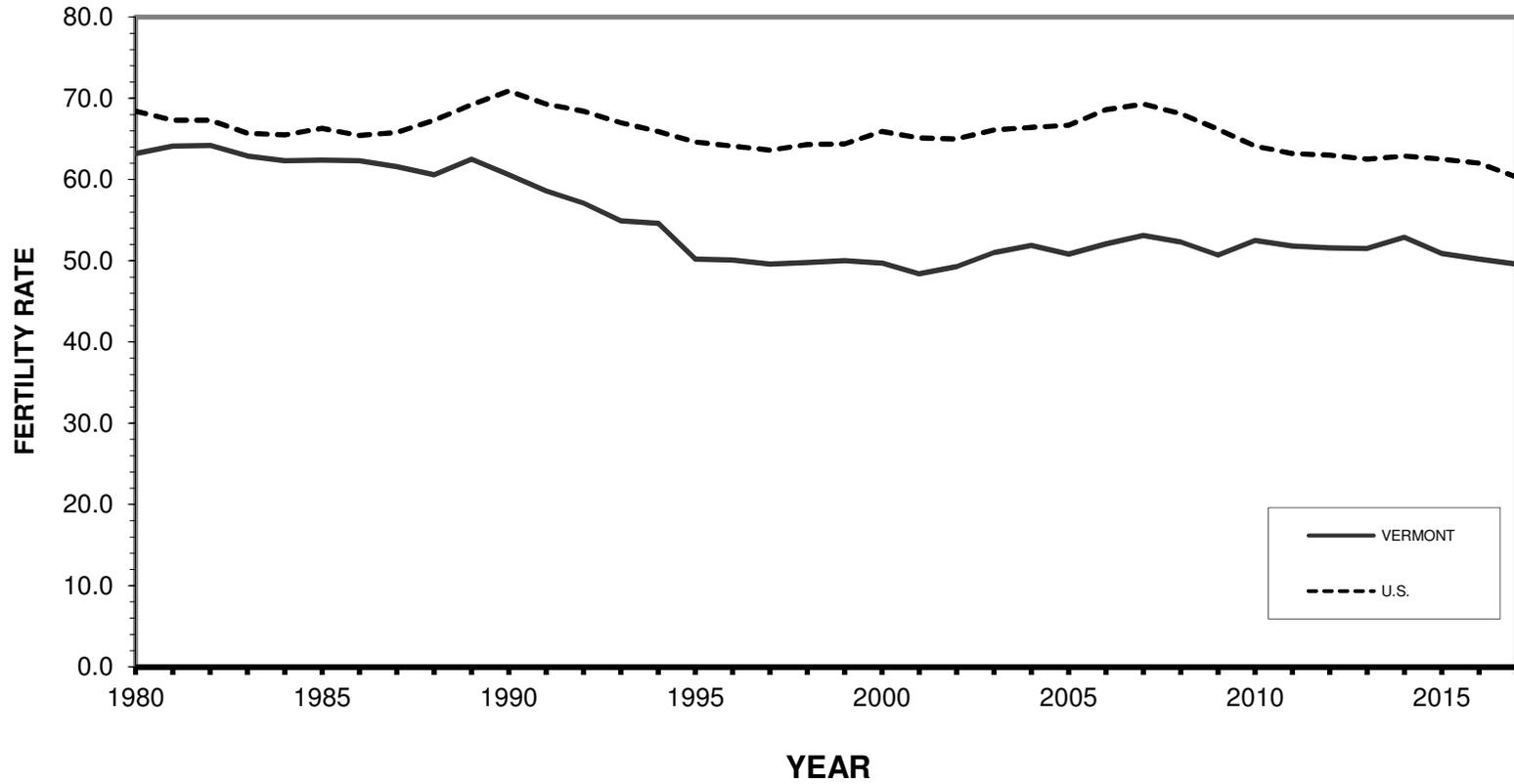
The 2017 teen pregnancy rate was 14.4 pregnancies per 1,000 women age 15 to 19 years (Table B-31), a decrease from 16.7 in 2016. In general, the teen pregnancy rate has been decreasing since 1991. In 2017, the highest pregnancy rate was seen in women 25 to 29 years of age at 109.6 followed by the 30 to 34 age group at 109.0. The lowest rate was for teens.

Figure 5
VERMONT AND U.S. BIRTH RATES
1980-2017



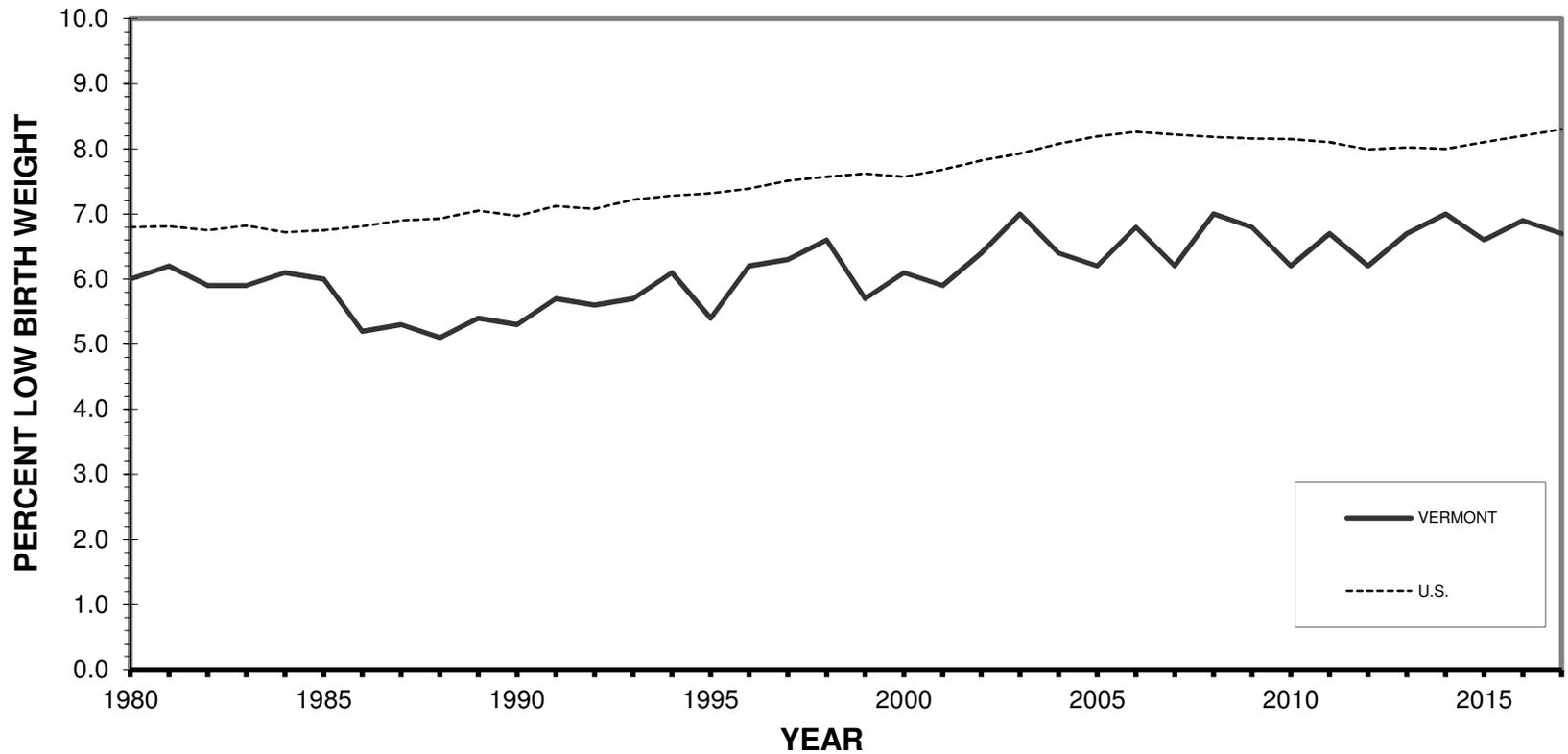
Vermont data points can be found in Table A-1. Data points for the U.S. can be found in Appendix D.

Figure 6
VERMONT AND U.S. FERTILITY RATES
1980 - 2017



Vermont data points can be found in Table A-1. Data points for U.S. can be found in Appendix D.

Figure 7
VERMONT AND U.S.
PERCENT LOW BIRTH WEIGHT BIRTHS, 1980-2017



Vermont data points can be found in Table A-1. Data points for U.S. can be found in Appendix D.

**TABLE B-1
2017 VERMONT BIRTHS**

GEOGRAPHIC DISTRIBUTION OF 2017 VERMONT BIRTHS

BIRTHS OCCURRING IN VERMONT		VERMONT RESIDENT BIRTHS	
PLACE OF RESIDENCE	NUMBER	PLACE OF BIRTH	NUMBER
COLORADO	1	CONNECTICUT	2
FLORIDA	5	FLORIDA	1
KENTUCKY	1	MASSACHUSETTS	28
MASSACHUSETTS	50	NEW HAMPSHIRE	623
MAINE	2	NEW YORK	22
MINNESOTA	1	PENNSYLVANIA	1
MISSOURI	1	TENNESSEE	1
NEW HAMPSHIRE	118	VIRGINIA	3
NEW JERSEY	1	VERMONT	4974
NEW YORK	358		
RHODE ISLAND	1		
TENNESSEE	1		
VERMONT	4974		
CANADA	1		
TOTAL	5518	TOTAL	5655

TABLE B-2
2017 VERMONT RESIDENT BIRTHS

SELECTED CHARACTERISTICS BY AGE OF MOTHER

AGE OF MOTHER	SEX				DOMESTIC RELATIONSHIP				PLURALITY			NUMBER OF PREVIOUS LIVE BIRTHS				
	TOTAL	MALE	FEMALE	UNK	CIVIL				SINGLE	TWINS	TRIPLET	NONE	ONE	TWO	THREE+	UNK
					MARRIED	UNION	SINGLE	UNK								
< 15 YEARS	1	0	1	0	0	0	1	0	1	0	0	1	0	0	0	0
15 YEARS	3	3	0	0	0	0	3	0	3	0	0	3	0	0	0	0
16 YEARS	7	6	1	0	0	0	7	0	7	0	0	7	0	0	0	0
17 YEARS	27	16	11	0	1	0	26	0	25	2	0	24	3	0	0	0
18 YEARS	61	24	37	0	4	0	57	0	61	0	0	54	7	0	0	0
19 YEARS	108	53	55	0	13	0	95	0	104	4	0	95	8	4	1	0
(15-19 YEARS)	(206)	(102)	(104)	(0)	(18)	0	(188)	0	(200)	(6)	(0)	(183)	(18)	(4)	(1)	(0)
20 YEARS	135	65	70	0	14	0	121	0	135	0	0	96	37	2	0	0
21 YEARS	149	66	83	0	25	0	124	0	143	6	0	86	50	11	2	0
22 YEARS	184	93	91	0	43	1	138	2	184	0	0	93	74	15	2	0
23 YEARS	198	93	105	0	62	0	135	1	198	0	0	94	86	15	3	0
24 YEARS	230	110	120	0	85	1	143	1	230	0	0	113	76	32	9	0
(20-24 YEARS)	(896)	(427)	(469)	(0)	(229)	(2)	(661)	(4)	(890)	(6)	(0)	(482)	(323)	(75)	(16)	(0)
25-29 YEARS	1648	862	786	0	940	0	708	0	1597	49	2	721	565	249	111	2
30-34 YEARS	1792	932	860	0	1362	0	430	0	1734	55	3	694	668	254	174	2
35-39 YEARS	921	458	463	0	711	1	208	1	875	46	0	291	353	157	120	0
40-44 YEARS	179	85	94	0	120	0	59	0	165	14	0	49	47	41	42	0
45+ YEARS	12	5	7	0	9	0	3	0	12	0	0	6	1	1	4	0
STATE TOTAL	5655	2871	2784	0	3389	3	2258	5	5474	176	5	2427	1975	781	468	4

TABLE B-3
2017 VERMONT RESIDENT BIRTHS

SELECTED CHARACTERISTICS BY COUNTY OF RESIDENCE

COUNTY OF RESIDENCE	SEX				DOMESTIC RELATIONSHIP				PLURALITY			NUMBER OF PREVIOUS LIVE BIRTHS				
	TOTAL	MALE	FEMALE	UNK	MARRIED	CIVIL UNION	SINGLE	UNK	SINGLE	TWINS	TRIPLET	NONE	ONE	TWO	THREE+	UNK
ADDISON	305	143	162	0	185	0	120	0	289	16	0	137	110	40	18	0
BENNINGTON	324	168	156	0	143	0	177	4	320	4	0	120	109	45	48	2
CALEDONIA	285	143	142	0	140	1	144	0	277	8	0	105	107	45	26	2
CHITTENDEN	1449	716	733	0	1072	0	377	0	1393	54	2	640	520	169	120	0
ESSEX	41	16	25	0	27	0	14	0	39	2	0	12	11	13	5	0
FRANKLIN	547	286	261	0	314	0	233	0	534	13	0	224	208	73	42	0
GRAND ISLE	58	28	30	0	35	0	23	0	58	0	0	21	21	11	5	0
LAMOILLE	246	113	133	0	134	0	112	0	240	6	0	117	87	30	12	0
ORANGE	260	135	125	0	135	0	125	0	246	14	0	121	85	37	17	0
ORLEANS	230	113	117	0	96	1	132	1	222	8	0	110	67	31	22	0
RUTLAND	522	269	253	0	292	0	230	0	509	10	3	214	168	92	48	0
WASHINGTON	555	278	277	0	357	1	197	0	537	18	0	244	193	76	42	0
WINDHAM	379	203	176	0	190	0	189	0	364	15	0	156	141	53	29	0
WINDSOR	454	260	194	0	269	0	185	0	446	8	0	206	148	66	34	0
STATE TOTAL	5655	2871	2784	0	3389	3	2258	5	5474	176	5	2427	1975	781	468	4

**TABLE B-4
2017 VERMONT RESIDENT BIRTHS
RACE OF MOTHER BY COUNTY OF RESIDENCE**

COUNTY OF RESIDENCE	RACE OF MOTHER							MULTIPLE RACE ⁽²⁾	TOTAL
	SINGLE RACE								
	WHITE	BLACK	AMERICAN INDIAN	ASIAN or PACIFIC ISLANDER ⁽¹⁾	OTHER NON-WHITE	UNKNOWN			
ADDISON	296	1	0	2	2	1	3	305	
BENNINGTON	308	3	2	0	2	2	7	324	
CALEDONIA	279	2	0	2	1	1	0	285	
CHITTENDEN	1197	91	1	116	13	7	24	1449	
ESSEX	38	0	0	1	0	1	1	41	
FRANKLIN	517	1	3	7	4	1	14	547	
GRAND ISLE	56	1	0	0	1	0	0	58	
LAMOILLE	232	4	1	1	1	0	7	246	
ORANGE	256	0	0	1	1	1	1	260	
ORLEANS	217	1	3	4	1	1	3	230	
RUTLAND	499	4	1	11	4	0	3	522	
WASHINGTON	526	4	2	11	2	2	8	555	
WINDHAM	342	6	0	4	3	0	24	379	
WINDSOR	437	6	2	5	0	1	3	454	
STATE TOTAL	5200	124	15	165	35	18	98	5655	

⁽¹⁾ INCLUDING ASIAN INDIAN, CHINESE, FILIPINO, JAPANESE, KOREAN, VIETNAMESE, OTHER ASIAN, GUAMANIAN OR CHAMORRO, SAMOAN, OTHER PACIFIC ISLANDER.

⁽²⁾ MOTHERS WHO INDICATED MORE THAN ONE RACE.

Table B-5
2017 VERMONT RESIDENT BIRTHS

AGE OF MOTHER BY COUNTY OF RESIDENCE
AGE OF MOTHER

COUNTY OF RESIDENCE	NUMBER OF EVENTS									TOTAL
	< 15 YEARS	15 - 17 YEARS	18 - 19 YEARS	20 - 24 YEARS	25 - 29 YEARS	30 - 34 YEARS	35 - 39 YEARS	40 - 44 YEARS	45+ YEARS	
ADDISON	0	2	8	52	93	87	53	10	0	305
BENNINGTON	0	2	15	63	98	90	46	10	0	324
CALEDONIA	0	0	14	64	94	71	38	4	0	285
CHITTENDEN	0	4	20	155	335	568	291	70	6	1449
ESSEX	0	0	1	7	15	7	8	3	0	41
FRANKLIN	1	3	16	102	202	155	62	6	0	547
GRAND ISLE	0	0	2	8	21	17	7	3	0	58
LAMOILLE	0	7	6	40	63	69	50	11	0	246
ORANGE	0	0	5	57	74	79	38	5	2	260
ORLEANS	0	4	19	53	85	44	21	4	0	230
RUTLAND	0	4	22	66	189	163	66	11	1	522
WASHINGTON	0	5	9	77	150	183	121	10	0	555
WINDHAM	0	2	14	77	106	105	57	17	1	379
WINDSOR	0	4	18	75	123	154	63	15	2	454
STATE TOTAL	1	37	169	896	1648	1792	921	179	12	5655

COUNTY OF RESIDENCE	ROW PERCENTS ⁽¹⁾									TOTAL
	< 15 YEARS	15 - 17 YEARS	18 - 19 YEARS	20 - 24 YEARS	25 - 29 YEARS	30 - 34 YEARS	35 - 39 YEARS	40 - 44 YEARS	45+ YEARS	
ADDISON	0.0%	0.7%	2.6%	17.0%	30.5%	28.5%	17.4%	3.3%	0.0%	100.0%
BENNINGTON	0.0%	0.6%	4.6%	19.4%	30.2%	27.8%	14.2%	3.1%	0.0%	100.0%
CALEDONIA	0.0%	0.0%	4.9%	22.5%	33.0%	24.9%	13.3%	1.4%	0.0%	100.0%
CHITTENDEN	0.0%	0.3%	1.4%	10.7%	23.1%	39.2%	20.1%	4.8%	0.4%	100.0%
ESSEX	0.0%	0.0%	2.4%	17.1%	36.6%	17.1%	19.5%	7.3%	0.0%	100.0%
FRANKLIN	0.2%	0.5%	2.9%	18.6%	36.9%	28.3%	11.3%	1.1%	0.0%	100.0%
GRAND ISLE	0.0%	0.0%	3.4%	13.8%	36.2%	29.3%	12.1%	5.2%	0.0%	100.0%
LAMOILLE	0.0%	2.8%	2.4%	16.3%	25.6%	28.0%	20.3%	4.5%	0.0%	100.0%
ORANGE	0.0%	0.0%	1.9%	21.9%	28.5%	30.4%	14.6%	1.9%	0.8%	100.0%
ORLEANS	0.0%	1.7%	8.3%	23.0%	37.0%	19.1%	9.1%	1.7%	0.0%	100.0%
RUTLAND	0.0%	0.8%	4.2%	12.6%	36.2%	31.2%	12.6%	2.1%	0.2%	100.0%
WASHINGTON	0.0%	0.9%	1.6%	13.9%	27.0%	33.0%	21.8%	1.8%	0.0%	100.0%
WINDHAM	0.0%	0.5%	3.7%	20.3%	28.0%	27.7%	15.0%	4.5%	0.3%	100.0%
WINDSOR	0.0%	0.9%	4.0%	16.5%	27.1%	33.9%	13.9%	3.3%	0.4%	100.0%
STATE TOTAL	0.0%	0.7%	3.0%	15.8%	29.1%	31.7%	16.3%	3.2%	0.2%	100.0%

⁽¹⁾ MAY NOT ADD TO 100% DUE TO ROUNDING.

Table B-6

2017 VERMONT RESIDENT BIRTHS

AGE-SPECIFIC FERTILITY RATES AND CRUDE BIRTH RATES BY COUNTY OF RESIDENCE⁽¹⁾

COUNTY OF RESIDENCE	FERTILITY RATES ⁽¹⁾					15-44 TOTAL	CRUDE BIRTH RATE
	AGE OF MOTHER						
	15-19	20-24	25-29	30-34	35-44		
ADDISON	6.8	32.6	109.0	92.2	32.5	44.8	8.3
BENNINGTON	14.6	52.7	126.0	101.2	32.2	56.2	9.1
CALEDONIA	14.6	77.2	123.8	93.9	24.4	56.7	9.4
CHITTENDEN	3.6	17.1	57.9	105.5	38.5	39.8	8.9
ESSEX	6.3	51.1	122.0	51.1	35.0	47.1	6.6
FRANKLIN	13.2	73.9	138.5	99.3	22.0	61.1	11.2
GRAND ISLE	11.8	48.2	122.1	92.4	26.9	54.6	8.3
LAMOILLE	15.9	52.9	82.8	90.9	37.6	52.2	9.7
ORANGE	6.3	76.0	105.1	96.8	26.8	55.3	9.0
ORLEANS	32.0	77.0	127.1	66.9	16.7	54.4	8.6
RUTLAND	13.9	36.2	127.2	103.2	26.0	53.6	8.8
WASHINGTON	8.3	47.6	97.5	105.5	36.4	54.6	9.5
WINDHAM	13.9	69.1	93.4	88.5	31.5	54.5	8.8
WINDSOR	15.9	57.7	86.8	96.7	26.3	52.2	8.2
STATE TOTAL	10.1	39.9	93.4	98.6	31.3	49.6	9.1

(1) RATES ARE BASED ON 2017 POPULATION ESTIMATES.

Table B-7

2017 VERMONT RESIDENT BIRTHS

AGE OF MOTHER BY AGE OF FATHER

AGE OF FATHER	AGE OF MOTHER									TOTAL
	NUMBER OF EVENTS									
	< 15 YEARS	15 - 17 YEARS	18 - 19 YEARS	20 - 24 YEARS	25 - 29 YEARS	30 - 34 YEARS	35 - 39 YEARS	40 - 44 YEARS	45+ YEARS	
15 - 17 YEARS	0	12	8	0	0	0	0	0	0	20
18 - 19 YEARS	0	10	25	19	5	0	0	0	0	59
20 - 24 YEARS	0	6	82	319	91	13	4	0	0	515
25 - 29 YEARS	0	0	21	334	754	146	28	5	0	1288
30 - 34 YEARS	0	0	5	91	491	915	149	14	1	1666
35 - 39 YEARS	0	0	1	31	132	497	428	37	0	1126
40 - 44 YEARS	0	0	0	7	40	105	199	67	4	422
45+ YEARS	0	0	0	5	25	53	84	48	5	220
STATE TOTAL	1	37	169	896	1648	1792	921	179	12	5655

AGE OF FATHER	ROW PERCENTS ⁽¹⁾									TOTAL
	< 15 YEARS	15 - 17 YEARS	18 - 19 YEARS	20 - 24 YEARS	25 - 29 YEARS	30 - 34 YEARS	35 - 39 YEARS	40 - 44 YEARS	45+ YEARS	
15 - 17 YEARS	0.0%	60.0%	40.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%
18 - 19 YEARS	0.0%	16.9%	42.4%	32.2%	8.5%	0.0%	0.0%	0.0%	0.0%	100.0%
20 - 24 YEARS	0.0%	1.2%	15.9%	61.9%	17.7%	2.5%	0.8%	0.0%	0.0%	100.0%
25 - 29 YEARS	0.0%	0.0%	1.6%	25.9%	58.5%	11.3%	2.2%	0.4%	0.0%	100.0%
30 - 34 YEARS	0.0%	0.0%	0.3%	5.5%	29.5%	54.9%	8.9%	0.8%	0.1%	100.0%
35 - 39 YEARS	0.0%	0.0%	0.1%	2.8%	11.7%	44.1%	38.0%	3.3%	0.0%	100.0%
40 - 44 YEARS	0.0%	0.0%	0.0%	1.7%	9.5%	24.9%	47.2%	15.9%	0.9%	100.0%
45+ YEARS	0.0%	0.0%	0.0%	2.3%	11.4%	24.1%	38.2%	21.8%	2.3%	100.0%
STATE TOTAL	0.0%	0.7%	3.0%	15.8%	29.1%	31.7%	16.3%	3.2%	0.2%	100.0%

⁽¹⁾ MAY NOT ADD TO 100% DUE TO ROUNDING.

Table B-8
2017 VERMONT RESIDENT BIRTHS

EDUCATION OF MOTHER BY COUNTY OF RESIDENCE
EDUCATION OF MOTHER

COUNTY OF RESIDENCE	NUMBER OF EVENTS									TOTAL
	8TH GRADE OR LESS	9TH - 12TH GRADE, NO DIPLOMA	HS GRAD / GED CERT	SOME COLLEGE - NO DEGREE	ASSOCIATE DEGREE	BACHELORS DEGREE	MASTERS DEGREE	DOCTORATE OR PROFESSIONAL DEGREE	UNKNOWN	
ADDISON	0	11	79	53	17	93	43	8	1	305
BENNINGTON	2	29	112	68	23	52	31	5	2	324
CALEDONIA	0	24	104	51	15	56	32	3	0	285
CHITTENDEN	31	67	197	211	81	461	279	102	20	1449
ESSEX	0	0	16	11	3	6	5	0	0	41
FRANKLIN	1	33	166	106	55	132	47	5	2	547
GRAND ISLE	1	3	20	6	4	14	8	2	0	58
LAMOILLE	0	15	64	36	17	79	29	5	1	246
ORANGE	0	19	73	58	18	56	28	7	1	260
ORLEANS	2	23	88	46	20	36	11	4	0	230
RUTLAND	3	35	143	101	59	125	49	6	1	522
WASHINGTON	1	26	117	103	29	152	85	37	5	555
WINDHAM	4	34	110	77	26	74	46	8	0	379
WINDSOR	0	33	123	79	46	99	54	19	1	454
STATE TOTAL	45	352	1412	1006	413	1435	747	211	34	5655

ROW PERCENTS⁽¹⁾

COUNTY OF RESIDENCE	ROW PERCENTS ⁽¹⁾									TOTAL
	8TH GRADE OR LESS	9TH - 12TH GRADE, NO DIPLOMA	HS GRAD / GED CERT	SOME COLLEGE - NO DEGREE	ASSOCIATE DEGREE	BACHELORS DEGREE	MASTERS DEGREE	DOCTORATE OR PROFESSIONAL DEGREE	UNKNOWN	
ADDISON	0.0	3.6	25.9	17.4	5.6	30.5	14.1	2.6	0.3	100.0
BENNINGTON	0.6	9.0	34.6	21.0	7.1	16.0	9.6	1.5	0.6	100.0
CALEDONIA	0.0	8.4	36.5	17.9	5.3	19.6	11.2	1.1	0.0	100.0
CHITTENDEN	2.1	4.6	13.6	14.6	5.6	31.8	19.3	7.0	1.4	100.0
ESSEX	0.0	0.0	39.0	26.8	7.3	14.6	12.2	0.0	0.0	100.0
FRANKLIN	0.2	6.0	30.3	19.4	10.1	24.1	8.6	0.9	0.4	100.0
GRAND ISLE	1.7	5.2	34.5	10.3	6.9	24.1	13.8	3.4	0.0	100.0
LAMOILLE	0.0	6.1	26.0	14.6	6.9	32.1	11.8	2.0	0.4	100.0
ORANGE	0.0	7.3	28.1	22.3	6.9	21.5	10.8	2.7	0.4	100.0
ORLEANS	0.9	10.0	38.3	20.0	8.7	15.7	4.8	1.7	0.0	100.0
RUTLAND	0.6	6.7	27.4	19.3	11.3	23.9	9.4	1.1	0.2	100.0
WASHINGTON	0.2	4.7	21.1	18.6	5.2	27.4	15.3	6.7	0.9	100.0
WINDHAM	1.1	9.0	29.0	20.3	6.9	19.5	12.1	2.1	0.0	100.0
WINDSOR	0.0	7.3	27.1	17.4	10.1	21.8	11.9	4.2	0.2	100.0
STATE TOTAL	0.8	6.2	25.0	17.8	7.3	25.4	13.2	3.7	0.6	100.0

⁽¹⁾ MAY NOT ADD TO 100% DUE TO ROUNDING.

Table B-9
2017 VERMONT RESIDENT BIRTHS

MONTH PRENATAL CARE BEGAN BY COUNTY OF RESIDENCE
NUMBER OF EVENTS AND ROW PERCENTS

COUNTY OF RESIDENCE	MONTH PRENATAL CARE BEGAN ⁽¹⁾											TOTAL
	1ST	2ND	3RD	4TH	5TH	6TH	7TH	8TH	9TH	NONE	UNKNOWN	
ADDISON	3	116	157	13	5	2	0	4	1	1	3	305
BENNINGTON	6	91	157	38	12	7	1	0	2	4	6	324
CALEDONIA	1	112	126	26	6	6	2	2	0	0	4	285
CHITTENDEN	4	548	687	119	34	15	4	14	5	1	18	1449
ESSEX	2	13	15	6	2	1	0	0	1	1	0	41
FRANKLIN	4	306	178	33	7	3	2	1	4	3	6	547
GRAND ISLE	1	26	23	2	3	1	2	0	0	0	0	58
LAMOILLE	0	113	95	24	7	2	2	0	0	1	2	246
ORANGE	2	94	128	18	5	6	2	2	0	1	2	260
ORLEANS	11	126	64	15	3	2	0	1	0	0	8	230
RUTLAND	5	316	151	24	4	4	3	6	3	3	3	522
WASHINGTON	5	219	248	46	18	6	6	1	0	0	6	555
WINDHAM	2	166	153	28	9	2	7	3	1	2	6	379
WINDSOR	6	196	187	37	13	2	4	2	1	1	5	454
STATE TOTAL	52	2442	2369	429	128	59	35	36	18	18	69	5655

CUMULATIVE ROW PERCENTS - EXCLUDING UNKNOWNNS

COUNTY OF RESIDENCE	1ST	2ND	3RD	4TH	5TH	6TH	7TH	8TH	9TH	NONE
ADDISON	1.0	39.4	91.4	95.7	97.4	98.0	98.0	99.3	99.7	100.0
BENNINGTON	1.9	30.5	79.9	91.8	95.6	97.8	98.1	98.1	98.7	100.0
CALEDONIA	0.4	40.2	85.1	94.3	96.4	98.6	99.3	100.0	100.0	100.0
CHITTENDEN	0.3	38.6	86.6	94.9	97.3	98.3	98.6	99.6	99.9	100.0
ESSEX	4.9	36.6	73.2	87.8	92.7	95.1	95.1	95.1	97.6	100.0
FRANKLIN	0.7	57.3	90.2	96.3	97.6	98.2	98.5	98.7	99.4	100.0
GRAND ISLE	1.7	46.6	86.2	89.7	94.8	96.6	100.0	100.0	100.0	100.0
LAMOILLE	0.0	46.3	85.2	95.1	98.0	98.8	99.6	99.6	99.6	100.0
ORANGE	0.8	37.2	86.8	93.8	95.7	98.1	98.8	99.6	99.6	100.0
ORLEANS	5.0	61.7	90.5	97.3	98.6	99.5	99.5	100.0	100.0	100.0
RUTLAND	1.0	61.8	90.9	95.6	96.3	97.1	97.7	98.8	99.4	100.0
WASHINGTON	0.9	40.8	86.0	94.4	97.6	98.7	99.8	100.0	100.0	100.0
WINDHAM	0.5	45.0	86.1	93.6	96.0	96.5	98.4	99.2	99.5	100.0
WINDSOR	1.3	45.0	86.6	94.9	97.8	98.2	99.1	99.6	99.8	100.0
STATE TOTAL	0.9	44.6	87.1	94.7	97.0	98.1	98.7	99.4	99.7	100.0

⁽¹⁾ SEE APPENDIX B FOR DATA QUALITY NOTES.

Table B-10
2017 VERMONT RESIDENT BIRTHS

BIRTH WEIGHT IN GRAMS BY COUNTY OF RESIDENCE
NUMBER OF EVENTS AND ROW PERCENTS

COUNTY OF RESIDENCE	BIRTH WEIGHT												UNKNOWN	TOTAL
	< 500g	500 - 999g	1000 - 1499g	1500 - 1999g	2000 - 2499g	2500 - 2999g	3000 - 3499g	3500 - 3999g	4000 - 4499g	4500 - 4999g	5000 - 5499g	5500g+		
ADDISON	0	1	2	7	12	53	95	106	25	3	0	0	1	305
BENNINGTON	1	0	0	5	18	52	126	94	23	3	1	0	1	324
CALEDONIA	0	1	3	7	7	43	101	84	36	3	0	0	0	285
CHITTENDEN	3	6	9	25	38	228	519	456	137	25	2	0	1	1449
ESSEX	0	0	0	2	2	5	17	11	4	0	0	0	0	41
FRANKLIN	0	2	3	4	24	92	181	178	56	6	1	0	0	547
GRAND ISLE	0	0	0	0	0	8	28	17	4	1	0	0	0	58
LAMOILLE	0	0	3	2	12	36	84	83	22	4	0	0	0	246
ORANGE	0	0	2	8	16	43	86	81	24	0	0	0	0	260
ORLEANS	0	1	4	1	10	49	83	58	20	4	0	0	0	230
RUTLAND	0	2	2	9	25	74	198	153	46	12	0	0	1	522
WASHINGTON	1	1	4	9	29	82	187	195	37	10	0	0	0	555
WINDHAM	1	2	2	5	16	50	146	114	36	6	1	0	0	379
WINDSOR	1	4	2	4	21	67	158	147	44	4	1	0	1	454
STATE TOTAL	7	20	36	88	230	882	2009	1777	514	81	6	0	5	5655

CUMULATIVE ROW PERCENTS - EXCLUDING UNKNOWN BIRTHWEIGHT

COUNTY OF RESIDENCE	< 500g	500 - 999g	1000 - 1499g	1500 - 1999g	2000 - 2499g	2500 - 2999g	3000 - 3499g	3500 - 3999g	4000 - 4499g	4500 - 4999g	5000 - 5499g	5500g+
ADDISON	0.0	0.3	1.0	3.3	7.2	24.7	55.9	90.8	99.0	100.0	100.0	100.0
BENNINGTON	0.3	0.3	0.3	1.9	7.4	23.5	62.5	91.6	98.8	99.7	100.0	100.0
CALEDONIA	0.0	0.4	1.4	3.9	6.3	21.4	56.8	86.3	98.9	100.0	100.0	100.0
CHITTENDEN	0.2	0.6	1.2	3.0	5.6	21.3	57.2	88.7	98.1	99.9	100.0	100.0
ESSEX	0.0	0.0	0.0	4.9	9.8	22.0	63.4	90.2	100.0	100.0	100.0	100.0
FRANKLIN	0.0	0.4	0.9	1.6	6.0	22.9	55.9	88.5	98.7	99.8	100.0	100.0
GRAND ISLE	0.0	0.0	0.0	0.0	0.0	13.8	62.1	91.4	98.3	100.0	100.0	100.0
LAMOILLE	0.0	0.0	1.2	2.0	6.9	21.5	55.7	89.4	98.4	100.0	100.0	100.0
ORANGE	0.0	0.0	0.8	3.8	10.0	26.5	59.6	90.8	100.0	100.0	100.0	100.0
ORLEANS	0.0	0.4	2.2	2.6	7.0	28.3	64.3	89.6	98.3	100.0	100.0	100.0
RUTLAND	0.0	0.4	0.8	2.5	7.3	21.5	59.5	88.9	97.7	100.0	100.0	100.0
WASHINGTON	0.2	0.4	1.1	2.7	7.9	22.7	56.4	91.5	98.2	100.0	100.0	100.0
WINDHAM	0.3	0.8	1.3	2.6	6.9	20.1	58.6	88.7	98.2	99.7	100.0	100.0
WINDSOR	0.2	1.1	1.5	2.4	7.1	21.9	56.7	89.2	98.9	99.8	100.0	100.0
STATE TOTAL	0.1	0.5	1.1	2.7	6.7	22.4	57.9	89.4	98.5	99.9	100.0	100.0

**Table B-11
2017 VERMONT RESIDENT BIRTHS**

**BIRTH WEIGHT IN GRAMS BY WEEKS GESTATION
NUMBER OF EVENTS AND ROW PERCENTS**

WEEKS GESTATION ⁽¹⁾	BIRTH WEIGHT												UNK	TOTAL	
	< 500g	500 - 999g	1000 - 1499g	1500 - 1999g	2000 - 2499g	2500 - 2999g	3000 - 3499g	3500 - 3999g	4000 - 4499g	4500 - 4999g	5000 - 5499g	5500g+			
<28 WEEKS	7	16	7	0	0	0	0	0	0	0	0	0	0	0	30
28-31 WEEKS	0	4	18	16	0	2	0	0	0	0	0	0	0	0	40
32-35 WEEKS	0	0	10	48	75	49	14	6	1	0	0	0	0	0	203
36 WEEKS	0	0	1	11	38	67	29	6	0	0	0	0	0	0	152
37-39 WEEKS	0	0	0	12	111	630	1225	842	176	26	1	0	1	1	3024
40 WEEKS	0	0	0	0	5	100	513	569	205	29	1	0	2	2	1424
41 WEEKS	0	0	0	1	0	28	208	328	117	24	3	0	1	1	710
42+ WEEKS	0	0	0	0	0	2	17	23	15	2	0	0	0	0	59
UNKNOWN	0	0	0	0	1	4	3	3	0	0	1	0	1	1	13
STATE TOTAL	7	20	36	88	230	882	2009	1777	514	81	6	0	5	5	5655

CUMULATIVE ROW PERCENTS - EXCLUDING UNKNOWN BIRTHWEIGHT

WEEKS GESTATION ⁽¹⁾	< 500g	500 - 999g	1000 - 1499g	1500 - 1999g	2000 - 2499g	2500 - 2999g	3000 - 3499g	3500 - 3999g	4000 - 4499g	4500 - 4999g	5000 - 5499g	5500g+
<28 WEEKS	23.3	76.7	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
28-31 WEEKS	0.0	10.0	55.0	95.0	95.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
32-35 WEEKS	0.0	0.0	4.9	28.6	65.5	89.7	96.6	99.5	100.0	100.0	100.0	100.0
36 WEEKS	0.0	0.0	0.7	7.9	32.9	77.0	96.1	100.0	100.0	100.0	100.0	100.0
37-39 WEEKS	0.0	0.0	0.0	0.4	4.1	24.9	65.4	93.3	99.1	100.0	100.0	100.0
40 WEEKS	0.0	0.0	0.0	0.0	0.4	7.4	43.5	83.5	97.9	99.9	100.0	100.0
41 WEEKS	0.0	0.0	0.0	0.1	0.1	4.1	33.4	79.7	96.2	99.6	100.0	100.0
42+ WEEKS	0.0	0.0	0.0	0.0	0.0	3.4	32.2	71.2	96.6	100.0	100.0	100.0
UNKNOWN	0.0	0.0	0.0	0.0	8.3	41.7	66.7	91.7	91.7	91.7	100.0	100.0
STATE TOTAL	0.1	0.5	1.1	2.7	6.7	22.4	57.9	89.4	98.5	99.9	100.0	100.0

⁽¹⁾ SEE APPENDIX B FOR DATA QUALITY NOTES.

Table B-12

2017 VERMONT RESIDENT BIRTHS

**BIRTH WEIGHT IN GRAMS BY AGE OF MOTHER
NUMBER OF EVENTS AND ROW PERCENTS**

AGE OF MOTHER	BIRTH WEIGHT												UNK	TOTAL
	< 500g	500 - 999g	1000 - 1499g	1500 - 1999g	2000 - 2499g	2500 - 2999g	3000 - 3499g	3500 - 3999g	4000 - 4499g	4500 - 4999g	5000 - 5499g	5500g+		
< 15 YEARS	0	1	0	0	0	0	0	0	0	0	0	0	0	1
15 - 17 YEARS	0	0	0	1	1	6	15	9	5	0	0	0	0	37
18 - 19 YEARS	0	3	2	4	8	32	61	48	9	2	0	0	0	169
20 - 24 YEARS	1	1	6	10	40	158	339	254	78	8	1	0	0	896
25 - 29 YEARS	4	9	7	29	61	254	591	524	149	17	1	0	2	1648
30 - 34 YEARS	2	4	6	26	81	265	616	580	171	34	4	0	3	1792
35 - 39 YEARS	0	2	12	16	30	132	319	305	90	15	0	0	0	921
40 - 44 YEARS	0	0	3	2	9	34	61	53	12	5	0	0	0	179
45+ YEARS	0	0	0	0	0	1	7	4	0	0	0	0	0	12
STATE TOTAL	7	20	36	88	230	882	2009	1777	514	81	6	0	5	5655

CUMULATIVE ROW PERCENTS - EXCLUDING UNKNOWNNS

AGE OF MOTHER	< 500g	500 - 999g	1000 - 1499g	1500 - 1999g	2000 - 2499g	2500 - 2999g	3000 - 3499g	3500 - 3999g	4000 - 4499g	4500 - 4999g	5000 - 5499g	5500g+
< 15 YEARS	0.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
15 - 17 YEARS	0.0	0.0	0.0	2.7	5.4	21.6	62.2	86.5	100.0	100.0	100.0	100.0
18 - 19 YEARS	0.0	1.8	3.0	5.3	10.1	29.0	65.1	93.5	98.8	100.0	100.0	100.0
20 - 24 YEARS	0.1	0.2	0.9	2.0	6.5	24.1	61.9	90.3	99.0	99.9	100.0	100.0
25 - 29 YEARS	0.2	0.8	1.2	3.0	6.7	22.1	58.0	89.9	98.9	99.9	100.0	100.0
30 - 34 YEARS	0.1	0.3	0.7	2.1	6.7	21.5	55.9	88.3	97.9	99.8	100.0	100.0
35 - 39 YEARS	0.0	0.2	1.5	3.3	6.5	20.8	55.5	88.6	98.4	100.0	100.0	100.0
40 - 44 YEARS	0.0	0.0	1.7	2.8	7.8	26.8	60.9	90.5	97.2	100.0	100.0	100.0
45+ YEARS	0.0	0.0	0.0	0.0	0.0	8.3	66.7	100.0	100.0	100.0	100.0	100.0
STATE TOTAL	0.1	0.5	1.1	2.7	6.7	22.4	57.9	89.4	98.5	99.9	100.0	100.0

Table B-13
2017 VERMONT RESIDENT BIRTHS

BIRTH WEIGHT IN GRAMS BY EDUCATION OF MOTHER
NUMBER OF EVENTS AND ROW PERCENTS

EDUCATION OF MOTHER	BIRTH WEIGHT												UNK	TOTAL
	< 500g	500 - 999g	1000 - 1499g	1500 - 1999g	2000 - 2499g	2500 - 2999g	3000 - 3499g	3500 - 3999g	4000 - 4499g	4500 - 4999g	5000 - 5499g	5500g+		
8TH GRADE OR LESS	0	0	0	1	1	9	18	15	1	0	0	0	0	45
9TH - 12TH GRADE, NO DIPLOMA	1	3	5	10	27	79	124	79	21	1	1	0	1	352
HS GRAD / GED CERT	2	4	7	27	66	271	490	407	121	14	1	0	2	1412
SOME COLLEGE - NO DEGREE	1	4	6	13	46	143	375	319	80	16	3	0	0	1006
ASSOCIATE DEGREE	0	0	1	8	12	56	146	137	48	5	0	0	0	413
BACHELORS DEGREE	0	6	7	16	46	193	498	485	155	26	1	0	2	1435
MASTERS DEGREE	2	3	8	12	23	88	266	263	68	14	0	0	0	747
DOCTORATE OR PROFESSIONAL DEGREE	0	0	1	1	8	37	81	62	17	4	0	0	0	211
UNKNOWN	1	0	1	0	1	6	11	10	3	1	0	0	0	34
STATE TOTAL	7	20	36	88	230	882	2009	1777	514	81	6	0	5	5655

CUMULATIVE ROW PERCENTS - EXCLUDING UNKNOWNNS

EDUCATION OF MOTHER	< 500g	500 - 999g	1000 - 1499g	1500 - 1999g	2000 - 2499g	2500 - 2999g	3000 - 3499g	3500 - 3999g	4000 - 4499g	4500 - 4999g	5000 - 5499g	5500g+
8TH GRADE OR LESS	0.0	0.0	0.0	2.2	4.4	24.4	64.4	97.8	100.0	100.0	100.0	100.0
9TH - 12TH GRADE, NO DIPLOMA	0.3	1.1	2.6	5.4	13.1	35.6	70.9	93.4	99.4	99.7	100.0	100.0
HS GRAD / GED CERT	0.1	0.4	0.9	2.8	7.5	26.7	61.5	90.4	98.9	99.9	100.0	100.0
SOME COLLEGE - NO DEGREE	0.1	0.5	1.1	2.4	7.0	21.2	58.4	90.2	98.1	99.7	100.0	100.0
ASSOCIATE DEGREE	0.0	0.0	0.2	2.2	5.1	18.6	54.0	87.2	98.8	100.0	100.0	100.0
BACHELORS DEGREE	0.0	0.4	0.9	2.0	5.2	18.7	53.5	87.3	98.1	99.9	100.0	100.0
MASTERS DEGREE	0.3	0.7	1.7	3.3	6.4	18.2	53.8	89.0	98.1	100.0	100.0	100.0
DOCTORATE OR PROFESSIONAL DEGREE	0.0	0.0	0.5	0.9	4.7	22.3	60.7	90.0	98.1	100.0	100.0	100.0
UNKNOWN	2.9	2.9	5.9	5.9	8.8	26.5	58.8	88.2	97.1	100.0	100.0	100.0
STATE TOTAL	0.1	0.5	1.1	2.7	6.7	22.4	57.9	89.4	98.5	99.9	100.0	100.0

Table B-14
2017 VERMONT RESIDENT BIRTHS

MONTH PRENATAL CARE BEGAN BY EDUCATION OF MOTHER
MONTH PRENATAL CARE BEGAN⁽¹⁾

EDUCATION OF MOTHER	NUMBER OF EVENTS											TOTAL
	1ST	2ND	3RD	4TH	5TH	6TH	7TH	8TH	9TH	NONE	UNKNOWN	
8TH GRADE OR LESS	0	10	19	11	1	2	0	1	0	1	0	45
9TH - 12TH GRADE, NO DIPLOMA	1	127	126	42	24	7	8	4	1	3	9	352
HS GRAD / GED CERT	26	637	502	136	35	19	11	13	7	9	17	1412
SOME COLLEGE - NO DEGREE	6	442	401	82	28	17	0	7	2	4	17	1006
ASSOCIATE DEGREE	4	213	155	26	4	2	3	0	0	1	5	413
BACHELORS DEGREE	11	606	674	84	21	8	8	8	3	0	12	1435
MASTERS DEGREE	3	318	369	34	6	1	3	2	3	0	8	747
DOCTORATE OR PROFESSIONAL DEGREE	1	79	110	9	7	2	2	0	0	0	1	211
UNKNOWN	0	10	13	5	2	1	0	1	2	0	0	34
STATE TOTAL	52	2442	2369	429	128	59	35	36	18	18	69	5655

CUMULATIVE ROW PERCENTS - EXCLUDING UNKNOWNNS

EDUCATION OF MOTHER	1ST	2ND	3RD	4TH	5TH	6TH	7TH	8TH	9TH	NONE
8TH GRADE OR LESS	0.0	22.2	64.4	88.9	91.1	95.6	95.6	97.8	97.8	100.0
9TH - 12TH GRADE, NO DIPLOMA	0.3	37.3	74.1	86.3	93.3	95.3	97.7	98.8	99.1	100.0
HS GRAD / GED CERT	1.9	47.5	83.5	93.3	95.8	97.1	97.9	98.9	99.4	100.0
SOME COLLEGE - NO DEGREE	0.6	45.3	85.8	94.1	97.0	98.7	98.7	99.4	99.6	100.0
ASSOCIATE DEGREE	1.0	53.2	91.2	97.5	98.5	99.0	99.8	99.8	99.8	100.0
BACHELORS DEGREE	0.8	43.4	90.7	96.6	98.1	98.7	99.2	99.8	100.0	100.0
MASTERS DEGREE	0.4	43.4	93.4	98.0	98.8	98.9	99.3	99.6	100.0	100.0
DOCTORATE OR PROFESSIONAL DEGREE	0.5	38.1	90.5	94.8	98.1	99.0	100.0	100.0	100.0	100.0
UNKNOWN	0.0	29.4	67.6	82.4	88.2	91.2	91.2	94.1	100.0	100.0
STATE TOTAL	0.9	44.6	87.1	94.7	97.0	98.1	98.7	99.4	99.7	100.0

⁽¹⁾ SEE APPENDIX B FOR DATA QUALITY NOTES.

Table B-15

2017 VERMONT RESIDENT BIRTHS

MONTH PRENATAL CARE BEGAN BY AGE OF MOTHER

AGE OF MOTHER	MONTH PRENATAL CARE BEGAN ⁽¹⁾											TOTAL	
	1ST	2ND	3RD	4TH	5TH	6TH	7TH	8TH	9TH	NONE	UNKNOWN		
< 15 YEARS	0	0	1	0	0	0	0	0	0	0	0	0	1
15 - 17 YEARS	0	14	14	2	4	0	2	0	0	1	0	0	37
18 - 19 YEARS	2	78	54	15	7	2	1	4	0	1	5	169	
20 - 24 YEARS	11	403	326	79	24	16	4	10	2	4	17	896	
25 - 29 YEARS	19	769	640	126	33	17	12	7	8	2	15	1648	
30 - 34 YEARS	14	768	784	131	39	11	5	10	6	7	17	1792	
35 - 39 YEARS	5	365	448	48	14	11	8	5	2	2	13	921	
40 - 44 YEARS	1	43	96	27	6	2	2	0	0	1	1	179	
45+ YEARS	0	2	6	1	1	0	1	0	0	0	1	12	
STATE TOTAL	52	2442	2369	429	128	59	35	36	18	18	69	5655	

CUMULATIVE ROW PERCENTS - EXCLUDING UNKNOWNNS

AGE OF MOTHER	1ST	2ND	3RD	4TH	5TH	6TH	7TH	8TH	9TH	NONE
< 15 YEARS	0.0	0.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
15 - 17 YEARS	0.0	37.8	75.7	81.1	91.9	91.9	97.3	97.3	97.3	100.0
18 - 19 YEARS	1.2	48.8	81.7	90.9	95.1	96.3	97.0	99.4	99.4	100.0
20 - 24 YEARS	1.3	47.1	84.2	93.2	95.9	97.7	98.2	99.3	99.5	100.0
25 - 29 YEARS	1.2	48.3	87.4	95.2	97.2	98.2	99.0	99.4	99.9	100.0
30 - 34 YEARS	0.8	44.1	88.2	95.6	97.8	98.4	98.7	99.3	99.6	100.0
35 - 39 YEARS	0.6	40.7	90.1	95.4	96.9	98.1	99.0	99.6	99.8	100.0
40 - 44 YEARS	0.6	24.7	78.7	93.8	97.2	98.3	99.4	99.4	99.4	100.0
45+ YEARS	0.0	18.2	72.7	81.8	90.9	90.9	100.0	100.0	100.0	100.0
STATE TOTAL	0.9	44.6	87.1	94.7	97.0	98.1	98.7	99.4	99.7	100.0

⁽¹⁾ SEE APPENDIX B FOR DATA QUALITY NOTES.

TABLE B-16
2017 VERMONT BIRTHS

COUNTY OF RESIDENCE BY PLACE OF BIRTH

PLACE OF BIRTH ⁽¹⁾	COUNTY OF RESIDENCE															TOTAL
	ADD	BEN	CAL	CHI	ESX	FRA	GI	LAM	ORG	ORL	RUT	WAS	WHM	WSR	O-O-S	
HOME	8	10	11	31	3	3	2	9	8	5	12	22	14	7	2	147
RUTLAND REGIONAL MEDICAL CENTER	3	11	0	0	0	0	0	0	0	0	320	0	4	10	8	356
CENTRAL VERMONT MEDICAL CENTER	2	0	16	0	0	0	0	9	45	0	0	249	0	4	1	326
COPLEY HOSPITAL	0	0	22	1	1	9	0	118	0	14	0	30	0	1	0	196
GIFFORD MEDICAL CENTER	2	0	1	1	0	0	0	0	55	0	8	68	0	33	1	169
NORTH COUNTRY HOSPITAL AND HEALTH CENTER	0	0	9	0	11	0	0	1	0	168	0	0	0	1	1	191
NORTHEASTERN VERMONT REGIONAL HOSPITAL	0	0	144	0	9	0	0	0	16	23	0	9	0	0	10	211
NORTHWESTERN MEDICAL CENTER	0	0	0	16	0	329	19	10	0	1	0	0	0	0	5	380
PORTER MEDICAL CENTER	181	0	0	6	0	0	0	0	0	0	112	0	1	0	61	361
BRATTLEBORO MEMORIAL HOSPITAL	0	4	0	0	0	0	0	0	0	0	0	0	256	6	60	326
SPRINGFIELD HOSPITAL	0	1	0	0	0	0	0	0	0	0	4	0	25	75	51	156
SOUTHWESTERN VERMONT MEDICAL CENTER	0	273	0	0	0	0	0	0	0	0	12	1	18	2	165	471
FLETCHER ALLEN HEALTH CARE /MEDICAL CTR CAMPUS	106	0	11	1386	2	204	37	97	8	12	21	163	1	1	179	2228
OUT OF STATE FACILITY	3	25	71	6	15	2	0	2	128	6	33	13	60	315	0	679
OTHER SPECIFIED PLACES	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
TOTAL	305	324	285	1449	41	547	58	246	260	229	522	555	379	455	544	6199

⁽¹⁾ SEE APPENDIX A FOR COMPLETE LIST OF HOSPITAL NAMES AND LOCATIONS.

TABLE B-17
2017 VERMONT BIRTHS

PLACE OF BIRTH ⁽¹⁾	ATTENDANT BY PLACE OF BIRTH						0	TOTAL
	ATTENDANT							
	MEDICAL DOCTOR	DOCTOR of OSTEOPATHY	CERTIFIED NURSE MIDWIFE	LICENSED MIDWIFE	OTHER			
HOME	0	0	4	122	21	0	147	
RUTLAND REGIONAL MEDICAL CENTER	355	0	0	0	1	0	356	
CENTRAL VERMONT MEDICAL CENTER	317	2	7	0	0	0	326	
COPLEY HOSPITAL	47	0	145	0	4	0	196	
GIFFORD MEDICAL CENTER	55	0	114	0	0	0	169	
NORTH COUNTRY HOSPITAL AND HEALTH CENTER	118	11	60	0	2	0	191	
NORTHEASTERN VERMONT REGIONAL HOSPITAL	102	0	109	0	0	0	211	
NORTHWESTERN MEDICAL CENTER	380	0	0	0	0	0	380	
PORTER MEDICAL CENTER	191	62	107	0	1	0	361	
BRATTLEBORO MEMORIAL HOSPITAL	168	0	158	0	0	0	326	
SPRINGFIELD HOSPITAL	155	0	0	0	1	0	156	
SOUTHWESTERN VERMONT MEDICAL CENTER	352	0	118	0	1	0	471	
FLETCHER ALLEN HEALTH CARE /MEDICAL CTR CAMPUS	1722	0	504	0	2	0	2228	
OUT OF STATE FACILITY	451	1	227	0	0	0	679	
OTHER SPECIFIED PLACES	1	0	0	0	1	0	2	
TOTAL	4414	76	1553	122	34	0	6199	

⁽¹⁾ SEE APPENDIX A FOR COMPLETE HOSPITAL NAMES AND LOCATIONS.

TABLE B-18
2017 VERMONT HOSPITAL BIRTHS

TYPE OF DELIVERY BY HOSPITAL OF BIRTH
NUMBER OF EVENTS AND PERCENTS

HOSPITAL OF BIRTH ¹	TYPE OF DELIVERY								
	VAGINAL		TOTAL	PRIMARY		REPEAT	TOTAL	UNKNOWN	TOTAL
	VAGINAL	AFTER CESAREAN	VAGINAL	CESAREAN	CESAREAN	CESAREAN			
RUTLAND REGIONAL MEDICAL CENTER	258	4	262	37	55	92	2	356	
CENTRAL VERMONT MEDICAL CENTER	215	8	223	67	35	102	1	326	
COPLEY HOSPITAL	159	4	163	25	8	33	0	196	
GIFFORD MEDICAL CENTER	121	3	124	32	13	45	0	169	
NORTH COUNTRY HOSPITAL AND HEALTH CENTER	134	5	139	37	15	52	0	191	
NORTHEASTERN VERMONT REGIONAL HOSPITAL	172	2	174	29	8	37	0	211	
NORTHWESTERN MEDICAL CENTER	257	9	266	66	48	114	0	380	
PORTER MEDICAL CENTER	272	14	286	45	27	72	3	361	
BRATTLEBORO MEMORIAL HOSPITAL	225	4	229	50	46	96	1	326	
SPRINGFIELD HOSPITAL	113	2	115	23	18	41	0	156	
SOUTHWESTERN VERMONT MEDICAL CENTER	342	5	347	61	63	124	0	471	
FLETCHER ALLEN HEALTH CARE /MEDICAL CTR CAMPUS	1517	93	1610	384	232	616	2	2228	
TOTAL	3785	153	3938	856	568	1424	9	5371	

HOSPITAL OF BIRTH ¹	PERCENTS				
	TOTAL VAGINAL ²	TOTAL CESAREAN ³	PRIMARY CESAREAN ⁴	REPEAT CESAREAN ⁵	VAGINAL AFTER CESAREAN ⁶
RUTLAND REGIONAL MEDICAL CENTER	74.0	26.0	12.5	59.8	6.8
CENTRAL VERMONT MEDICAL CENTER	68.6	31.4	23.8	34.3	18.6
COPLEY HOSPITAL	83.2	16.8	13.6	24.2	33.3
GIFFORD MEDICAL CENTER	73.4	26.6	20.9	28.9	18.8
NORTH COUNTRY HOSPITAL AND HEALTH CENTER	72.8	27.2	21.6	28.8	25.0
NORTHEASTERN VERMONT REGIONAL HOSPITAL	82.5	17.5	14.4	21.6	20.0
NORTHWESTERN MEDICAL CENTER	70.0	30.0	20.4	42.1	15.8
PORTER MEDICAL CENTER	79.9	20.1	14.2	37.5	34.1
BRATTLEBORO MEMORIAL HOSPITAL	70.5	29.5	18.2	47.9	8.0
SPRINGFIELD HOSPITAL	73.7	26.3	16.9	43.9	10.0
SOUTHWESTERN VERMONT MEDICAL CENTER	73.7	26.3	15.1	50.8	7.4
FLETCHER ALLEN HEALTH CARE /MEDICAL CTR CAMPUS	72.3	27.7	20.2	37.7	28.6
TOTAL	73.4	26.6	18.4	39.9	21.2

¹ SEE APPENDIX A FOR COMPLETE HOSPITAL NAMES AND LOCATIONS.

² PERCENT OF ALL BIRTHS THAT ARE VAGINAL BIRTHS.

³ PERCENT OF ALL BIRTHS THAT ARE BY CESAREAN DELIVERY.

⁴ NUMBER OF PRIMARY CESAREANS PER 100 LIVE BIRTHS TO WOMEN WHO HAVE NOT HAD A PREVIOUS CESAREAN.

⁵ PERCENT OF CESAREANS THAT ARE REPEAT CESAREANS.

⁶ NUMBER OF VAGINAL BIRTHS AFTER PREVIOUS CESAREAN DELIVERY PER 100 LIVE BIRTHS TO WOMEN WITH A PREVIOUS CESAREAN DELIVERY.

TABLE B-19
2017 VERMONT RESIDENT BIRTHS

MOTHER'S SMOKING STATUS BY COUNTY OF RESIDENCE
NUMBER OF BIRTHS AND ROW PERCENTS

COUNTY OF RESIDENCE	NUMBER OF BIRTHS			TOTAL
	NON-SMOKERS ⁽¹⁾	SMOKERS ⁽²⁾	UNKNOWN	
ADDISON	260	41	4	305
BENNINGTON	239	81	4	324
CALEDONIA	224	54	7	285
CHITTENDEN	1311	126	12	1449
ESSEX	31	9	1	41
FRANKLIN	441	103	3	547
GRAND ISLE	45	12	1	58
LAMOILLE	209	37	0	246
ORANGE	210	48	2	260
ORLEANS	188	42	0	230
RUTLAND	432	85	5	522
WASHINGTON	472	75	8	555
WINDHAM	292	77	10	379
WINDSOR	368	77	9	454
STATE TOTAL	4722	867	66	5655

ROW PERCENTS - EXCLUDING UNKNOWNNS

COUNTY OF RESIDENCE	NON-SMOKERS ⁽¹⁾	SMOKERS ⁽²⁾	QUITTERS ⁽³⁾
ADDISON	86.4	13.6	31.1
BENNINGTON	74.7	25.3	15.1
CALEDONIA	80.6	19.4	20.3
CHITTENDEN	91.2	8.8	23.9
ESSEX	77.5	22.5	11.1
FRANKLIN	81.1	18.9	18.8
GRAND ISLE	78.9	21.1	30.8
LAMOILLE	85.0	15.0	22.0
ORANGE	81.4	18.6	32.2
ORLEANS	81.7	18.3	37.9
RUTLAND	83.6	16.4	30.6
WASHINGTON	86.3	13.7	33.3
WINDHAM	79.1	20.9	35.1
WINDSOR	82.7	17.3	23.9
STATE TOTAL	84.5	15.5	26.5

SMOKING AS A RISK FACTOR FOR LOW BIRTH WEIGHT
PERCENT OF LOW BIRTH WEIGHT BABIES BY MOTHER'S SMOKING STATUS

	NON-SMOKERS ⁽¹⁾	SMOKERS ⁽²⁾	QUITTERS ⁽³⁾	ALL MOTHERS
PERCENT LBW (<2500g)	5.5	13.6	5.6	6.7

⁽¹⁾ MOTHERS WHO DID NOT SMOKE CIGARETTES DURING PREGNANCY.

⁽²⁾ MOTHERS WHO SMOKED CIGARETTES DURING PREGNANCY.

⁽³⁾ MOTHERS WHO SMOKED CIGARETTES DURING THE THREE MONTHS BEFORE PREGNANCY OR DURING THE 1ST TRIMESTER OF PREGNANCY, BUT DID NOT SMOKE DURING THE 2ND OR 3RD TRIMESTERS OF PREGNANCY.

TABLE B-20
2017 VERMONT RESIDENT BIRTHS

MOTHER'S SMOKING STATUS BY AGE OF MOTHER
NUMBER OF BIRTHS AND ROW PERCENTS

AGE OF MOTHER	NUMBER OF BIRTHS			TOTAL
	NON-SMOKERS ⁽¹⁾	SMOKERS ⁽²⁾	UNKNOWN	
< 15 YEARS	1	0	0	1
15 - 17 YEARS	28	9	0	37
18 - 19 YEARS	123	42	4	169
20 - 24 YEARS	658	225	13	896
25 - 29 YEARS	1323	304	21	1648
30 - 34 YEARS	1569	202	21	1792
35 - 39 YEARS	841	74	6	921
40 - 44 YEARS	167	11	1	179
45+ YEARS	12	0	0	12
STATE TOTAL	4722	867	66	5655

ROW PERCENTS - EXCLUDING UNKNOWNNS

AGE OF MOTHER	NON-SMOKERS ⁽¹⁾	SMOKERS ⁽²⁾	QUITTERS ⁽³⁾
< 15 YEARS	100.0	0.0	0.0
15 - 17 YEARS	75.7	24.3	25.0
18 - 19 YEARS	74.5	25.5	30.6
20 - 24 YEARS	74.5	25.5	28.7
25 - 29 YEARS	81.3	18.7	25.7
30 - 34 YEARS	88.6	11.4	26.1
35 - 39 YEARS	91.9	8.1	20.0
40 - 44 YEARS	93.8	6.2	35.7
45+ YEARS	100.0	0.0	0.0
STATE TOTAL	84.5	15.5	26.5

⁽¹⁾ MOTHERS WHO DID NOT SMOKE CIGARETTES DURING PREGNANCY.

⁽²⁾ MOTHERS WHO SMOKED CIGARETTES DURING PREGNANCY.

⁽³⁾ MOTHERS WHO SMOKED CIGARETTES DURING THE THREE MONTHS BEFORE PREGNANCY OR DURING THE 1ST TRIMESTER OF PREGNANCY, BUT DID NOT SMOKE DURING THE 2ND OR 3RD TRIMESTERS OF PREGNANCY.

TABLE B-21

2017 VERMONT RESIDENT BIRTHS

**PREGNANCY RISK FACTORS AND CHARACTERISTICS OF LABOR AND DELIVERY
NUMBER AND PERCENT OF BIRTHS**

RISK FACTORS FOR THIS PREGNANCY			CHARACTERISTICS OF LABOR AND DELIVERY		
ITEM	NUMBER	PERCENT	ITEM	NUMBER	PERCENT
PRE-PREGNANCY DIABETES	76	1.3	PREMATURE RUPTURE OF MEMBRANES	493	8.7
GESTATIONAL DIABETES	332	5.9	PRECIPITOUS LABOR	327	5.8
PRE-PREGNANCY HYPERTENSION	116	2.1	PROLONGED LABOR	212	3.7
GESTATIONAL HYPERTENSION	518	9.2	INDUCTION OF LABOR	1751	31.0
HYPERTENSION ECLAMPSIA	10	0.2	AUGMENTATION OF LABOR	1770	31.3
PREVIOUS PRETERM BIRTHS	228	4.0	NON-VERTEX PRESENTATION	127	2.2
POOR PREGNANCY OUTCOMES	102	1.8	STEROIDS	287	5.1
FERTILITY ENHANCING DRUGS	67	1.2	ANTIBIOTICS	1110	19.6
ASSISTED REPRODUCTIVE TECHNOLOGY	144	2.5	CHORIOAMNIONITIS	122	2.2
			MECONIUM STAINING	338	6.0
			FETAL INTOLERANCE	1304	23.1
			ANESTHESIA	3130	55.3
			CERVICAL CERCLAGE	12	0.2
			TOCOLYSIS	33	0.6
			SUCCESSFUL EXTERNAL CEPHALIC VERSION	25	0.4
			FAILED EXTERNAL CEPHALIC VERSION	30	0.5

**TABLE B-22
2017 VERMONT RESIDENT BIRTHS**

**COMPLICATIONS OF THE NEWBORN
NUMBER AND PERCENT OF BIRTHS**

ABNORMAL CONDITIONS OF THE NEWBORN			CONGENITAL ANOMALIES OF THE NEWBORN		
ITEM	NUMBER	PERCENT	ITEM	NUMBER	PERCENT
ASSISTED VENTILATION	586	10.4	ANENCEPHALY	0	0.0
ASSISTED VENTILATION >6H	149	2.6	MENINGOMYELOCELE/SPINA BIFIDA	0	0.0
ADMISSION TO NICU	323	5.7	CYANOTIC CONGENITAL HEART DISEASE	0	0.0
SURFACTANT	48	0.8	CONGENITAL DIAPHRAGMATIC HERNIA	0	0.0
ANTIBIOTICS	211	3.7	OMPHALOCELE	1	0.0
SEIZURES	10	0.2	GASTROSCHISIS	4	0.1
BIRTH INJURY	6	0.1	LIMB REDUCTION DEFECT	3	0.1
			CLEFT LIP W OR WO CLEFT PALATE	2	0.0
			CLEFT PALATE ALONE	0	0.0
			DOWN SYNDROME ⁽¹⁾	5	0.1
			SUSPECTED CHROMOSOMAL DISORDER	4	0.1
			HYPOSPADIAS	2	0.0

⁽¹⁾ INCLUDES KARYOTYPE CONFIRMED, AND KARYOTYPE PENDING.

Table B-23
2017 VERMONT RESIDENT BIRTHS

PREPREGNANCY BMI AND WEIGHT GAIN DURING PREGNANCY BY COUNTY OF RESIDENCE
NUMBER OF EVENTS AND ROW PERCENTS

COUNTY OF RESIDENCE	PREPREGNANCY BMI ⁽²⁾					WEIGHT GAIN ⁽²⁾				TOTAL ⁽¹⁾
	UNDER WEIGHT	HEALTHY WEIGHT	OVER WEIGHT	OBESE	UNKNOWN	BELOW GUIDELINES	WITHIN GUIDELINES	ABOVE GUIDELINES	UNKNOWN	
	NUMBER OF EVENTS ⁽¹⁾									
ADDISON	3	120	62	83	4	47	83	124	18	272
BENNINGTON	5	127	74	89	1	71	74	143	8	296
CALEDONIA	4	107	68	72	4	47	74	121	13	255
CHITTENDEN	26	687	333	241	24	232	446	588	45	1311
ESSEX	0	14	10	12	0	8	14	13	1	36
FRANKLIN	7	197	122	176	2	96	147	251	10	504
GRAND ISLE	0	21	18	18	0	8	19	28	2	57
LAMOILLE	3	109	58	56	0	47	57	119	3	226
ORANGE	5	91	61	66	6	40	85	92	12	229
ORLEANS	5	76	49	66	3	37	60	91	11	199
RUTLAND	12	209	114	144	5	85	120	260	19	484
WASHINGTON	8	233	127	134	3	97	153	237	18	505
WINDHAM	7	164	82	90	3	76	89	170	11	346
WINDSOR	14	182	119	91	4	81	134	179	16	410
STATE TOTAL	99	2337	1297	1338	59	972	1555	2416	187	5130

ROW PERCENTS - EXCLUDING UNKNOWNNS

COUNTY OF RESIDENCE	UNDER WEIGHT	HEALTHY WEIGHT	OVER WEIGHT	OBESE	BELOW GUIDELINES	WITHIN GUIDELINES	ABOVE GUIDELINES	TOTAL ⁽¹⁾
ADDISON	1.1	44.8	23.1	31.0	18.5	32.7	48.8	100.0
BENNINGTON	1.7	43.1	25.1	30.2	24.7	25.7	49.7	100.0
CALEDONIA	1.6	42.6	27.1	28.7	19.4	30.6	50.0	100.0
CHITTENDEN	2.0	53.4	25.9	18.7	18.3	35.2	46.4	100.0
ESSEX	0.0	38.9	27.8	33.3	22.9	40.0	37.1	100.0
FRANKLIN	1.4	39.2	24.3	35.1	19.4	29.8	50.8	100.0
GRAND ISLE	0.0	36.8	31.6	31.6	14.5	34.5	50.9	100.0
LAMOILLE	1.3	48.2	25.7	24.8	21.1	25.6	53.4	100.0
ORANGE	2.2	40.8	27.4	29.6	18.4	39.2	42.4	100.0
ORLEANS	2.6	38.8	25.0	33.7	19.7	31.9	48.4	100.0
RUTLAND	2.5	43.6	23.8	30.1	18.3	25.8	55.9	100.0
WASHINGTON	1.6	46.4	25.3	26.7	19.9	31.4	48.7	100.0
WINDHAM	2.0	47.8	23.9	26.2	22.7	26.6	50.7	100.0
WINDSOR	3.4	44.8	29.3	22.4	20.6	34.0	45.4	100.0
STATE TOTAL	2.0	46.1	25.6	26.4	19.7	31.5	48.9	100.0

⁽¹⁾ FULL TERM, SINGLETON BIRTHS ONLY.

⁽²⁾ PREPREGNANCY BMI CATEGORIES AND WEIGHT GAIN GUIDELINES UPDATED BY THE INSTITUTE OF MEDICINE 2009.

Table B-24

2017 VERMONT RESIDENT BIRTHS

PREPREGNANCY BMI AND WEIGHT GAIN DURING PREGNANCY BY AGE OF MOTHER
NUMBER OF EVENTS AND ROW PERCENTS

AGE OF MOTHER	PREPREGNANCY BMI ⁽²⁾					WEIGHT GAIN ⁽²⁾				TOTAL ⁽¹⁾
	UNDER	HEALTHY	OVER	OBESE	UNKNOWN	BELOW	WITHIN	ABOVE	UNKNOWN	
	WEIGHT	WEIGHT	WEIGHT			GUIDELINES	GUIDELINES	GUIDELINES		
<15 YEARS	0	0	0	0	0	0	0	0	0	0
15 - 17 YEARS	0	20	4	8	1	10	6	16	1	33
18 - 19 YEARS	10	60	38	39	2	31	29	81	8	149
20 - 24 YEARS	27	341	202	241	13	180	229	375	40	824
25 - 29 YEARS	24	663	377	431	12	279	444	742	42	1507
30 - 34 YEARS	29	778	397	397	21	284	531	749	58	1622
35 - 39 YEARS	9	404	232	177	9	156	267	375	33	831
40 - 44 YEARS	0	67	40	44	1	29	44	74	5	152
45+ YEARS	0	4	7	1	0	3	5	4	0	12
STATE TOTAL	99	2337	1297	1338	59	972	1555	2416	187	5130

AGE OF MOTHER	PREPREGNANCY BMI ⁽²⁾				WEIGHT GAIN ⁽²⁾			TOTAL ⁽¹⁾
	UNDER	HEALTHY	OVER	OBESE	BELOW	WITHIN	ABOVE	
	WEIGHT	WEIGHT	WEIGHT		GUIDELINES	GUIDELINES	GUIDELINES	
<15 YEARS	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
15 - 17 YEARS	0.0	62.5	12.5	25.0	31.3	18.8	50.0	100.0
18 - 19 YEARS	6.8	40.8	25.9	26.5	22.0	20.6	57.4	100.0
20 - 24 YEARS	3.3	42.0	24.9	29.7	23.0	29.2	47.8	100.0
25 - 29 YEARS	1.6	44.3	25.2	28.8	19.0	30.3	50.6	100.0
30 - 34 YEARS	1.8	48.6	24.8	24.8	18.2	34.0	47.9	100.0
35 - 39 YEARS	1.1	49.1	28.2	21.5	19.5	33.5	47.0	100.0
40 - 44 YEARS	0.0	44.4	26.5	29.1	19.7	29.9	50.3	100.0
45+ YEARS	0.0	33.3	58.3	8.3	25.0	41.7	33.3	100.0
STATE TOTAL	2.0	46.1	25.6	26.4	19.7	31.5	48.9	100.0

⁽¹⁾ FULL TERM, SINGLETON BIRTHS ONLY.

⁽²⁾ PREPREGNANCY BMI CATEGORIES AND WEIGHT GAIN GUIDELINES UPDATED BY THE INSTITUTE OF MEDICINE 2009.

Table B-25
2017 VERMONT RESIDENT BIRTHS

ADEQUACY OF PRENATAL CARE BY AGE OF MOTHER
NUMBER OF EVENTS AND ROW PERCENTS

AGE OF MOTHER	ADEQUACY OF PRENATAL CARE ⁽¹⁾					TOTAL
	INTENSIVE	ADEQUATE	INTERMEDIATE	INADEQUATE	UNKNOWN	
< 15 YEARS	1	0	0	0	0	1
15 YEARS	0	2	0	1	0	3
16 YEARS	4	2	0	1	0	7
17 YEARS	11	8	3	5	0	27
18 YEARS	31	22	2	4	2	61
19 YEARS	50	36	7	12	3	108
(15-19 YEARS)	(96)	(70)	(12)	(23)	(5)	(206)
20 YEARS	57	60	5	12	1	135
21 YEARS	74	46	10	14	5	149
22 YEARS	82	66	17	14	5	184
23 YEARS	83	90	11	12	2	198
24 YEARS	94	104	16	9	7	230
(20-24 YEARS)	(390)	(366)	(59)	(61)	(20)	(896)
25-29 YEARS	736	729	75	89	19	1648
30-34 YEARS	761	864	66	84	17	1792
35-39 YEARS	418	402	39	46	16	921
40-44 YEARS	86	74	6	12	1	179
45+ YEARS	4	4	1	2	1	12
STATE TOTAL	2492	2509	258	317	79	5655

ROW PERCENTS - EXCLUDING UNKNOWN⁽²⁾

AGE OF MOTHER	INTENSIVE	ADEQUATE	INTERMEDIATE	INADEQUATE
< 15 YEARS	100.0	0.0	0.0	0.0
15 YEARS	0.0	66.7	0.0	33.3
16 YEARS	57.1	28.6	0.0	14.3
17 YEARS	40.7	29.6	11.1	18.5
18 YEARS	52.5	37.3	3.4	6.8
19 YEARS	47.6	34.3	6.7	11.4
(15-19 YEARS)	(47.8)	(34.8)	(6.0)	(11.4)
20 YEARS	42.5	44.8	3.7	9.0
21 YEARS	51.4	31.9	6.9	9.7
22 YEARS	45.8	36.9	9.5	7.8
23 YEARS	42.3	45.9	5.6	6.1
24 YEARS	42.2	46.6	7.2	4.0
(20-24 YEARS)	(44.5)	(41.8)	(6.7)	(7.0)
25-29 YEARS	45.2	44.8	4.6	5.5
30-34 YEARS	42.9	48.7	3.7	4.7
35-39 YEARS	46.2	44.4	4.3	5.1
40-44 YEARS	48.3	41.6	3.4	6.7
45+ YEARS	36.4	36.4	9.1	18.2
STATE TOTAL	44.7	45.0	4.6	5.7

⁽¹⁾ ACCORDING TO THE ADEQUACY OF PRENATAL CARE UTILIZATION INDEX DEVELOPED BY MILTON KOTELCHUCK, Ph.D., M.P.H.

- INTENSIVE: PNC BEGUN BY MONTH 4 AND >= 110% OF EXPECTED VISITS WERE RECEIVED.
- ADEQUATE: PNC BEGUN BY MONTH 4 AND 80-109% OF EXPECTED VISITS WERE RECEIVED.
- INTERMEDIATE: PNC BEGUN BY MONTH 4 AND 50-79% OF EXPECTED VISITS WERE RECEIVED.
- INADEQUATE: PNC BEGUN AFTER MONTH 4 OR <50% OF EXPECTED VISITS WERE RECEIVED.

⁽²⁾ MAY NOT ADD TO 100% DUE TO ROUNDING.

TABLE B-26

2017 VERMONT RESIDENT BIRTHS

BREASTFEEDING INITIATION BY COUNTY OF RESIDENCE AND AGE OF MOTHER

NUMBER OF EVENTS (ROW PERCENTS - EXCLUDING UNKNOWNNS)

COUNTY OF RESIDENCE	BREASTFEEDING INDICATOR			TOTAL
	YES	NO	UNKNOWN	
ADDISON	278 (92.1)	24 (7.9)	3	305
BENNINGTON	265 (82.6)	56 (17.4)	3	324
CALEDONIA	232 (82.3)	50 (17.7)	3	285
CHITTENDEN	1372 (94.9)	73 (5.1)	4	1449
ESSEX	30 (76.9)	9 (23.1)	2	41
FRANKLIN	469 (85.9)	77 (14.1)	1	547
GRAND ISLE	50 (86.2)	8 (13.8)	0	58
LAMOILLE	227 (92.3)	19 (7.7)	0	246
ORANGE	233 (89.6)	27 (10.4)	0	260
ORLEANS	194 (84.3)	36 (15.7)	0	230
RUTLAND	455 (87.3)	66 (12.7)	1	522
WASHINGTON	508 (91.7)	46 (8.3)	1	555
WINDHAM	324 (86.2)	52 (13.8)	3	379
WINDSOR	406 (89.8)	46 (10.2)	2	454
STATE TOTAL	5043 (89.5)	589 (10.5)	23	5655

AGE OF MOTHER	BREASTFEEDING INDICATOR			TOTAL
	YES	NO	UNKNOWN	
< 15 YEARS	0 (0.0)	1 (100.0)	0	1
15 - 17 YEARS	30 (81.1)	7 (18.9)	0	37
18 - 19 YEARS	131 (78.0)	37 (22.0)	1	169
20 - 24 YEARS	740 (82.8)	154 (17.2)	2	896
25 - 29 YEARS	1431 (87.3)	208 (12.7)	9	1648
30 - 34 YEARS	1670 (93.6)	114 (6.4)	8	1792
35 - 39 YEARS	864 (94.1)	54 (5.9)	3	921
40 - 44 YEARS	165 (92.2)	14 (7.8)	0	179
45+ YEARS	12 (100.0)	0 (0.0)	0	12
STATE TOTAL	5043 (89.5)	589 (10.5)	23	5655

TABLE B-27
2017 VERMONT RESIDENT BIRTHS

WIC ENROLLMENT BY COUNTY OF RESIDENCE AND AGE OF MOTHER

NUMBER OF EVENTS (ROW PERCENTS - EXCLUDING UNKNOWNNS)

COUNTY OF RESIDENCE	WIC PARTICIPANT			TOTAL
	YES	NO	UNKNOWN	
ADDISON	103 (34.1)	199 (65.9)	3	305
BENNINGTON	157 (51.3)	149 (48.7)	18	324
CALEDONIA	139 (49.1)	144 (50.9)	2	285
CHITTENDEN	368 (26.2)	1038 (73.8)	43	1449
ESSEX	22 (53.7)	19 (46.3)	0	41
FRANKLIN	180 (33.0)	365 (67.0)	2	547
GRAND ISLE	21 (36.8)	36 (63.2)	1	58
LAMOILLE	91 (37.6)	151 (62.4)	4	246
ORANGE	86 (33.2)	173 (66.8)	1	260
ORLEANS	133 (58.3)	95 (41.7)	2	230
RUTLAND	201 (38.8)	317 (61.2)	4	522
WASHINGTON	133 (24.2)	417 (75.8)	5	555
WINDHAM	145 (39.2)	225 (60.8)	9	379
WINDSOR	152 (33.9)	297 (66.1)	5	454
STATE TOTAL	1931 (34.8)	3625 (65.2)	99	5655

AGE OF MOTHER	WIC PARTICIPANT			TOTAL
	YES	NO	UNKNOWN	
< 15 YEARS	0 (0.0)	1 (100.0)	0	1
15 - 17 YEARS	32 (86.5)	5 (13.5)	0	37
18 - 19 YEARS	136 (81.4)	31 (18.6)	2	169
20 - 24 YEARS	543 (61.8)	335 (38.2)	18	896
25 - 29 YEARS	604 (37.3)	1017 (62.7)	27	1648
30 - 34 YEARS	402 (22.9)	1357 (77.1)	33	1792
35 - 39 YEARS	174 (19.2)	730 (80.8)	17	921
40 - 44 YEARS	39 (22.0)	138 (78.0)	2	179
45+ YEARS	1 (8.3)	11 (91.7)	0	12
STATE TOTAL	1931 (34.8)	3625 (65.2)	99	5655

Table B-28

2017 VERMONT RESIDENT BIRTHS

PAYMENT SOURCE FOR DELIVERY BY COUNTY OF RESIDENCE
NUMBER OF EVENTS AND ROW PERCENTS

COUNTY OF RESIDENCE	PAYMENT SOURCE					TOTAL
	MEDICAID	PRIVATE INSURANCE	SELF PAY	OTHER	UNKNOWN	
ADDISON	119	178	4	4	0	305
BENNINGTON	192	113	11	2	6	324
CALEDONIA	156	59	8	62	0	285
CHITTENDEN	475	938	10	26	0	1449
ESSEX	21	14	1	3	2	41
FRANKLIN	204	313	12	18	0	547
GRAND ISLE	28	29	1	0	0	58
LAMOILLE	118	119	5	3	1	246
ORANGE	116	130	2	11	1	260
ORLEANS	149	70	1	10	0	230
RUTLAND	239	253	14	16	0	522
WASHINGTON	187	345	6	17	0	555
WINDHAM	201	162	13	2	1	379
WINDSOR	217	227	3	7	0	454
STATE TOTAL	2422	2950	91	181	11	5655

COUNTY OF RESIDENCE	ROW PERCENTS - UNKNOWN EXCLUDED				TOTAL
	MEDICAID	PRIVATE INSURANCE	SELF PAY	OTHER	
ADDISON	39.0	58.4	1.3	1.3	100.0
BENNINGTON	60.4	35.5	3.5	0.6	100.0
CALEDONIA	54.7	20.7	2.8	21.8	100.0
CHITTENDEN	32.8	64.7	0.7	1.8	100.0
ESSEX	53.8	35.9	2.6	7.7	100.0
FRANKLIN	37.3	57.2	2.2	3.3	100.0
GRAND ISLE	48.3	50.0	1.7	0.0	100.0
LAMOILLE	48.2	48.6	2.0	1.2	100.0
ORANGE	44.8	50.2	0.8	4.2	100.0
ORLEANS	64.8	30.4	0.4	4.3	100.0
RUTLAND	45.8	48.5	2.7	3.1	100.0
WASHINGTON	33.7	62.2	1.1	3.1	100.0
WINDHAM	53.2	42.9	3.4	0.5	100.0
WINDSOR	47.8	50.0	0.7	1.5	100.0
STATE TOTAL	42.9	52.3	1.6	3.2	100.0

Table B-29

2017 VERMONT RESIDENT BIRTHS

PAYMENT SOURCE FOR DELIVERY BY AGE OF MOTHER
NUMBER OF EVENTS AND ROW PERCENTS

AGE OF MOTHER	PAYMENT SOURCE					TOTAL
	MEDICAID	PRIVATE INSURANCE	SELF PAY	OTHER	UNKNOWN	
< 15 YEARS	1	0	0	0	0	1
15 - 17 YEARS	33	3	1	0	0	37
18 - 19 YEARS	136	23	5	5	0	169
20 - 24 YEARS	607	248	12	26	3	896
25 - 29 YEARS	788	774	25	57	4	1648
30 - 34 YEARS	551	1145	31	63	2	1792
35 - 39 YEARS	251	630	12	27	1	921
40 - 44 YEARS	52	119	4	3	1	179
45+ YEARS	3	8	1	0	0	12
STATE TOTAL	2422	2950	91	181	11	5655

ROW PERCENTS - UNKNOWNNS EXCLUDED

AGE OF MOTHER	PAYMENT SOURCE				TOTAL
	MEDICAID	PRIVATE INSURANCE	SELF PAY	OTHER	
< 15 YEARS	100.0	0.0	0.0	0.0	100.0
15 - 17 YEARS	89.2	8.1	2.7	0.0	100.0
18 - 19 YEARS	80.5	13.6	3.0	3.0	100.0
20 - 24 YEARS	68.0	27.8	1.3	2.9	100.0
25 - 29 YEARS	47.9	47.1	1.5	3.5	100.0
30 - 34 YEARS	30.8	64.0	1.7	3.5	100.0
35 - 39 YEARS	27.3	68.5	1.3	2.9	100.0
40 - 44 YEARS	29.2	66.9	2.2	1.7	100.0
45+ YEARS	25.0	66.7	8.3	0.0	100.0
STATE TOTAL	42.9	52.3	1.6	3.2	100.0

Table B-30

2017 VERMONT RESIDENT BIRTHS

PAYMENT SOURCE FOR DELIVERY BY MONTH OF PRENATAL CARE ENTRY

NUMBER OF EVENTS AND ROW PERCENTS

MONTH PRENATAL CARE BEGAN	PAYMENT SOURCE					TOTAL
	MEDICAID	PRIVATE INSURANCE	SELF PAY	OTHER	UNKNOWN	
1ST	29	22	1	0	0	52
2ND	972	1349	30	90	1	2442
3RD	930	1337	30	67	5	2369
4TH	261	149	11	7	1	429
5TH	87	38	0	3	0	128
6TH	40	12	2	4	1	59
7TH	21	9	4	1	0	35
8TH	26	5	1	3	1	36
9TH	11	3	3	0	1	18
NONE	10	2	5	0	1	18
UNKNOWN	35	24	4	6	0	69
STATE TOTAL	2422	2950	91	181	11	5655

ROW PERCENTS - UNKNOWNNS EXCLUDED

MONTH PRENATAL CARE BEGAN	PRIVATE				TOTAL
	MEDICAID	INSURANCE	SELF PAY	OTHER	
1ST	55.8	42.3	1.9	0.0	100.0
2ND	39.3	56.6	1.3	2.8	100.0
3RD	61.0	34.8	2.6	1.6	100.0
4TH	68.0	29.7	0.0	2.3	100.0
5TH	69.0	20.7	3.4	6.9	100.0
6TH	60.0	25.7	11.4	2.9	100.0
7TH	74.3	14.3	2.9	8.6	100.0
8TH	64.7	17.6	17.6	0.0	100.0
9TH	58.8	11.8	29.4	0.0	100.0
NONE	55.8	42.3	1.9	0.0	100.0
UNKNOWN	50.7	34.8	5.8	8.7	100.0
STATE TOTAL	42.9	52.3	1.6	3.2	100.0

Table B-31

2017 VERMONT RESIDENT PREGNANCIES(1)

AGE-SPECIFIC PREGNANCY RATES BY COUNTY OF RESIDENCE

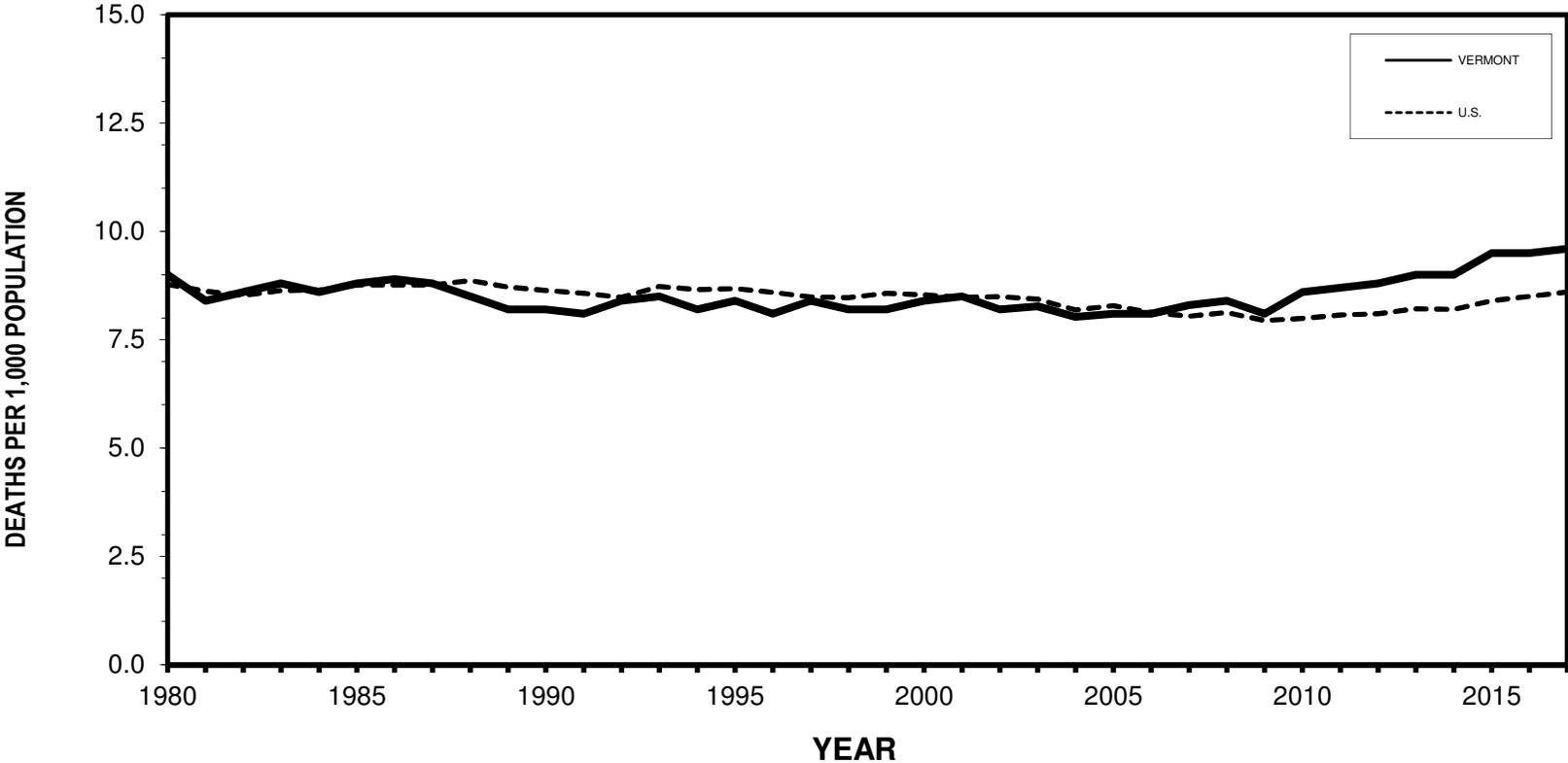
COUNTY OF RESIDENCE	AGE OF PATIENT					TOTAL
	15-19	20-24	25-29	30-34	35-44	
ADDISON	8.1	38.2	117.2	99.6	36.7	49.7
BENNINGTON	21.5	66.9	146.5	113.6	36.8	66.6
CALEDONIA	18.8	100.1	141.0	104.5	26.7	66.3
CHITTENDEN	6.8	26.7	72.2	117.0	43.8	48.1
ESSEX	12.5	73.0	146.3	58.4	38.2	57.4
FRANKLIN	17.4	90.6	152.3	105.7	24.5	68.6
GRAND ISLE	11.8	90.4	139.5	108.7	29.6	67.7
LAMOILLE	23.3	67.5	107.8	106.7	43.7	64.5
ORANGE	10.2	82.7	126.4	105.4	29.9	62.8
ORLEANS	34.8	90.1	143.5	76.0	20.0	62.2
RUTLAND	19.7	50.4	150.7	119.7	30.4	65.0
WASHINGTON	13.7	64.4	117.0	115.9	43.9	65.5
WINDHAM	22.6	81.7	104.8	95.2	35.7	62.4
WINDSOR	19.5	73.9	98.8	103.6	29.3	59.4
STATE TOTAL	14.4	52.3	109.6	109.0	35.8	58.3

Rates are pregnancies per 1,000 Female Population.

(1) INCLUDES ALL VERMONT RESIDENT LIVE BIRTHS AND FETAL DEATHS AND INDUCED ABORTIONS OCCURRING IN VERMONT TO VERMONT RESIDENTS.

Deaths

Figure 8
VERMONT AND U.S. CRUDE DEATH RATES
1980-2017



Vermont data points can be found in Table A-1. Data points for the U.S. can be found in Appendix D. U.S. data for 2015 was unavailable at the time of printing.

DEATHS

There were 6,010 resident deaths in 2017, 102 more than in 2016. The crude death rate increased to 9.6 per 1,000/population, the highest rate since 1980. The death rate has been increasing since 2004 when the rate was 8.0; prior to then it had been slowly declining from 11.2 in 1960, to 10.0 in 1970, down to 9.0 in 1980 and 8.2 in 1990. The Vermont crude death rate was slightly lower than the U.S. crude death rate from 1988 through 2005 and has been slightly higher than the U.S. crude death rate since 2007 (Figure 8).

From the 1960's through 2006 the two leading causes of death in Vermont were heart disease and cancer, respectively. In 2007 cancer took over as the leading cause of death among Vermonters and has remained such except for 2016 when heart disease briefly overtook cancer as the leading cause of death in Vermont. Heart disease and cancer accounted for 46.0 percent of the deaths in 2017 (Table C-11). The heart disease crude death rate peaked in the 1960's at 439.5 deaths per 100,000/population but has decreased significantly since then. The heart disease death rate for 2017 was 213.7 per 100,000/population (Table C-1). In contrast, the crude death rate for cancer (malignant neoplasms) increased steadily since 1980 before leveling off in recent years. The 2017 death rate for cancer was 229.9.

Accidents (or unintentional injuries) had maintained its position as the fourth leading cause of death in Vermont since 2005 before becoming the third leading cause of death in 2016. The crude death rate declined to 31.3 in 1994 to 1996. From the mid 1990's through 2006, the death rate continued to increase, but has leveled off in recent years. The crude rate for 2017 was 62.9 deaths per 100,000/population, increasing from the 2016 rate of 59.4.

Chronic lower respiratory diseases (formerly referred to as chronic obstructive pulmonary diseases) had been the third leading cause of death among Vermont residents since 2005 before dropping to the fourth leading cause of death in 2016. The crude death rate for this cause increased from 33.0 per 100,000/population in the period from 1979 to 1981 to 50.9 in 2000. After declining in 2001 and 2002, the rate has fluctuated since. In 2017, the rate was 60.1 per 100,000/population, up from 57.0 in 2016.

The crude death rate from Alzheimer's disease steadily increased throughout the 1990's, resulting in movement up from the tenth to the seventh leading cause of death in 1999. In 2004, Alzheimer's disease moved up to the sixth leading cause of death and remained there through 2010. In 2011 Alzheimer's moved up to the fifth leading cause of death in Vermont and has maintained that ranking every year except in 2015 when it again ranked sixth. The crude death rate for Alzheimer's disease in 2017 was 59.3 per 100,000/population, up sharply from 49.6 in 2016.

Cerebrovascular diseases, or stroke, dropped from the third leading cause of death in 2004 to the fifth leading cause beginning in 2005. In 2011 cerebrovascular diseases dropped to the sixth leading cause of death in Vermont and has maintained that rank except for 2015 when it temporarily moved back to ranking fifth. The crude death rate for cerebrovascular diseases has dropped significantly from its peak of 131.9 per 100,000/population in the early 1960's to 39.9 in 2017.

Diabetes remained the seventh leading cause of death in Vermont in 2017, and the rate fluctuated throughout the last decade, from 26.9 per 100,000/population in 2000 to 29.6 in 2003, 27.4 in 2007 to 24.0 in 2010, up to 28.4 in 2012 and down to 26.1 in 2017.

Intentional self-harm (suicide) remained the eighth leading cause of death in 2017. The death rate increased steadily from 12.0 per 100,000/population in 2005 to 19.2 in 2011 before dropping to 13.7 in 2012. The suicide death rate was 18.0 in 2017.

The ninth leading cause of death in Vermont in 2017 was influenza and pneumonia with a crude death rate of 13.9 per 100,000/population. Parkinson's disease was the tenth leading cause of death in Vermont in 2017, with a crude death rate of 13.0 per 100,000/population. Chronic liver disease and cirrhosis dropped out of the top ten.

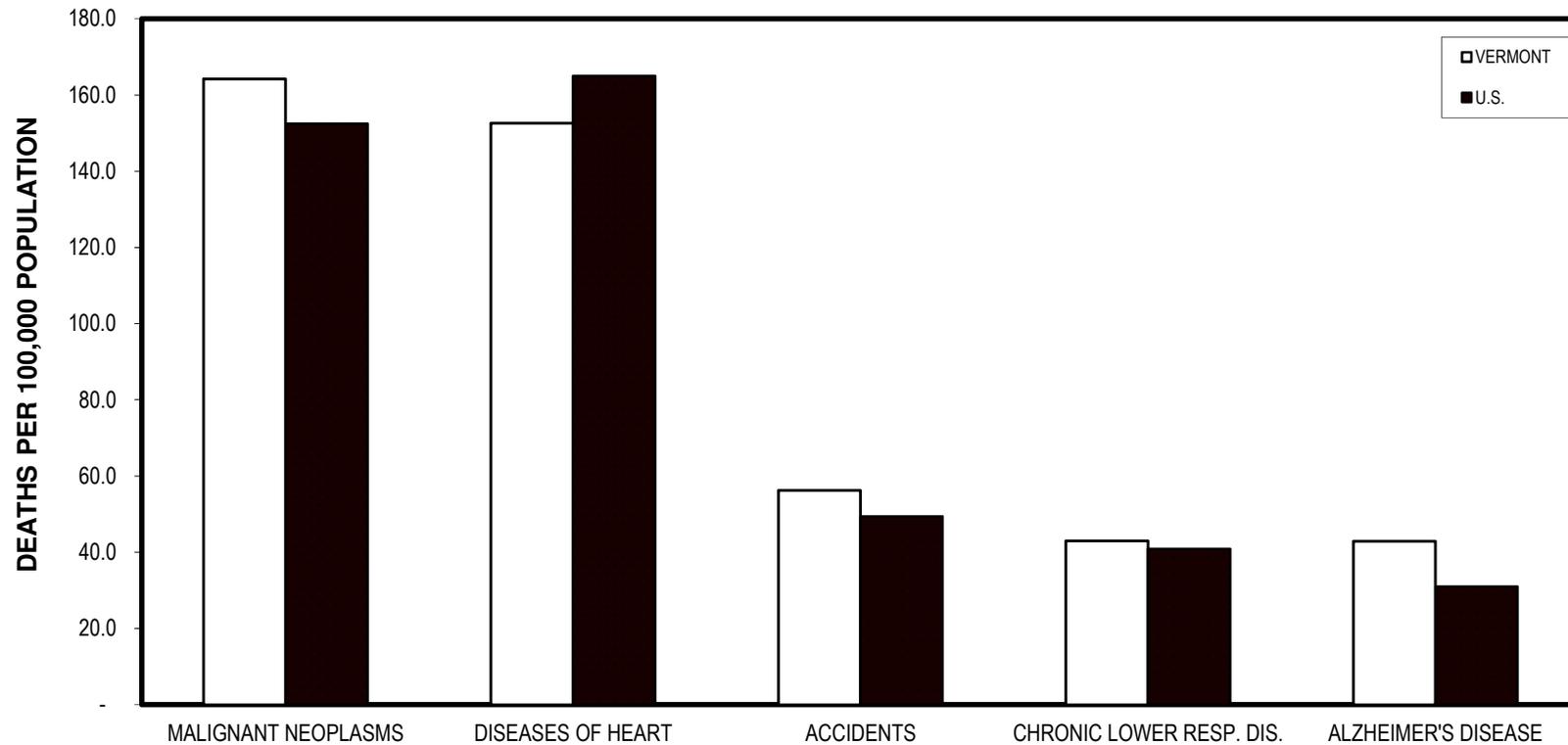
The leading causes of death varied with age (Table C-2 and Table C-14). Unintentional injuries were the leading cause of death for people age 15 to 44. Cancer was the leading cause of death, followed by heart disease for 45 to 84 year olds, and at ages 85 and higher, the causes were reversed with heart disease as the leading cause, followed by cancer.

Death rates dramatically increase after age 75. While people age 75 and over comprised only 7.4 percent of the total population, they accounted for 58.9 percent of total deaths. Except for accidents and influenza and pneumonia, the leading causes of death in this age group were all chronic diseases.

The leading causes of death did vary by sex (Table C-1 and Table C-11). While cancer was the leading cause of death overall, heart disease was the leading cause for men. Accidents were the third leading cause of death for Vermont males, while accidents were the fifth leading cause of death for females. Alzheimer's disease was the third leading cause of death among women but was fifth among men. Men had higher death rates than women due to suicide and Parkinson's disease, while women had higher death rates due to influenza and pneumonia, diabetes, cerebrovascular disease and chronic lower respiratory diseases.

Deaths occurring in a hospital accounted for 30.7 percent of 2017 Vermont resident deaths (Table C-17), less than 35.8 percent in 2010, and down from 62 percent in 1980, 53 percent in 1990, and 42 percent in 2000. In 2017, 32.3 percent of Vermont resident deaths occurred at home and 27.4 percent occurred in a nursing home or long-term care facility.

Figure 9
FIVE LEADING CAUSES OF DEATH IN VERMONT IN 2017,
VERMONT AND U.S. RATES



Vermont and U.S. rates in this chart are age-adjusted to the U.S. standard population for comparison purposes, Vermont rates published in tables are crude rates.

TABLE C-1

1979-2017 VERMONT RESIDENT DEATHS
 10 LEADING CAUSES OF DEATH, BY SEX
 CRUDE RATES PER 100,000 POPULATION

CAUSE OF DEATH ⁽¹⁾		2017		2010	2000	1989-91	1979-81
		NUMBER	RATE	RATE	RATE	RATE	RATE
1. MALIGNANT NEOPLASMS (CANCER)	T	1434	229.9	223.1	203.5	199.1	188.1
10th: C00-C97	M	750	243.3	238.5	207.8	216.8	202.8
9th: 140-208 (1.0068)	F	684	216.9	208.2	199.4	182.1	174.1
OF TRACHEA, BRONCHUS AND LUNG	T	356	57.1	64.9	54.9	49.1	44.7
10th: C33-C34	M	180	58.4	70.4	64.0	67.4	67.0
9th: 162 (0.9837)	F	176	55.8	59.5	46.1	31.6	23.5
2. DISEASES OF THE HEART	T	1333	213.7	187.0	236.4	255.1	327.4
10th: I00-I09, I11, I13, I20-I51	M	764	247.8	200.8	233.3	254.7	352.2
9th: 390-398, 402, 404, 410-429 (0.9858)	F	569	180.4	173.5	239.3	255.4	303.7
3. ACCIDENTS	T	392	62.9	47.5	38.1	34.4	46.3
10th: V01-X59, Y85-Y86	M	230	74.6	53.5	49.9	46.3	66.5
9th: E800-E869, E880-E929 (1.0305)	F	162	51.4	41.6	26.7	23.1	27.1
FALLS	T	137	22.0	21.4	5.4	5.0	5.7
10th: W00-W19	M	59	19.1	17.8	7.4	4.5	5.7
9th: E880-E888 (0.8409)	F	78	24.7	24.9	3.5	5.5	5.6
4. CHRONIC LOWER RESPIRATORY DISEASES (COPD)	T	375	60.1	53.5	50.9	41.5	33.0
10th: J40-J47	M	174	56.4	44.5	53.0	49.7	48.2
9th: 490-494, 496 (1.0478)	F	201	63.7	62.4	49.0	33.6	18.4
5. ALZHEIMER'S DISEASE	T	370	59.3	37.7	22.0	15.4	0.9
10th: G30	M	112	36.3	25.0	10.7	9.8	0.6
9th: 331.0 (1.5536)	F	258	81.8	50.1	32.9	20.7	1.2

CORRECTED 1/02/2024

TABLE C-1

1979-2017 VERMONT RESIDENT DEATHS
10 LEADING CAUSES OF DEATH, BY SEX
CRUDE RATES PER 100,000 POPULATION

CAUSE OF DEATH ⁽¹⁾		2017		2010	2000	1989-91	1979-81
		NUMBER	RATE	RATE	RATE	RATE	RATE
6. CEREBROVASCULAR DISEASES (STROKE)	T	249	39.9	42.5	56.5	54.0	69.2
10th: I60-I69	M	103	33.4	38.3	42.9	41.3	57.7
9th: 430-434, 436-438 (1.0588)	F	146	46.3	46.6	69.6	66.2	80.1
7. DIABETES MELLITUS	T	163	26.1	24.0	26.9	22.0	13.6
10th: E10-E14	M	70	22.7	27.6	25.1	20.1	11.0
9th: 250 (1.0082)	F	93	29.5	20.5	28.7	23.9	16.1
8. INTENTIONAL SELF-HARM (SUICIDE)	T	112	18.0	17.3	12.6	16.1	16.3
10th: X60-X84, Y87.0	M	82	26.6	28.2	22.8	27.4	25.8
9th: E950-E959 (0.9962)	F	30	9.5	6.6	2.9	5.3	7.2
9. INFLUENZA AND PNEUMONIA	T	87	13.9	9.7	6.9	9.6	11.8
10th: J10-J18	M	37	12.0	7.5	9.4	12.0	15.3
9th: 480-487 (0.6982)	F	50	15.9	12.0	4.5	7.3	8.6
10. PARKINSON'S DISEASE	T	81	13.0	8.8	5.6	3.8	2.4
10th: G20-G21	M	51	16.5	9.7	7.0	4.2	2.3
9th: 332 (1.0012)	F	30	9.5	7.9	4.2	3.4	2.6

⁽¹⁾ CAUSE OF DEATH IS CODED BY THE INTERNATIONAL CLASSIFICATION OF DISEASES. DEATHS IN 1979 TO 1998 WERE CODED ACCORDING TO ICD-9. EFFECTIVE JANUARY 1, 1999 DEATHS WERE CODED ACCORDING TO ICD-10. SINCE SIGNIFICANT CHANGES WERE MADE IN ICD-10, THE CODE NUMBERS FOR ICD-9 AND ICD-10 ARE GIVEN IN ADDITION TO COMPARABILITY RATIOS WHICH HAVE BEEN APPLIED TO THE EARLIER RATES TO MAKE THEM COMPARABLE TO THE ICD-10 RATES.

TABLE C-2
2017 VERMONT RESIDENT DEATHS

LEADING CAUSES OF DEATH BY AGE GROUPS AND SEX
NUMBER OF DEATHS AND AGE-SPECIFIC DEATH RATES
PER 100,000 POPULATION

AGE GROUP AND CAUSE ⁽¹⁾	NUMBER OF		RATES			
	DEATHS	TOTAL	# MALE	MALE	# FEMALE	FEMALE
UNDER 1 ⁽²⁾	27	4.8	14	4.9	13	4.7
1-4 YEARS	4	16.5	3	23.9	1	8.6
5-14 YEARS	7	10.7	6	17.7	1	3.2
15-24 YEARS	55	62.4	43	94.9	12	28.0
ACCIDENTS	33	37.4	27	59.6	6	14.0
25-34 YEARS	100	137.0	70	188.4	30	83.8
ACCIDENTS	50	68.5	34	91.5	16	44.7
INTENTIONAL SELF HARM (SUICIDE)	20	27.4	18	48.4	2	5.6
35-44 YEARS	138	198.1	84	243.6	54	153.6
ACCIDENTS	43	61.7	29	84.1	14	39.8
INTENTIONAL SELF HARM (SUICIDE)	25	35.9	18	52.2	7	19.9
MALIGNANT NEOPLASMS	21	30.2	8	23.2	13	37.0
45-54 YEARS	295	352.7	169	412.0	126	295.5
MALIGNANT NEOPLASMS	83	99.2	41	100.0	42	98.5
ACCIDENTS	51	61.0	40	97.5	11	25.8
DISEASES OF HEART	48	57.4	34	82.9	14	32.8
INTENTIONAL SELF HARM (SUICIDE)	22	26.3	16	39.0	6	14.1
55-64 YEARS	710	733.3	432	914.6	278	560.6
MALIGNANT NEOPLASMS	258	266.4	139	294.3	119	239.9
DISEASES OF HEART	150	154.9	110	232.9	40	80.7
CHRONIC LOWER RESPIRATORY DISEASES	45	46.5	25	52.9	20	40.3
ACCIDENTS	40	41.3	28	59.3	12	24.2
CHRONIC LIVER DISEASE AND CIRRHOSIS	23	23.8	17	36.0	6	12.1
DIABETES MELLITUS	20	20.7	12	25.4	8	16.1
65-74 YEARS	1135	1606.1	645	1881.3	490	1346.9
MALIGNANT NEOPLASMS	417	590.1	216	630.0	201	552.5
DISEASES OF HEART	238	336.8	173	504.6	65	178.7
CHRONIC LOWER RESPIRATORY DISEASES	90	127.4	41	119.6	49	134.7
CEREBROVASCULAR DISEASE (STROKE)	38	53.8	21	61.3	17	46.7
DIABETES MELLITUS	35	49.5	26	75.8	9	24.7
ACCIDENTS	34	48.1	16	46.7	18	49.5
ALZHEIMER'S DISEASE	26	36.8	10	29.2	16	44.0
75-84 YEARS	1413	4425.2	736	5093.1	677	3873.0
MALIGNANT NEOPLASMS	374	1171.3	185	1280.2	189	1081.2
DISEASES OF HEART	297	930.1	174	1204.1	123	703.7
CHRONIC LOWER RESPIRATORY DISEASES	117	366.4	56	387.5	61	349.0
ALZHEIMER'S DISEASE	101	316.3	34	235.3	67	383.3
CEREBROVASCULAR DISEASE (STROKE)	63	197.3	36	249.1	27	154.5
DIABETES MELLITUS	48	150.3	37	256.0	11	62.9
ACCIDENTS	36	112.7	27	186.8	9	51.5
PARKINSON'S DISEASE	32	100.2	16	110.7	16	91.5
ESSENTIAL HYPERTENSION AND HYPERTENSIVE RENAL DISEASE	21	65.8	11	76.1	10	57.2
85+ YEARS	2125	14889.3	845	17146.9	1280	13698.6
DISEASES OF HEART	581	4070.9	254	5154.2	327	3499.6
MALIGNANT NEOPLASMS	271	1898.8	144	2922.1	127	1359.2
ALZHEIMER'S DISEASE	238	1667.6	65	1319.0	173	1851.5
CEREBROVASCULAR DISEASE (STROKE)	133	931.9	39	791.4	94	1006.0
CHRONIC LOWER RESPIRATORY DISEASES	110	770.7	51	1034.9	59	631.4
ACCIDENTS	99	693.7	35	710.2	64	684.9
INFLUENZA AND PNEUMONIA	58	406.4	15	304.4	43	460.2
DIABETES MELLITUS	48	336.3	21	426.1	27	289.0
ESSENTIAL HYPERTENSION AND HYPERTENSIVE RENAL DISEASE	42	294.3	21	426.1	21	224.7
PARKINSON'S DISEASE	40	280.3	15	304.4	25	267.6

⁽¹⁾ CAUSES OF LESS THAN 20 DEATHS ARE NOT LISTED.

⁽²⁾ DEATH RATES FOR THOSE UNDER 1 YEAR OLD ARE PER 1,000 LIVE BIRTHS

TABLE C-3
2017

GEOGRAPHIC DISTRIBUTION OF VERMONT DEATHS

DEATHS OCCURRING IN VERMONT		VERMONT RESIDENT DEATHS	
PLACE OF RESIDENCE	NUMBER	PLACE OF DEATH	NUMBER
ARIZONA	1	ARIZONA	1
CALIFORNIA	1	CALIFORNIA	2
COLORADO	1	COLORADO	2
CONNECTICUT	10	CONNECTICUT	11
FLORIDA	26	FLORIDA	41
GEORGIA	2	GEORGIA	2
IOWA	2	ILLINOIS	1
MASSACHUSETTS	41	LOUISIANA	1
MARYLAND	1	MASSACHUSETTS	64
MAINE	3	MARYLAND	3
MONTANA	1	MAINE	5
NORTH CAROLINA	2	NORTH CAROLINA	4
NEW HAMPSHIRE	81	NEW HAMPSHIRE	390
NEW JERSEY	9	NEW JERSEY	8
NEW YORK	179	NEVADA	1
OHIO	2	NEW YORK	69
OREGON	1	PENNSYLVANIA	4
PENNSYLVANIA	3	RHODE ISLAND	2
RHODE ISLAND	2	SOUTH CAROLINA	4
SOUTH CAROLINA	3	TEXAS	1
TENNESSEE	3	UTAH	1
TEXAS	3	VIRGINIA	4
VIRGINIA	2	VERMONT	5388
VERMONT	5388	WEST VIRGINIA	1
WISCONSIN	1		
US - UNKNOWN STATE	3		
CANADA	2		
OTHER FOREIGN COUNTRY	2		
TOTAL	5775	TOTAL	6010

TABLE C-4
2017 VERMONT RESIDENT DEATHS

COUNTY OF RESIDENCE	AGE AT DEATH BY COUNTY OF RESIDENCE											UNK
	AGE											
	Under 1	1-4	5-14	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85+	
ADDISON	0	0	0	1	1	5	10	32	50	79	128	0
BENNINGTON	2	0	0	4	4	8	24	55	90	124	165	0
CALEDONIA	0	0	0	2	7	11	16	38	55	82	95	0
CHITTENDEN	10	1	2	12	22	27	63	130	201	270	411	0
ESSEX	0	0	0	2	2	5	4	10	19	22	21	0
FRANKLIN	0	0	3	5	10	14	31	58	83	112	135	0
GRAND ISLE	0	0	0	1	0	3	2	11	19	14	16	0
LAMOILLE	0	1	1	0	5	4	11	27	45	50	70	0
ORANGE	1	0	1	2	10	4	14	37	45	71	86	0
ORLEANS	2	0	0	6	5	1	11	32	71	66	123	0
RUTLAND	5	1	0	4	11	15	35	90	136	156	280	0
WASHINGTON	2	1	0	5	9	9	31	63	102	139	201	0
WINDHAM	3	0	0	5	5	19	19	54	101	98	168	0
WINDSOR	2	0	0	6	9	12	24	73	118	130	226	1
UNKNOWN	0	0	0	0	0	1	0	0	0	0	0	0
STATE TOTAL	27	4	7	55	100	138	295	710	1135	1413	2125	1

TABLE C-5
2017 VERMONT RESIDENT DEATHS

AGE AT DEATH BY COUNTY OF RESIDENCE FOR THOSE OVER 1
AGE-SPECIFIC AND AGE-ADJUSTED DEATH RATES PER 100,000 POPULATION

COUNTY OF RESIDENCE	AGE-SPECIFIC DEATH RATES								AGE-ADJUSTED DEATH RATES
	AGE								
	1-24	25-34	35-44	45-54	55-64	65-74	75-84	85+	
ADDISON	9.0	27.0	129.4	200.8	555.0	1142.9	4199.9	16285.0	850.2
BENNINGTON	40.9	118.3	231.2	499.8	931.9	2007.6	5386.6	14410.5	1102.2
CALEDONIA	23.8	221.6	321.9	403.3	776.3	1451.2	5118.6	13950.1	989.5
CHITTENDEN	27.9	96.2	145.0	309.7	601.7	1456.3	4158.3	12360.9	836.4
ESSEX	138.5	386.8	815.7	440.5	897.7	2006.3	4921.7	11666.7	1127.7
FRANKLIN	56.3	163.9	229.9	436.8	789.9	1766.3	5369.1	15919.8	1083.0
GRAND ISLE	59.0	0.0	404.9	195.5	831.4	1921.1	4129.8	17391.3	1047.7
LAMOILLE	27.2	161.8	123.5	312.9	735.9	1748.9	4180.6	15250.5	957.3
ORANGE	39.9	323.5	124.0	351.1	734.7	1211.6	4557.1	14726.0	936.0
ORLEANS	86.0	173.4	33.3	307.3	757.4	1991.6	4056.5	17107.1	1043.1
RUTLAND	32.1	173.3	254.1	425.8	910.6	1768.5	4537.5	18469.7	1121.2
WASHINGTON	37.4	139.3	128.7	379.4	700.3	1515.8	4624.1	14746.9	951.0
WINDHAM	46.3	107.7	421.9	337.4	719.2	1724.7	4029.6	14946.6	982.5
WINDSOR	45.3	150.2	200.7	323.2	763.5	1583.0	3689.0	15586.2	946.1
STATE TOTAL	37.1	137.0	198.1	352.7	733.3	1606.1	4425.2	14889.3	963.5

TABLE C-6
2017 VERMONT RESIDENT DEATHS

AGE AT DEATH BY DOMESTIC RELATIONSHIP AND SEX

DOMESTIC RELATIONSHIP	TOTAL										
	<15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85+	UNK	TOTAL
NEVER MARRIED NOR IN CIVIL UNION	38	55	80	58	83	128	123	76	97	0	738
MARRIED	0	0	13	38	101	293	558	639	501	0	2143
WIDOWED	0	0	0	1	5	60	147	475	1376	0	2064
DIVORCED	0	0	6	40	94	212	290	219	148	0	1009
CIVIL UNION	0	0	1	1	7	5	5	0	1	0	20
CIVIL UNION DISSOLUTION	0	0	0	0	0	1	1	0	0	0	2
UNKNOWN	0	0	0	0	5	11	11	4	2	1	34
STATE TOTAL	38	55	100	138	295	710	1135	1413	2125	1	6010

DOMESTIC RELATIONSHIP	MALES										
	<15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85+	UNK	TOTAL
NEVER MARRIED NOR IN CIVIL UNION	23	43	56	38	53	85	79	40	35	0	452
MARRIED	0	0	9	26	58	176	329	426	376	0	1400
WIDOWED	0	0	0	1	1	27	47	141	378	0	595
DIVORCED	0	0	4	19	51	135	179	116	55	0	559
CIVIL UNION	0	0	1	0	5	2	2	0	1	0	11
CIVIL UNION DISSOLUTION	0	0	0	0	0	0	1	0	0	0	1
UNKNOWN	0	0	0	0	1	7	8	0	0	0	16
STATE TOTAL	23	43	70	84	169	432	645	723	845	0	3034

DOMESTIC RELATIONSHIP	FEMALES										
	<15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85+	UNK	TOTAL
NEVER MARRIED NOR IN CIVIL UNION	15	12	24	20	30	43	44	36	62	0	286
MARRIED	0	0	4	12	43	117	229	213	125	0	743
WIDOWED	0	0	0	0	4	33	100	334	998	0	1469
DIVORCED	0	0	2	21	43	77	111	103	93	0	450
CIVIL UNION	0	0	0	1	2	3	3	0	0	0	9
CIVIL UNION DISSOLUTION	0	0	0	0	0	1	0	0	0	0	1
UNKNOWN	0	0	0	0	4	4	3	4	2	1	18
STATE TOTAL	15	12	30	54	126	278	490	690	1280	1	2976

**TABLE C-7
2017 VERMONT RESIDENT DEATHS**

DISPOSITION OF BODY	AGE AT DEATH BY DISPOSITION OF BODY										UNK	TOTAL
	AGE AT DEATH											
	<15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85+			
BURIAL	10	5	6	12	25	65	116	199	392	0	830	
CREMATION	25	45	84	110	245	581	894	1004	1363	0	4351	
TEMPORARY STORAGE	1	1	1	0	10	22	35	85	157	1	313	
DONATION	0	0	0	0	1	4	8	8	18	0	39	
REMOVED FROM STATE	2	3	9	15	14	36	74	106	184	0	443	
ENTOMBMENT	0	0	0	0	0	1	0	4	0	0	5	
OTHER	0	1	0	1	0	1	8	7	11	0	29	
UNKNOWN	0	0	0	0	0	0	0	0	0	0	0	
STATE TOTAL	38	55	100	138	295	710	1135	1413	2125	1	6010	

**TABLE C-8
2017 VERMONT RESIDENT DEATHS**

DISPOSITION OF BODY	MONTH OF DEATH BY DISPOSITION OF BODY												UNK	TOTAL
	MONTH OF DEATH													
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC		
BURIAL	42	25	44	79	95	81	94	81	79	86	78	46	0	830
CREMATION	391	362	411	371	339	346	339	344	332	355	356	405	0	4351
TEMPORARY STORAGE	72	53	70	28	7	1	1	0	0	3	13	64	1	313
DONATION	6	2	2	2	2	1	6	2	3	6	5	2	0	39
REMOVED FROM STATE	46	31	40	37	35	32	29	35	31	39	48	40	0	443
ENTOMBMENT	1	1	0	0	1	1	1	0	0	0	0	0	0	5
OTHER	5	6	9	1	0	1	0	2	0	1	1	3	0	29
UNKNOWN	0	0	0	0	0	0	0	0	0	0	0	0	0	0
STATE TOTAL	563	480	576	518	479	463	470	464	445	490	501	560	1	6010

TABLE C-9
2017 VERMONT RESIDENT DEATHS

RACE BY COUNTY OF RESIDENCE
RACE

COUNTY OF RESIDENCE	WHITE	BLACK	AMERICAN INDIAN	ASIAN OR PACIFIC ISLANDER ⁽¹⁾	OTHER NON-WHITE	UNKNOWN	MULTIPLE RACE ⁽²⁾	TOTAL
ADDISON	302	0	1	0	0	0	3	306
BENNINGTON	458	2	0	0	2	0	14	476
CALEDONIA	302	2	0	0	0	0	2	306
CHITTENDEN	1100	18	4	13	3	3	8	1149
ESSEX	82	0	0	0	0	0	3	85
FRANKLIN	440	1	5	0	0	1	4	451
GRAND ISLE	66	0	0	0	0	0	0	66
LAMOILLE	213	1	0	0	0	0	0	214
ORANGE	265	1	0	0	0	0	5	271
ORLEANS	312	0	0	1	1	0	3	317
RUTLAND	723	1	2	4	0	1	2	733
WASHINGTON	552	3	0	0	0	1	6	562
WINDHAM	448	3	0	1	1	3	16	472
WINDSOR	584	3	1	1	0	1	11	601
UNKNOWN	1	0	0	0	0	0	0	1
STATE TOTAL	5848	35	13	20	7	10	77	6010

⁽¹⁾ INCLUDES: ASIAN INDIAN, CHINESE, FILIPINO, NATIVE HAWAIIAN, JAPANESE, KOREAN, VIETNAMESE, OTHER ASIAN, GUAMANIAN OR CHAMORRO, SAMOAN, AND OTHER PACIFIC ISLANDER.

⁽²⁾ MORE THAN ONE RACE INDICATED.

TABLE C-10
2017 VERMONT RESIDENT DEATHS

AUTOPSY BY CERTIFIER OF DEATH
NUMBER OF EVENTS, ROW AND COLUMN PERCENTS
AUTOPSY

CERTIFIER	NUMBER OF EVENTS				ROW PERCENTS ⁽¹⁾				COLUMN PERCENTS ⁽¹⁾			
	AUTOPSY	NONE	UNK	TOTAL	AUTOPSY	NONE	UNK	TOTAL	AUTOPSY	NONE	UNK	TOTAL
PHYSICIAN	35	3653	110	3798	0.9	96.2	2.9	100.0	6.7	68.6	69.2	63.2
PATHOLOGIST	55	1	1	57	96.5	1.8	1.8	100.0	10.5	0.0	0.6	0.9
MEDICAL EXAMINER	373	670	3	1046	35.7	64.1	0.3	100.0	71.3	12.6	1.9	17.4
PHYSICIAN ASSISTANT OR ADVANCED PRACTICE												
REGISTERED NURSE	0	452	35	487	0.0	92.8	7.2	100.0	0.0	8.5	22.0	8.1
UNKNOWN	60	552	10	622	9.6	88.7	1.6	100.0	11.5	10.4	6.3	10.3
STATE TOTAL	523	5328	159	6010	8.7	88.7	2.6	100.0	100.0	100.0	100.0	100.0

⁽¹⁾ MAY NOT ADD TO 100% DUE TO ROUNDING.

TABLE C-11 - PAGE 1
2017 VERMONT RESIDENT DEATHS

SEX OF DECEDENT BY 113 SELECTED CAUSES OF DEATH

CAUSE OF DEATH ⁽¹⁾	NUMBER OF EVENTS			COLUMN PERCENTS			AGE-ADJUSTED DEATH RATE PER 100,000 POPULATION		
	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
SALMONELLA INFECTIONS	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
SHIGELLOSIS AND AMEBIASIS	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
CERTAIN OTHER INTESTINAL INFECTIONS	3	9	12	0.1	0.3	0.2	1.4	2.4	1.9
TUBERCULOSIS	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
RESPIRATORY TUBERCULOSIS	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
OTHER TUBERCULOSIS	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
WHOOPING COUGH	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
SCARLET FEVER AND ERYSIPELAS	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
MENINGOCOCCAL INFECTION	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
SEPTICEMIA	19	15	34	0.6	0.5	0.6	7.1	4.3	5.5
SYPHILIS	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
ACUTE POLIOMYELITIS	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
ARTHROPOD-BORNE VIRAL ENCEPHALITIS	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
MEASLES	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
VIRAL HEPATITIS	12	4	16	0.4	0.1	0.3	4.1	1.2	2.6
HUMAN IMMUNODEFICIENCY VIRUS (HIV) DISEASE	3	1	4	0.1	0.0	0.1	1.0	0.3	0.6
MALARIA	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
OTHER AND UNSPECIFIED INFECTIOUS AND PARASITIC DISEASES AND THEIR SEQUELAE	6	16	22	0.2	0.5	0.4	2.3	4.5	3.5
MALIGNANT NEOPLASMS	750	684	1434	24.7	23.0	23.9	271.3	201.8	229.9
OF LIP, ORAL CAVITY, AND PHARYNX	10	6	16	0.3	0.2	0.3	3.3	1.8	2.6
OF ESOPHAGUS	39	10	49	1.3	0.3	0.8	13.9	3.0	7.9
OF STOMACH	15	8	23	0.5	0.3	0.4	5.5	2.4	3.7
OF COLON, RECTUM AND ANUS	61	68	129	2.0	2.3	2.1	21.7	20.0	20.7
OF LIVER AND INTRAHEPATIC BILE DUCTS	32	16	48	1.1	0.5	0.8	11.1	4.6	7.7
OF PANCREAS	49	52	101	1.6	1.7	1.7	17.5	15.3	16.2
OF LARYNX	3	0	3	0.1	0.0	0.0	1.0	0.0	0.5
OF TRACHEA, BRONCHUS AND LUNG	180	176	356	5.9	5.9	5.9	64.7	51.9	57.1
OF SKIN	9	8	17	0.3	0.3	0.3	3.4	2.2	2.7
OF BREAST	1	80	81	0.0	2.7	1.3	0.3	23.8	13.0
OF CERVIX UTERI	0	4	4	0.0	0.1	0.1	0.0	1.2	0.6
OF CORPUS UTERI AND UTERUS, PART UNSPECIFIED	0	30	30	0.0	1.0	0.5	0.0	9.2	4.8
OF OVARY	0	28	28	0.0	0.9	0.5	0.0	8.4	4.5
OF PROSTATE	70	0	70	2.3	0.0	1.2	27.0	0.0	11.2
OF KIDNEY AND RENAL PELVIS	26	11	37	0.9	0.4	0.6	9.3	3.4	5.9
OF BLADDER	28	12	40	0.9	0.4	0.7	10.4	3.3	6.4
OF MENINGES, BRAIN AND OTHER PARTS OF CENTRAL NERVOUS SYSTEM	32	29	61	1.1	1.0	1.0	11.0	8.9	9.8

TABLE C-11 - PAGE 2
2017 VERMONT RESIDENT DEATHS

SEX OF DECEDENT BY 113 SELECTED CAUSES OF DEATH

CAUSE OF DEATH ⁽¹⁾	NUMBER OF EVENTS			COLUMN PERCENTS			AGE-ADJUSTED DEATH RATE PER 100,000 POPULATION		
	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
OF LYMPHOID, HEMATOPOIETIC AND RELATED TISSUE	71	47	118	2.3	1.6	2.0	26.5	13.3	18.9
HODGKIN'S DISEASE	1	1	2	0.0	0.0	0.0	0.3	0.3	0.3
NON-HODGKIN'S LYMPHOMA	27	17	44	0.9	0.6	0.7	10.2	4.8	7.1
LEUKEMIA	29	21	50	1.0	0.7	0.8	11.0	6.1	8.0
MULTIPLE MYELOMA AND IMMUNOPROLIFERATIVE NEOPLASMS ALL OTHER AND UNSPECIFIED MALIGNANT NEOPLASMS OF LYMPHOID, HEMATOPOIETIC AND RELATED TISSUE	14	7	21	0.5	0.2	0.3	4.9	1.9	3.4
ALL OTHER AND UNSPECIFIED MALIGNANT NEOPLASMS IN SITU NEOPLASMS, BENIGN NEOPLASMS AND NEOPLASMS OF UNCERTAIN OR UNKNOWN BEHAVIOR	0	1	1	0.0	0.0	0.0	0.0	0.2	0.2
ALL OTHER AND UNSPECIFIED MALIGNANT NEOPLASMS IN SITU NEOPLASMS, BENIGN NEOPLASMS AND NEOPLASMS OF UNCERTAIN OR UNKNOWN BEHAVIOR	124	99	223	4.1	3.3	3.7	44.8	29.0	35.8
ANEMIAS	2	5	7	0.1	0.2	0.1	0.8	1.4	1.1
DIABETES MELLITUS	70	93	163	2.3	3.1	2.7	25.6	26.4	26.1
NUTRITIONAL DEFICIENCIES	2	5	7	0.1	0.2	0.1	0.8	1.4	1.1
MALNUTRITION	2	4	6	0.1	0.1	0.1	0.8	1.1	1.0
OTHER NUTRITIONAL DEFICIENCIES	0	1	1	0.0	0.0	0.0	0.0	0.2	0.2
MENINGITIS	2	0	2	0.1	0.0	0.0	0.7	0.0	0.3
PARKINSON'S DISEASE	51	30	81	1.7	1.0	1.3	20.2	7.9	13.0
ALZHEIMER'S DISEASE	112	258	370	3.7	8.7	6.2	46.5	67.6	59.3
MAJOR CARDIOVASCULAR DISEASES	930	782	1712	30.7	26.3	28.5	354.3	210.0	274.5
DISEASES OF HEART	764	569	1333	25.2	19.1	22.2	290.2	153.3	213.7
ACUTE RHEUMATIC FEVER AND CHRONIC RHEUMATIC HEART DISEASES	6	11	17	0.2	0.4	0.3	2.5	3.1	2.7
HYPERTENSIVE HEART DISEASE	63	61	124	2.1	2.0	2.1	23.4	16.5	19.9
HYPERTENSIVE HEART AND RENAL DISEASE	11	12	23	0.4	0.4	0.4	4.4	3.3	3.7
ISCHEMIC HEART DISEASES	531	319	850	17.5	10.7	14.1	199.4	86.9	136.3
ACUTE MYOCARDIAL INFARCTION	93	80	173	3.1	2.7	2.9	35.9	21.7	27.7
OTHER ACUTE ISCHEMIC HEART DISEASES	5	0	5	0.2	0.0	0.1	1.8	0.0	0.8
OTHER FORMS OF CHRONIC ISCHEMIC HEART DISEASE ATHEROSCLEROTIC CARDIOVASCULAR DISEASE, SO DESCRIBED	433	239	672	14.3	8.0	11.2	161.8	65.2	107.8
ALL OTHER FORMS OF CHRONIC ISCHEMIC HEART DISEASE	248	116	364	8.2	3.9	6.1	89.0	32.9	58.4
OTHER HEART DISEASES	185	123	308	6.1	4.1	5.1	72.8	32.3	49.4
ACUTE AND SUBACUTE ENDOCARDITIS	153	166	319	5.0	5.6	5.3	60.4	43.6	51.1
DISEASES OF PERICARDIUM AND ACUTE MYOCARDITIS	2	1	3	0.1	0.0	0.0	0.7	0.2	0.5
HEART FAILURE	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
ALL OTHER FORMS OF HEART DISEASE	21	26	47	0.7	0.9	0.8	8.5	6.5	7.5
ESSENTIAL HYPERTENSION AND HYPERTENSIVE RENAL DISEASE	130	139	269	4.3	4.7	4.5	51.2	36.8	43.1
CEREBROVASCULAR DISEASES	35	44	79	1.2	1.5	1.3	13.8	11.7	12.7
ATHEROSCLEROSIS	103	146	249	3.4	4.9	4.1	39.9	38.6	39.9
OTHER DISEASES OF CIRCULATORY SYSTEM	2	2	4	0.1	0.1	0.1	0.8	0.5	0.6
OTHER DISEASES OF CIRCULATORY SYSTEM	26	21	47	0.9	0.7	0.8	9.6	5.9	7.5

TABLE C-11 - PAGE 3
2017 VERMONT RESIDENT DEATHS

SEX OF DECEDENT BY 113 SELECTED CAUSES OF DEATH

CAUSE OF DEATH ⁽¹⁾	NUMBER OF EVENTS			COLUMN PERCENTS			AGE-ADJUSTED DEATH RATE PER 100,000 POPULATION		
	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
AORTIC ANEURYSM AND DISSECTION	22	11	33	0.7	0.4	0.5	8.0	3.1	5.3
OTHER DISEASES OF ARTERIES, ARTERIOLES AND CAPILLARIES	4	10	14	0.1	0.3	0.2	1.6	2.8	2.2
OTHER DISORDERS OF THE CIRCULATORY SYSTEM	2	8	10	0.1	0.3	0.2	0.7	2.2	1.6
INFLUENZA AND PNEUMONIA	37	50	87	1.2	1.7	1.4	15.1	13.0	13.9
INFLUENZA	6	10	16	0.2	0.3	0.3	2.4	2.6	2.6
PNEUMONIA	31	40	71	1.0	1.3	1.2	12.7	10.4	11.4
OTHER AND UNSPECIFIED ACUTE LOWER RESPIRATORY INFECTIONS	1	2	3	0.0	0.1	0.0	0.3	0.6	0.5
ACUTE BRONCHITIS AND BRONCHIOLITIS	1	2	3	0.0	0.1	0.0	0.3	0.6	0.5
UNSPECIFIED ACUTE LOWER RESPIRATORY INFECTION	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
CHRONIC LOWER RESPIRATORY DISEASES	174	201	375	5.7	6.8	6.2	65.5	57.6	60.1
BRONCHITIS, CHRONIC AND UNSPECIFIED	1	0	1	0.0	0.0	0.0	0.3	0.0	0.2
EMPHYSEMA	27	23	50	0.9	0.8	0.8	10.3	6.7	8.0
ASTHMA	2	9	11	0.1	0.3	0.2	0.7	2.7	1.8
OTHER CHRONIC LOWER RESPIRATORY DISEASES	144	169	313	4.7	5.7	5.2	54.2	48.1	50.2
PNEUMOCONIOSES AND CHEMICAL EFFECTS	2	1	3	0.1	0.0	0.0	0.8	0.3	0.5
PNEUMONITIS DUE TO SOLIDS AND LIQUIDS	17	11	28	0.6	0.4	0.5	6.5	2.8	4.5
OTHER DISEASES OF RESPIRATORY SYSTEM	43	33	76	1.4	1.1	1.3	15.9	9.3	12.2
PEPTIC ULCER	9	4	13	0.3	0.1	0.2	3.6	1.1	2.1
DISEASES OF APPENDIX	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
HERNIA	3	5	8	0.1	0.2	0.1	1.3	1.5	1.3
CHRONIC LIVER DISEASE AND CIRRHOSIS	42	29	71	1.4	1.0	1.2	14.0	9.0	11.4
ALCOHOLIC LIVER DISEASE	36	18	54	1.2	0.6	0.9	12.0	5.7	8.7
OTHER CHRONIC LIVER DISEASE AND CIRRHOSIS	6	11	17	0.2	0.4	0.3	2.1	3.3	2.7
CHOLELITHIASIS AND OTHER DISORDERS OF GALLBLADDER	9	8	17	0.3	0.3	0.3	3.3	2.2	2.7
NEPHRITIS, NEPHROTIC SYNDROME AND NEPHROSIS	14	15	29	0.5	0.5	0.5	5.3	4.2	4.6
ACUTE AND RAPIDLY PROGRESSIVE NEPHRITIC AND NEPHROTIC SYNDROME	1	1	2	0.0	0.0	0.0	0.3	0.2	0.3
CHRONIC GLOMERULONEPHRITIS, NEPHRITIS AND NEPHROPATHY NOT SPECIFIED AS ACUTE OR CHRONIC, AND RENAL SCLEROSIS UNSPECIFIED	1	0	1	0.0	0.0	0.0	0.4	0.0	0.2
RENAL FAILURE	12	14	26	0.4	0.5	0.4	4.7	4.0	4.2
OTHER DISORDERS OF KIDNEY	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
INFECTIONS OF KIDNEY	1	1	2	0.0	0.0	0.0	0.5	0.2	0.3
HYPERPLASIA OF PROSTATE	8	0	8	0.3	0.0	0.1	3.5	0.0	1.3
INFLAMMATORY DISEASES OF FEMALE PELVIC ORGANS	0	2	2	0.0	0.1	0.0	0.0	0.6	0.3
PREGNANCY, CHILDBIRTH, AND THE PUERPERIUM	0	1	1	0.0	0.0	0.0	0.0	0.3	0.2
PREGNANCY WITH ABORTIVE OUTCOME	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
OTHER COMPLICATIONS OF PREGNANCY, CHILDBIRTH AND THE PUERPERIUM	0	1	1	0.0	0.0	0.0	0.0	0.3	0.2
CERTAIN CONDITIONS ORIGINATING IN THE PERINATAL PERIOD	11	8	19	0.4	0.3	0.3	3.4	2.6	3.0

TABLE C-11 - PAGE 4
2017 VERMONT RESIDENT DEATHS

CAUSE OF DEATH ⁽¹⁾	SEX OF DECEDENT BY 113 SELECTED CAUSES OF DEATH						AGE-ADJUSTED DEATH RATE PER 100,000 POPULATION		
	NUMBER OF EVENTS			COLUMN PERCENTS			MALE	FEMALE	TOTAL
	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL			
CONGENITAL MALFORMATIONS, DEFORMATIONS AND CHROMOSOMAL ABNORMALITIES	10	10	20	0.3	0.3	0.3	3.2	3.1	3.2
SYMPTOMS, SIGNS AND ABNORMAL CLINICAL AND LABORATORY FINDINGS, NOT ELSEWHERE CLASSIFIED	11	18	29	0.4	0.6	0.5	4.3	4.7	4.6
ALL OTHER DISEASES (RESIDUAL)	321	439	760	10.6	14.8	12.6	122.7	119.9	121.7
ACCIDENTS (UNINTENTIONAL INJURIES)	230	162	392	7.6	5.4	6.5	79.6	46.4	62.9
TRANSPORT ACCIDENTS	66	25	91	2.2	0.8	1.5	21.8	7.9	14.6
MOTOR VEHICLE ACCIDENTS	58	23	81	1.9	0.8	1.3	19.2	7.2	13.0
OTHER LAND TRANSPORT ACCIDENTS	3	0	3	0.1	0.0	0.0	1.0	0.0	0.5
WATER, AIR AND SPACE AND OTHER AND UNSPECIFIED TRANSPORT ACCIDENTS AND THEIR SEQUELAE	5	2	7	0.2	0.1	0.1	1.7	0.6	1.1
NONTRANSPORT ACCIDENTS	164	137	301	5.4	4.6	5.0	57.8	38.5	48.3
FALLS	59	78	137	1.9	2.6	2.3	23.6	20.5	22.0
ACCIDENTAL DISCHARGE OF FIREARMS	1	0	1	0.0	0.0	0.0	0.3	0.0	0.2
ACCIDENTAL DROWNING AND SUBMERSION	5	1	6	0.2	0.0	0.1	1.6	0.3	1.0
ACCIDENTAL EXPOSURE TO SMOKE, FIRE AND FLAMES	1	5	6	0.0	0.2	0.1	0.3	1.4	1.0
ACCIDENTAL POISONING AND EXPOSURE TO NOXIOUS SUBSTANCES	82	37	119	2.7	1.2	2.0	26.4	11.8	19.1
OTHER AND UNSPECIFIED NONTRANSPORT ACCIDENTS AND THEIR SEQUELAE	16	16	32	0.5	0.5	0.5	5.5	4.5	5.1
INTENTIONAL SELF-HARM (SUICIDE)	82	30	112	2.7	1.0	1.9	27.0	9.5	18.0
INTENTIONAL SELF-HARM (SUICIDE) BY DISCHARGE OF FIREARMS	52	10	62	1.7	0.3	1.0	17.4	3.2	9.9
INTENTIONAL SELF-HARM (SUICIDE) BY OTHER AND UNSPECIFIED MEANS AND THEIR SEQUELAE	30	20	50	1.0	0.7	0.8	9.6	6.3	8.0
ASSAULT (HOMICIDE)	6	9	15	0.2	0.3	0.2	2.0	2.8	2.4
ASSAULT (HOMICIDE) BY DISCHARGE OF FIREARMS	4	3	7	0.1	0.1	0.1	1.3	1.0	1.1
ASSAULT (HOMICIDE) BY OTHER AND UNSPECIFIED MEANS AND THEIR SEQUELAE	2	6	8	0.1	0.2	0.1	0.7	1.9	1.3
LEGAL INTERVENTION	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
EVENTS OF UNDETERMINED INTENT	6	2	8	0.2	0.1	0.1	2.2	0.6	1.3
DISCHARGE OF FIREARMS, UNDETERMINED INTENT	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
OTHER AND UNSPECIFIED EVENTS OF UNDETERMINED INTENT AND THEIR SEQUELAE	6	2	8	0.2	0.1	0.1	2.2	0.6	1.3
OPERATIONS OF WAR AND THEIR SEQUELAE	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
COMPLICATIONS OF MEDICAL AND SURGICAL CARE	9	4	13	0.3	0.1	0.2	3.2	1.3	2.1
ALL CAUSES	3034	2976	6010	100.0	100.0	100.0	1128.8	830.7	963.5

⁽¹⁾ SEE APPENDIX C FOR COMPLETE CAUSE DEFINITIONS AND CODES.

2017 VERMONT RESIDENT DEATHS

CAUSE OF DEATH ⁽¹⁾	COUNTY OF RESIDENCE BY 113 SELECTED CAUSES OF DEATH															TOTAL	
	ADD	BEN	CAL	CHT	ESX	FRA	GI	LAM	ORG	ORL	RUT	WAS	WHM	WSR	UNK		
SALMONELLA INFECTIONS	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SHIGELLOSIS AND AMEBIASIS	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CERTAIN OTHER INTESTINAL INFECTIONS	0	0	2	1	0	1	0	0	1	0	2	1	0	4	0	0	12
TUBERCULOSIS	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
RESPIRATORY TUBERCULOSIS	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
OTHER TUBERCULOSIS	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
WHOOPING COUGH	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SCARLET FEVER AND ERYSIPELAS	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
MENINGOCOCCAL INFECTION	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SEPTICEMIA	2	4	1	6	1	1	0	1	2	1	4	3	1	7	0	0	34
SYPHILIS	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
ACUTE POLIOMYELITIS	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
ARTHROPOD-BORNE VIRAL ENCEPHALITIS	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
MEASLES	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
VIRAL HEPATITIS	0	0	1	3	1	2	0	2	1	0	3	0	0	3	0	0	16
HUMAN IMMUNODEFICIENCY VIRUS (HIV) DISEASE	0	0	1	1	0	0	0	0	0	0	2	0	0	0	0	0	4
MALARIA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
OTHER AND UNSPECIFIED INFECTIOUS AND PARASITIC DISEASES AND THEIR SEQUELAE	1	2	1	8	0	0	0	1	3	0	0	2	0	4	0	0	22
MALIGNANT NEOPLASMS	69	98	69	277	20	115	23	54	79	66	174	120	116	154	0	0	1434
OF LIP, ORAL CAVITY, AND PHARYNX	1	2	0	0	0	3	0	2	1	0	2	3	1	1	0	0	16
OF ESOPHAGUS	3	9	1	8	0	2	1	5	3	0	8	1	3	5	0	0	49
OF STOMACH	0	1	1	6	0	2	2	1	0	0	1	4	3	2	0	0	23
OF COLON, RECTUM AND ANUS	6	6	8	28	2	12	1	2	6	7	17	9	12	13	0	0	129
OF LIVER AND INTRAHEPATIC BILE DUCTS	2	3	2	10	0	2	1	0	3	0	8	5	4	8	0	0	48
OF PANCREAS	4	9	8	18	2	4	1	0	5	6	8	10	13	13	0	0	101
OF LARYNX	0	2	0	0	0	0	0	1	0	0	0	0	0	0	0	0	3
OF TRACHEA, BRONCHUS AND LUNG	19	18	15	65	7	49	7	11	17	19	45	27	22	35	0	0	356
OF SKIN	2	0	0	5	0	2	0	2	2	0	1	0	0	3	0	0	17
OF BREAST	1	3	2	15	1	6	2	7	7	4	7	11	8	7	0	0	81
OF CERVIX UTERI	0	0	1	0	0	0	1	0	0	1	0	0	0	1	0	0	4
OF CORPUS UTERI AND UTERUS, PART UNSPECIFIED	0	3	2	8	0	1	1	3	2	0	2	1	3	4	0	0	30
OF OVARY	1	2	4	7	0	0	0	2	0	2	1	2	3	4	0	0	28
OF PROSTATE	5	5	5	10	0	4	3	2	4	2	5	4	11	10	0	0	70
OF KIDNEY AND RENAL PELVIS	1	3	2	7	1	2	0	0	1	2	6	6	3	3	0	0	37
OF BLADDER	1	4	2	9	2	1	0	2	1	0	7	3	3	5	0	0	40
OF MENINGES, BRAIN AND OTHER PARTS OF CENTRAL NERVOUS SYSTEM	1	5	5	16	1	2	0	3	4	4	4	7	3	6	0	0	61

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2017 VERMONT RESIDENT DEATHS

CAUSE OF DEATH ⁽¹⁾	COUNTY OF RESIDENCE BY 113 SELECTED CAUSES OF DEATH															
	ADD	BEN	CAL	CHT	ESX	FRA	GI	LAM	ORG	ORL	RUT	WAS	WHM	WSR	UNK	TOTAL
OF LYMPHOID, HEMATOPOIETIC AND RELATED TISSUE	7	8	3	28	1	6	1	4	8	7	17	7	9	12	0	118
HODGKIN'S DISEASE	0	0	0	1	0	0	0	1	0	0	0	0	0	0	0	2
NON-HODGKIN'S LYMPHOMA	2	3	1	11	0	3	0	2	4	2	5	3	3	5	0	44
LEUKEMIA	3	2	1	11	0	2	1	0	3	3	11	3	5	5	0	50
MULTIPLE MYELOMA AND IMMUNOPROLIFERATIVE NEOPLASMS	2	3	1	5	1	1	0	1	1	1	1	1	1	2	0	21
ALL OTHER AND UNSPECIFIED MALIGNANT NEOPLASMS OF																
LYMPHOID, HEMATOPOIETIC AND RELATED TISSUE	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
ALL OTHER AND UNSPECIFIED MALIGNANT NEOPLASMS	15	15	8	37	3	17	2	7	15	12	35	20	15	22	0	223
IN SITU NEOPLASMS, BENIGN NEOPLASMS AND NEOPLASMS OF																
UNCERTAIN OR UNKNOWN BEHAVIOR	3	4	2	7	0	5	1	1	1	3	5	10	2	1	0	45
ANEMIAS	0	1	0	2	0	1	0	0	0	0	0	0	1	2	0	7
DIABETES MELLITUS	6	17	9	31	0	11	1	10	5	14	15	12	15	17	0	163
NUTRITIONAL DEFICIENCIES	0	0	0	0	0	1	0	0	1	1	3	0	0	1	0	7
MALNUTRITION	0	0	0	0	0	0	0	0	1	1	3	0	0	1	0	6
OTHER NUTRITIONAL DEFICIENCIES	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1
MENINGITIS	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	2
PARKINSON'S DISEASE	3	6	4	14	1	5	1	2	3	7	10	7	8	10	0	81
ALZHEIMER'S DISEASE	13	38	18	83	3	21	3	10	15	24	47	49	11	35	0	370
MAJOR CARDIOVASCULAR DISEASES	101	126	89	313	17	124	12	59	74	84	231	171	135	175	1	1712
DISEASES OF HEART	74	105	68	238	13	106	8	39	56	67	183	131	108	136	1	1333
ACUTE RHEUMATIC FEVER AND CHRONIC RHEUMATIC HEART																
DISEASES	3	2	0	3	0	1	1	0	0	0	1	1	2	3	0	17
HYPERTENSIVE HEART DISEASE	6	6	13	24	1	14	1	4	4	6	12	11	9	13	0	124
HYPERTENSIVE HEART AND RENAL DISEASE	4	0	0	9	0	2	0	0	0	1	3	2	1	1	0	23
ISCHEMIC HEART DISEASES	39	69	45	156	11	71	3	28	35	46	105	89	69	84	0	850
ACUTE MYOCARDIAL INFARCTION	8	8	9	30	2	20	2	9	6	12	18	20	16	13	0	173
OTHER ACUTE ISCHEMIC HEART DISEASES	0	0	0	1	0	0	0	0	1	1	0	0	2	0	0	5
OTHER FORMS OF CHRONIC ISCHEMIC HEART DISEASE	31	61	36	125	9	51	1	19	28	33	87	69	51	71	0	672
ATHEROSCLEROTIC CARDIOVASCULAR DISEASE, SO																
DESCRIBED	18	37	18	66	6	24	1	7	16	18	54	38	21	40	0	364
ALL OTHER FORMS OF CHRONIC ISCHEMIC HEART DISEASE	13	24	18	59	3	27	0	12	12	15	33	31	30	31	0	308
OTHER HEART DISEASES	22	28	10	46	1	18	3	7	17	14	62	28	27	35	1	319
ACUTE AND SUBACUTE ENDOCARDITIS	1	1	0	0	0	0	0	0	0	0	0	0	0	0	1	3
DISEASES OF PERICARDIUM AND ACUTE MYOCARDITIS	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
HEART FAILURE	4	3	1	8	0	3	0	0	4	1	5	7	5	6	0	47
ALL OTHER FORMS OF HEART DISEASE	17	24	9	38	1	15	3	7	13	13	57	21	22	29	0	269
ESSENTIAL HYPERTENSION AND HYPERTENSIVE RENAL																
DISEASE	4	6	5	15	3	4	1	6	3	7	3	10	6	6	0	79
CEREBROVASCULAR DISEASES	21	14	12	51	0	10	2	13	14	9	35	23	17	28	0	249
ATHEROSCLEROSIS	0	0	0	1	0	0	0	1	0	0	0	0	1	1	0	4
OTHER DISEASES OF CIRCULATORY SYSTEM	2	1	4	8	1	4	1	0	1	1	10	7	3	4	0	47
AORTIC ANEURYSM AND DISSECTION	1	1	2	6	1	3	1	0	0	1	8	7	1	1	0	33
OTHER DISEASES OF ARTERIES, ARTERIOLES AND CAPILLARIES	1	0	2	2	0	1	0	0	1	0	2	0	2	3	0	14

2017 VERMONT RESIDENT DEATHS

CAUSE OF DEATH ⁽¹⁾	COUNTY OF RESIDENCE BY 113 SELECTED CAUSES OF DEATH															TOTAL
	ADD	BEN	CAL	CHT	ESX	FRA	GI	LAM	ORG	ORL	RUT	WAS	WHM	WSR	UNK	
OTHER DISORDERS OF THE CIRCULATORY SYSTEM	1	1	0	2	1	0	0	2	0	0	1	2	0	0	0	10
INFLUENZA AND PNEUMONIA	8	7	8	15	1	3	0	4	9	4	7	10	5	6	0	87
INFLUENZA	1	0	1	4	0	0	0	2	1	1	3	0	0	3	0	16
PNEUMONIA	7	7	7	11	1	3	0	2	8	3	4	10	5	3	0	71
OTHER AND UNSPECIFIED ACUTE LOWER RESPIRATORY INFECTIONS	0	0	0	1	0	0	0	0	0	0	2	0	0	0	0	3
ACUTE BRONCHITIS AND BRONCHIOLITIS	0	0	0	1	0	0	0	0	0	0	2	0	0	0	0	3
UNSPECIFIED ACUTE LOWER RESPIRATORY INFECTION	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CHRONIC LOWER RESPIRATORY DISEASES	21	39	17	69	9	34	6	9	14	15	37	34	44	27	0	375
BRONCHITIS, CHRONIC AND UNSPECIFIED	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
EMPHYSEMA	0	5	3	14	1	4	0	2	2	3	2	6	6	2	0	50
ASTHMA	1	0	1	1	0	2	0	0	0	0	1	3	1	1	0	11
OTHER CHRONIC LOWER RESPIRATORY DISEASES	20	34	13	54	8	28	6	7	12	12	34	24	37	24	0	313
PNEUMOCONIOSES AND CHEMICAL EFFECTS	1	0	0	1	0	0	0	0	0	0	1	0	0	0	0	3
PNEUMONITIS DUE TO SOLIDS AND LIQUIDS	2	0	1	4	0	3	0	0	2	0	6	5	1	4	0	28
OTHER DISEASES OF RESPIRATORY SYSTEM	5	4	3	14	3	3	0	3	1	10	13	5	5	7	0	76
PEPTIC ULCER	0	0	1	4	0	1	1	1	0	0	0	0	2	3	0	13
DISEASES OF APPENDIX	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
HERNIA	0	1	0	2	0	0	0	0	0	1	1	0	1	2	0	8
CHRONIC LIVER DISEASE AND CIRRHOSIS	0	8	1	14	0	2	2	7	2	6	11	7	5	6	0	71
ALCOHOLIC LIVER DISEASE	0	7	1	12	0	1	1	5	1	4	8	5	4	5	0	54
OTHER CHRONIC LIVER DISEASE AND CIRRHOSIS	0	1	0	2	0	1	1	2	1	2	3	2	1	1	0	17
CHOLELITHIASIS AND OTHER DISORDERS OF GALLBLADDER	0	1	0	7	0	1	0	0	0	0	2	4	1	1	0	17
NEPHRITIS, NEPHROTIC SYNDROME AND NEPHROSIS	2	4	0	2	1	1	0	0	2	1	9	4	1	2	0	29
ACUTE AND RAPIDLY PROGRESSIVE NEPHRITIC AND NEPHROTIC SYNDROME	0	1	0	0	0	0	0	0	0	0	1	0	0	0	0	2
CHRONIC GLOMERULONEPHRITIS, NEPHRITIS AND NEPHROPATHY NOT SPECIFIED AS ACUTE OR CHRONIC, AND RENAL SCLEROSIS UNSPECIFIED	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
RENAL FAILURE	2	3	0	1	1	1	0	0	2	1	8	4	1	2	0	26
OTHER DISORDERS OF KIDNEY	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
INFECTIONS OF KIDNEY	0	0	0	0	0	1	0	0	0	0	0	0	1	0	0	2
HYPERPLASIA OF PROSTATE	0	3	1	1	0	1	0	0	0	0	1	1	0	0	0	8
INFLAMMATORY DISEASES OF FEMALE PELVIC ORGANS	0	0	0	1	0	0	0	0	1	0	0	0	0	0	0	2
PREGNANCY, CHILDBIRTH, AND THE PUERPERIUM	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
PREGNANCY WITH ABORTIVE OUTCOME	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
OTHER COMPLICATIONS OF PREGNANCY, CHILDBIRTH AND THE PUERPERIUM	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
CERTAIN CONDITIONS ORIGINATING IN THE PERINATAL PERIOD	0	2	0	7	0	0	0	0	1	0	3	2	2	2	0	19
CONGENITAL MALFORMATIONS, DEFORMATIONS AND CHROMOSOMAL ABNORMALITIES	0	1	1	3	0	3	1	1	0	1	4	3	2	0	0	20
SYMPTOMS, SIGNS AND ABNORMAL CLINICAL AND LABORATORY FINDINGS, NOT ELSEWHERE CLASSIFIED	1	1	3	8	1	2	1	0	0	2	3	0	4	3	0	29
ALL OTHER DISEASES (RESIDUAL)	48	70	42	132	12	59	8	34	29	52	74	67	63	70	0	760
ACCIDENTS (UNINTENTIONAL INJURIES)	17	26	18	88	9	30	3	7	19	18	47	36	32	42	0	392

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2017 VERMONT RESIDENT DEATHS

CAUSE OF DEATH ⁽¹⁾	COUNTY OF RESIDENCE BY 113 SELECTED CAUSES OF DEATH															TOTAL
	ADD	BEN	CAL	CHT	ESX	FRA	GI	LAM	ORG	ORL	RUT	WAS	WHM	WSR	UNK	
TRANSPORT ACCIDENTS	5	7	5	13	3	7	1	1	8	7	7	11	6	10	0	91
MOTOR VEHICLE ACCIDENTS	5	7	5	10	3	7	1	1	6	7	5	11	5	8	0	81
OTHER LAND TRANSPORT ACCIDENTS WATER, AIR AND SPACE AND OTHER AND UNSPECIFIED TRANSPORT ACCIDENTS AND THEIR SEQUELAE	0	0	0	1	0	0	0	0	1	0	0	0	0	1	0	3
NONTRANSPORT ACCIDENTS	12	19	13	75	6	23	2	6	11	11	40	25	26	32	0	301
FALLS	9	11	6	35	3	7	0	3	3	5	23	10	10	12	0	137
ACCIDENTAL DISCHARGE OF FIREARMS	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
ACCIDENTAL DROWNING AND SUBMERSION	0	0	0	3	1	0	0	0	0	0	1	1	0	0	0	6
ACCIDENTAL EXPOSURE TO SMOKE, FIRE AND FLAMES	0	1	0	0	0	0	2	0	2	0	0	0	1	0	0	6
ACCIDENTAL POISONING AND EXPOSURE TO NOXIOUS SUBSTANCES	1	5	5	35	0	10	0	3	5	3	12	12	15	13	0	119
OTHER AND UNSPECIFIED NONTRANSPORT ACCIDENTS AND THEIR SEQUELAE	2	2	2	2	2	6	0	0	1	2	4	2	0	7	0	32
INTENTIONAL SELF-HARM (SUICIDE)	1	10	12	18	2	14	0	6	6	7	10	3	12	11	0	112
INTENTIONAL SELF-HARM (SUICIDE) BY DISCHARGE OF FIREARMS	1	8	7	10	2	4	0	3	4	5	6	3	5	4	0	62
INTENTIONAL SELF-HARM (SUICIDE) BY OTHER AND UNSPECIFIED MEANS AND THEIR SEQUELAE	0	2	5	8	0	10	0	3	2	2	4	0	7	7	0	50
ASSAULT (HOMICIDE)	0	1	0	2	3	2	0	0	0	0	2	2	2	1	0	15
ASSAULT (HOMICIDE) BY DISCHARGE OF FIREARMS	0	0	0	0	2	1	0	0	0	0	1	1	1	1	0	7
ASSAULT (HOMICIDE) BY OTHER AND UNSPECIFIED MEANS AND THEIR SEQUELAE	0	1	0	2	1	1	0	0	0	0	1	1	1	0	0	8
LEGAL INTERVENTION	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
EVENTS OF UNDETERMINED INTENT	1	1	0	3	0	0	2	0	0	0	1	0	0	0	0	8
DISCHARGE OF FIREARMS, UNDETERMINED INTENT	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
OTHER AND UNSPECIFIED EVENTS OF UNDETERMINED INTENT AND THEIR SEQUELAE	1	1	0	3	0	0	2	0	0	0	1	0	0	0	0	8
OPERATIONS OF WAR AND THEIR SEQUELAE	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
COMPLICATIONS OF MEDICAL AND SURGICAL CARE	0	0	1	4	0	4	1	0	0	0	1	2	0	0	0	13
ALL CAUSES	306	476	306	1149	85	451	66	214	271	317	733	562	472	601	1	6010

⁽¹⁾ SEE APPENDIX C FOR COMPLETE CAUSE DEFINITIONS AND CODES.

2017 VERMONT RESIDENT DEATHS

AGE-ADJUSTED DEATH RATES PER 100,000 POPULATION

COUNTY OF RESIDENCE BY 113 SELECTED CAUSES OF DEATH

CAUSE OF DEATH ⁽¹⁾	AGE-ADJUSTED DEATH RATES ⁽²⁾														TOTAL
	ADD	BEN	CAL	CHT	ESX	FRA	GI	LAM	ORG	ORL	RUT	WAS	WHM	WSR	
SALMONELLA INFECTIONS	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
SHIGELLOSIS AND AMEBIASIS	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
CERTAIN OTHER INTESTINAL INFECTIONS	0.0	0.0	6.6	0.8	0.0	2.7	0.0	0.0	3.3	0.0	3.0	1.7	0.0	6.3	1.9
TUBERCULOSIS	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
RESPIRATORY TUBERCULOSIS	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
OTHER TUBERCULOSIS	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
WHOOPING COUGH	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
SCARLET FEVER AND ERYSIPELAS	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
MENINGOCOCCAL INFECTION	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
SEPTICEMIA	5.5	8.5	3.2	4.4	12.7	2.4	0.0	4.4	6.1	3.7	6.1	5.1	1.9	10.8	5.5
SYPHILIS	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
ACUTE POLIOMYELITIS	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
ARTHROPOD-BORNE VIRAL ENCEPHALITIS	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
MEASLES	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
VIRAL HEPATITIS	0.0	0.0	3.2	2.2	12.0	4.8	0.0	7.9	3.1	0.0	4.8	0.0	0.0	4.8	2.6
HUMAN IMMUNODEFICIENCY VIRUS (HIV) DISEASE	0.0	0.0	3.2	0.7	0.0	0.0	0.0	0.0	0.0	0.0	3.2	0.0	0.0	0.0	0.6
MALARIA	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
OTHER AND UNSPECIFIED INFECTIOUS AND PARASITIC DISEASES AND THEIR SEQUELAE	2.9	4.8	3.4	5.7	0.0	0.0	0.0	4.2	10.5	0.0	0.0	3.4	0.0	6.1	3.5
MALIGNANT NEOPLASMS	187.8	230.9	219.8	207.6	253.0	271.0	326.7	235.2	262.6	216.7	263.6	202.6	238.4	239.2	229.9
OF LIP, ORAL CAVITY, AND PHARYNX	2.6	5.1	0.0	0.0	0.0	7.0	0.0	8.8	3.3	0.0	2.9	5.1	1.9	1.5	2.6
OF ESOPHAGUS	8.2	21.4	3.2	6.2	0.0	4.6	11.5	21.0	10.9	0.0	12.1	1.7	5.9	7.7	7.9
OF STOMACH	0.0	2.6	3.2	4.5	0.0	5.2	22.9	4.4	0.0	0.0	1.5	6.8	6.3	3.2	3.7
OF COLON, RECTUM AND ANUS	16.4	13.0	25.6	20.7	28.7	27.7	15.1	8.7	19.0	22.8	25.7	15.0	24.7	21.1	20.7
OF LIVER AND INTRAHEPATIC BILE DUCTS	5.3	7.7	6.2	7.3	0.0	5.2	11.5	0.0	11.1	0.0	12.2	8.4	8.8	12.6	7.7
OF PANCREAS	10.7	20.9	25.2	14.3	25.9	9.6	15.1	0.0	16.2	20.6	12.0	17.0	26.5	20.1	16.2
OF LARYNX	0.0	4.8	0.0	0.0	0.0	0.0	0.0	4.4	0.0	0.0	0.0	0.0	0.0	0.0	0.5
OF TRACHEA, BRONCHUS AND LUNG	51.1	42.2	47.4	49.3	86.5	119.1	111.2	48.3	54.0	62.5	68.0	45.7	44.8	54.1	57.1
OF SKIN	5.4	0.0	0.0	3.6	0.0	4.8	0.0	8.6	7.8	0.0	1.5	0.0	0.0	4.6	2.7
OF BREAST	2.6	8.1	6.7	11.3	12.7	14.0	23.2	31.0	22.9	13.2	10.9	18.6	16.8	10.5	13.0
OF CERVIX UTERI	0.0	0.0	3.3	0.0	0.0	0.0	15.1	0.0	0.0	3.7	0.0	0.0	0.0	1.5	0.6
OF CORPUS UTERI AND UTERUS, PART UNSPECIFIED	0.0	7.3	6.0	6.2	0.0	2.4	11.7	13.0	6.1	0.0	2.9	1.7	6.0	6.2	4.8
OF OVARY	2.9	5.2	13.1	5.5	0.0	0.0	0.0	8.7	0.0	6.3	1.6	3.3	6.2	6.1	4.5
OF PROSTATE	14.4	11.1	15.4	7.2	0.0	9.7	38.0	9.3	13.3	6.4	7.4	6.7	22.6	15.9	11.2
OF KIDNEY AND RENAL PELVIS	2.7	7.4	6.2	4.9	11.5	4.8	0.0	0.0	3.3	6.3	9.0	10.2	6.1	5.0	5.9
OF BLADDER	2.7	9.7	6.4	6.5	24.2	2.1	0.0	8.6	3.9	0.0	10.7	5.1	6.5	7.4	6.4
OF MENINGES, BRAIN AND OTHER PARTS OF CENTRAL NERVOUS SYSTEM	2.7	13.0	15.8	11.4	13.9	3.7	0.0	13.0	13.7	13.7	6.3	11.7	6.6	9.4	9.8

2017 VERMONT RESIDENT DEATHS

AGE-ADJUSTED DEATH RATES PER 100,000 POPULATION

COUNTY OF RESIDENCE BY 113 SELECTED CAUSES OF DEATH

CAUSE OF DEATH ⁽¹⁾	AGE-ADJUSTED DEATH RATES ⁽²⁾														
	ADD	BEN	CAL	CHT	ESX	FRA	GI	LAM	ORG	ORL	RUT	WAS	WHM	WSR	TOTAL
OF LYMPHOID, HEMATOPOIETIC AND RELATED TISSUE	19.3	17.4	9.9	20.7	11.5	13.5	24.9	17.2	27.3	22.2	25.8	11.8	18.5	18.2	18.9
HODGKIN'S DISEASE	0.0	0.0	0.0	0.7	0.0	0.0	0.0	4.2	0.0	0.0	0.0	0.0	0.0	0.0	0.3
NON-HODGKIN'S LYMPHOMA	5.5	6.0	3.4	7.9	0.0	6.8	0.0	8.7	12.9	6.4	7.5	5.0	6.6	7.5	7.1
LEUKEMIA	8.2	4.0	3.2	8.2	0.0	4.3	24.9	0.0	10.4	9.5	16.7	5.1	9.8	7.7	8.0
MULTIPLE MYELOMA AND IMMUNOPROLIFERATIVE NEOPLASMS	5.6	7.4	3.4	3.9	11.5	2.4	0.0	4.3	3.9	3.1	1.6	1.7	2.1	3.0	3.4
ALL OTHER AND UNSPECIFIED MALIGNANT NEOPLASMS OF															
LYMPHOID, HEMATOPOIETIC AND RELATED TISSUE	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	3.2	0.0	0.0	0.0	0.0	0.2
ALL OTHER AND UNSPECIFIED MALIGNANT NEOPLASMS	40.8	34.2	26.2	28.0	38.2	37.7	26.6	30.2	49.7	39.1	53.0	33.9	30.1	34.2	35.8
IN SITU NEOPLASMS, BENIGN NEOPLASMS AND NEOPLASMS OF															
UNCERTAIN OR UNKNOWN BEHAVIOR	8.4	9.1	6.4	5.3	0.0	12.4	11.5	5.0	4.2	10.0	7.6	17.0	4.1	1.5	7.2
ANEMIAS	0.0	2.0	0.0	1.5	0.0	2.7	0.0	0.0	0.0	0.0	0.0	0.0	2.1	3.2	1.1
DIABETES MELLITUS	16.3	39.4	29.3	23.3	0.0	23.3	15.1	46.0	16.7	45.3	22.7	20.3	31.2	26.1	26.1
NUTRITIONAL DEFICIENCIES	0.0	0.0	0.0	0.0	0.0	2.7	0.0	0.0	3.1	3.2	4.5	0.0	0.0	1.6	1.1
MALNUTRITION	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	3.1	3.2	4.5	0.0	0.0	1.6	1.0
OTHER NUTRITIONAL DEFICIENCIES	0.0	0.0	0.0	0.0	0.0	2.7	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.2
MENINGITIS	0.0	0.0	0.0	0.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.5	0.3
PARKINSON'S DISEASE	8.7	12.7	12.9	10.4	12.0	12.7	24.9	9.3	11.1	22.2	15.0	11.8	16.6	15.2	13.0
ALZHEIMER'S DISEASE	36.6	80.7	59.4	60.0	38.1	54.4	55.1	46.6	56.2	76.1	70.7	82.7	22.2	54.3	59.3
MAJOR CARDIOVASCULAR DISEASES	282.2	286.7	287.3	229.6	224.5	305.7	204.3	272.3	259.4	270.6	350.5	288.8	277.0	272.8	274.5
DISEASES OF HEART	207.1	240.9	219.0	175.7	175.0	260.3	124.3	180.0	198.4	216.2	277.4	221.2	222.1	212.2	213.7
ACUTE RHEUMATIC FEVER AND CHRONIC RHEUMATIC HEART															
DISEASES	8.4	4.6	0.0	2.3	0.0	2.5	24.9	0.0	0.0	0.0	1.5	1.7	4.1	4.7	2.7
HYPERTENSIVE HEART DISEASE	17.3	14.6	41.9	17.5	13.9	33.1	13.1	18.0	14.2	19.5	18.1	18.6	18.5	20.4	19.9
HYPERTENSIVE HEART AND RENAL DISEASE	11.2	0.0	0.0	6.5	0.0	4.5	0.0	0.0	0.0	3.2	4.5	3.4	2.1	1.5	3.7
ISCHEMIC HEART DISEASES	107.9	160.5	145.2	116.1	149.1	174.3	38.6	129.1	122.9	148.1	158.7	150.4	141.6	131.0	136.3
ACUTE MYOCARDIAL INFARCTION	22.9	18.8	29.1	21.9	24.7	49.6	23.5	41.5	21.7	38.1	27.3	33.9	33.0	20.7	27.7
OTHER ACUTE ISCHEMIC HEART DISEASES	0.0	0.0	0.0	0.7	0.0	0.0	0.0	0.0	3.1	3.1	0.0	0.0	4.1	0.0	0.8
OTHER FORMS OF CHRONIC ISCHEMIC HEART DISEASE	85.0	141.7	116.0	93.5	124.4	124.7	15.1	87.7	98.2	106.8	131.4	116.5	104.5	110.3	107.8
ATHEROSCLEROTIC CARDIOVASCULAR DISEASE, SO															
DESCRIBED	48.0	87.5	57.1	49.6	88.2	54.9	15.1	31.6	55.4	59.2	81.9	64.2	42.9	62.3	58.4
ALL OTHER FORMS OF CHRONIC ISCHEMIC HEART DISEASE	37.1	54.2	58.9	43.9	36.1	69.8	0.0	56.1	42.8	47.6	49.5	52.3	61.6	48.0	49.4
OTHER HEART DISEASES	62.3	61.2	31.9	33.2	12.0	45.9	47.8	32.9	61.3	45.4	94.6	47.2	55.9	54.6	51.1
ACUTE AND SUBACUTE ENDOCARDITIS	2.7	2.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.5
DISEASES OF PERICARDIUM AND ACUTE MYOCARDITIS	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
HEART FAILURE	11.6	6.5	3.0	5.6	0.0	7.8	0.0	0.0	14.8	3.2	7.5	11.8	10.7	9.3	7.5
ALL OTHER FORMS OF HEART DISEASE	48.0	52.7	28.9	27.6	12.0	38.1	47.8	32.9	46.4	42.2	87.1	35.4	45.2	45.4	43.1
ESSENTIAL HYPERTENSION AND HYPERTENSIVE RENAL															
DISEASE	10.9	13.0	16.3	10.7	35.6	9.7	24.9	28.0	11.1	22.2	4.6	16.9	12.1	9.6	12.7
CEREBROVASCULAR DISEASES	58.6	30.2	39.1	37.1	0.0	25.4	39.9	60.1	46.6	29.1	53.0	38.9	34.7	42.9	39.9
ATHEROSCLEROSIS	0.0	0.0	0.0	0.8	0.0	0.0	0.0	4.2	0.0	0.0	0.0	0.0	2.0	1.6	0.6
OTHER DISEASES OF CIRCULATORY SYSTEM	5.5	2.5	12.9	5.3	13.9	10.3	15.1	0.0	3.4	3.2	15.5	11.9	6.0	6.5	7.5
AORTIC ANEURYSM AND DISSECTION	2.6	2.5	6.6	3.9	13.9	7.8	15.1	0.0	0.0	3.2	12.5	11.9	1.9	1.6	5.3
OTHER DISEASES OF ARTERIES, ARTERIOLES AND CAPILLARIES	2.9	0.0	6.4	1.4	0.0	2.5	0.0	0.0	3.4	0.0	3.0	0.0	4.1	4.9	2.2
OTHER DISORDERS OF THE CIRCULATORY SYSTEM	2.7	2.8	0.0	1.6	12.7	0.0	0.0	9.4	0.0	0.0	1.5	3.4	0.0	0.0	1.6

2017 VERMONT RESIDENT DEATHS

AGE-ADJUSTED DEATH RATES PER 100,000 POPULATION

COUNTY OF RESIDENCE BY 113 SELECTED CAUSES OF DEATH

CAUSE OF DEATH ⁽¹⁾	AGE-ADJUSTED DEATH RATES ⁽²⁾														
	ADD	BEN	CAL	CHT	ESX	FRA	GI	LAM	ORG	ORL	RUT	WAS	WHM	WSR	TOTAL
INFLUENZA AND PNEUMONIA	22.5	14.4	26.1	10.9	12.7	8.1	0.0	19.9	33.0	12.7	10.5	16.8	10.2	9.2	13.9
INFLUENZA	2.7	0.0	3.4	2.9	0.0	0.0	0.0	10.0	3.3	3.2	4.5	0.0	0.0	4.6	2.6
PNEUMONIA	19.8	14.4	22.7	8.0	12.7	8.1	0.0	10.0	29.7	9.5	6.0	16.8	10.2	4.6	11.4
OTHER AND UNSPECIFIED ACUTE LOWER RESPIRATORY INFECTIONS	0.0	0.0	0.0	0.7	0.0	0.0	0.0	0.0	0.0	0.0	3.4	0.0	0.0	0.0	0.5
ACUTE BRONCHITIS AND BRONCHIOLITIS	0.0	0.0	0.0	0.7	0.0	0.0	0.0	0.0	0.0	0.0	3.4	0.0	0.0	0.0	0.5
UNSPECIFIED ACUTE LOWER RESPIRATORY INFECTION	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
CHRONIC LOWER RESPIRATORY DISEASES	57.7	90.2	54.1	52.0	106.8	83.3	95.6	40.1	47.5	48.6	55.6	57.9	90.7	41.0	60.1
BRONCHITIS, CHRONIC AND UNSPECIFIED	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.9	0.0	0.0	0.2
EMPHYSEMA	0.0	11.4	9.5	10.4	11.5	9.2	0.0	9.2	6.6	9.5	3.0	10.2	12.6	3.1	8.0
ASTHMA	2.7	0.0	3.2	0.8	0.0	3.8	0.0	0.0	0.0	0.0	1.5	5.2	2.1	1.5	1.8
OTHER CHRONIC LOWER RESPIRATORY DISEASES	55.0	78.8	41.4	40.8	95.4	70.3	95.6	30.9	40.9	39.1	51.0	40.6	76.0	36.4	50.2
PNEUMOCONIOSES AND CHEMICAL EFFECTS	2.9	0.0	0.0	0.8	0.0	0.0	0.0	0.0	0.0	0.0	1.5	0.0	0.0	0.0	0.5
PNEUMONITIS DUE TO SOLIDS AND LIQUIDS	5.6	0.0	3.4	3.1	0.0	7.9	0.0	0.0	7.2	0.0	9.1	8.4	2.0	6.1	4.5
OTHER DISEASES OF RESPIRATORY SYSTEM	13.9	8.4	9.4	10.5	36.1	7.6	0.0	12.7	3.3	32.7	19.6	8.4	10.0	10.4	12.2
PEPTIC ULCER	0.0	0.0	3.4	3.0	0.0	2.5	11.5	4.2	0.0	0.0	0.0	0.0	4.1	4.7	2.1
DISEASES OF APPENDIX	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
HERNIA	0.0	2.8	0.0	1.4	0.0	0.0	0.0	0.0	0.0	3.2	1.5	0.0	2.1	3.3	1.3
CHRONIC LIVER DISEASE AND CIRRHOSIS	0.0	20.5	3.2	10.2	0.0	4.9	23.2	28.9	6.2	20.5	17.5	11.8	10.5	9.6	11.4
ALCOHOLIC LIVER DISEASE	0.0	18.2	3.2	8.8	0.0	2.4	11.5	20.8	3.1	13.7	13.0	8.4	8.4	8.0	8.7
OTHER CHRONIC LIVER DISEASE AND CIRRHOSIS	0.0	2.2	0.0	1.4	0.0	2.5	11.7	8.1	3.1	6.8	4.5	3.4	2.1	1.6	2.7
CHOLELITHIASIS AND OTHER DISORDERS OF GALLBLADDER	0.0	2.2	0.0	5.4	0.0	2.5	0.0	0.0	0.0	0.0	3.0	6.8	2.1	1.6	2.7
NEPHRITIS, NEPHROTIC SYNDROME AND NEPHROSIS	5.6	8.6	0.0	1.5	11.5	2.4	0.0	0.0	6.1	3.2	13.7	6.7	2.1	3.3	4.6
ACUTE AND RAPIDLY PROGRESSIVE NEPHRITIC AND NEPHROTIC SYNDROME	0.0	2.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.5	0.0	0.0	0.0	0.3
CHRONIC GLOMERULONEPHRITIS, NEPHRITIS AND NEPHROPATHY NOT SPECIFIED AS ACUTE OR CHRONIC, AND RENAL SCLEROSIS UNSPECIFIED	0.0	0.0	0.0	0.8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.2
RENAL FAILURE	5.6	6.6	0.0	0.7	11.5	2.4	0.0	0.0	6.1	3.2	12.2	6.7	2.1	3.3	4.2
OTHER DISORDERS OF KIDNEY	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
INFECTIONS OF KIDNEY	0.0	0.0	0.0	0.0	0.0	2.7	0.0	0.0	0.0	0.0	0.0	0.0	2.0	0.0	0.3
HYPERPLASIA OF PROSTATE	0.0	6.6	3.4	0.7	0.0	2.7	0.0	0.0	0.0	0.0	1.5	1.7	0.0	0.0	1.3
INFLAMMATORY DISEASES OF FEMALE PELVIC ORGANS	0.0	0.0	0.0	0.8	0.0	0.0	0.0	0.0	3.3	0.0	0.0	0.0	0.0	0.0	0.3
PREGNANCY, CHILDBIRTH, AND THE PUERPERIUM	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.8	0.0	0.0	0.0	0.2
PREGNANCY WITH ABORTIVE OUTCOME	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
OTHER COMPLICATIONS OF PREGNANCY, CHILDBIRTH AND THE PUERPERIUM	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.8	0.0	0.0	0.0	0.2
CERTAIN CONDITIONS ORIGINATING IN THE PERINATAL PERIOD	0.0	5.6	0.0	4.1	0.0	0.0	0.0	0.0	3.7	0.0	5.7	3.5	5.0	4.0	3.0
CONGENITAL MALFORMATIONS, DEFORMATIONS AND CHROMOSOMAL ABNORMALITIES	0.0	2.6	3.4	2.0	0.0	7.0	11.7	3.8	0.0	3.7	6.7	5.1	4.5	0.0	3.2
SYMPTOMS, SIGNS AND ABNORMAL CLINICAL AND LABORATORY FINDINGS, NOT ELSEWHERE CLASSIFIED	2.9	2.6	9.7	5.4	12.7	4.6	24.9	0.0	0.0	7.6	4.9	0.0	7.9	4.8	4.6
ALL OTHER DISEASES (RESIDUAL)	134.9	158.4	136.2	96.6	157.0	145.2	143.4	154.9	101.2	168.7	111.9	113.5	129.2	107.6	121.7
ACCIDENTS (UNINTENTIONAL INJURIES)	47.7	66.9	59.2	56.3	131.0	65.0	56.7	29.5	67.5	67.1	75.8	61.5	74.1	74.9	62.9
TRANSPORT ACCIDENTS	14.3	20.0	16.4	7.8	46.9	13.0	20.1	4.2	27.0	28.4	11.4	19.0	13.0	18.9	14.6

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CAUSE OF DEATH ⁽¹⁾	AGE-ADJUSTED DEATH RATES ⁽²⁾														
	ADD	BEN	CAL	CHT	ESX	FRA	GI	LAM	ORG	ORL	RUT	WAS	WHM	WSR	TOTAL
MOTOR VEHICLE ACCIDENTS	14.3	20.0	16.4	5.5	46.9	13.0	20.1	4.2	20.8	28.4	8.3	19.0	10.5	14.9	13.0
OTHER LAND TRANSPORT ACCIDENTS WATER, AIR AND SPACE AND OTHER AND UNSPECIFIED	0.0	0.0	0.0	0.8	0.0	0.0	0.0	0.0	3.1	0.0	0.0	0.0	0.0	2.6	0.5
TRANSPORT ACCIDENTS AND THEIR SEQUELAE	0.0	0.0	0.0	1.5	0.0	0.0	0.0	0.0	3.1	0.0	3.1	0.0	2.5	1.5	1.1
NONTRANSPORT ACCIDENTS	33.4	47.0	42.7	48.5	84.1	52.0	36.6	25.3	40.5	38.7	64.4	42.5	61.2	56.0	48.3
FALLS	25.8	25.7	19.8	24.8	36.9	17.6	0.0	14.3	10.5	15.8	35.2	16.8	20.7	18.4	22.0
ACCIDENTAL DISCHARGE OF FIREARMS	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	3.7	0.0	0.0	0.0	0.0	0.2
ACCIDENTAL DROWNING AND SUBMERSION	0.0	0.0	0.0	1.8	23.3	0.0	0.0	0.0	0.0	0.0	1.6	1.7	0.0	0.0	1.0
ACCIDENTAL EXPOSURE TO SMOKE, FIRE AND FLAMES	0.0	2.2	0.0	0.0	0.0	0.0	36.6	0.0	7.4	0.0	0.0	0.0	2.5	0.0	1.0
ACCIDENTAL POISONING AND EXPOSURE TO NOXIOUS SUBSTANCES	2.2	15.1	16.7	20.7	0.0	21.1	0.0	11.1	19.3	12.6	21.4	20.5	38.0	26.4	19.1
OTHER AND UNSPECIFIED NONTRANSPORT ACCIDENTS AND THEIR SEQUELAE	5.3	4.0	6.3	1.3	23.9	13.4	0.0	0.0	3.4	6.6	6.2	3.4	0.0	11.2	5.1
INTENTIONAL SELF-HARM (SUICIDE)	2.7	29.6	40.5	11.4	45.9	28.6	0.0	22.9	20.8	27.3	17.8	5.3	27.9	20.4	18.0
INTENTIONAL SELF-HARM (SUICIDE) BY DISCHARGE OF FIREARMS	2.7	24.2	23.2	6.4	45.9	8.1	0.0	11.1	14.4	18.9	10.6	5.3	12.1	7.2	9.9
INTENTIONAL SELF-HARM (SUICIDE) BY OTHER AND UNSPECIFIED MEANS AND THEIR SEQUELAE	0.0	5.4	17.3	5.0	0.0	20.5	0.0	11.8	6.4	8.4	7.2	0.0	15.8	13.2	8.0
ASSAULT (HOMICIDE)	0.0	2.2	0.0	1.1	48.9	4.0	0.0	0.0	0.0	0.0	3.4	3.5	4.4	1.9	2.4
ASSAULT (HOMICIDE) BY DISCHARGE OF FIREARMS	0.0	0.0	0.0	0.0	37.4	2.1	0.0	0.0	0.0	0.0	1.8	1.8	2.5	1.9	1.1
ASSAULT (HOMICIDE) BY OTHER AND UNSPECIFIED MEANS AND THEIR SEQUELAE	0.0	2.2	0.0	1.1	11.5	1.9	0.0	0.0	0.0	0.0	1.6	1.7	1.9	0.0	1.3
LEGAL INTERVENTION	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
EVENTS OF UNDETERMINED INTENT	2.7	3.1	0.0	1.9	0.0	0.0	30.2	0.0	0.0	0.0	1.6	0.0	0.0	0.0	1.3
DISCHARGE OF FIREARMS, UNDETERMINED INTENT	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
OTHER AND UNSPECIFIED EVENTS OF UNDETERMINED INTENT AND THEIR SEQUELAE	2.7	3.1	0.0	1.9	0.0	0.0	30.2	0.0	0.0	0.0	1.6	0.0	0.0	0.0	1.3
OPERATIONS OF WAR AND THEIR SEQUELAE	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
COMPLICATIONS OF MEDICAL AND SURGICAL CARE	0.0	0.0	3.2	3.1	0.0	9.2	13.1	0.0	0.0	0.0	1.5	3.4	0.0	0.0	2.1
ALL CAUSES	850.2	1102.2	989.5	836.4	1127.7	1083.0	1047.7	957.3	936.0	1043.1	1121.2	951.0	982.5	946.1	963.5

⁽¹⁾ SEE APPENDIX C FOR COMPLETE CAUSE DEFINITIONS AND CODES.⁽²⁾ COUNTY RATES ARE AGE-ADJUSTED TO THE 2017 VERMONT POPULATION.

TABLE C-14 - PAGE 1
2017 VERMONT RESIDENT DEATHS

CAUSE OF DEATH ⁽¹⁾	AGE AT DEATH BY 113 SELECTED CAUSES OF DEATH											TOTAL	
	<1	1-4	5-14	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85+		UNK
SALMONELLA INFECTIONS	0	0	0	0	0	0	0	0	0	0	0	0	0
SHIGELLOSIS AND AMEBIASIS	0	0	0	0	0	0	0	0	0	0	0	0	0
CERTAIN OTHER INTESTINAL INFECTIONS	0	0	0	0	0	0	0	0	0	1	3	8	12
TUBERCULOSIS	0	0	0	0	0	0	0	0	0	0	0	0	0
RESPIRATORY TUBERCULOSIS	0	0	0	0	0	0	0	0	0	0	0	0	0
OTHER TUBERCULOSIS	0	0	0	0	0	0	0	0	0	0	0	0	0
WHOOPING COUGH	0	0	0	0	0	0	0	0	0	0	0	0	0
SCARLET FEVER AND ERYSIPELAS	0	0	0	0	0	0	0	0	0	0	0	0	0
MENINGOCOCCAL INFECTION	0	0	0	0	0	0	0	0	0	0	0	0	0
SEPTICEMIA	0	0	0	0	0	1	0	7	10	4	12	0	34
SYPHILIS	0	0	0	0	0	0	0	0	0	0	0	0	0
ACUTE POLIOMYELITIS	0	0	0	0	0	0	0	0	0	0	0	0	0
ARTHROPOD-BORNE VIRAL ENCEPHALITIS	0	0	0	0	0	0	0	0	0	0	0	0	0
MEASLES	0	0	0	0	0	0	0	0	0	0	0	0	0
VIRAL HEPATITIS	0	0	0	0	0	2	1	6	6	0	1	0	16
HUMAN IMMUNODEFICIENCY VIRUS (HIV) DISEASE	0	0	0	0	0	0	1	2	0	1	0	0	4
MALARIA	0	0	0	0	0	0	0	0	0	0	0	0	0
OTHER AND UNSPECIFIED INFECTIOUS AND PARASITIC DISEASES AND THEIR SEQUELAE	0	0	0	0	1	0	0	2	4	7	8	0	22
MALIGNANT NEOPLASMS	0	1	2	2	5	21	83	258	417	374	271	0	1434
OF LIP, ORAL CAVITY, AND PHARYNX	0	0	0	0	0	0	1	2	10	3	0	0	16
OF ESOPHAGUS	0	0	0	0	0	0	2	10	15	16	6	0	49
OF STOMACH	0	0	0	0	0	0	0	6	5	9	3	0	23
OF COLON, RECTUM AND ANUS	0	0	0	0	1	6	12	25	33	28	24	0	129
OF LIVER AND INTRAHEPATIC BILE DUCTS	0	0	0	0	0	1	7	13	11	8	8	0	48
OF PANCREAS	0	0	0	0	0	0	1	19	37	27	17	0	101
OF LARYNX	0	0	0	0	0	0	0	0	2	1	0	0	3
OF TRACHEA, BRONCHUS AND LUNG	0	0	0	0	0	1	14	72	107	100	62	0	356
OF SKIN	0	0	0	0	0	0	2	2	2	4	7	0	17
OF BREAST	0	0	0	0	1	1	9	20	17	20	13	0	81
OF CERVIX UTERI	0	0	0	0	0	2	1	0	0	1	0	0	4
OF CORPUS UTERI AND UTERUS, PART UNSPECIFIED	0	0	0	0	0	1	0	4	18	6	1	0	30
OF OVARY	0	0	0	0	0	1	3	4	9	8	3	0	28
OF PROSTATE	0	0	0	0	0	0	2	7	15	21	25	0	70
OF KIDNEY AND RENAL PELVIS	0	1	0	0	0	1	1	8	11	11	4	0	37
OF BLADDER	0	0	0	0	0	0	3	6	8	9	14	0	40
OF MENINGES, BRAIN AND OTHER PARTS OF CENTRAL NERVOUS SYSTEM	0	0	1	1	1	4	5	19	15	12	3	0	61

TABLE C-14 - PAGE 2
2017 VERMONT RESIDENT DEATHS

CAUSE OF DEATH ⁽¹⁾	AGE AT DEATH BY 113 SELECTED CAUSES OF DEATH											UNK	TOTAL
	<1	1-4	5-14	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85+		
OF LYMPHOID, HEMATOPOIETIC AND RELATED TISSUE	0	0	0	0	1	0	8	10	32	31	36	0	118
HODGKIN'S DISEASE	0	0	0	0	0	0	0	2	0	0	0	0	2
NON-HODGKIN'S LYMPHOMA	0	0	0	0	0	0	4	2	8	15	15	0	44
LEUKEMIA	0	0	0	0	1	0	4	3	18	9	15	0	50
MULTIPLE MYELOMA AND IMMUNOPROLIFERATIVE NEOPLASMS	0	0	0	0	0	0	0	3	6	7	5	0	21
ALL OTHER AND UNSPECIFIED MALIGNANT NEOPLASMS OF													
LYMPHOID, HEMATOPOIETIC AND RELATED TISSUE	0	0	0	0	0	0	0	0	0	0	1	0	1
ALL OTHER AND UNSPECIFIED MALIGNANT NEOPLASMS	0	0	1	1	1	3	12	31	70	59	45	0	223
IN SITU NEOPLASMS, BENIGN NEOPLASMS AND NEOPLASMS OF													
UNCERTAIN OR UNKNOWN BEHAVIOR	0	0	0	1	0	0	1	4	12	13	14	0	45
ANEMIAS	0	0	0	0	0	0	1	0	1	1	4	0	7
DIABETES MELLITUS	0	0	0	1	2	3	6	20	35	48	48	0	163
NUTRITIONAL DEFICIENCIES	0	0	0	0	0	0	0	1	2	0	4	0	7
MALNUTRITION	0	0	0	0	0	0	0	1	2	0	3	0	6
OTHER NUTRITIONAL DEFICIENCIES	0	0	0	0	0	0	0	0	0	0	1	0	1
MENINGITIS	0	0	0	0	0	1	0	0	0	1	0	0	2
PARKINSON'S DISEASE	0	0	0	0	0	0	0	0	9	32	40	0	81
ALZHEIMER'S DISEASE	0	0	0	0	0	0	0	5	26	101	238	0	370
MAJOR CARDIOVASCULAR DISEASES	0	0	0	0	5	20	57	168	299	388	775	0	1712
DISEASES OF HEART	0	0	0	0	3	16	48	150	238	297	581	0	1333
ACUTE RHEUMATIC FEVER AND CHRONIC RHEUMATIC HEART													
DISEASES	0	0	0	0	0	0	0	2	2	5	8	0	17
HYPERTENSIVE HEART DISEASE	0	0	0	0	0	1	4	15	23	30	51	0	124
HYPERTENSIVE HEART AND RENAL DISEASE	0	0	0	0	0	1	0	3	2	5	12	0	23
ISCHEMIC HEART DISEASES	0	0	0	0	0	10	31	113	175	194	327	0	850
ACUTE MYOCARDIAL INFARCTION	0	0	0	0	0	5	7	24	23	34	80	0	173
OTHER ACUTE ISCHEMIC HEART DISEASES	0	0	0	0	0	0	1	1	1	1	1	0	5
OTHER FORMS OF CHRONIC ISCHEMIC HEART DISEASE	0	0	0	0	0	5	23	88	151	159	246	0	672
DESCRIBED	0	0	0	0	0	3	21	77	99	78	86	0	364
ALL OTHER FORMS OF CHRONIC ISCHEMIC HEART DISEASE	0	0	0	0	0	2	2	11	52	81	160	0	308
OTHER HEART DISEASES	0	0	0	0	3	4	13	17	36	63	183	0	319
ACUTE AND SUBACUTE ENDOCARDITIS	0	0	0	0	0	1	0	0	0	1	1	0	3
DISEASES OF PERICARDIUM AND ACUTE MYOCARDITIS	0	0	0	0	0	0	0	0	0	0	0	0	0
HEART FAILURE	0	0	0	0	1	0	0	1	5	5	35	0	47
ALL OTHER FORMS OF HEART DISEASE	0	0	0	0	2	3	13	16	31	57	147	0	269
ESSENTIAL HYPERTENSION AND HYPERTENSIVE RENAL													
DISEASE	0	0	0	0	0	0	2	4	10	21	42	0	79
CEREBROVASCULAR DISEASES	0	0	0	0	0	3	3	9	38	63	133	0	249
ATHEROSCLEROSIS	0	0	0	0	0	0	0	1	0	1	2	0	4
OTHER DISEASES OF CIRCULATORY SYSTEM	0	0	0	0	2	1	4	4	13	6	17	0	47
AORTIC ANEURYSM AND DISSECTION	0	0	0	0	2	1	2	3	10	5	10	0	33
OTHER DISEASES OF ARTERIES, ARTERIOLES AND CAPILLARIES	0	0	0	0	0	0	2	1	3	1	7	0	14
OTHER DISORDERS OF THE CIRCULATORY SYSTEM	0	0	0	0	0	0	1	1	1	3	4	0	10
INFLUENZA AND PNEUMONIA	0	0	0	0	0	1	1	6	8	13	58	0	87

TABLE C-14 - PAGE 3
2017 VERMONT RESIDENT DEATHS

CAUSE OF DEATH ⁽¹⁾	AGE AT DEATH BY 113 SELECTED CAUSES OF DEATH											UNK	TOTAL
	<1	1-4	5-14	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85+		
INFLUENZA	0	0	0	0	0	0	0	1	2	3	10	0	16
PNEUMONIA	0	0	0	0	0	1	1	5	6	10	48	0	71
OTHER AND UNSPECIFIED ACUTE LOWER RESPIRATORY INFECTIONS	1	0	0	0	0	0	0	0	1	0	1	0	3
ACUTE BRONCHITIS AND BRONCHIOLITIS	1	0	0	0	0	0	0	0	1	0	1	0	3
UNSPECIFIED ACUTE LOWER RESPIRATORY INFECTION	0	0	0	0	0	0	0	0	0	0	0	0	0
CHRONIC LOWER RESPIRATORY DISEASES	0	0	0	1	1	1	10	45	90	117	110	0	375
BRONCHITIS, CHRONIC AND UNSPECIFIED	0	0	0	1	0	0	0	0	0	0	0	0	1
EMPHYSEMA	0	0	0	0	0	0	3	11	8	14	14	0	50
ASTHMA	0	0	0	0	1	0	2	3	0	4	1	0	11
OTHER CHRONIC LOWER RESPIRATORY DISEASES	0	0	0	0	0	1	5	31	82	99	95	0	313
PNEUMOCONIOSES AND CHEMICAL EFFECTS	0	0	0	0	0	0	0	0	1	1	1	0	3
PNEUMONITIS DUE TO SOLIDS AND LIQUIDS	0	0	0	0	0	0	0	1	5	7	15	0	28
OTHER DISEASES OF RESPIRATORY SYSTEM	0	0	1	0	0	0	0	7	14	33	21	0	76
PEPTIC ULCER	0	0	0	0	0	0	0	3	1	3	6	0	13
DISEASES OF APPENDIX	0	0	0	0	0	0	0	0	0	0	0	0	0
HERNIA	0	0	0	0	0	0	2	1	0	2	3	0	8
CHRONIC LIVER DISEASE AND CIRRHOSIS	0	0	0	0	2	4	12	23	16	14	0	0	71
ALCOHOLIC LIVER DISEASE	0	0	0	0	2	4	10	18	15	5	0	0	54
OTHER CHRONIC LIVER DISEASE AND CIRRHOSIS	0	0	0	0	0	0	2	5	1	9	0	0	17
CHOLELITHIASIS AND OTHER DISORDERS OF GALLBLADDER	0	0	0	0	0	0	0	0	2	11	4	0	17
NEPHRITIS, NEPHROTIC SYNDROME AND NEPHROSIS	0	0	0	0	0	0	3	3	7	5	11	0	29
ACUTE AND RAPIDLY PROGRESSIVE NEPHRITIC AND NEPHROTIC SYNDROME	0	0	0	0	0	0	0	0	1	0	1	0	2
CHRONIC GLOMERULONEPHRITIS, NEPHRITIS AND NEPHROPATHY NOT SPECIFIED AS ACUTE OR CHRONIC, AND RENAL SCLEROSIS UNSPECIFIED	0	0	0	0	0	0	0	0	0	1	0	0	1
RENAL FAILURE	0	0	0	0	0	0	3	3	6	4	10	0	26
OTHER DISORDERS OF KIDNEY	0	0	0	0	0	0	0	0	0	0	0	0	0
INFECTIONS OF KIDNEY	0	0	0	0	0	0	0	0	0	0	2	0	2
HYPERPLASIA OF PROSTATE	0	0	0	0	0	0	0	1	0	1	6	0	8
INFLAMMATORY DISEASES OF FEMALE PELVIC ORGANS	0	0	0	0	0	0	0	0	0	2	0	0	2
PREGNANCY, CHILDBIRTH, AND THE PUERPERIUM	0	0	0	0	1	0	0	0	0	0	0	0	1
PREGNANCY WITH ABORTIVE OUTCOME	0	0	0	0	0	0	0	0	0	0	0	0	0
OTHER COMPLICATIONS OF PREGNANCY, CHILDBIRTH AND THE PUERPERIUM	0	0	0	0	1	0	0	0	0	0	0	0	1
CERTAIN CONDITIONS ORIGINATING IN THE PERINATAL PERIOD	19	0	0	0	0	0	0	0	0	0	0	0	19
CONGENITAL MALFORMATIONS, DEFORMATIONS AND CHROMOSOMAL ABNORMALITIES	2	1	0	1	1	0	3	7	3	1	1	0	20
SYMPTOMS, SIGNS AND ABNORMAL CLINICAL AND LABORATORY FINDINGS, NOT ELSEWHERE CLASSIFIED	3	0	0	0	1	0	0	3	3	1	18	0	29
ALL OTHER DISEASES (RESIDUAL)	1	1	0	1	6	12	35	77	111	180	335	1	760
ACCIDENTS (UNINTENTIONAL INJURIES)	1	1	4	33	50	43	51	40	34	36	99	0	392
TRANSPORT ACCIDENTS	0	0	1	14	11	10	21	14	11	6	3	0	91
MOTOR VEHICLE ACCIDENTS	0	0	1	13	11	9	19	12	8	5	3	0	81

TABLE C-14 - PAGE 4
2017 VERMONT RESIDENT DEATHS

CAUSE OF DEATH ⁽¹⁾	AGE AT DEATH BY 113 SELECTED CAUSES OF DEATH											TOTAL	
	<1	1-4	5-14	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85+		UNK
OTHER LAND TRANSPORT ACCIDENTS WATER, AIR AND SPACE AND OTHER AND UNSPECIFIED TRANSPORT ACCIDENTS AND THEIR SEQUELAE	0	0	0	1	0	0	0	1	1	0	0	0	3
NONTRANSPORT ACCIDENTS	1	1	3	19	39	33	30	26	23	30	96	0	301
FALLS	0	0	0	1	0	2	5	6	14	26	83	0	137
ACCIDENTAL DISCHARGE OF FIREARMS	0	0	0	0	0	0	0	1	0	0	0	0	1
ACCIDENTAL DROWNING AND SUBMERSION	0	1	1	2	0	0	1	1	0	0	0	0	6
ACCIDENTAL EXPOSURE TO SMOKE, FIRE AND FLAMES	0	0	1	0	1	0	0	1	0	1	2	0	6
ACCIDENTAL POISONING AND EXPOSURE TO NOXIOUS SUBSTANCES	0	0	0	16	36	30	20	14	1	0	2	0	119
OTHER AND UNSPECIFIED NONTRANSPORT ACCIDENTS AND THEIR SEQUELAE	1	0	1	0	2	1	4	3	8	3	9	0	32
INTENTIONAL SELF-HARM (SUICIDE)	0	0	0	14	20	25	22	15	10	2	4	0	112
INTENTIONAL SELF-HARM (SUICIDE) BY DISCHARGE OF FIREARMS INTENTIONAL SELF-HARM (SUICIDE) BY OTHER AND UNSPECIFIED MEANS AND THEIR SEQUELAE	0	0	0	7	12	14	13	6	4	2	4	0	62
ASSAULT (HOMICIDE)	0	0	0	7	8	11	9	9	6	0	0	0	50
ASSAULT (HOMICIDE) BY DISCHARGE OF FIREARMS ASSAULT (HOMICIDE) BY OTHER AND UNSPECIFIED MEANS AND THEIR SEQUELAE	0	0	0	0	4	3	2	3	1	2	0	0	15
LEGAL INTERVENTION	0	0	0	0	3	2	1	1	0	0	0	0	7
EVENTS OF UNDETERMINED INTENT	0	0	0	0	1	1	1	2	1	2	0	0	8
DISCHARGE OF FIREARMS, UNDETERMINED INTENT OTHER AND UNSPECIFIED EVENTS OF UNDETERMINED INTENT AND THEIR SEQUELAE	0	0	0	1	1	1	1	1	0	1	2	0	8
OPERATIONS OF WAR AND THEIR SEQUELAE	0	0	0	1	1	1	1	1	0	1	2	0	8
COMPLICATIONS OF MEDICAL AND SURGICAL CARE	0	0	0	0	0	0	0	0	0	0	0	0	0
ALL CAUSES	27	4	7	55	100	138	295	710	1135	1413	2125	1	6010

⁽¹⁾ SEE APPENDIX C FOR COMPLETE CAUSE DEFINITIONS AND CODES.

TABLE C-15

2017 VERMONT RESIDENT INJURY DEATHS

INJURY DEATHS BY MECHANISM, SEX, AND AGE GROUP

INJURY MECHANISM	SEX		AGE AT DEATH											UNK	TOTAL
	MALE	FEMALE	<1	1-4	5-14	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85+		
UNINTENTIONAL INJURY DEATHS	230	162	1	1	4	33	50	43	51	40	34	36	99	0	392
TOTAL TRANSPORT ACCIDENTS	66	25	0	0	1	14	11	10	21	14	11	6	3	0	91
MOTOR VEHICLE DRIVER	13	10	0	0	0	2	4	1	4	5	4	2	1	0	23
MOTOR VEHICLE OCCUPANT	7	5	0	0	0	2	1	3	1	1	1	2	1	0	12
PEDESTRIAN	7	3	0	0	0	0	0	0	5	3	2	0	0	0	10
MOTORCYCLIST	13	0	0	0	0	1	4	1	3	3	1	0	0	0	13
PEDAL CYCLIST	3	0	0	0	0	1	0	0	0	1	1	0	0	0	3
OFF-ROAD MOTOR VEHICLE	8	3	0	0	1	4	1	2	3	0	0	0	0	0	11
OTHER TRANSPORT ⁽¹⁾	15	4	0	0	0	4	1	3	5	1	2	2	1	0	19
TOTAL NONTRANSPORT ACCIDENTS	164	137	1	1	3	19	39	33	30	26	23	30	96	0	301
FALLS	59	78	0	0	0	1	0	2	5	6	14	26	83	0	137
JUMPING/DIVING INTO WATER	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
FIRE/BURNS	1	5	0	0	1	0	1	0	0	1	0	1	2	0	6
NATURAL/ENVIRONMENTAL ⁽²⁾	2	1	0	0	0	0	1	0	1	0	1	0	0	0	3
POISONING	82	37	0	0	0	16	36	30	20	14	1	0	2	0	119
FIREARMS	1	0	0	0	0	0	0	0	0	1	0	0	0	0	1
DROWNING	5	1	0	1	1	2	0	0	1	1	0	0	0	0	6
SUFFOCATION	4	9	1	0	0	0	1	1	1	2	1	1	5	0	13
EXPOSURE-OTHER ⁽³⁾	3	5	0	0	0	0	0	0	0	1	2	1	4	0	8
OTHER NONTRANSPORT ACCIDENTS	7	1	0	0	1	0	0	0	2	0	4	1	0	0	8
INTENTIONAL INJURY DEATHS	88	39	0	0	0	14	24	28	24	18	11	4	4	0	127
TOTAL SUICIDE	82	30	0	0	0	14	20	25	22	15	10	2	4	0	112
FIREARM	52	10	0	0	0	7	12	14	13	6	4	2	4	0	62
POISONING	8	8	0	0	0	0	0	5	2	4	5	0	0	0	16
OTHER SUICIDE	22	12	0	0	0	7	8	6	7	5	1	0	0	0	34
TOTAL HOMICIDE	6	9	0	0	0	0	4	3	2	3	1	2	0	0	15
FIREARM	4	3	0	0	0	0	3	2	1	1	0	0	0	0	7
SMOKE/FIRE/FLAMES	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CUT/PIERCE	2	3	0	0	0	0	1	1	1	0	0	2	0	0	5
SUFFOCATION/CHOKING	0	1	0	0	0	0	0	0	0	1	0	0	0	0	1
DROWNING/SUBMERSION	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
FALL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
OTHER HOMICIDE	0	2	0	0	0	0	0	0	0	1	1	0	0	0	2
UNDETERMINED INTENT	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
LEGAL INTERVENTION/WAR	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
COMPLICATIONS OF MEDICAL SURGICAL CARE	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTAL INJURY DEATHS	318	201	1	1	4	47	74	71	75	58	45	40	103	0	519

NOTES:

⁽¹⁾ INCLUDES WATER, AIR SPACE, ANIMAL, AGRICULTURAL, AND UNSPECIFIED VEHICLE TRANSPORT ACCIDENTS, AND SEQUELAE OF SUCH.

⁽²⁾ INCLUDES EXPOSURE TO EXCESSIVE NATURAL COLD, AND LACK OF FOOD OR WATER.

⁽³⁾ INCLUDES EXPOSURE TO OTHER UNSPECIFIED FACTORS.

TABLE C-16
2017 VERMONT RESIDENT UNINTENTIONAL INJURY DEATHS

AGE AT DEATH BY PLACE OF INJURY AND SEX

PLACE OF INJURY	TOTAL												TOTAL
	AGE AT DEATH												
	<1	1-4	5-14	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85+	UNK	
HOME	1	1	1	8	27	25	17	16	13	6	39	0	154
RESIDENTIAL INSTITUTION	0	0	0	0	0	1	0	1	2	12	34	0	50
SCHOOL, OTHER INSTITUTION, ADMIN AREA	0	0	0	0	0	0	0	0	0	0	1	0	1
SPORTS AND RECREATION AREA	0	0	0	0	0	0	0	0	1	0	0	0	1
STREET OR HIGHWAY	0	0	0	6	10	5	15	7	6	4	2	0	55
TRADE OR SERVICE AREA	0	0	0	0	1	1	1	1	0	0	2	0	6
INDUSTRIAL OR CONSTRUCTION AREA	0	0	0	0	0	1	1	0	0	0	0	0	2
FARM	0	0	1	0	0	0	0	0	0	0	0	0	1
OTHER SPECIFIED PLACE	0	0	2	7	2	5	4	2	2	1	3	0	28
UNSPECIFIED PLACE	0	0	0	12	10	5	13	13	10	13	18	0	94
TOTAL	1	1	4	33	50	43	51	40	34	36	99	0	392

PLACE OF INJURY	MALES												TOTAL
	AGE AT DEATH												
	<1	1-4	5-14	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85+	UNK	
HOME	0	1	1	8	17	17	9	10	7	3	18	0	91
RESIDENTIAL INSTITUTION	0	0	0	0	0	0	0	1	2	5	5	0	13
SCHOOL, OTHER INSTITUTION, ADMIN AREA	0	0	0	0	0	0	0	0	0	0	1	0	1
SPORTS AND RECREATION AREA	0	0	0	0	0	0	0	0	1	0	0	0	1
STREET OR HIGHWAY	0	0	0	5	8	4	9	4	4	1	2	0	37
TRADE OR SERVICE AREA	0	0	0	0	1	0	1	1	0	0	2	0	5
INDUSTRIAL OR CONSTRUCTION AREA	0	0	0	0	0	1	1	0	0	0	0	0	2
FARM	0	0	1	0	0	0	0	0	0	0	0	0	1
OTHER SPECIFIED PLACE	0	0	2	5	2	3	3	2	2	1	1	0	21
UNSPECIFIED PLACE	0	0	0	9	6	4	11	10	5	7	6	0	58
TOTAL	0	1	4	27	34	29	34	28	21	17	35	0	230

PLACE OF INJURY	FEMALES												TOTAL
	AGE AT DEATH												
	<1	1-4	5-14	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85+	UNK	
HOME	1	0	0	0	10	8	8	6	6	3	21	0	63
RESIDENTIAL INSTITUTION	0	0	0	0	0	1	0	0	0	7	29	0	37
SCHOOL, OTHER INSTITUTION, ADMIN AREA	0	0	0	0	0	0	0	0	0	0	0	0	0
SPORTS AND RECREATION AREA	0	0	0	0	0	0	0	0	0	0	0	0	0
STREET OR HIGHWAY	0	0	0	1	2	1	6	3	2	3	0	0	18
TRADE OR SERVICE AREA	0	0	0	0	0	1	0	0	0	0	0	0	1
INDUSTRIAL OR CONSTRUCTION AREA	0	0	0	0	0	0	0	0	0	0	0	0	0
FARM	0	0	0	0	0	0	0	0	0	0	0	0	0
OTHER SPECIFIED PLACE	0	0	0	2	0	2	1	0	0	0	2	0	7
UNSPECIFIED PLACE	0	0	0	3	4	1	2	3	5	6	12	0	36
TOTAL	1	0	0	6	16	14	17	12	13	19	64	0	162

TABLE C-17
2017 VERMONT DEATHS

PLACE OF DEATH ⁽¹⁾	COUNTY OF RESIDENCE BY PLACE OF DEATH																TOTAL
	COUNTY OF RESIDENCE																
	ADD	BEN	CAL	CHI	ESS	FRA	GI	LAM	ORG	ORL	RUT	WAS	WDM	WDR	O-O-S	UNK	
AT HOME ⁽²⁾	124	146	125	302	24	128	23	79	109	84	225	186	174	210	14	0	1953
RUTLAND REGIONAL MEDICAL CENTER	6	9	0	0	1	1	0	0	1	0	186	0	1	3	11	0	219
CENTRAL VERMONT MEDICAL CENTER	0	0	0	1	0	0	0	2	5	0	0	92	0	1	5	0	106
COPLEY HOSPITAL	0	0	5	0	0	0	0	40	0	6	0	0	0	0	1	0	52
GIFFORD MEDICAL CENTER	0	0	0	0	0	0	0	0	20	0	0	1	0	8	1	0	30
UNIVERSITY OF VERMONT MEDICAL CENTER	40	1	5	297	0	59	10	24	7	5	23	46	1	2	117	1	638
GRACE COTTAGE HOSPITAL	0	1	0	0	0	0	0	0	0	0	0	0	17	0	0	0	18
MOUNT ASCUTNEY HOSPITAL AND HEALTH CENTER	0	0	0	0	0	0	0	0	1	0	1	0	0	32	8	0	42
NORTH COUNTRY HOSPITAL AND HEALTH CENTER	0	0	0	0	6	0	0	0	0	80	0	0	0	0	0	0	86
NORTHEASTERN VERMONT REGIONAL HOSPITAL	0	0	40	0	3	1	0	0	0	3	0	0	0	0	3	0	50
NORTHWESTERN MEDICAL CENTER	0	0	0	3	0	76	6	1	0	0	0	0	0	0	1	0	87
PORTER MEDICAL CENTER	32	0	0	1	0	0	0	0	0	0	5	0	0	0	5	0	43
BRATTLEBORO MEMORIAL HOSPITAL	1	0	0	0	0	0	0	0	0	0	0	1	42	1	10	0	55
SPRINGFIELD HOSPITAL	0	0	0	0	0	0	0	0	1	0	1	0	8	28	8	0	46
SOUTHWESTERN VERMONT MEDICAL CENTER	0	66	0	0	0	2	0	0	0	0	0	0	3	0	39	0	110
VA MEDICAL CENTER	0	0	0	0	0	1	0	0	3	1	2	2	3	7	20	0	39
VERMONT STATE HOSPITAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
NURSING HOME/LONG TERM CARE FACILITY	74	178	77	263	17	129	11	51	53	92	218	177	126	181	68	0	1715
HOSPICE FACILITY	7	3	2	212	2	21	13	8	3	3	6	16	2	7	10	0	315
OTHER PLACES	18	20	18	52	10	23	3	6	13	16	33	20	18	25	66	0	341
OUT OF STATE HOSPITAL	4	52	34	18	22	10	0	3	55	27	33	21	77	96	0	0	452
UNKNOWN	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTAL	306	476	306	1149	85	451	66	214	271	317	733	562	472	601	387	1	6397

⁽¹⁾ SEE APPENDIX A FOR COMPLETE HOSPITAL NAMES AND LOCATIONS.

⁽²⁾ INCLUDES OUT OF STATE RESIDENTS WHO DIED AT A SEASONAL HOME.

TABLE C-18 - PAGE 1
2017 VERMONT RESIDENT DEATHS

INTERNATIONAL CLASSIFICATION OF DISEASES CODE (10th REVISION)		AGE AT DEATH BY CAUSE AND SEX																	UNK	TOTAL	
		SEX	AGE AT DEATH																		
			<1	1-4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-59	60-64	65-69	70-74	75-79	80-84	85+			
A047	ENTEROCOLITIS DUE TO CLOSTRIDIUM DIFFICILE	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	2	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	2	3	0	6
A084	VIRAL INTESTINAL INFECTION, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
A099	GASTROENTERITIS AND COLITIS OF UNSPECIFIED ORIGIN	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	2	0	3
A403	SEPTICEMIA DUE TO STREPTOCOCCUS PNEUMONIAE	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1
A409	STREPTOCOCCAL SEPTICEMIA, UNSPECIFIED	M	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
A419	SEPTICEMIA, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	2	2	4	1	1	2	6	0	18	
		F	0	0	0	0	0	0	0	0	0	1	2	1	3	0	0	6	0	13	
A481	LEGIONNAIRES' DISEASE	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
A490	STAPHYLOCOCCAL INFECTION, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	2
A491	STREPTOCOCCAL INFECTION, UNSPECIFIED	M	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	2
A810	CREUTZFELDT-JAKOB DISEASE	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
B169	ACUTE HEPATITIS B WITHOUT DELTA-AGENT AND WITHOUT HEPATIC COMA	M	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
B182	CHRONIC VIRAL HEPATITIS C	M	0	0	0	0	0	0	0	2	0	3	3	2	0	0	0	1	0	11	
		F	0	0	0	0	0	0	0	0	1	0	0	3	0	0	0	0	0	4	
B212	HIV DISEASE RESULTING IN OTHER TYPES OF NON-HODGKIN'S LYMPHOMA	M	0	0	0	0	0	0	0	0	0	1	1	0	0	1	0	0	0	3	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
B227	HIV DISEASE RESULTING IN MULTIPLE DISEASES CLASSIFIED ELSEWHERE	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1
B279	INFECTIOUS MONONUCLEOSIS, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1
B348	OTHER VIRAL INFECTIONS OF UNSPECIFIED SITE	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	3	
B349	VIRAL INFECTION, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	2	0	3	
B377	CANDIDAL SEPTICEMIA	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
B407	DISSEMINATED BLASTOMYCOSIS	M	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
B49	UNSPECIFIED MYCOSIS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	
B59	PNEUMOCYSTOSIS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1
B948	SEQUELAE OF OTHER SPECIFIED INFECTIOUS AND PARASITIC DISEASES	M	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1

TABLE C-18 - PAGE 2
2017 VERMONT RESIDENT DEATHS

INTERNATIONAL CLASSIFICATION OF DISEASES CODE (10th REVISION)		AGE AT DEATH BY CAUSE AND SEX																	TOTAL
		SEX	AGE AT DEATH																
		<1	1-4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	UNK	
C01	MALIGNANT NEOPLASM OF BASE OF TONGUE	M	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C029	MALIGNANT NEOPLASM OF TONGUE, UNSPECIFIED	M	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0	0	2
	F	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	2
C049	MALIGNANT NEOPLASM OF FLOOR OF MOUTH, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	F	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
C062	MALIGNANT NEOPLASM OF RETROMOLAR AREA	M	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C07	MALIGNANT NEOPLASM OF PAROTID GLAND	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1
C099	MALIGNANT NEOPLASM OF TONSIL, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	F	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
C109	MALIGNANT NEOPLASM OF OROPHARYNX, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	2
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C119	MALIGNANT NEOPLASM OF NASOPHARYNX, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	0	2
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C139	MALIGNANT NEOPLASM OF HYPOPHARYNX, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
	F	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
C140	MALIGNANT NEOPLASM OF PHARYNX, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C155	MALIGNANT NEOPLASM OF LOWER THIRD OF ESOPHAGUS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	2
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C159	MALIGNANT NEOPLASM OF ESOPHAGUS, UNSPECIFIED	M	0	0	0	0	0	0	0	2	2	3	8	5	11	3	3	0	37
	F	0	0	0	0	0	0	0	0	0	0	5	1	1	0	2	1	0	10
C160	MALIGNANT NEOPLASM OF CARDIA	M	0	0	0	0	0	0	0	0	0	2	0	2	0	1	0	0	5
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C169	MALIGNANT NEOPLASM OF STOMACH, UNSPECIFIED	M	0	0	0	0	0	0	0	0	2	0	0	2	3	1	2	0	10
	F	0	0	0	0	0	0	0	0	0	3	1	0	1	1	2	0	0	8
C170	MALIGNANT NEOPLASM OF DUODENUM	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	F	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
C180	MALIGNANT NEOPLASM OF CECUM	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	F	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	2
C181	MALIGNANT NEOPLASM OF APPENDIX	M	0	0	0	0	0	0	1	0	0	1	0	0	0	0	0	0	2
	F	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	0	0	2
C182	MALIGNANT NEOPLASM OF ASCENDING COLON	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
C184	MALIGNANT NEOPLASM OF TRANSVERSE COLON	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1
C186	MALIGNANT NEOPLASM OF DESCENDING COLON	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
C187	MALIGNANT NEOPLASM OF SIGMOID COLON	M	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	0	2
	F	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	3
C189	MALIGNANT NEOPLASM OF COLON, UNSPECIFIED	M	0	0	0	0	0	0	1	6	1	6	4	4	4	3	6	0	35
	F	0	0	0	0	0	0	1	2	2	2	1	4	6	5	6	7	0	36

TABLE C-18 - PAGE 3
2017 VERMONT RESIDENT DEATHS

INTERNATIONAL CLASSIFICATION OF DISEASES CODE (10th REVISION)		SEX	AGE AT DEATH																UNK	TOTAL
			<1	1-4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-59	60-64	65-69	70-74	75-79	80-84	85+		
C19	MALIGNANT NEOPLASM OF RECTOSIGMOID JUNCTION	M	0	0	0	0	0	0	0	0	0	0	0	0	3	0	2	1	0	6
		F	0	0	0	0	0	0	0	1	2	2	1	0	0	0	0	1	0	
C20	MALIGNANT NEOPLASM OF RECTUM	M	0	0	0	0	0	0	0	1	2	3	5	2	0	0	1	0	14	
		F	0	0	0	0	0	0	1	1	3	0	2	1	2	1	2	0		
C210	MALIGNANT NEOPLASM OF ANUS, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0		
C211	MALIGNANT NEOPLASM OF ANAL CANAL	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0		
C220	LIVER CELL CARCINOMA	M	0	0	0	0	0	0	1	3	4	6	4	1	2	2	0	0	23	
		F	0	0	0	0	0	0	0	1	0	0	2	1	0	1	1	0		
C221	INTRAHEPATIC BILE DUCT CARCINOMA	M	0	0	0	0	0	0	0	0	0	1	0	1	1	0	3	0	6	
		F	0	0	0	0	0	0	0	3	0	0	1	1	0	1	2	0		
C229	MALIGNANT NEOPLASM OF LIVER, UNSPECIFIED	M	0	0	0	0	0	0	0	0	1	1	0	0	1	0	0	0	3	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0		
C23	MALIGNANT NEOPLASM OF GALLBLADDER	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	0	0	1	3	0	0	0		
C249	MALIGNANT NEOPLASM OF BILIARY TRACT, UNSPECIFIED	M	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	0	2	
		F	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0		
C252	MALIGNANT NEOPLASM OF TAIL OF PANCREAS	M	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
C258	MALIGNANT NEOPLASM OF OVERLAPPING LESION OF PANCREAS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0		
C259	MALIGNANT NEOPLASM OF PANCREAS, UNSPECIFIED	M	0	0	0	0	0	0	0	1	5	6	10	5	7	6	8	0	48	
		F	0	0	0	0	0	0	0	0	1	6	8	14	7	6	9	0		
C260	MALIGNANT NEOPLASM OF INTESTINAL TRACT, PART UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0		
C269	MALIGNANT NEOPLASM OF ILL-DEFINED SITES WITHIN THE DIGESTIVE SYSTEM	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0		
C310	MALIGNANT NEOPLASM OF MAXILLARY SINUS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
C311	MALIGNANT NEOPLASM OF ETHMOIDAL SINUS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0		
C320	MALIGNANT NEOPLASM OF GLOTTIS	M	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
C329	MALIGNANT NEOPLASM OF LARYNX, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	2	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
C33	MALIGNANT NEOPLASM OF TRACHEA	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0		
C340	MALIGNANT NEOPLASM OF MAIN BRONCHUS	M	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
C341	MALIGNANT NEOPLASM OF UPPER LOBE, BRONCHUS OR LUNG	M	0	0	0	0	0	0	0	0	0	1	0	1	2	0	0	0	4	
		F	0	0	0	0	0	0	0	1	0	1	0	1	0	1	1	0		
C342	MALIGNANT NEOPLASM OF MIDDLE LOBE, BRONCHUS OR LUNG	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0		

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INTERNATIONAL CLASSIFICATION OF DISEASES CODE (10th REVISION)		SEX	AGE AT DEATH																UNK	TOTAL
			<1	1-4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-59	60-64	65-69	70-74	75-79	80-84	85+		
C343	MALIGNANT NEOPLASM OF LOWER LOBE, BRONCHUS OR LUNG	M	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	0	3
		F	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
C349	MALIGNANT NEOPLASM OF BRONCHUS OR LUNG, UNSPECIFIED	M	0	0	0	0	0	0	0	0	7	21	11	26	30	31	17	29	0	172
		F	0	0	0	0	0	0	0	1	6	11	25	26	21	27	20	31	0	168
C37	MALIGNANT NEOPLASM OF THYMUS	M	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
C380	MALIGNANT NEOPLASM OF HEART	M	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C383	MALIGNANT NEOPLASM OF MEDIASTINUM, PART UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1
C419	MALIGNANT NEOPLASM OF BONE AND ARTICULAR CARTILAGE, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	2
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C433	MALIGNANT MELANOMA OF OTHER AND UNSPECIFIED PARTS OF FACE	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	2
C434	MALIGNANT MELANOMA OF SCALP AND NECK	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
C439	MALIGNANT MELANOMA OF SKIN, UNSPECIFIED	M	0	0	0	0	0	0	0	0	1	1	1	1	0	1	1	3	0	9
		F	0	0	0	0	0	0	0	0	1	0	0	0	1	1	1	1	0	5
C443	MALIGNANT NEOPLASM OF SKIN OF OTHER AND UNSPECIFIED PARTS OF FACE	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
C444	MALIGNANT NEOPLASM OF SKIN OF SCALP AND NECK	M	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	2
		F	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	2
C445	MALIGNANT NEOPLASM OF SKIN OF TRUNK	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C449	MALIGNANT NEOPLASM OF SKIN, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	1	0	0	2	1	1	0	5
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C450	MALIGNANT MESOTHELIOMA OF PLEURA	M	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C459	MALIGNANT MESOTHELIOMA, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	1	3	2	2	1	0	9
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C479	MALIGNANT NEOPLASM OF PERIPHERAL NERVES AND AUTONOMIC NERVOUS SYSTEM, UNSPECIFIED	M	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C480	MALIGNANT NEOPLASM OF RETROPERITONEUM	M	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C482	MALIGNANT NEOPLASM OF PERITONEUM, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	1	1	2	0	0	4
C492	MALIGNANT NEOPLASM OF CONNECTIVE AND SOFT TISSUE OF LOWER LIMB, INCLUDING HIP	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
C494	MALIGNANT NEOPLASM OF CONNECTIVE AND SOFT TISSUE OF ABDOMEN	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	0	2
C499	MALIGNANT NEOPLASM OF CONNECTIVE AND SOFT TISSUE, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	2
		F	0	0	0	0	0	0	0	1	0	0	1	2	0	0	0	0	0	4
C509	MALIGNANT NEOPLASM OF BREAST, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	1	1	9	10	9	8	9	11	9	13	0	80

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INTERNATIONAL CLASSIFICATION OF DISEASES CODE (10th REVISION)		AGE AT DEATH BY CAUSE AND SEX																	TOTAL	
		SEX	AGE AT DEATH																	
		<1	1-4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	UNK		
C519	MALIGNANT NEOPLASM OF VULVA, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	1	1	0	4
C52	MALIGNANT NEOPLASM OF VAGINA	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
C539	MALIGNANT NEOPLASM OF CERVIX UTERI, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	F	0	0	0	0	0	0	0	2	1	0	0	0	0	1	0	0	0	0	4
C541	MALIGNANT NEOPLASM OF ENDOMETRIUM	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	F	0	0	0	0	0	0	0	1	0	1	0	7	7	3	2	1	0	0	22
C549	CORPUS UTERI, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	F	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1
C55	MALIGNANT NEOPLASM OF UTERUS, PART UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	F	0	0	0	0	0	0	0	0	0	2	0	2	2	1	0	0	0	0	7
C56	MALIGNANT NEOPLASM OF OVARY	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	F	0	0	0	0	0	0	0	1	3	2	2	2	7	6	2	3	0	0	28
C570	MALIGNANT NEOPLASM OF FALLOPIAN TUBE	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	F	0	0	0	0	0	0	0	0	1	0	1	1	0	1	0	0	0	0	4
C578	MALIGNANT OVERLAPPING LESION OF FEMALE GENITAL ORGANS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
C579	MALIGNANT NEOPLASM OF FEMALE GENITAL ORGAN, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	F	0	0	0	0	0	0	0	0	0	0	0	0	2	0	0	1	0	0	3
C609	MALIGNANT NEOPLASM OF PENIS, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C61	MALIGNANT NEOPLASM OF PROSTATE	M	0	0	0	0	0	0	0	2	2	5	6	9	13	8	25	0	0	70
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C629	MALIGNANT NEOPLASM OF TESTIS, UNSPECIFIED	M	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C631	MALIGNANT NEOPLASM OF SPERMATIC CORD	M	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C64	MALIGNANT NEOPLASM OF KIDNEY, EXCEPT RENAL PELVIS	M	0	0	0	0	0	0	1	1	4	1	3	5	4	2	3	0	0	24
	F	0	1	0	0	0	0	0	0	0	1	2	2	1	3	1	0	0	0	11
C65	MALIGNANT NEOPLASM OF RENAL PELVIS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	2
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C66	MALIGNANT NEOPLASM OF URETER	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1
C679	MALIGNANT NEOPLASM OF BLADDER, UNSPECIFIED	M	0	0	0	0	0	0	0	3	3	2	5	2	2	3	8	0	0	28
	F	0	0	0	0	0	0	0	0	1	0	0	1	2	2	6	0	0	0	12
C680	MALIGNANT NEOPLASM OF URETHRA	M	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	2
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C689	MALIGNANT NEOPLASM OF URINARY ORGAN, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C700	MALIGNANT NEOPLASM OF CEREBRAL MENINGES	M	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C712	MALIGNANT NEOPLASM OF TEMPORAL LOBE	M	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
	F	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1

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INTERNATIONAL CLASSIFICATION OF DISEASES CODE (10th REVISION)		AGE AT DEATH BY CAUSE AND SEX																	TOTAL
		SEX	AGE AT DEATH																
		<1	1-4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	UNK	
C713	MALIGNANT NEOPLASM OF PARIETAL LOBE	M	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C714	MALIGNANT NEOPLASM OF OCCIPITAL LOBE	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	F	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
C716	MALIGNANT NEOPLASM OF CEREBELLUM	M	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
	F	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
C719	MALIGNANT NEOPLASM OF BRAIN, UNSPECIFIED	M	0	0	0	1	0	0	3	3	4	7	0	4	0	2	3	0	27
	F	0	0	0	0	0	0	0	1	2	4	2	5	4	6	1	0	0	25
C720	MALIGNANT NEOPLASM OF SPINAL CORD	M	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1
	F	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1
C73	MALIGNANT NEOPLASM OF THYROID GLAND	M	0	0	0	0	0	0	0	1	0	1	1	0	0	1	0	4	
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	1	0	3
C740	MALIGNANT NEOPLASM OF CORTEX OF ADRENAL GLAND	M	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C749	MALIGNANT NEOPLASM OF ADRENAL GLAND, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C760	MALIGNANT NEOPLASM OF HEAD, FACE, AND NECK	M	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	2
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C762	MALIGNANT NEOPLASM OF ABDOMEN	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	F	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
C786	SECONDARY MALIGNANT NEOPLASM OF RETROPERITONEUM AND PERITONEUM	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	F	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	2
C787	SECONDARY MALIGNANT NEOPLASM OF LIVER	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	2
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	2
C793	SECONDARY MALIGNANT NEOPLASM OF BRAIN AND CEREBRAL MENINGES	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	F	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	2
C798	SECONDARY MALIGNANT NEOPLASM OF OTHER SPECIFIED SITES	M	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C80	MALIGNANT NEOPLASM WITHOUT SPECIFICATION OF SITE	M	0	0	0	1	0	0	0	4	4	9	12	11	7	10	11	0	69
	F	0	0	0	0	0	1	0	1	4	3	2	4	8	5	3	10	0	41
C819	HODGKIN'S DISEASE, UNSPECIFIED	M	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1
	F	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
C829	FOLLICULAR NON-HODGKIN'S LYMPHOMA, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	2
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
C831	DIFFUSE NON-HODGKIN'S LYMPHOMA: SMALL CLEAVED CELL (DIFFUSE)	M	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	0	2
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1
C833	DIFFUSE NON-HODGKIN'S LYMPHOMA: LARGE CELL	M	0	0	0	0	0	0	0	0	1	1	1	2	0	1	0	6	
	F	0	0	0	0	0	0	0	0	0	0	0	1	1	0	2	0	4	
C837	DIFFUSE NON-HODGKIN'S LYMPHOMA: BURKITT'S TUMOR	M	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C844	PERIPHERAL T-CELL LYMPHOMA	M	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	2
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C845	OTHER AND UNSPECIFIED T-CELL LYMPHOMAS	M	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

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INTERNATIONAL CLASSIFICATION OF DISEASES CODE (10th REVISION)		SEX	AGE AT DEATH																UNK	TOTAL
			<1	1-4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-59	60-64	65-69	70-74	75-79	80-84	85+		
C851	B-CELL LYMPHOMA, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	0	3
		F	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	1	0	3
C859	NON-HODGKIN'S LYMPHOMA, UNSPECIFIED TYPE	M	0	0	0	0	0	0	0	0	0	0	0	2	2	1	5	0	10	
		F	0	0	0	0	0	0	0	0	2	0	1	0	1	0	1	3	0	8
C900	MULTIPLE MYELOMA	M	0	0	0	0	0	0	0	0	0	2	3	2	3	3	1	0	14	
		F	0	0	0	0	0	0	0	0	0	1	0	1	0	1	4	0	7	
C910	ACUTE LYMPHOBLASTIC LEUKEMIA	M	0	0	0	0	0	1	0	1	0	0	1	0	0	0	0	0	3	
		F	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	2	
C911	CHRONIC LYMPHOCYTIC LEUKEMIA	M	0	0	0	0	0	0	0	1	0	0	2	1	1	0	5	0	10	
		F	0	0	0	0	0	0	0	0	0	0	0	1	1	0	1	0	3	
C920	ACUTE MYELOID LEUKEMIA	M	0	0	0	0	0	0	0	0	0	1	3	2	2	0	2	0	10	
		F	0	0	0	0	0	0	0	0	1	0	2	3	3	1	3	0	13	
C921	CHRONIC MYELOID LEUKEMIA	M	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	
C929	MYELOID LEUKEMIA, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
C930	ACUTE MONOCYTIC LEUKEMIA	M	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
C950	ACUTE LEUKEMIA OF UNSPECIFIED CELL TYPE	M	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	2	
		F	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	
C959	LEUKEMIA, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	
C962	MALIGNANT MAST CELL TUMOR	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	
C97	MALIGNANT NEOPLASMS OF INDEPENDENT (PRIMARY) MULTIPLE SITES	M	0	0	0	0	0	0	0	0	1	0	1	1	3	1	1	0	8	
		F	0	0	0	0	0	0	0	0	1	0	1	0	2	0	1	3	0	
D181	LYMPHANGIOMA, ANY SITE	M	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
D329	BENIGN NEOPLASM OF MENINGES, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
D374	NEOPLASM OF UNCERTAIN OR UNKNOWN BEHAVIOR OF COLON	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
D377	NEOPLASM OF UNCERTAIN OR UNKNOWN BEHAVIOR OF OTHER DIGESTIVE ORGANS	M	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
D381	NEOPLASM OF UNCERTAIN OR UNKNOWN BEHAVIOR OF TRACHEA, BRONCHUS, AND LUNG	M	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	2	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	2	
D432	NEOPLASM OF UNCERTAIN OR UNKNOWN BEHAVIOR OF BRAIN, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	1	2	0	0	1	0	4	
D444	NEOPLASM OF UNCERTAIN OR UNKNOWN BEHAVIOR OF CRANIOPHARYNGEAL DUCT	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	
D469	MYELODYSPLASTIC SYNDROME, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	4	4	2	0	0	10	
		F	0	0	0	0	0	0	0	0	0	1	0	1	1	0	7	0	10	
D471	CHRONIC MYELOPROLIFERATIVE DISEASE	M	0	0	0	0	0	0	0	1	0	1	1	1	0	1	1	0	6	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	2	

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INTERNATIONAL CLASSIFICATION OF DISEASES CODE (10th REVISION)		AGE AT DEATH BY CAUSE AND SEX																	TOTAL			
		SEX	AGE AT DEATH																			
			<1	1-4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	UNK			
D472	MONOCLONAL GAMMOPATHY	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1
D487	NEOPLASM OF UNCERTAIN OR UNKNOWN BEHAVIOR OF OTHER SPECIFIED SITES	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
D489	NEOPLASMS OF UNCERTAIN OR UNKNOWN BEHAVIOR, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
D500	IRON DEFICIENCY ANEMIA SECONDARY TO BLOOD LOSS (CHRONIC)	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1
D589	HEREDITARY HEMOLYTIC ANEMIA, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
D591	OTHER AUTOIMMUNE HEMOLYTIC ANEMIAS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1
D619	APLASTIC ANEMIA, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
D62	ACUTE POSTHEMORRHAGIC ANEMIA	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
D649	ANEMIA, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	0	2
D689	COAGULATION DEFECT, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1
		F	0	0	0	0	0	0	0	1	0	0	0	0	1	0	1	0	0	0	0	3
D693	IDIOPATHIC THROMBOCYTOPENIC PURPURA	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
D823	IMMUNODEFICIENCY FOLLOWING HEREDITARY DEFECTIVE RESPONSE TO EPSTEIN-BARR VIRUS	M	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
E039	HYPOTHYROIDISM, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
E042	NONTOXIC MULTINODULAR GOITER	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1
E100	INSULIN-DEPENDENT DIABETES MELLITUS WITH COMA	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1
E101	INSULIN-DEPENDENT DIABETES MELLITUS WITH KETOACIDOSIS	M	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	2
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
E102	INSULIN-DEPENDENT DIABETES MELLITUS WITH RENAL COMPLICATIONS	M	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	1	1	0	0	0	1	0	1	0	1	0	1	0	5
E105	INSULIN-DEPENDENT DIABETES MELLITUS WITH PERIPHERAL CIRCULATORY COMPLICATIONS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
E106	INSULIN-DEPENDENT DIABETES MELLITUS WITH OTHER SPECIFIED COMPLICATIONS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1
E109	INSULIN-DEPENDENT DIABETES MELLITUS WITHOUT COMPLICATIONS	M	0	0	0	0	0	0	0	1	2	0	0	0	0	0	0	1	0	0	0	4
		F	0	0	0	0	0	0	0	1	0	0	1	1	0	0	0	2	0	0	0	5
E112	NONINSULIN-DEPENDENT DIABETES MELLITUS WITH RENAL COMPLICATIONS	M	0	0	0	0	0	0	0	0	0	0	0	3	1	3	4	0	0	0	0	11
		F	0	0	0	0	0	0	0	0	0	1	0	1	0	3	1	5	0	0	0	11
E115	NONINSULIN-DEPENDENT DIABETES MELLITUS WITH PERIPHERAL CIRCULATORY COMPLICATIONS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

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INTERNATIONAL CLASSIFICATION OF DISEASES CODE (10th REVISION)		AGE AT DEATH BY CAUSE AND SEX																	TOTAL		
		SEX	AGE AT DEATH																		
			<1	1-4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	UNK		
E117	NONINSULIN-DEPENDENT DIABETES MELLITUS WITH MULTIPLE COMPLICATIONS	M	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
E119	NONINSULIN-DEPENDENT DIABETES MELLITUS WITHOUT COMPLICATIONS	M	0	0	0	0	0	0	0	0	0	2	1	2	1	1	3	1	0	0	11
		F	0	0	0	0	0	0	0	0	2	0	0	1	2	2	4	7	0	0	18
E140	UNSPECIFIED DIABETES MELLITUS WITH COMA	M	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
E141	UNSPECIFIED DIABETES MELLITUS WITH KETOACIDOSIS	M	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	1	0	1	1	1	0	0	0	1	0	0	0	5
E142	UNSPECIFIED DIABETES MELLITUS WITH RENAL COMPLICATIONS	M	0	0	0	0	0	0	0	0	0	0	1	0	2	1	1	5	0	0	10
		F	0	0	0	0	0	0	0	0	0	0	1	2	3	4	3	5	0	0	18
E144	UNSPECIFIED DIABETES MELLITUS WITH NEUROLOGICAL COMPLICATIONS	M	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	1	0	0	3
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
E145	UNSPECIFIED DIABETES MELLITUS WITH PERIPHERAL CIRCULATORY COMPLICATIONS	M	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0	2
		F	0	0	0	0	0	0	0	0	0	1	0	0	1	0	1	1	0	0	4
E146	UNSPECIFIED DIABETES MELLITUS WITH OTHER SPECIFIED COMPLICATIONS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	2	0	0	3
E147	UNSPECIFIED DIABETES MELLITUS WITH MULTIPLE COMPLICATIONS	M	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	1	0	0	3
		F	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	0	2
E149	UNSPECIFIED DIABETES MELLITUS WITHOUT COMPLICATIONS	M	0	0	0	0	0	0	0	0	2	1	1	3	2	2	6	2	0	0	19
		F	0	0	0	0	0	0	0	0	0	1	1	1	4	2	2	7	0	0	18
E15	NONDIABETIC HYPOGLYCEMIC COMA	M	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
E213	HYPERPARATHYROIDISM, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
E41	NUTRITIONAL MARASMUS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
E43	UNSPECIFIED SEVERE PROTEIN-ENERGY MALNUTRITION	M	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	0	2
E440	MODERATE PROTEIN-ENERGY MALNUTRITION	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
E46	UNSPECIFIED PROTEIN-ENERGY MALNUTRITION	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
E639	NUTRITIONAL DEFICIENCY, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
E662	EXTREME OBESITY WITH ALVEOLAR HYPOVENTILATION	M	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	1	1	0	1	0	0	0	0	0	3
E668	OTHER OBESITY	M	0	0	0	0	0	0	0	0	0	0	3	0	0	0	0	0	0	0	3
		F	0	0	0	0	0	0	1	1	1	3	2	0	0	1	0	0	0	0	9
E669	OBESITY, UNSPECIFIED	M	0	0	0	0	0	1	0	1	1	1	3	0	0	0	0	0	0	0	7
		F	0	0	0	0	0	0	0	1	1	2	0	0	1	1	0	0	0	0	6
E701	OTHER HYPERPHENYLALANINEMIAS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
E780	PURE HYPERCHOLESTEROLEMIA	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	2
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	2

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INTERNATIONAL CLASSIFICATION OF DISEASES CODE (10th REVISION)		SEX	AGE AT DEATH																UNK	TOTAL		
			<1	1-4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-59	60-64	65-69	70-74	75-79	80-84	85+				
E785	HYPERLIPIDEMIA, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	1	1	5	2	2	11	0	22
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	4	5	0	11
E789	DISORDER OF LIPOPROTEIN METABOLISM, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	2	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
E831	DISORDERS OF IRON METABOLISM	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	
E848	CYSTIC FIBROSIS WITH OTHER MANIFESTATIONS	M	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	
		F	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	
E854	ORGAN-LIMITED AMYLOIDOSIS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	2	1	2	0	5		
		F	0	0	0	0	0	0	0	0	0	0	0	0	2	0	0	1	0	3		
E86	VOLUME DEPLETION	M	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	2	0	3		
		F	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1		
E870	HYPEROSMOLALITY AND HYPERNATREMIA	M	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1		
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1		
E871	HYPO-OSMOLALITY AND HYPONATREMIA	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0		
E872	ACIDOSIS	M	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0	2		
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
E877	FLUID OVERLOAD	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1		
E878	OTHER DISORDERS OF ELECTROLYTE AND FLUID BALANCE, NOT ELSEWHERE CLASSIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	1	2	0	3			
		F	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	7	0	9		
E880	DISORDERS OF PLASMA-PROTEIN METABOLISM, NOT ELSEWHERE CLASSIFIED	M	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1			
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
E889	METABOLIC DISORDER, UNSPECIFIED	M	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	0	2			
		F	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1			
F011	MULTI-INFARCT DEMENTIA	M	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	0	3			
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1			
F019	VASCULAR DEMENTIA, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	1	1	2	4	12	0	20			
		F	0	0	0	0	0	0	0	0	0	0	0	1	1	9	29	0	40			
F03	UNSPECIFIED DEMENTIA	M	0	0	0	0	0	0	0	0	0	1	2	3	2	14	46	0	68			
		F	0	0	0	0	0	0	0	0	0	0	1	2	10	21	108	0	142			
F059	DELIRIUM, NOT INDUCED BY ALCOHOL AND OTHER PSYCHOACTIVE SUBSTANCES, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0			
F067	MILD COGNITIVE DISORDER	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1			
F101	HARMFUL USE OF ALCOHOL	M	0	0	0	0	0	0	1	4	2	2	0	1	1	1	0	0	12			
		F	0	0	0	0	0	0	0	2	0	0	1	0	1	0	0	0	4			
F102	DEPENDENCE SYNDROME DUE TO USE OF ALCOHOL	M	0	0	0	0	0	0	0	2	3	1	1	0	0	0	1	0	8			
		F	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0	2			
F103	WITHDRAWAL STATE DUE TO USE OF ALCOHOL	M	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1			
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
F106	AMNESIC SYNDROME DUE TO USE OF ALCOHOL	M	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1			
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			

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INTERNATIONAL CLASSIFICATION OF DISEASES CODE (10th REVISION)		SEX	AGE AT DEATH																UNK	TOTAL
			<1	1-4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-59	60-64	65-69	70-74	75-79	80-84	85+		
F107	RESIDUAL AND LATE-ONSET PSYCHOTIC DISORDER DUE TO USE OF ALCOHOL	M	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	2
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0
F111	HARMFUL USE OF OPIOIDS	M	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
F112	DEPENDENCE SYNDROME DUE TO USE OF OPIOIDS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
F179	UNSPECIFIED MENTAL AND BEHAVIORAL DISORDER DUE TO USE OF TOBACCO	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
F191	HARMFUL USE OF MULTIPLE-DRUG USE AND USE OF OTHER PSYCHOACTIVE SUBSTANCES	M	0	0	0	0	0	0	0	1	2	0	0	0	0	0	0	0	0	3
		F	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1
F199	UNSPECIFIED MENTAL AND BEHAVIORAL DISORDER DUE TO MULTIPLE-DRUG USE AND USE OF OTHER PSYCHOACTIVE SUBSTANCES	M	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	2
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
F209	SCHIZOPHRENIA, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	1	1	1	0	0	1	0	4
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
F259	SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
F329	DEPRESSIVE EPISODE, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	2
		F	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	3	0	4
F432	ADJUSTMENT DISORDERS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
F439	REACTION TO SEVERE STRESS, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
F508	OTHER EATING DISORDERS	M	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
F89	UNSPECIFIED DISORDER OF PSYCHOLOGICAL DEVELOPMENT	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
F99	MENTAL DISORDER, NOT OTHERWISE SPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
G001	PNEUMOCOCCAL MENINGITIS	M	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
G039	MENINGITIS, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
G10	HUNTINGTON'S DISEASE	M	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	0	2
G122	MOTOR NEURON DISEASE	M	0	0	0	0	0	0	0	0	1	2	0	2	2	1	2	1	0	11
		F	0	0	0	0	0	0	0	0	0	2	1	4	1	1	0	1	0	10
G129	SPINAL MUSCULAR ATROPHY, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1
		F	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
G20	PARKINSON'S DISEASE	M	0	0	0	0	0	0	0	0	0	0	3	3	11	13	21	0	51	
		F	0	0	0	0	0	0	0	0	0	0	1	2	3	5	19	0	30	
G231	PROGRESSIVE SUPRANUCLEAR OPHTHALMOPLEGIA [STEELE-RICHARDSON-OLSZEWSKI]	M	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	1	0	0	1	0	0	0	0	2
G239	DEGENERATIVE DISEASE OF BASAL GANGLIA, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1

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2017 VERMONT RESIDENT DEATHS

INTERNATIONAL CLASSIFICATION OF DISEASES CODE (10th REVISION)		AGE AT DEATH BY CAUSE AND SEX																	UNK	TOTAL	
		SEX	AGE AT DEATH																		
			<1	1-4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-59	60-64	65-69	70-74	75-79	80-84	85+			
G300	ALZHEIMER'S DISEASE WITH EARLY ONSET	M	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	2	0	1	0	0	0	0	0
G301	ALZHEIMER'S DISEASE WITH LATE ONSET	M	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	2	0	0	4
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	4	0	0	4
G309	ALZHEIMER'S DISEASE, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	2	2	6	17	17	63	0	0	107
		F	0	0	0	0	0	0	0	0	0	0	0	1	4	11	22	44	169	0	251
G310	CIRCUMSCRIBED BRAIN ATROPHY	M	0	0	0	0	0	0	0	0	0	0	1	2	1	0	0	0	0	0	5
		F	0	0	0	0	0	0	0	0	0	0	0	0	2	0	0	1	0	0	3
G318	OTHER SPECIFIED DEGENERATIVE DISEASES OF NERVOUS SYSTEM	M	0	0	0	0	0	0	0	0	0	1	1	2	0	0	2	1	0	0	7
		F	0	0	0	0	0	0	0	0	0	0	0	0	1	1	2	3	0	0	7
G319	DEGENERATIVE DISEASE OF NERVOUS SYSTEM, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	2
G35	MULTIPLE SCLEROSIS	M	0	0	0	0	0	0	0	1	0	0	0	0	1	0	0	0	0	0	2
		F	0	0	0	0	0	0	0	0	0	1	1	1	0	1	1	0	0	0	5
G409	EPILEPSY, UNSPECIFIED	M	0	0	0	0	1	0	0	0	0	0	0	0	1	0	0	0	0	0	2
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
G419	STATUS EPILEPTICUS, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1
G473	SLEEP APNEA	M	0	0	0	0	0	0	0	0	1	0	1	0	0	1	0	0	0	0	3
		F	0	0	0	0	0	0	0	0	1	1	0	0	0	0	1	0	0	0	3
G628	OTHER SPECIFIED POLYNEUROPATHIES	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
G629	POLYNEUROPATHY, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
G700	MYASTHENIA GRAVIS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1
G709	MYONEURAL DISORDER, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	2
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
G710	MUSCULAR DYSTROPHY	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1
G711	MYOTONIC DISORDERS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1
G808	OTHER INFANTILE CEREBRAL PALSY	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1
G809	INFANTILE CEREBRAL PALSY, UNSPECIFIED	M	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	0	0	2
		F	0	0	0	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
G825	TETRAPLEGIA, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
G903	MULTISYSTEM DEGENERATION	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1
G909	DISORDER OF AUTONOMIC NERVOUS SYSTEM, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1
G931	ANOXIC BRAIN DAMAGE, NOT ELSEWHERE CLASSIFIED	M	0	0	0	0	0	0	0	0	1	1	0	0	0	1	0	0	0	0	3
		F	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0	0	2

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INTERNATIONAL CLASSIFICATION OF DISEASES CODE (10th REVISION)		AGE AT DEATH BY CAUSE AND SEX																	TOTAL	
		SEX	AGE AT DEATH																	
			<1	1-4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	UNK	
G934	ENCEPHALOPATHY, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	2	0	1	0	0	3
		F	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
G959	DISEASE OF SPINAL CORD, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1
G968	OTHER SPECIFIED DISORDERS OF CENTRAL NERVOUS SYSTEM	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1
I050	MITRAL STENOSIS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1
I059	MITRAL VALVE DISEASE, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	2
		F	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	2
I071	TRICUSPID INSUFFICIENCY	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	1	3
I080	DISORDERS OF BOTH MITRAL AND AORTIC VALVES	M	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	0	2
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	1	0	3
I081	DISORDERS OF BOTH MITRAL AND TRICUSPID VALVES	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1
I099	RHEUMATIC HEART DISEASE, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1
		F	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
I10	ESSENTIAL (PRIMARY) HYPERTENSION	M	0	0	0	0	0	0	0	1	0	2	2	2	2	4	5	0	0	18
		F	0	0	0	0	0	0	0	0	0	1	1	0	1	4	19	0	0	26
I110	HYPERTENSIVE HEART DISEASE WITH (CONGESTIVE) HEART FAILURE	M	0	0	0	0	0	0	0	0	0	1	2	2	2	0	8	0	0	15
		F	0	0	0	0	0	0	0	0	0	0	0	1	1	6	25	0	0	33
I119	HYPERTENSIVE HEART DISEASE WITHOUT (CONGESTIVE) HEART FAILURE	M	0	0	0	0	0	0	0	4	3	6	6	6	9	5	9	0	0	48
		F	0	0	0	0	0	0	1	0	3	2	2	4	3	4	9	0	0	28
I120	HYPERTENSIVE RENAL DISEASE WITH RENAL FAILURE	M	0	0	0	0	0	0	0	0	0	1	1	0	2	3	9	0	0	16
		F	0	0	0	0	0	0	0	1	0	0	2	1	1	4	8	0	0	17
I129	HYPERTENSIVE RENAL DISEASE WITHOUT RENAL FAILURE	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
I130	HYPERTENSIVE HEART AND RENAL DISEASE WITH (CONGESTIVE) HEART FAILURE	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	2
I131	HYPERTENSIVE HEART AND RENAL DISEASE WITH RENAL FAILURE	M	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	0	2
		F	0	0	0	0	0	0	0	1	0	0	1	0	0	0	0	1	0	3
I132	HYPERTENSIVE HEART AND RENAL DISEASE WITH B(CONGESTIVE) HEART FAILURE AND RENAL FAILURE	M	0	0	0	0	0	0	0	0	0	1	0	0	2	2	2	0	0	7
		F	0	0	0	0	0	0	0	0	0	0	0	1	0	0	6	0	0	7
I139	HYPERTENSIVE HEART AND RENAL DISEASE, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
I200	UNSTABLE ANGINA	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
I214	ACUTE SUBENDOCARDIAL MYOCARDIAL INFARCTION	M	0	0	0	0	0	0	0	0	0	0	1	0	1	1	6	0	0	9
		F	0	0	0	0	0	0	0	0	0	0	0	1	0	2	8	0	0	11
I219	ACUTE MYOCARDIAL INFARCTION, UNSPECIFIED	M	0	0	0	0	0	0	4	6	6	7	5	8	9	10	29	0	0	84
		F	0	0	0	0	0	0	1	1	2	9	6	2	4	7	37	0	0	69
I249	ACUTE ISCHEMIC HEART DISEASE, UNSPECIFIED	M	0	0	0	0	0	0	0	1	0	1	0	1	0	1	1	0	0	5
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

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INTERNATIONAL CLASSIFICATION OF DISEASES CODE (10th REVISION)		AGE AT DEATH BY CAUSE AND SEX																	TOTAL
		SEX	AGE AT DEATH																
		<1	1-4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	UNK	
I250	ATHEROSCLEROTIC CARDIOVASCULAR DISEASE, SO DESCRIBED	M	0	0	0	0	0	0	3	18	26	37	34	39	22	23	46	0	248
		F	0	0	0	0	0	0	0	3	6	8	11	15	10	23	40	0	116
I251	ATHEROSCLEROTIC HEART DISEASE	M	0	0	0	0	0	0	0	1	6	3	22	17	22	20	67	0	158
		F	0	0	0	0	0	0	1	1	1	0	4	2	12	14	70	0	105
I255	ISCHEMIC CARDIOMYOPATHY	M	0	0	0	0	0	0	0	0	0	0	0	3	1	2	5	0	11
		F	0	0	0	0	0	0	1	0	0	0	1	0	1	1	3	0	7
I258	OTHER FORMS OF CHRONIC ISCHEMIC HEART DISEASE	M	0	0	0	0	0	0	0	0	0	0	0	1	1	1	2	0	5
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0
I259	CHRONIC ISCHEMIC HEART DISEASE, UNSPECIFIED	M	0	0	0	0	0	0	0	0	1	0	1	1	1	3	4	0	11
		F	0	0	0	0	0	0	0	0	0	0	0	0	1	1	6	0	8
I269	PULMONARY EMBOLISM WITHOUT MENTION OF ACUTE COR PULMONALE	M	0	0	0	0	0	0	0	1	1	0	0	1	1	0	1	0	5
		F	0	0	0	0	0	0	0	0	0	0	0	3	1	1	4	0	9
I270	PRIMARY PULMONARY HYPERTENSION	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	2
I272	OTHER SECONDARY PULMONARY HYPERTENSION	M	0	0	0	0	0	0	0	1	0	0	0	1	1	4	5	0	12
		F	0	0	0	0	0	0	0	0	0	0	0	1	0	0	5	0	6
I279	PULMONARY HEART DISEASE, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	2
I330	ACUTE AND SUBACUTE INFECTIVE ENDOCARDITIS	M	0	0	0	0	0	0	1	0	0	0	0	0	1	0	0	0	2
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
I340	MITRAL (VALVE) INSUFFICIENCY	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	2	0	2	0	4
I350	AORTIC (VALVE) STENOSIS	M	0	0	0	0	0	0	0	0	0	0	2	4	3	3	22	0	34
		F	0	0	0	0	0	0	0	0	0	0	0	3	2	4	32	0	41
I359	AORTIC VALVE DISORDER, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	3
		F	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	2
I368	OTHER NONRHEUMATIC TRICUSPID VALVE DISORDERS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
I38	ENDOCARDITIS, VALVE UNSPECIFIED	M	0	0	0	0	0	0	0	2	1	0	0	0	1	1	2	0	7
		F	0	0	0	0	0	0	0	0	1	0	0	0	1	2	0	0	4
I420	DILATED CARDIOMYOPATHY	M	0	0	0	0	0	0	1	1	1	0	0	0	1	0	0	0	4
		F	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0	0	3
I422	OTHER HYPERTROPHIC CARDIOMYOPATHY	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	2
I425	OTHER RESTRICTIVE CARDIOMYOPATHY	M	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	3
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
I426	ALCOHOLIC CARDIOMYOPATHY	M	0	0	0	0	0	0	0	1	2	0	0	1	0	0	0	0	4
		F	0	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	2
I428	OTHER CARDIOMYOPATHIES	M	0	0	0	0	0	1	0	0	0	0	0	1	0	0	0	0	2
		F	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
I429	CARDIOMYOPATHY, UNSPECIFIED	M	0	0	0	0	0	0	0	1	1	1	1	4	0	2	3	0	13
		F	0	0	0	0	0	0	1	1	0	1	0	0	1	1	4	0	9
I442	ATRIOVENTRICULAR BLOCK, COMPLETE	M	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	2
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	1	2	0	3

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INTERNATIONAL CLASSIFICATION OF DISEASES CODE (10th REVISION)		AGE AT DEATH BY CAUSE AND SEX																	TOTAL		
		SEX	AGE AT DEATH																		
			<1	1-4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	UNK		
I459	CONDUCTION DISORDER, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
I461	SUDDEN CARDIAC DEATH, SO DESCRIBED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1
I469	CARDIAC ARREST, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
I48	ATRIAL FIBRILLATION AND FLUTTER	M	0	0	0	0	0	0	0	1	0	1	0	0	4	4	12	0	0	22	
		F	0	0	0	0	0	0	0	0	0	0	1	0	1	2	2	27	0	33	
I495	SICK SINUS SYNDROME	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0	3	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0	3	
I498	OTHER SPECIFIED CARDIAC ARRHYTHMIAS	M	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	2	
I499	CARDIAC ARRHYTHMIA, UNSPECIFIED	M	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0	0	2	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	2	
I500	CONGESTIVE HEART FAILURE	M	0	0	0	0	0	0	0	0	0	0	3	0	3	8	0	0	0	14	
		F	0	0	0	0	0	0	0	0	0	0	0	1	0	1	20	0	0	22	
I501	LEFT VENTRICULAR FAILURE	M	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
I509	HEART FAILURE, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	1	0	1	1	0	3	0	0	6	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	4	0	0	4	
I516	CARDIOVASCULAR DISEASE, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0	3	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	1	2	0	0	3	
I517	CARDIOMEGALY	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	
I518	OTHER ILL-DEFINED HEART DISEASES	M	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	
I519	HEART DISEASE, UNSPECIFIED	M	0	0	0	0	0	0	1	1	0	2	0	1	0	0	2	0	0	7	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	
I600	SUBARACHNOID HEMORRHAGE FROM CAROTID SIPHON AND BIFURCATION	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	
I609	SUBARACHNOID HEMORRHAGE, UNSPECIFIED	M	0	0	0	0	0	0	1	0	0	0	0	0	1	0	0	0	0	2	
		F	0	0	0	0	0	0	0	0	0	0	0	2	1	0	1	0	0	4	
I611	INTRACEREBRAL HEMORRHAGE IN HEMISPHERE, CORTICAL	M	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
I613	INTRACEREBRAL HEMORRHAGE IN BRAIN STEM	M	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	
I615	INTRACEREBRAL HEMORRHAGE, INTRAVENTRICULAR	M	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	2	
I619	INTRACEREBRAL HEMORRHAGE, UNSPECIFIED	M	0	0	0	0	0	0	0	1	1	1	1	3	2	2	5	0	0	16	
		F	0	0	0	0	0	0	0	1	0	0	0	2	2	1	4	0	0	10	
I620	SUBDURAL HEMORRHAGE (ACUTE) (NONTRAUMATIC)	M	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	0	0	2	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
I621	NONTRAUMATIC EXTRADURAL HEMORRHAGE	M	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	

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INTERNATIONAL CLASSIFICATION OF DISEASES CODE (10th REVISION)		SEX	AGE AT DEATH																UNK	TOTAL	
			<1	1-4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-59	60-64	65-69	70-74	75-79	80-84	85+			
I629	INTRACRANIAL HEMORRHAGE (NONTRAUMATIC), UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	1	2	0	1	0	4
		F	0	0	0	0	0	0	0	0	0	0	0	0	1	0	2	0	2	0	5
I632	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF PRECEREBRAL ARTERIES	M	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
I633	CEREBRAL INFARCTION DUE TO THROMBOSIS OF CEREBRAL ARTERIES	M	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
I634	CEREBRAL INFARCTION DUE TO EMBOLISM OF CEREBRAL ARTERIES	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	2	0	4	
I635	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF CEREBRAL ARTERIES	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	2	
I639	CEREBRAL INFARCTION, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	2	2	2	0	1	0	7	
		F	0	0	0	0	0	0	0	0	0	1	1	1	0	3	2	8	0	16	
I64	STROKE, NOT SPECIFIED AS HEMORRHAGE OR INFARCTION	M	0	0	0	0	0	0	0	0	0	0	1	2	5	6	9	18	0	41	
		F	0	0	0	0	0	0	0	0	1	0	0	1	5	6	6	47	0	66	
I672	CEREBRAL ATHEROSCLEROSIS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	6	8	
I678	OTHER SPECIFIED CEREBROVASCULAR DISEASES	M	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	2	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
I679	CEREBROVASCULAR DISEASE, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	2	
		F	0	0	0	0	0	0	0	1	0	0	0	0	0	0	2	1	0	4	
I690	SEQUELAE OF SUBARACHNOID HEMORRHAGE	M	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
I693	SEQUELAE OF CEREBRAL INFARCTION	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	
I694	SEQUELAE OF STROKE, NOT SPECIFIED AS HEMORRHAGE OR INFARCTION	M	0	0	0	0	0	0	0	0	0	0	0	0	2	0	2	4	0	8	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	9	0	10	
I698	SEQUELAE OF OTHER AND UNSPECIFIED CEREBROVASCULAR DISEASES	M	0	0	0	0	0	0	0	0	0	0	0	2	2	0	1	6	0	11	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	11	0	12	
I709	GENERALIZED AND UNSPECIFIED ATHEROSCLEROSIS	M	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	2	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	2	
I710	DISSECTION OF AORTA [ANY PART]	M	0	0	0	0	0	0	2	1	2	0	1	0	1	2	1	0	0	10	
		F	0	0	0	0	0	0	0	0	0	1	0	1	2	0	0	0	0	4	
I711	THORACIC AORTIC ANEURYSM, RUPTURED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	2	
I712	THORACIC AORTIC ANEURYSM, WITHOUT MENTION OF RUPTURE	M	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	2		
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
I713	ABDOMINAL AORTIC ANEURYSM, RUPTURED	M	0	0	0	0	0	0	0	0	0	1	1	1	0	0	2	0	5		
		F	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	2		
I714	ABDOMINAL AORTIC ANEURYSM, WITHOUT MENTION OF RUPTURE	M	0	0	0	0	0	0	0	0	0	0	1	0	0	2	0	0	3		
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1		
I718	AORTIC ANEURYSM OF UNSPECIFIED SITE, RUPTURED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1		
		F	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1		
I719	AORTIC ANEURYSM OF UNSPECIFIED SITE, WITHOUT MENTION OF RUPTURE	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	

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INTERNATIONAL CLASSIFICATION OF DISEASES CODE (10th REVISION)		AGE AT DEATH BY CAUSE AND SEX																	UNK	TOTAL			
		SEX	AGE AT DEATH																				
			<1	1-4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-59	60-64	65-69	70-74	75-79	80-84	85+					
I720	ANEURYSM OF CAROTID ARTERY	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	
I729	ANEURYSM OF UNSPECIFIED SITE	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
I739	PERIPHERAL VASCULAR DISEASE, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	2	0	0	0	3	
		F	0	0	0	0	0	0	0	0	1	0	0	1	0	0	0	4	0	0	0	0	6
I743	EMBOLISM AND THROMBOSIS OF ARTERIES OF THE LOWER EXTREMITIES	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1
I749	EMBOLISM AND THROMBOSIS OF UNSPECIFIED ARTERY	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
I776	ARTERITIS, UNSPECIFIED	M	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
I802	PHLEBITIS AND THROMBOPHLEBITIS OF OTHER DEEP VESSELS OF LOWER EXTREMITIES	M	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	0	0	2
I803	PHLEBITIS AND THROMBOPHLEBITIS OF LOWER EXTREMITIES, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
I81	PORTAL VEIN THROMBOSIS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
I829	EMBOLISM AND THROMBOSIS OF UNSPECIFIED VEIN	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1
I890	LYMPHEDEMA, NOT ELSEWHERE CLASSIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
I959	HYPOTENSION, UNSPECIFIED	M	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
I99	OTHER AND UNSPECIFIED DISORDERS OF CIRCULATORY SYSTEM	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0	2
J069	ACUTE UPPER RESPIRATORY INFECTION, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0	2
		F	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
J100	INFLUENZA WITH PNEUMONIA, INFLUENZA VIRUS IDENTIFIED	M	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	2	0	0	0	0	3
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
J101	INFLUENZA WITH OTHER RESPIRATORY MANIFESTATIONS, INFLUENZA VIRUS IDENTIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	2
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	1	0	0	0	0	3
J110	INFLUENZA WITH PNEUMONIA, VIRUS NOT IDENTIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0	0	0	3
J111	INFLUENZA WITH OTHER RESPIRATORY MANIFESTATIONS, VIRUS NOT IDENTIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	3	0	0	0	0	4
J121	RESPIRATORY SYNCYTIAL VIRUS PNEUMONIA	M	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0	0	0	3
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
J13	PNEUMONIA DUE TO STREPTOCOCCUS PNEUMONIAE	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
J151	PNEUMONIA DUE TO PSEUDOMONAS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
J155	PNEUMONIA DUE TO ESCHERICHIA COLI	M	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

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INTERNATIONAL CLASSIFICATION OF DISEASES CODE (10th REVISION)		AGE AT DEATH BY CAUSE AND SEX																	UNK	TOTAL	
		SEX	AGE AT DEATH																		
			<1	1-4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-59	60-64	65-69	70-74	75-79	80-84	85+			
J159	BACTERIAL PNEUMONIA, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	2	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	2	0	4
J180	BRONCHOPNEUMONIA, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
J181	LOBAR PNEUMONIA, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
J189	PNEUMONIA, UNSPECIFIED	M	0	0	0	0	0	0	1	0	1	2	0	2	1	2	15	0	0	24	
		F	0	0	0	0	0	0	0	1	0	0	2	1	2	0	26	0	0	32	
J208	ACUTE BRONCHITIS DUE TO OTHER SPECIFIED ORGANISMS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
J210	ACUTE BRONCHIOLITIS DUE TO RESPIRATORY SYNCYTIAL VIRUS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	
J219	ACUTE BRONCHIOLITIS, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
J392	OTHER DISEASES OF PHARYNX	M	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
J399	DISEASE OF UPPER RESPIRATORY TRACT, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	
J40	BRONCHITIS, NOT SPECIFIED AS ACUTE OR CHRONIC	M	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
J439	EMPHYSEMA, UNSPECIFIED	M	0	0	0	0	0	0	0	1	1	5	2	2	2	5	9	0	0	27	
		F	0	0	0	0	0	0	0	2	2	3	2	2	3	4	5	0	0	23	
J440	CHRONIC OBSTRUCTIVE PULMONARY DISEASE WITH ACUTE LOWER RESPIRATORY INFECTION	M	0	0	0	0	0	0	0	1	1	4	3	3	4	3	12	0	0	31	
		F	0	0	0	0	0	0	0	0	0	0	4	5	4	7	9	0	0	29	
J441	CHRONIC OBSTRUCTIVE PULMONARY DISEASE WITH ACUTE EXACERBATION, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	1	1	0	0	1	0	0	3	
		F	0	0	0	0	0	0	1	0	0	1	0	3	0	1	1	0	0	7	
J448	OTHER SPECIFIED CHRONIC OBSTRUCTIVE PULMONARY DISEASE	M	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0	3	
		F	0	0	0	0	0	0	0	1	1	0	0	1	0	0	2	0	0	5	
J449	CHRONIC OBSTRUCTIVE PULMONARY DISEASE, UNSPECIFIED	M	0	0	0	0	0	0	0	1	6	7	12	15	18	19	28	0	0	106	
		F	0	0	0	0	0	0	0	2	3	8	12	20	21	21	40	0	0	127	
J459	ASTHMA, UNSPECIFIED	M	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	0	0	2	
		F	0	0	0	0	0	0	1	0	1	0	2	0	0	1	2	1	0	8	
J46	STATUS ASTHMATICUS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	
J47	BRONCHIECTASIS	M	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	
J61	PNEUMOCONIOSIS DUE TO ASBESTOS AND OTHER MINERAL FIBERS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	2	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
J64	UNSPECIFIED PNEUMOCONIOSIS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	
J690	PNEUMONITIS DUE TO FOOD AND VOMIT	M	0	0	0	0	0	0	0	0	0	1	3	2	1	4	6	0	0	17	
		F	0	0	0	0	0	0	0	0	0	0	0	0	1	1	9	0	0	11	
J80	ADULT RESPIRATORY DISTRESS SYNDROME	M	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	

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INTERNATIONAL CLASSIFICATION OF DISEASES CODE (10th REVISION)		SEX	AGE AT DEATH																UNK	TOTAL	
			<1	1-4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-59	60-64	65-69	70-74	75-79	80-84	85+			
J840	ALVEOLAR AND PARIETOALVEOLAR CONDITIONS	M	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0
J841	OTHER INTERSTITIAL PULMONARY DISEASES WITH FIBROSIS	M	0	0	0	0	0	0	0	0	0	2	1	3	2	5	3	3	0	0	19
		F	0	0	0	0	0	0	0	0	0	0	1	1	2	5	1	3	0	0	13
J849	INTERSTITIAL PULMONARY DISEASE, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	1	1	2	2	3	2	0	0	11
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	3	0	0	5
J961	CHRONIC RESPIRATORY FAILURE	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
J969	RESPIRATORY FAILURE, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
J981	PULMONARY COLLAPSE	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
J982	INTERSTITIAL EMPHYSEMA	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1
J984	OTHER DISORDERS OF LUNG	M	0	0	0	0	0	0	0	0	0	0	0	0	2	1	1	0	0	0	4
		F	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	3	0	0	5
J988	OTHER SPECIFIED RESPIRATORY DISORDERS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	2	0	0	3
J989	RESPIRATORY DISORDER, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1
K20	ESOPHAGITIS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	1	1	0	0	0	0	0	1	0	0	0	3
K219	GASTROESOPHAGEAL REFLUX DISEASE WITHOUT ESOPHAGITIS	M	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
K222	ESOPHAGEAL OBSTRUCTION	M	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
K224	DYSKINESIA OF ESOPHAGUS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
K255	GASTRIC ULCER, CHRONIC OR UNSPECIFIED WITH PERFORATION	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
K264	DUODENAL ULCER, CHRONIC OR UNSPECIFIED WITH HAEMORRHAGE	M	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0	0	3
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
K265	DUODENAL ULCER, CHRONIC OR UNSPECIFIED WITH PERFORATION	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	0	2
K266	DUODENAL ULCER, CHRONIC OR UNSPECIFIED WITH HAEMORRHAGE AND PERFORATION	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
K269	DUODENAL ULCER, UNSPECIFIED AS ACUTE OR CHRONIC, WITHOUT HAEMORRHAGE OR PERFORATION	M	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	2
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
K274	PEPTIC ULCER, SITE UNSPECIFIED, CHRONIC OR UNSPECIFIED WITH HAEMORRHAGE	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	2
K295	CHRONIC GASTRITIS, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
K297	GASTRITIS, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1

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INTERNATIONAL CLASSIFICATION OF DISEASES CODE (10th REVISION)		SEX	AGE AT DEATH																	UNK	TOTAL
			<1	1-4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-59	60-64	65-69	70-74	75-79	80-84	85+			
K298	DUODENITIS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0
K409	UNILATERAL OR UNSPECIFIED INGUINAL HERNIA, WITHOUT OBSTRUCTION OR GANGRENE	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0
K449	DIAPHRAGMATIC HERNIA WITHOUT OBSTRUCTION OR GANGRENE	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	2	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0		1
K460	UNSPECIFIED ABDOMINAL HERNIA WITH OBSTRUCTION, WITHOUT GANGRENE	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0		1
K469	UNSPECIFIED ABDOMINAL HERNIA WITHOUT OBSTRUCTION OR GANGRENE	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	1	0	1	0	0	0	1	0	0		3
K509	CROHN'S DISEASE, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0		1
K519	ULCERATIVE COLITIS, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0
K528	OTHER SPECIFIED NONINFECTIVE GASTROENTERITIS AND COLITIS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0		1
K529	NONINFECTIVE GASTROENTERITIS AND COLITIS, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0		2
K550	ACUTE VASCULAR DISORDERS OF INTESTINE	M	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	2	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0		1
K551	CHRONIC VASCULAR DISORDERS OF INTESTINE	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0		1
K559	VASCULAR DISORDER OF INTESTINE, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	2	2	1	1	0	6	
		F	0	0	0	0	0	0	0	0	0	0	0	0	1	1	2	2	0		6
K560	PARALYTIC ILEUS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0		1
K562	VOLVULUS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	2	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0		1
K565	INTESTINAL ADHESIONS [BANDS] WITH OBSTRUCTION	M	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0		2
K566	OTHER AND UNSPECIFIED INTESTINAL OBSTRUCTION	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	2	
		F	0	0	0	0	0	0	0	0	0	0	1	0	0	1	2	4	0		8
K567	ILEUS, UNSPECIFIED	M	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0		1
K572	DIVERTICULAR DISEASE OF LARGE INTESTINE WITH PERFORATION AND ABSCESS	M	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0		1
K578	DIVERTICULAR DISEASE OF INTESTINE, PART UNSPECIFIED, WITH PERFORATION AND ABSCESS	M	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	1	0	1	0	0	2	0	0		4
K579	DIVERTICULAR DISEASE OF INTESTINE, PART UNSPECIFIED, WITHOUT PERFORATION OR ABSCESS	M	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	2	
		F	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	2	0		3
K589	IRRITABLE BOWEL SYNDROME WITHOUT DIARRHEA	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0		2
K590	CONSTIPATION	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0		2

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INTERNATIONAL CLASSIFICATION OF DISEASES CODE (10th REVISION)		SEX	AGE AT DEATH																UNK	TOTAL		
			<1	1-4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-59	60-64	65-69	70-74	75-79	80-84	85+				
K599	FUNCTIONAL INTESTINAL DISORDER, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0
K611	RECTAL ABSCESS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	0	0	2
K629	DISEASE OF ANUS AND RECTUM, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
K631	PERFORATION OF INTESTINE (NONTRAUMATIC)	M	0	0	0	0	0	0	0	0	1	1	0	0	0	0	2	0	0	0	0	4
		F	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	2
K635	POLYP OF COLON	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
K639	DISEASE OF INTESTINE, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1
K650	ACUTE PERITONITIS	M	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
K659	PERITONITIS, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	0	0	0	2
		F	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	0	0	2
K661	HEMOPERITONEUM	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
K668	OTHER SPECIFIED DISORDERS OF PERITONEUM	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
K701	ALCOHOLIC HEPATITIS	M	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	1	2	0	0	0	0	0	0	0	0	0	0	3
K703	ALCOHOLIC CIRRHOSIS OF LIVER	M	0	0	0	0	0	0	0	1	3	6	7	5	3	1	3	0	0	0	0	29
		F	0	0	0	0	0	0	1	1	5	1	2	4	0	0	0	0	0	0	0	14
K704	ALCOHOLIC HEPATIC FAILURE	M	0	0	0	0	0	0	0	1	0	1	1	0	0	0	0	0	0	0	0	3
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
K709	ALCOHOLIC LIVER DISEASE, UNSPECIFIED	M	0	0	0	0	0	0	1	0	0	0	0	0	1	0	1	0	0	0	0	3
		F	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1
K729	HEPATIC FAILURE, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	1	0	0	1	0	0	0	0	0	0	2
K743	PRIMARY BILIARY CIRRHOSIS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	0	0	0	0	2
K746	OTHER AND UNSPECIFIED CIRRHOSIS OF LIVER	M	0	0	0	0	0	0	0	0	0	1	1	1	0	1	2	0	0	0	0	6
		F	0	0	0	0	0	0	0	0	1	1	2	0	0	3	2	0	0	0	0	9
K754	AUTOIMMUNE HEPATITIS	M	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	0	0	0	0	2
K760	FATTY (CHANGE OF) LIVER, NOT ELSEWHERE CLASSIFIED	M	0	0	0	0	0	0	0	0	0	0	1	1	0	1	0	0	0	0	0	3
		F	0	0	0	0	0	0	0	0	0	1	0	1	2	3	0	0	0	0	0	7
K767	HEPATORENAL SYNDROME	M	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
K769	LIVER DISEASE, UNSPECIFIED	M	0	0	0	0	0	0	0	0	2	0	0	0	0	1	0	0	0	0	0	3
		F	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1
K800	CALCULUS OF GALLBLADDER WITH ACUTE CHOLECYSTITIS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

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INTERNATIONAL CLASSIFICATION OF DISEASES CODE (10th REVISION)		AGE AT DEATH BY CAUSE AND SEX																	UNK	TOTAL
		SEX	AGE AT DEATH																	
			<1	1-4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-59	60-64	65-69	70-74	75-79	80-84	85+		
K802	CALCULUS OF GALLBLADDER WITHOUT CHOLECYSTITIS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	2	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	2	0	3
K810	ACUTE CHOLECYSTITIS	M	0	0	0	0	0	0	0	0	0	0	0	0	1	2	0	0	3	
		F	0	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0	2	
K811	CHRONIC CHOLECYSTITIS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	0	2	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	
K819	CHOLECYSTITIS, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	2	
K830	CHOLANGITIS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	0	2	
K831	OBSTRUCTION OF BILE DUCT	M	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
K839	DISEASE OF BILIARY TRACT, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
K850	IDIOPATHIC ACUTE PANCREATITIS	M	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
K859	ACUTE PANCREATITIS, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	2	0	1	0	0	0	3	
		F	0	0	0	0	0	0	0	1	0	0	0	1	0	1	0	0	3	
K861	OTHER CHRONIC PANCREATITIS	M	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
K869	DISEASE OF PANCREAS, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	0	0	0	1	0	2	0	3	
K922	GASTROINTESTINAL HEMORRHAGE, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	2	0	2	0	0	5	0	9	
		F	0	0	0	0	0	0	0	1	0	0	1	0	3	3	6	0	14	
K929	DISEASE OF DIGESTIVE SYSTEM, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
L039	CELLULITIS, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	
L120	BULLOUS PEMPHIGOID	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	
L899	DECUBITUS ULCER AND PRESSURE AREA, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	
L97	ULCER OF LOWER LIMB, NOT ELSEWHERE CLASSIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	
M009	PYOGENIC ARTHRITIS, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
M051	RHEUMATOID LUNG DISEASE	M	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
M052	RHEUMATOID VASCULITIS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
M069	RHEUMATOID ARTHRITIS, UNSPECIFIED	M	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	
		F	0	0	0	0	0	0	0	1	0	1	0	1	1	1	0	0	5	
M169	COXARTHROSIS, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	

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INTERNATIONAL CLASSIFICATION OF DISEASES CODE (10th REVISION)		AGE AT DEATH BY CAUSE AND SEX																	TOTAL		
		SEX	AGE AT DEATH																		
		<1	1-4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	UNK			
M199	ARTHROSIS, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0	3
M310	HYPERSENSITIVITY ANGIITIS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	2
M313	WEGENER'S GRANULOMATOSIS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
M353	POLYMYALGIA RHEUMATICA	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
M402	OTHER AND UNSPECIFIED KYPHOSIS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
M480	SPINAL STENOSIS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	2
M489	SPONDYLOPATHY, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
M513	OTHER SPECIFIED INTERVERTEBRAL DISC DEGENERATION	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1
M609	MYOSITIS, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	0	0	0	2
M622	ISCHEMIC INFARCTION OF MUSCLE	M	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
M726	NECROTIZING FASCIITIS	M	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
M792	NEURALGIA AND NEURITIS, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
M819	OSTEOPOROSIS, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1
M861	OTHER ACUTE OSTEOMYELITIS	M	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
M869	OSTEOMYELITIS, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	3	0	0	4
M878	OTHER OSTEO NECROSIS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1
N019	RAPIDLY PROGRESSIVE NEPHRITIC SYNDROME WITH UNSPECIFIED MORPHOLOGICAL CHANGES	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
N049	NEPHROTIC SYNDROME WITH UNSPECIFIED MORPHOLOGICAL CHANGES	M	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
N112	TUBULO-INTERSTITIAL NEPHRITIS, NOT SPECIFIED AS ACUTE OR CHRONIC	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1
N133	OTHER AND UNSPECIFIED HYDRONEPHROSIS	M	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	2
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
N136	PYONEPHROSIS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
N179	ACUTE RENAL FAILURE, UNSPECIFIED	M	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	0	0	2
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

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INTERNATIONAL CLASSIFICATION OF DISEASES CODE (10th REVISION)		AGE AT DEATH BY CAUSE AND SEX																	TOTAL	
		SEX	AGE AT DEATH																	
		<1	1-4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	UNK		
N183	CHRONIC KIDNEY DISEASE, STAGE 3	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
N184	CHRONIC KIDNEY DISEASE, STAGE 4	M	0	0	0	0	0	0	0	0	0	0	0	1	0	0	2	0	3	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
N185	CHRONIC KIDNEY DISEASE, STAGE 5	M	0	0	0	0	0	0	0	0	1	0	0	1	1	0	0	0	3	
		F	0	0	0	0	0	0	0	1	0	0	0	1	1	0	1	0	4	
N189	CHRONIC RENAL FAILURE, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	
		F	0	0	0	0	0	0	0	0	1	0	0	0	0	1	2	0	4	
N19	UNSPECIFIED RENAL FAILURE	M	0	0	0	0	0	0	0	0	0	1	1	0	0	0	1	0	3	
		F	0	0	0	0	0	0	0	1	0	0	2	0	0	1	1	0	5	
N200	CALCULUS OF KIDNEY	M	0	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0	2	
		F	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	
N26	UNSPECIFIED CONTRACTED KIDNEY	M	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
N288	OTHER SPECIFIED DISORDERS OF KIDNEY AND URETER	M	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
N319	NEUROMUSCULAR DYSFUNCTION OF BLADDER, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
N390	URINARY TRACT INFECTION, SITE NOT SPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	3	3	0	6	
		F	0	0	0	0	0	0	0	0	0	0	0	1	0	2	3	0	6	
N40	HYPERPLASIA OF PROSTATE	M	0	0	0	0	0	0	0	0	0	1	0	0	0	1	6	0	8	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
N61	INFLAMMATORY DISORDERS OF BREAST	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	
N719	INFLAMMATORY DISEASE OF UTERUS, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	
N739	FEMALE PELVIC INFLAMMATORY DISEASE, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	
N800	ENDOMETRIOSIS OF UTERUS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	
N859	NONINFLAMMATORY DISORDER OF UTERUS, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	
O969	DEATH FROM UNSPECIFIED OBSTETRIC CAUSE	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	
P015	FETUS AND NEWBORN AFFECTED BY MULTIPLE PREGNANCY	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	
P027	FETUS AND NEWBORN AFFECTED BY CHORIOAMNIONITIS	M	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	
		F	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	
P072	EXTREME IMMATURITY	M	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	
		F	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	
P073	OTHER PRETERM INFANTS	M	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	
		F	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	
P209	INTRAUTERINE HYPOXIA, UNSPECIFIED	M	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	

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INTERNATIONAL CLASSIFICATION OF DISEASES CODE (10th REVISION)		AGE AT DEATH BY CAUSE AND SEX																	TOTAL		
		SEX	AGE AT DEATH																		
			<1	1-4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	UNK		
P220	RESPIRATORY DISTRESS SYNDROME OF NEWBORN	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
P240	NEONATAL ASPIRATION OF MECONIUM	M	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
P293	PERSISTENT FETAL CIRCULATION	M	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
P529	INTRACRANIAL (NONTRAUMATIC) HEMORRHAGE OF NEWBORN, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
P832	HYDROPS FETALIS NOT DUE TO HEMOLYTIC DISEASE	M	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
P916	HYPOXIC ISCHAEMIC ENCEPHALOPATHY OF NEWBORN	M	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
		F	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Q031	ATRESIA OF FORAMINA OF MAGENDIE AND LUSCHKA	M	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Q211	CONGENITAL MALFORMATIONS: ATRIAL SEPTAL DEFECT	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
Q249	CONGENITAL MALFORMATION OF THE HEART, UNSPECIFIED	M	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Q273	PERIPHERAL ARTERIOVENOUS MALFORMATION	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
Q279	CONGENITAL MALFORMATION OF PERIPHERAL VASCULAR SYSTEM, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
Q336	HYPOPLASIA AND DYSPLASIA OF LUNG	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Q613	POLYCYSTIC KIDNEY, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1
Q871	CONGENITAL MALFORMATION SYNDROMES PREDOMINANTLY ASSOCIATED WITH SHORT STATURE	M	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Q872	CONGENITAL MALFORMATION SYNDROMES PREDOMINANTLY INVOLVING LIMBS	M	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Q878	OTHER SPECIFIED CONGENITAL MALFORMATION SYNDROMES, NOT ELSEWHERE CLASSIFIED	M	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Q899	CONGENITAL MALFORMATION, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1
Q909	DOWN'S SYNDROME, UNSPECIFIED	M	0	0	0	0	0	0	0	1	2	1	1	0	0	0	0	0	0	0	5
		F	0	0	0	0	0	0	0	1	0	3	0	0	0	0	0	0	0	0	4
R001	BRADYCARDIA, UNSPECIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
R13	DYSPHAGIA	M	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
R400	SOMNOLENCE	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1
R418	OTHER AND UNSPECIFIED SYMPTOMS AND SIGNS INVOLVING COGNITIVE FUNCTIONS AND AWARENESS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

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INTERNATIONAL CLASSIFICATION OF DISEASES CODE (10th REVISION)		SEX	AGE AT DEATH																	UNK	TOTAL	
			<1	1-4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-59	60-64	65-69	70-74	75-79	80-84	85+				
R522	OTHER CHRONIC PAIN	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0
R54	SENILITY	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	7	0	0
R570	CARDIOGENIC SHOCK	M	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
R628	OTHER LACK OF EXPECTED NORMAL PHYSIOLOGICAL DEVELOPMENT	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0	0
R64	CACHEXIA	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
R688	OTHER SPECIFIED GENERAL SYMPTOMS AND SIGNS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	0	0
R95	SUDDEN INFANT DEATH SYNDROME	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
R99	OTHER ILL-DEFINED AND UNSPECIFIED CAUSES OF MORTALITY	M	2	0	0	0	0	0	1	0	0	0	0	0	1	0	0	1	0	0	0	5
		F	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	0	0	0
V030	PEDESTRIAN INJURED IN NONTRAFFIC ACCIDENT INVOLVING COLLISION WITH CAR, PICK-UP TRUCK, OR VAN	M	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
V031	PEDESTRIAN INJURED IN TRAFFIC ACCIDENT INVOLVING COLLISION WITH CAR, PICK-UP TRUCK, OR VAN	M	0	0	0	0	0	0	0	0	2	1	0	0	1	0	0	0	0	0	0	4
		F	0	0	0	0	0	0	0	0	1	1	0	0	1	0	0	0	0	0	0	0
V041	PEDESTRIAN INJURED IN TRAFFIC ACCIDENT INVOLVING COLLISION WITH HEAVY TRANSPORT VEHICLE OR BUS	M	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	2
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
V182	UNSPECIFIED PEDAL CYCLIST INJURED IN NONCOLLISION, NONTRAFFIC ACCIDENT	M	0	0	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	0	2
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
V189	UNSPECIFIED PEDAL CYCLIST INJURED IN NONCOLLISION, TRAFFIC ACCIDENT	M	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
V224	DRIVER INJURED IN TRAFFIC ACCIDENT	M	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
V234	MOTORCYCLE DRIVER INJURED IN TRAFFIC ACCIDENT INVOLVING COLLISION WITH CAR, PICK-UP TRUCK OR VAN	M	0	0	0	0	1	0	2	0	1	0	0	0	0	0	0	0	0	0	0	4
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
V274	MOTORCYCLE DRIVER INJURED IN TRAFFIC ACCIDENT INVOLVING COLLISION WITH FIXED OR STATIONARY OBJECT	M	0	0	0	0	0	0	1	0	1	0	0	1	0	0	0	0	0	0	0	3
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
V284	MOTORCYCLE DRIVER INJURED IN NONCOLLISION TRANSPORT TRAFFIC ACCIDENT	M	0	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	0	0	0	2
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
V294	MOTORCYCLE DRIVER INJURED IN COLLISION WITH OTHER AND UNSPECIFIED MOTOR VEHICLES IN TRAFFIC ACCIDENT	M	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
V299	MOTORCYCLE RIDER [ANY] INJURED IN UNSPECIFIED TRAFFIC ACCIDENT	M	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	2
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
V435	CAR DRIVER INJURED IN TRAFFIC ACCIDENT INVOLVING COLLISION WITH CAR, PICK-UP TRUCK OR VAN	M	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0	0	0	2
		F	0	0	0	0	0	0	1	0	2	2	0	1	0	0	1	0	0	0	0	0
V436	CAR PASSENGER INJURED IN TRAFFIC ACCIDENT INVOLVING COLLISION WITH CAR, PICK-UP TRUCK OR VAN	M	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	2
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0
V445	CAR DRIVER INJURED IN TRAFFIC ACCIDENT INVOLVING COLLISION WITH HEAVY TRANSPORT VEHICLE OR BUS	M	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	0	0	0	2
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

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2017 VERMONT RESIDENT DEATHS

INTERNATIONAL CLASSIFICATION OF DISEASES CODE (10th REVISION)		SEX	AGE AT DEATH																	UNK	TOTAL
			<1	1-4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-59	60-64	65-69	70-74	75-79	80-84	85+			
V475	CAR DRIVER INJURED IN TRAFFIC ACCIDENT INVOLVING COLLISION WITH FIXED OR STATIONARY OBJECT	M	0	0	0	0	0	1	1	0	0	1	0	0	1	0	0	0	0	4	
		F	0	0	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	2	
V476	CAR PASSENGER INJURED IN TRAFFIC ACCIDENT INVOLVING COLLISION WITH FIXED OR STATIONARY OBJECT	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	
		F	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	
V485	CAR DRIVER INJURED IN NONCOLLISION TRANSPORT, TRAFFIC ACCIDENT	M	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
V486	CAR PASSENGER INJURED IN NONCOLLISION TRANSPORT, TRAFFIC ACCIDENT	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	
V494	CAR DRIVER INJURED IN COLLISION WITH OTHER AND UNSPECIFIED MOTOR VEHICLES IN TRAFFIC ACCIDENT	M	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	
V499	CAR OCCUPANT [ANY] INJURED IN UNSPECIFIED TRAFFIC ACCIDENT	M	0	0	0	0	0	0	0	2	0	0	0	0	1	0	0	0	0	3	
		F	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	
V535	DRIVER OF PICK-UP TRUCK OR VAN INJURED IN TRAFFIC ACCIDENT INVOLVING COLLISION WITH CAR, PICK-UP TRUCK OR VAN	M	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
V575	DRIVER OF PICK-UP TRUCK OR VAN INJURED IN TRAFFIC ACCIDENT INVOLVING COLLISION WITH FIXED OR STATIONARY OBJECT	M	0	0	0	0	0	1	0	0	0	1	0	0	0	0	0	0	0	2	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
V576	PASSENGER OF PICK-UP TRUCK OR VAN INJURED IN TRAFFIC ACCIDENT INVOLVING COLLISION WITH FIXED OR STATIONARY OBJECT	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	
V599	OCCUPANT [ANY] OF PICK-UP TRUCK OR VAN INJURED IN UNSPECIFIED TRAFFIC ACCIDENT	M	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
V860	DRIVER OF ALL-TERRAIN OR OTHER OFF-ROAD MOTOR VEHICLE INJURED IN TRAFFIC ACCIDENT	M	0	0	0	0	0	1	0	0	1	0	0	0	0	0	0	0	0	2	
		F	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	
V865	DRIVER OF ALL-TERRAIN OR OTHER OFF-ROAD MOTOR VEHICLE INJURED IN NONTRAFFIC ACCIDENT	M	0	0	0	1	0	3	1	1	0	0	0	0	0	0	0	0	0	6	
		F	0	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	0	2	
V877	PERSON INJURED IN COLLISION BETWEEN OTHER SPECIFIED MOTOR VEHICLES (TRAFFIC)	M	0	0	0	0	1	0	0	1	0	0	0	0	0	0	0	1	0	3	
		F	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	
V892	PERSON INJURED IN UNSPECIFIED MOTOR-VEHICLE ACCIDENT, TRAFFIC	M	0	0	0	0	0	1	1	1	3	0	0	0	0	1	0	0	0	7	
		F	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	
V929	WATER-TRANSPORT-RELATED DROWNING AND SUBMERSION WITHOUT ACCIDENT TO UNSPECIFIED WATERCRAFT	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	
W00	FALL ON SAME LEVEL INVOLVING ICE AND SNOW	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	
W02	FALL INVOLVING ICE SKATES, SKIS, ROLLER SKATES, OR SKATEBOARDS	M	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	2	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
W05	FALL INVOLVING WHEELCHAIR	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	
W06	FALL INVOLVING BED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1		
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	4	0	4		
W07	FALL INVOLVING CHAIR	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	
W10	FALL ON AND FROM STAIRS AND STEPS	M	0	0	0	0	0	0	0	0	0	1	0	1	0	3	2	0	7		
		F	0	0	0	0	0	0	0	0	1	0	0	0	3	0	0	3	0	7	
W11	FALL ON AND FROM LADDER	M	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	

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INTERNATIONAL CLASSIFICATION OF DISEASES CODE (10th REVISION)		SEX	AGE AT DEATH																UNK	TOTAL	
			<1	1-4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-59	60-64	65-69	70-74	75-79	80-84	85+			
W13	FALL FROM, OUT OF, OR THROUGH BUILDING OR STRUCTURE	M	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
W17	OTHER FALL FROM ONE LEVEL TO ANOTHER	M	0	0	0	0	0	0	0	1	1	0	0	0	0	0	0	1	0	0	3
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
W18	OTHER FALL ON SAME LEVEL	M	0	0	0	0	0	0	0	0	1	0	0	0	4	3	3	19	0	0	30
		F	0	0	0	0	0	0	0	0	0	0	1	1	1	2	4	37	0	0	46
W19	UNSPECIFIED FALL	M	0	0	0	0	0	0	0	0	0	2	1	0	2	1	1	7	0	0	14
		F	0	0	0	0	0	0	0	0	1	0	1	0	1	1	4	10	0	0	18
W23	CAUGHT, CRUSHED, JAMMED, OR PINCHED IN OR BETWEEN OBJECTS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
W28	CONTACT WITH POWERED LAWN MOWER	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1
W30	CONTACT WITH AGRICULTURAL MACHINERY	M	0	0	1	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	2
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
W31	CONTACT WITH OTHER AND UNSPECIFIED MACHINERY	M	0	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	2
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
W34	DISCHARGE FROM OTHER AND UNSPECIFIED FIREARMS	M	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
W67	DROWNING AND SUBMERSION WHILE IN SWIMMING POOL	M	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
W69	DROWNING AND SUBMERSION WHILE IN NATURAL WATER	M	0	0	0	1	1	0	0	0	0	0	1	0	0	0	0	0	0	0	3
		F	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1
W73	OTHER SPECIFIED DROWNING AND SUBMERSION	M	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
W75	ACCIDENTAL SUFFOCATION AND STRANGULATION IN BED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
W76	OTHER ACCIDENTAL HANGING AND STRANGULATION	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
W78	INHALATION OF GASTRIC CONTENTS	M	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
W79	INHALATION AND INGESTION OF FOOD CAUSING OBSTRUCTION OF RESPIRATORY TRACT	M	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	1	1	0	0	0	0	0	0	1	0	0	3
W80	INHALATION AND INGESTION OF OTHER OBJECTS CAUSING OBSTRUCTION OF RESPIRATORY TRACT	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0	0	3
W84	UNSPECIFIED THREAT TO BREATHING	M	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
W87	EXPOSURE TO UNSPECIFIED ELECTRIC CURRENT	M	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
X00	EXPOSURE TO UNCONTROLLED FIRE IN BUILDING OR STRUCTURE	M	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	1	0	0	1	0	0	0	0	0	2	0	0	4
X06	EXPOSURE TO IGNITION OR MELTING OF OTHER CLOTHING AND APPAREL	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1

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INTERNATIONAL CLASSIFICATION OF DISEASES CODE (10th REVISION)		AGE AT DEATH BY CAUSE AND SEX																	TOTAL	
		SEX	AGE AT DEATH																	
			<1	1-4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	UNK	
X31	EXPOSURE TO EXCESSIVE NATURAL COLD	M	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
		F	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0
X41	ACCIDENTAL POISONING BY AND EXPOSURE TO ANTIPILEPTIC, SEDATIVE-HYPNOTIC, ANTIPARKINSONISM, AND PSYCHOTROPIC DRUGS, NOT ELSEWHERE CLASSIFIED	M	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	0
X42	ACCIDENTAL POISONING BY AND EXPOSURE TO NARCOTICS AND PSYCHODYSLEPTICS [HALLUCINOGENS], NOT ELSEWHERE CLASSIFIED	M	0	0	0	0	2	9	22	16	10	5	1	0	0	0	0	0	0	65
		F	0	0	0	0	0	2	9	7	4	0	2	0	0	0	0	0	0	24
X44	ACCIDENTAL POISONING BY AND EXPOSURE TO OTHER AND UNSPECIFIED DRUGS, MEDICAMENTS, AND BIOLOGICAL SUBSTANCES	M	0	0	0	0	0	2	3	4	3	2	1	0	0	0	0	1	0	16
		F	0	0	0	0	0	0	2	1	0	0	1	0	0	0	0	0	1	5
X45	ACCIDENTAL POISONING BY AND EXPOSURE TO ALCOHOL	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	1	1	1	0	0	0	0	0	0	0	3
X46	ACCIDENTAL POISONING BY AND EXPOSURE TO ORGANIC SOLVENTS AND HALOGENATED HYDROCARBONS AND THEIR VAPORS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
X47	ACCIDENTAL POISONING BY AND EXPOSURE TO OTHER GASES AND VAPORS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1
X49	ACCIDENTAL POISONING BY AND EXPOSURE TO OTHER AND UNSPECIFIED CHEMICALS AND NOXIOUS SUBSTANCES	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1
X53	LACK OF FOOD	M	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
X590	ACCIDENTAL EXPOSURE TO UNSPECIFIED FACTOR CAUSING FRACTURE	M	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	2
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0
X599	ACCIDENTAL EXPOSURE TO UNSPECIFIED FACTOR	M	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	2
X61	INTENTIONAL SELF-POISONING (SUICIDE) BY AND EXPOSURE TO ANTIPILEPTIC, SEDATIVE-HYPNOTIC, ANTIPARKINSONISM, AND PSYCHOTROPIC DRUGS, NOT ELSEWHERE CLASSIFIED	M	0	0	0	0	0	0	0	0	1	1	2	0	0	0	0	0	0	4
		F	0	0	0	0	0	0	0	1	1	0	0	1	0	0	0	0	0	3
X62	INTENTIONAL SELF-POISONING (SUICIDE) BY AND EXPOSURE TO NARCOTICS AND PSYCHODYSLEPTICS [HALLUCINOGENS], NOT ELSEWHERE CLASSIFIED	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
X64	INTENTIONAL SELF-POISONING (SUICIDE) BY AND EXPOSURE TO OTHER AND UNSPECIFIED DRUGS, MEDICAMENTS, AND BIOLOGICAL SUBSTANCES	M	0	0	0	0	0	0	0	3	0	0	1	0	0	0	0	0	0	4
		F	0	0	0	0	0	0	0	1	0	0	0	2	1	0	0	0	0	4
X70	INTENTIONAL SELF HARM (SUICIDE) BY HANGING, STRANGULATION, AND SUFFOCATION	M	0	0	0	0	3	0	6	3	4	1	0	0	0	0	0	0	0	17
		F	0	0	0	0	1	1	0	2	2	1	0	0	0	0	0	0	0	7
X72	INTENTIONAL SELF HARM (SUICIDE) BY HANDGUN DISCHARGE	M	0	0	0	0	1	1	7	6	4	1	2	2	2	0	0	3	0	29
		F	0	0	0	0	1	1	1	2	3	1	0	0	0	0	0	0	0	9
X73	INTENTIONAL SELF HARM (SUICIDE) BY RIFLE, SHOTGUN, AND LARGER FIREARM DISCHARGE	M	0	0	0	0	1	1	2	5	6	1	1	0	0	1	0	1	0	19
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
X74	INTENTIONAL SELF HARM (SUICIDE) BY OTHER AND UNSPECIFIED FIREARM DISCHARGE	M	0	0	0	0	0	1	2	0	0	0	0	0	0	1	0	0	0	4
		F	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1
X76	INTENTIONAL SELF HARM (SUICIDE) BY SMOKE, FIRE, AND FLAMES	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1
X78	INTENTIONAL SELF HARM (SUICIDE) BY SHARP OBJECT	M	0	0	0	0	0	1	0	1	1	0	0	0	0	0	0	0	0	3
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

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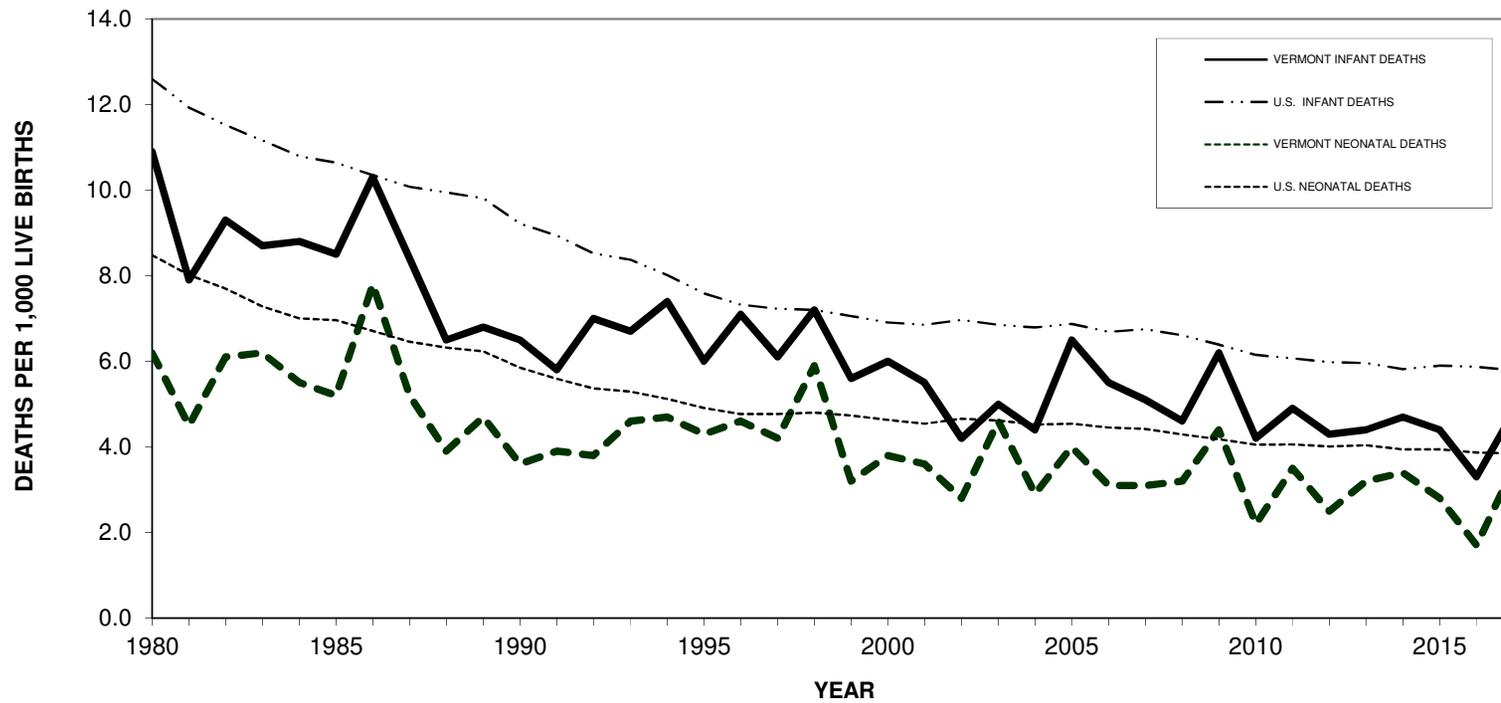
INTERNATIONAL CLASSIFICATION OF DISEASES CODE (10th REVISION)		SEX	AGE AT DEATH																	UNK	TOTAL	
			<1	1-4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-59	60-64	65-69	70-74	75-79	80-84	85+				
X80	INTENTIONAL SELF HARM (SUICIDE) BY JUMPING FROM A HIGH PLACE	M	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	0	0	0	0
X82	INTENTIONAL SELF HARM (SUICIDE) BY CRASHING OF MOTOR VEHICLE	M	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0
X91	ASSAULT (HOMICIDE) BY HANGING, STRANGULATION, AND SUFFOCATION	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0
X94	ASSAULT (HOMICIDE) BY RIFLE, SHOTGUN, AND LARGER FIREARM DISCHARGE	M	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0
X95	ASSAULT (HOMICIDE) BY OTHER AND UNSPECIFIED FIREARM DISCHARGE	M	0	0	0	0	0	0	1	1	0	1	0	0	0	0	0	0	0	0	0	3
		F	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	0	0	0	0	0
X99	ASSAULT (HOMICIDE) BY SHARP OBJECT	M	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	2
		F	0	0	0	0	0	0	1	0	1	0	0	0	0	0	1	0	0	0	0	0
Y069	NEGLECT AND ABANDONMENT BY UNSPECIFIED PERSON	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0
Y09	ASSAULT (HOMICIDE) BY UNSPECIFIED MEANS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0
Y12	POISONING BY AND EXPOSURE TO NARCOTICS AND PSYCHODYSLEPTICS [HALLUCINOGENS], NOT ELSEWHERE CLASSIFIED, UNDETERMINED INTENT	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0
Y14	POISONING BY AND EXPOSURE TO OTHER AND UNSPECIFIED DRUGS, MEDICAMENTS, AND BIOLOGICAL SUBSTANCES, UNDETERMINED INTENT	M	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0
Y21	DROWNING AND SUBMERSION, UNDETERMINED INTENT	M	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Y32	CRASHING OF MOTOR VEHICLE, UNDETERMINED INTENT	M	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Y33	OTHER SPECIFIED EVENTS, UNDETERMINED INTENT	M	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Y34	UNSPECIFIED EVENT, UNDETERMINED INTENT	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Y442	ANTICOAGULANTS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Y445	THROMBOLYTIC DRUGS	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Y575	ADVERSE EFFECTS IN THERAPEUTIC USE FROM X-RAY CONTRAST MEDIA	M	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Y600	UNINTENTIONAL CUT, PUNCTURE, PERFORATION, OR HEMORRHAGE DURING SURGICAL OPERATION	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0
Y830	SURGICAL OPERATION WITH TRANSPLANT OF WHOLE ORGAN AS THE CAUSE OF ABNORMAL REACTION OF THE PATIENT, OR OF LATER COMPLICATION, WITHOUT MENTION OF MISADVENTURE AT THE TIME OF THE PROCEDURE	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0
Y833	SURGICAL OPERATION WITH FORMATION OF EXTERNAL STOMA AS THE CAUSE OF ABNORMAL REACTION OF THE PATIENT, OR OF LATER COMPLICATION, WITHOUT MENTION OF MISADVENTURE AT THE TIME OF THE PROCEDURE	M	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1
		F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

TABLE C-18 - PAGE 31
2017 VERMONT RESIDENT DEATHS

INTERNATIONAL CLASSIFICATION OF DISEASES CODE (10th REVISION)		AGE AT DEATH BY CAUSE AND SEX																	UNK	TOTAL	
		SEX	AGE AT DEATH																		
			<1	1-4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-59	60-64	65-69	70-74	75-79	80-84	85+			
Y834	OTHER RECONSTRUCTIVE SURGERY AS THE CAUSE OF ABNORMAL REACTION OF THE PATIENT, OR OF LATER COMPLICATION, WITHOUT MENTION OF MISADVENTURE AT THE TIME OF THE PROCEDURE	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	F	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0
Y835	AMPUTATION OF LIMB (S) AS THE CAUSE OF ABNORMAL REACTION OF THE PATIENT, OR OF LATER COMPLICATION, WITHOUT MENTION OF MISADVENTURE AT THE TIME OF THE PROCEDURE	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Y836	REMOVAL OF OTHER ORGAN (PARTIAL) (TOTAL) AS THE CAUSE OF ABNORMAL REACTION OF THE PATIENT, OR OF LATER COMPLICATION, WITHOUT MENTION OF MISADVENTURE AT THE TIME OF THE PROCEDURE	M	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Y838	OTHER SURGICAL PROCEDURES AS THE CAUSE OF ABNORMAL REACTION OF THE PATIENT, OR OF LATER COMPLICATION, WITHOUT MENTION OF MISADVENTURE AT THE TIME OF THE PROCEDURE	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	F	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0
Y846	URINARY CATHETERIZATION AS THE CAUSE OF ABNORMAL REACTION OF THE PATIENT, OR OF LATER COMPLICATION, WITHOUT MENTION OF MISADVENTURE AT THE TIME OF THE PROCEDURE	M	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Y848	OTHER MEDICAL PROCEDURES AS THE CAUSE OF ABNORMAL REACTION OF THE PATIENT, OR OF LATER COMPLICATION, WITHOUT MENTION OF MISADVENTURE AT THE TIME OF THE PROCEDURE	M	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Y850	SEQUELAE OF MOTOR-VEHICLE ACCIDENT	M	0	0	0	0	0	0	0	1	0	1	0	1	1	0	0	0	0	0	4
	F	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Y859	SEQUELAE OF OTHER AND UNSPECIFIED TRANSPORT ACCIDENTS	M	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Y86	SEQUELAE OF OTHER ACCIDENTS	M	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Y870	SEQUELAE OF INTENTIONAL SELF HARM	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	F	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1
TOTALS		M	14	3	2	4	12	31	70	84	169	192	240	298	347	355	368	845	0	3034	
	F	13	1	1	0	4	8	30	54	126	116	162	207	283	295	395	1280	1	2976		
STATE TOTALS			27	4	3	4	16	39	100	138	295	308	402	505	630	650	763	2125	1	6010	

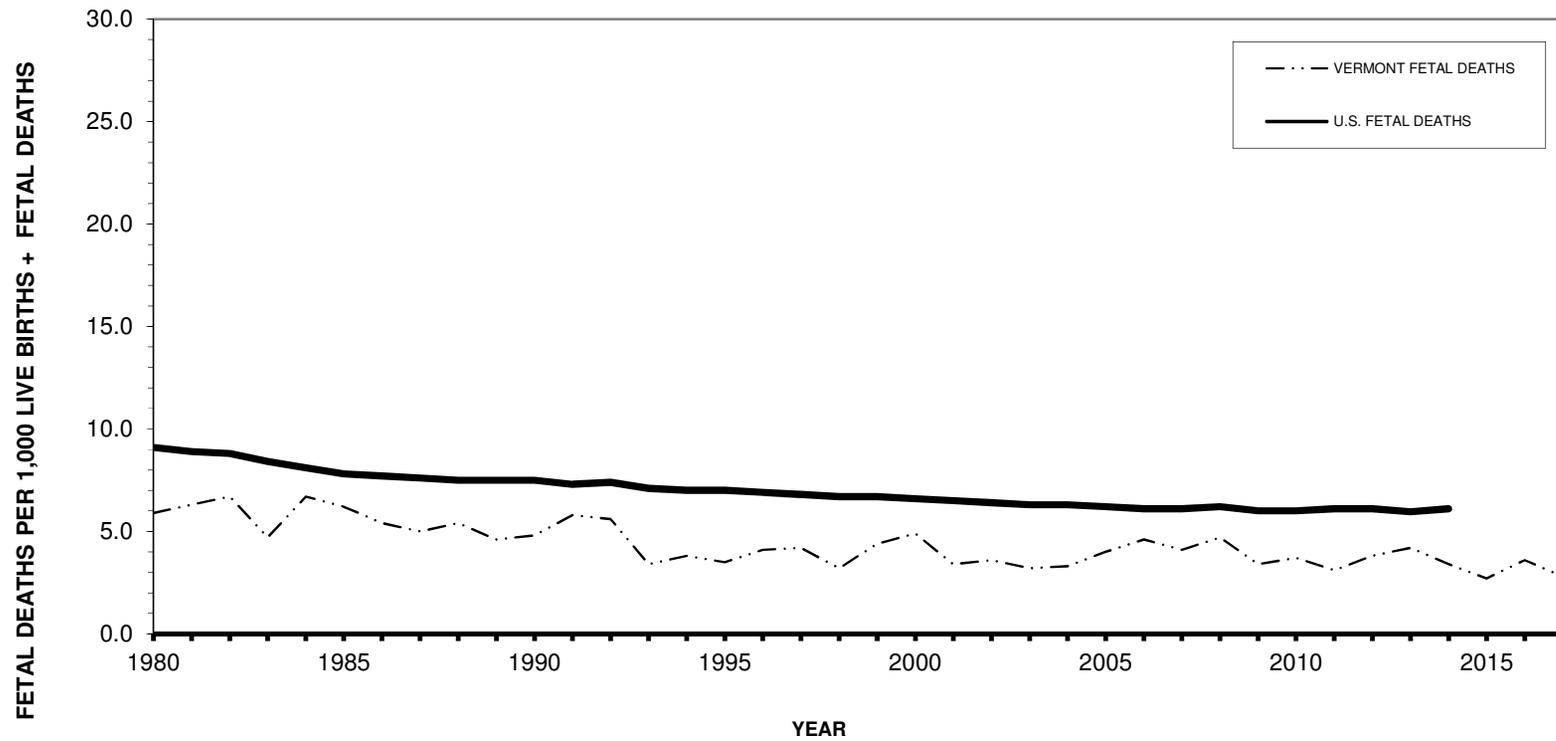
Infant Deaths, Fetal Deaths, Abortions and Pregnancies

**Figure 10a
VERMONT AND U.S.
INFANT AND NEONATAL MORTALITY RATES
1980 - 2017**



Vermont data points can be found in Table A-1. Data points for the U.S. population can be found in Appendix D.

Figure 10b
VERMONT AND U.S.
FETAL MORTALITY RATES
1980 - 2017



Vermont data points can be found in Table A-1. Data points for the U.S. population can be found in Appendix D.

INFANT DEATHS, FETAL DEATHS, AND ABORTIONS

INFANT DEATHS

In 2017, there were 27 resident infant deaths, which equates to a rate of 4.7 infant deaths per 1,000 live births, up from 3.3 in 2016 which was the lowest rate ever recorded in Vermont. This rate is lower than the 2017 U.S. rate of 5.8. The Vermont infant mortality rate steadily declined from 24.0 in 1960 to 5.8 per 1,000 live births in 1991. Over the past two decades the rate has fluctuated between a high of 7.4 in 1994 and a low of 3.3 in 2016. (Table A-1)

Twenty (74 percent) of the infant deaths occurred during the neonatal period, that is before the infant became 28 days old (Table D-3). The neonatal death rate was 3.5 deaths per 1,000 live births (Table D-2), below the 2017 U.S. neonatal death rate of 3.9. The Vermont neonatal death rate decreased from 18.6 in 1960, to 14.4 in 1970, to 6.2 in 1980, to 3.6 in 1990 (Table A-1), then followed an increasing trend through the nineties to a high of 5.9 in 1998. The rate has fluctuated throughout the past two decades.

One of the most important risk factors in infant mortality is low birth weight (Table D-3). Of resident infants who died in 2017, 52% had a birth weight less than 2500 grams (5 pounds 8 ounces), while 6.7 percent of all resident births were low birth weight. The infant mortality rate for low weight births was 36.7 deaths per 1,000 live births.

FETAL DEATHS

Unlike births and deaths, reports of fetal deaths and abortions are not shared among states. Therefore, statistics concerning these events reflect occurrences in Vermont only and do not include Vermont resident fetal deaths and abortions that occurred in other states.

There were 16 resident fetal deaths in 2017 (Table D-1) for a rate of 2.8 per 1,000 live births and fetal deaths, down from 3.6 per 1,000 live births and fetal deaths in 2016 (Table D-2). Of the fetal deaths in Vermont, 12 weighed less than 2500 grams (Table D-3). From 2015 to 2017, the fetal death rate was highest in the 25 to 29 age group: 4.3 per 1,000 live births (Table D-2).

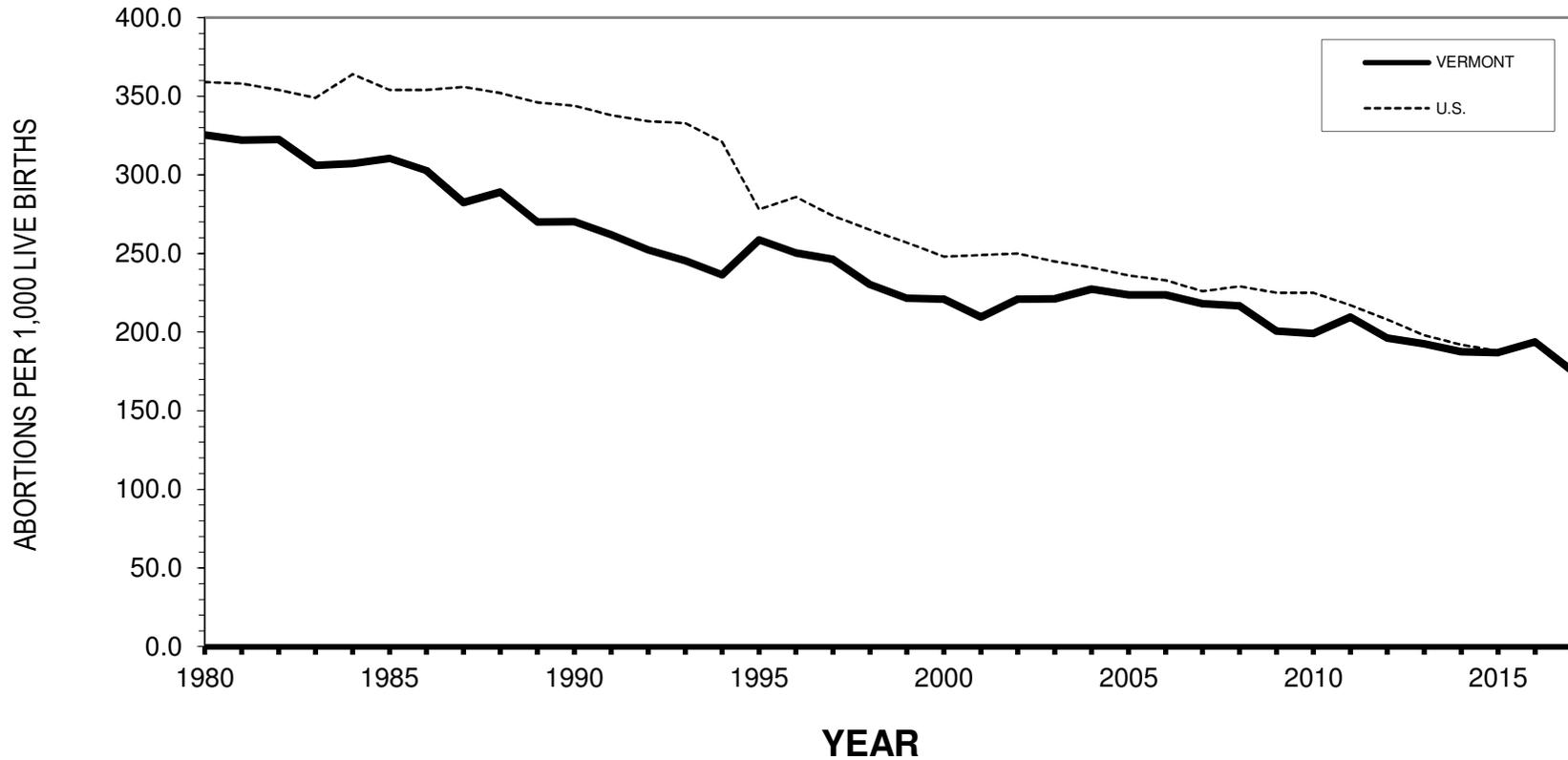
VERMONT ABORTIONS

There were 1,203 abortions performed in Vermont in 2017, declining from 1,298 in 2016. Vermont residents accounted for 992, or 82.5 percent. This represents a rate of 8.7 per 1,000 Vermont women ages 15 to 44.

The abortion ratio is the number of resident abortions occurring in Vermont times 1,000, divided by the total resident live births. The abortion ratio for 2017 was 175.4 abortions per 1,000 live births, a decrease from the 193.7 seen in 2016. The U.S. abortion ratio was 188 per 1,000 live births in 2015. Women age 25 to 29 had the highest *age-specific* abortion rate, of 18.7 per 1,000 women, followed by women age 20 to 24 at 14.8.

First trimester abortions (less than or equal to 12 weeks) accounted for 91.9 percent of all Vermont abortions, and 70.9 percent of all Vermont abortions were for pregnancies of less than 9 weeks duration (Table E-5). See Appendix B for the method used to compute the number of weeks of gestation.

Figure 11
VERMONT AND U.S. ABORTION RATIOS
1980 - 2017



Vermont data points can be found in Table A-1. Data points for the U.S. population can be found in Appendix D and are based on reporting states. US Data for 2016 and 2017 is not available at the time of printing.

TABLE D-1
2017

EVENTS BY AGE OF MOTHER AND COUNTY OF RESIDENCE

AGE OF MOTHER	FETAL DEATHS	PERINATAL DEATHS	NEONATAL DEATHS	INFANT DEATHS
<20	0	0	0	2
20-24	3	3	0	2
25-29	7	16	10	11
30-34	3	9	8	10
35-39	3	4	1	1
40-44	0	1	1	1
45+	0	0	0	0
UNKNOWN	0	0	0	0
STATE TOTAL	16	33	20	27

COUNTY OF RESIDENCE	FETAL DEATHS	PERINATAL DEATHS	NEONATAL DEATHS	INFANT DEATHS
ADDISON	4	4	0	0
BENNINGTON	1	3	2	2
CALEDONIA	0	0	0	0
CHITTENDEN	3	11	8	10
ESSEX	0	0	0	0
FRANKLIN	5	5	0	0
GRAND ISLE	1	1	0	0
LAMOILLE	1	1	0	0
ORANGE	0	1	1	1
ORLEANS	0	0	0	2
RUTLAND	0	2	3	5
WASHINGTON	0	1	2	2
WINDHAM	1	3	3	3
WINDSOR	0	1	1	2
STATE TOTAL	16	33	20	27

**TABLE D-2
2015-2017 VERMONT RESIDENT
FETAL, PERINATAL, NEONATAL AND INFANT DEATH RATES
BY AGE OF MOTHER**

AGE OF MOTHER	FETAL DEATHS	PERINATAL DEATHS	NEONATAL DEATHS	INFANT DEATHS
15-19 YEARS	3.0	4.5	1.5	6.0
20-24 YEARS	3.7	4.7	1.0	3.7
25-29 YEARS	4.4	7.2	3.0	4.6
30-34 YEARS	2.4	4.8	3.0	3.9
35-39 YEARS	1.8	3.6	3.9	4.3
40-44 YEARS	0.0	2.1	2.1	2.1
2015-2017	3.1	5.2	2.7	4.2
2015 TOTAL	2.7	4.7	2.9	4.6
2016 TOTAL	3.6	5.0	1.7	3.3
2017 TOTAL	2.8	5.8	3.5	4.8

NOTES:

Fetal and perinatal death rates are the number of resident fetal deaths and perinatal deaths per 1,000 resident live births and fetal deaths.

Neonatal and infant death rates are the number of resident neonatal deaths and infant deaths per 1,000 resident live births.

Data for the years 2015-2017 have been combined to produce more stable rates.

TABLE D-3
2017 VERMONT RESIDENT FETAL, PERINATAL, NEONATAL AND INFANT DEATHS
EVENTS BY WEEKS GESTATION and BIRTH WEIGHT IN GRAMS

WEEKS GESTATION	FETAL DEATHS	PERINATAL DEATHS	NEONATAL DEATHS	INFANT DEATHS
<28 WEEKS	6	16	10	11
28-31 WEEKS	0	1	1	1
32-35 WEEKS	5	5	2	4
36 WEEKS	1	1	0	0
37-39 WEEKS	3	4	2	4
40 WEEKS	0	2	2	3
41 WEEKS	1	3	2	3
42+ WEEKS	0	0	0	0
UNKNOWN	0	1	1	1
STATE TOTAL	16	33	20	27

BIRTH WEIGHT	FETAL DEATHS	PERINATAL DEATHS	NEONATAL DEATHS	INFANT DEATHS
<500g	6	12	6	6
500-999g	1	5	4	5
1000-1499g	2	3	1	1
1500-1999g	1	1	0	1
2000-2499g	0	0	0	1
2500-2999g	3	3	2	2
3000-3499g	2	4	3	6
3500-3999g	0	2	2	3
4000g+	0	2	2	2
UNKNOWN	1	1	0	0
STATE TOTAL	16	33	20	27

TABLE E-1

2017 VERMONT ABORTIONS - OCCURRENCE

AGE OF PATIENT BY PLACE OF RESIDENCE

PLACE OF RESIDENCE	AGE OF PATIENT											UNK	TOTAL	
	< 15 YEARS	15 YEARS	16 YEARS	17 YEARS	18 YEARS	19 YEARS	20-24 YEARS	25-29 YEARS	30-34 YEARS	35-39 YEARS	40+ YEARS			
ARIZONA	0	0	0	0	0	0	1	0	0	0	0	0	0	1
CALIFORNIA	0	0	0	0	0	1	0	2	0	0	0	0	0	3
COLORADO	0	0	0	0	0	0	2	0	1	0	0	0	0	3
FLORIDA	0	0	0	0	0	0	1	0	0	1	0	0	0	2
MAINE	0	0	0	0	0	0	3	0	0	1	0	0	0	4
MASSACHUSETTS	0	0	1	0	1	1	4	5	3	3	0	0	0	18
NEW HAMPSHIRE	0	0	0	8	4	4	31	33	27	13	6	0	0	126
NEW JERSEY	0	0	0	0	0	0	1	0	0	0	0	0	0	1
NEW YORK	0	0	0	0	0	1	12	10	14	5	1	0	0	43
NORTH CAROLINA	0	0	0	0	0	0	1	0	0	0	0	0	0	1
PENNSYLVANIA	0	0	0	1	0	0	1	0	0	0	1	0	0	3
RHODE ISLAND	0	0	0	0	0	0	0	0	1	0	0	0	0	1
SOUTH CAROLINA	0	0	0	0	0	0	1	0	0	0	0	0	0	1
VERMONT	2	6	10	13	18	41	275	279	187	119	40	2	0	992
WASHINGTON	0	0	0	0	0	0	0	0	1	0	0	0	0	1
CANADA	0	0	0	0	0	0	0	1	1	1	0	0	0	3
TOTAL	2	6	11	22	23	48	333	330	235	143	48	2	0	1203

TABLE E-2

2017 VERMONT ABORTIONS - OCCURRENCE

RACE OF PATIENT BY PLACE OF RESIDENCE

PLACE OF RESIDENCE	RACE OF PATIENT						TOTAL
	WHITE	BLACK	AMERICAN INDIAN	ASIAN OR PACIFIC ISLANDER	OTHER NON-WHITE	UNKNOWN	
ARIZONA	0	1	0	0	0	0	1
CALIFORNIA	3	0	0	0	0	0	3
COLORADO	3	0	0	0	0	0	3
FLORIDA	2	0	0	0	0	0	2
MAINE	2	0	0	1	1	0	4
MASSACHUSETTS	15	0	0	1	2	0	18
NEW HAMPSHIRE	108	2	3	8	3	2	126
NEW JERSEY	1	0	0	0	0	0	1
NEW YORK	39	1	2	0	1	0	43
NORTH CAROLINA	1	0	0	0	0	0	1
PENNSYLVANIA	3	0	0	0	0	0	3
RHODE ISLAND	0	0	0	0	1	0	1
SOUTH CAROLINA	1	0	0	0	0	0	1
VERMONT	907	31	2	26	19	7	992
WASHINGTON	1	0	0	0	0	0	1
CANADA	2	1	0	0	0	0	3
TOTAL	1088	36	7	36	27	9	1203

TABLE E-3

2017 VERMONT ABORTIONS - OCCURRENCE

AGE OF PATIENT BY COUNTY OF RESIDENCE

COUNTY OF RESIDENCE	AGE OF PATIENT											UNK	TOTAL
	< 15 YEARS	15 YEARS	16 YEARS	17 YEARS	18 YEARS	19 YEARS	20-24 YEARS	25-29 YEARS	30-34 YEARS	35-39 YEARS	40+ YEARS		
ADDISON	0	0	0	0	0	2	9	6	6	6	1	0	30
BENNINGTON	0	0	1	1	3	3	17	15	11	5	3	0	59
CALEDONIA	0	1	0	0	1	2	19	13	8	3	1	0	48
CHITTENDEN	0	2	1	1	6	11	87	81	62	37	12	2	302
ESSEX	0	0	0	0	0	1	3	3	1	1	0	0	9
FRANKLIN	0	0	1	1	2	2	22	18	8	5	3	0	62
GRAND ISLE	0	0	0	0	0	0	6	3	3	1	0	0	13
LAMOILLE	0	1	1	2	0	2	10	19	12	6	4	0	57
ORANGE	0	0	0	0	0	3	5	15	7	4	1	0	35
ORLEANS	1	0	0	0	0	2	9	11	6	4	1	0	34
RUTLAND	1	0	2	0	3	6	26	35	26	9	4	0	112
WASHINGTON	0	1	3	1	1	3	27	30	18	22	6	0	112
WINDHAM	0	1	0	4	2	3	14	12	8	8	3	0	55
WINDSOR	0	0	1	3	0	1	21	17	11	8	1	0	63
UNKNOWN CTY	0	0	0	0	0	0	0	1	0	0	0	0	1
OUT OF STATE	0	0	1	9	5	7	58	51	48	24	8	0	211
STATE TOTAL	2	6	11	22	23	48	333	330	235	143	48	2	1203

**TABLE E-4
2017 VERMONT ABORTIONS - OCCURRENCE**

AGE OF PATIENT	WEEKS GESTATION BY AGE OF PATIENT						UNKNOWN	TOTAL
	< 9	9 - 10	11 - 12	13 - 15	16 - 20	21 +		
< 15 YEARS	2	0	0	0	0	0	0	2
15 YEARS	2	2	0	2	0	0	0	6
16 YEARS	7	0	3	0	1	0	0	11
17 YEARS	15	2	4	0	1	0	0	22
18 YEARS	15	6	1	1	0	0	0	23
19 YEARS	28	9	7	2	2	0	0	48
20-24 YEARS	251	47	18	10	6	1	0	333
25-29 YEARS	234	46	22	8	15	4	1	330
30-34 YEARS	169	23	20	12	5	6	0	235
35-39 YEARS	94	22	8	9	5	5	0	143
40+ YEARS	33	8	5	2	0	0	0	48
UNKNOWN	2	0	0	0	0	0	0	2
TOTAL	852	165	88	46	35	16	1	1203

⁽¹⁾ SEE APPENDIX B FOR DATA QUALITY NOTES.

**TABLE E-5
2017 VERMONT ABORTIONS - OCCURRENCE**

ABORTION PROCEDURE	WEEKS GESTATION BY ABORTION PROCEDURE						UNKNOWN	TOTAL
	WEEKS GESTATION ⁽¹⁾							
	< 9	9 - 10	11 - 12	13 - 15	16 - 20	21 +		
SUCTION CURETTAGE / EARLY UTERINE EVACUATION	281	101	82	24	6	1	0	495
MEDICAL (NON-SURGICAL)	569	63	2	0	2	2	1	639
OTHER	2	1	4	22	27	13	0	69
UNKNOWN	0	0	0	0	0	0	0	0
TOTAL	852	165	88	46	35	16	1	1203

⁽¹⁾ SEE APPENDIX B FOR DATA QUALITY NOTES.

TABLE E-6

2017 VERMONT ABORTIONS - OCCURRENCE

TYPE OF FACILITY BY ABORTION PROCEDURE

ABORTION PROCEDURE	TYPE OF FACILITY				TOTAL
	HOSPITAL	CLINIC	DOCTOR'S OFFICE	UNKNOWN	
SUCTION CURETTAGE / EARLY					
UTERINE EVACUATION	39	443	13	0	495
MEDICAL (NON-SURGICAL)	9	630	0	0	639
OTHER	42	27	0	0	69
UNKNOWN	0	0	0	0	0
TOTAL	90	1100	13	0	1203

**TABLE E-7
2017 VERMONT ABORTIONS - OCCURRENCE**

TYPE OF FACILITY	WEEKS GESTATION BY TYPE OF FACILITY						UNKNOWN	TOTAL
	WEEKS GESTATION ⁽¹⁾							
	< 9	9 - 10	11 - 12	13 - 15	16 - 20	21 +		
HOSPITAL	29	6	7	10	22	16	0	90
CLINIC	814	157	79	36	13	0	1	1100
DOCTOR'S OFFICE	9	2	2	0	0	0	0	13
UNKNOWN	0	0	0	0	0	0	0	0
TOTAL	852	165	88	46	35	16	1	1203

⁽¹⁾ SEE APPENDIX B FOR DATA QUALITY NOTES.

TABLE E-8

2017 VERMONT ABORTIONS - OCCURRENCE

PATIENT'S DOMESTIC RELATIONSHIP BY NUMBER OF LIVING CHILDREN

NUMBER OF EVENTS

DOMESTIC RELATIONSHIP

NUMBER OF LIVING CHILDREN	DOMESTIC RELATIONSHIP						CIVIL UNION	DISSOLVED CIVIL UNION	UNK	Total
	SINGLE	MARRIED	WIDOWED	DIVORCED	SEPARATED					
NONE	533	29	1	6	0	3	0	13	585	
ONE	191	48	0	5	0	6	0	4	254	
TWO	145	68	0	13	0	7	0	9	242	
THREE	48	21	0	6	0	1	0	4	80	
FOUR	17	8	0	0	0	1	0	4	30	
FIVE +	6	4	0	1	0	1	0	0	12	
UNKNOWN	0	0	0	0	0	0	0	0	0	
TOTAL	940	178	1	31	0	19	0	34	1203	

ROW PERCENTS ⁽¹⁾

DOMESTIC RELATIONSHIP

NUMBER OF LIVING CHILDREN	DOMESTIC RELATIONSHIP						CIVIL UNION	DISSOLVED CIVIL UNION	UNK	Total
	SINGLE	MARRIED	WIDOWED	DIVORCED	SEPARATED					
NONE	91.1	5.0	0.2	1.0	0.0	0.5	0.0	2.2	100.0	
ONE	75.2	18.9	0.0	2.0	0.0	2.4	0.0	1.6	100.0	
TWO	59.9	28.1	0.0	5.4	0.0	2.9	0.0	3.7	100.0	
THREE	60.0	26.3	0.0	7.5	0.0	1.3	0.0	5.0	100.0	
FOUR	56.7	26.7	0.0	0.0	0.0	3.3	0.0	13.3	100.0	
FIVE +	50.0	33.3	0.0	8.3	0.0	8.3	0.0	0.0	100.0	
UNKNOWN	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0	
TOTAL	78.1	14.8	0.1	2.6	0.0	1.6	0.0	2.8	100.0	

⁽¹⁾ MAY NOT ADD TO 100% DUE TO ROUNDING.

TABLE E-9

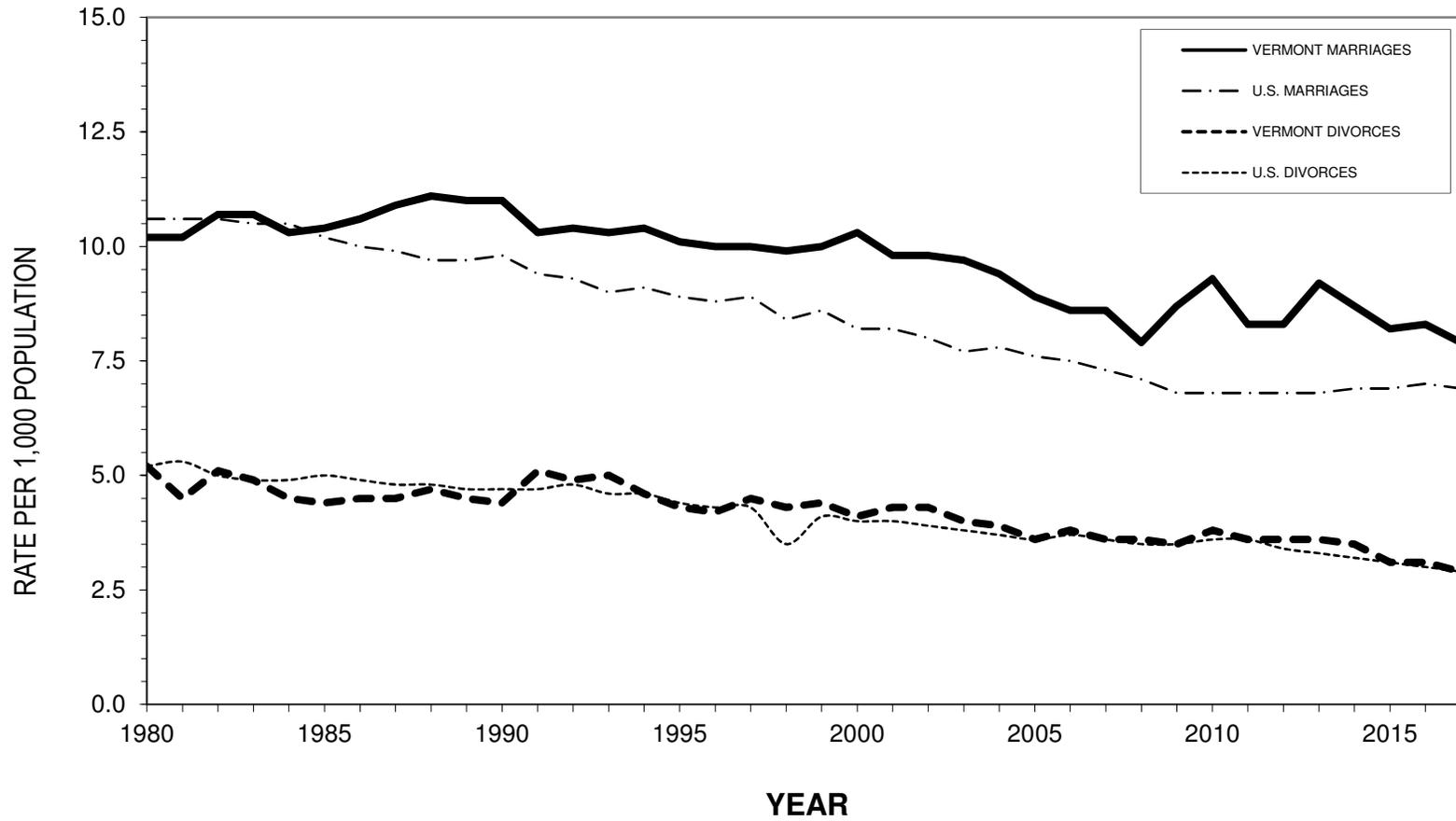
2017 VERMONT ABORTIONS - OCCURRENCE

PATIENT'S EDUCATION BY COUNTY OF RESIDENCE

COUNTY OF RESIDENCE	EDUCATION										TOTAL
	< 9 YEARS	9 YEARS	10 YEARS	11 YEARS	H.S. GRAD	1 YEAR COLLEGE	2 YEARS COLLEGE	3 YEARS COLLEGE	4+ YEARS COLLEGE	UNKNOWN	
ADDISON	0	0	0	0	12	2	5	0	4	7	30
BENNINGTON	0	1	0	2	30	1	9	1	10	5	59
CALEDONIA	2	1	0	0	19	6	7	0	5	8	48
CHITTENDEN	4	1	4	5	86	16	43	14	84	45	302
ESSEX	0	0	0	0	5	1	2	0	1	0	9
FRANKLIN	1	0	1	3	24	4	8	3	9	9	62
GRAND ISLE	0	0	0	0	5	2	0	0	3	3	13
LAMOILLE	0	1	1	2	15	2	7	2	14	13	57
ORANGE	0	0	0	0	18	4	3	1	5	4	35
ORLEANS	0	1	0	0	16	3	4	2	4	4	34
RUTLAND	1	0	1	3	63	10	9	5	14	6	112
WASHINGTON	1	1	2	6	41	6	11	3	17	24	112
WINDHAM	2	0	1	3	21	3	8	4	10	3	55
WINDSOR	0	1	2	5	31	6	3	2	11	2	63
UNKNOWN CTY	0	0	0	0	1	0	0	0	0	0	1
OUT OF STATE	0	0	2	8	82	18	19	9	48	25	211
STATE TOTAL	11	7	14	37	469	84	138	46	239	158	1203

Marriages and Divorces

Figure 12
VERMONT AND U.S. MARRIAGE AND DIVORCE RATES
1980 - 2017



Data points for the U.S. population can be found in Appendix D. Vermont data points can be found in Table A-1.

MARRIAGES & DIVORCES

MARRIAGES

NOTE: Marriage between same sex partners became legal in Vermont on September 1, 2009. The tables in this section include marriages between same sex partners and therefore the labels have been changed to reflect the labels used on the revised civil marriage license and certificate: Applicant A and Applicant B.

In 2017, 4,932 marriages were performed in Vermont, 258 fewer than in 2015. The 2017 Vermont marriage rate was 7.9 per 1,000 Vermont resident population, higher than the 2017 U.S. rate of 6.9. Marriages between two out-of-state residents accounted for 36.3 percent of the marriages in Vermont (Table F-2).

There was the usual seasonal variation with more marriages occurring in summer than in any other season. September (887), July (745) and August (724) were the most popular months for marriages in 2017 (Table F-5).

Well more than half (61.7 percent) of the marriages were firsts for both applicants (Table F-4). For Applicant B, 70.9 percent were first marriages, and for Applicant A, 71.7 percent were first marriages. Remarriages for both applicants accounted for 19.1 percent of marriages in Vermont.

Civil ceremonies accounted for 61.4 percent of marriages in 2017 (Table F-6).

DIVORCES

There were 1,826 divorces granted in 2017, 111 fewer than in 2016. This represents a rate of 2.9 per 1,000 residents, same as the 2017 U.S. rate.

The median length of marriages ending in divorce was 10 years, with a range of 7 months to 57 years. The median age at the time of divorce was 42 for Applicant A with a range of 19 to 82 years. The median age at the time of divorce was 43 for Applicant B, with a range of 19 to 85 years (Table G-2).

TABLE F-1
2017 VERMONT MARRIAGES

PLACE OF RESIDENCE BY APPLICANT A AND APPLICANT B

APPLICANT A'S PLACE OF RESIDENCE	NUMBER	APPLICANT B'S PLACE OF RESIDENCE	NUMBER
ALABAMA	12	ALABAMA	12
ARIZONA	1	ARIZONA	1
ARKANSAS	3	ARKANSAS	2
CALIFORNIA	58	CALIFORNIA	58
COLORADO	28	COLORADO	28
CONNECTICUT	140	CONNECTICUT	140
DELAWARE	4	DELAWARE	5
DISTRICT OF COLUMBIA	26	DISTRICT OF COLUMBIA	27
FLORIDA	42	FLORIDA	40
GEORGIA	16	GEORGIA	14
IDAHO	0	IDAHO	1
ILLINOIS	12	ILLINOIS	15
INDIANA	6	INDIANA	5
IOWA	0	IOWA	1
KANSAS	1	KANSAS	3
KENTUCKY	3	KENTUCKY	3
LOUISIANA	3	LOUISIANA	4
MAINE	25	MAINE	26
MARYLAND	23	MARYLAND	22
MASSACHUSETTS	518	MASSACHUSETTS	519
MICHIGAN	12	MICHIGAN	12
MINNESOTA	7	MINNESOTA	8
MISSISSIPPI	1	MISSISSIPPI	1
MISSOURI	8	MISSOURI	6
MONTANA	3	MONTANA	3
NEBRASKA	3	NEBRASKA	3
NEVADA	5	NEVADA	5
NEW HAMPSHIRE	173	NEW HAMPSHIRE	178
NEW JERSEY	84	NEW JERSEY	83
NEW MEXICO	2	NEW MEXICO	1
NEW YORK	315	NEW YORK	343
NORTH CAROLINA	23	NORTH CAROLINA	29
NORTH DAKOTA	1	NORTH DAKOTA	1
OHIO	14	OHIO	16
OKLAHOMA	3	OKLAHOMA	2
OREGON	11	OREGON	12
PENNSYLVANIA	58	PENNSYLVANIA	59
RHODE ISLAND	33	RHODE ISLAND	32
SOUTH CAROLINA	14	SOUTH CAROLINA	14
SOUTH DAKOTA	1	SOUTH DAKOTA	1
TENNESSEE	12	TENNESSEE	14
TEXAS	33	TEXAS	35
UTAH	2	UTAH	3
VERMONT	3066	VERMONT	2969
VIRGINIA	33	VIRGINIA	31
WASHINGTON	17	WASHINGTON	21
WEST VIRGINIA	1	WEST VIRGINIA	1
WISCONSIN	5	WISCONSIN	4
WYOMING	3	WYOMING	3
ALASKA	1	ALASKA	1
HAWAII	1	HAWAII	2
PUERTO RICO	0	PUERTO RICO	1
CANADA	42	CANADA	49
MEXICO	0	MEXICO	1
OTHER COUNTRIES	18	OTHER COUNTRIES	59
UNKNOWN	6	UNKNOWN	3
TOTAL	4932	TOTAL	4932

TABLE F-2
2017 VERMONT MARRIAGES

COUNTY OF RESIDENCE OF APPLICANT B BY COUNTY OF RESIDENCE OF APPLICANT A
RESIDENCE OF APPLICANT B

RESIDENCE OF APPLICANT A	ADD	BEN	CAL	CHT	ESX	FRA	GI	LAM	ORG	ORL	RUT	WAS	WHM	WSR	O-O-S	UNK	TOTAL
ADDISON	157	0	0	3	0	0	0	0	0	0	4	0	2	3	10	0	179
BENNINGTON	0	127	0	0	0	0	0	0	0	0	0	0	2	0	9	0	138
CALEDONIA	0	0	126	2	1	0	0	2	0	0	0	0	0	1	14	0	146
CHITTENDEN	2	0	0	770	0	8	0	2	1	1	1	1	0	0	52	1	839
ESSEX	0	0	0	0	16	0	0	0	0	0	0	0	0	0	0	0	16
FRANKLIN	0	0	0	8	0	263	1	0	0	0	0	1	0	0	7	0	280
GRAND ISLE	0	0	0	2	0	0	40	1	0	0	0	0	0	0	1	0	44
LAMOILLE	0	0	2	0	0	0	0	127	1	2	0	1	0	0	5	0	138
ORANGE	0	0	1	2	0	0	0	1	134	0	0	2	1	0	6	0	147
ORLEANS	1	0	1	2	1	0	0	0	0	135	0	1	0	0	4	0	145
RUTLAND	2	3	0	0	0	0	1	0	0	0	250	0	0	2	18	0	276
WASHINGTON	0	0	2	4	0	0	0	2	5	0	0	259	0	0	13	1	286
WINDHAM	0	2	0	0	0	0	0	0	1	0	0	0	173	2	17	0	195
WINDSOR	2	0	0	0	0	0	0	0	0	0	0	1	0	215	14	0	232
OUT OF STATE	1	3	3	18	1	2	1	3	6	5	7	3	9	10	1792	1	1865
UNKNOWN	0	0	0	0	0	0	0	0	1	0	0	1	1	0	3	0	6
TOTAL	165	135	135	811	19	273	43	138	149	143	262	270	188	233	1965	3	4932

**TABLE F-3
2017 VERMONT MARRIAGES**

AGE OF APPLICANT A	AGE OF APPLICANT B BY AGE OF APPLICANT A														UNK	TOTAL	
	AGE OF APPLICANT B																
	<18 YEARS	18-20 YEARS	20-24 YEARS	25-29 YEARS	30-34 YEARS	35-39 YEARS	40-44 YEARS	45-49 YEARS	50-54 YEARS	55-59 YEARS	60-64 YEARS	65-69 YEARS	70-74 YEARS	75+ YEARS			
<18 YEARS	0	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	2
18-20 YEARS	1	21	27	5	1	2	0	0	0	0	0	0	0	0	0	0	57
20-24 YEARS	0	27	192	154	24	7	6	2	1	0	0	0	0	0	0	0	413
25-29 YEARS	0	13	108	871	360	74	23	7	3	1	0	0	1	0	0	0	1461
30-34 YEARS	0	2	29	274	584	183	64	23	4	3	0	1	0	0	0	0	1167
35-39 YEARS	0	0	6	47	154	146	79	31	13	5	2	0	0	0	0	0	483
40-44 YEARS	0	0	6	18	32	70	102	50	23	9	3	1	1	0	0	0	315
45-49 YEARS	0	1	2	11	16	30	59	82	52	27	11	2	1	0	0	0	294
50-54 YEARS	0	0	3	1	13	11	28	63	69	45	29	5	3	0	0	0	270
55-59 YEARS	0	0	3	1	4	4	7	23	56	62	34	11	1	0	0	0	206
60-64 YEARS	0	0	0	0	0	1	1	10	28	33	31	13	8	1	0	0	126
65-69 YEARS	0	0	0	0	1	0	5	6	8	13	17	13	9	4	0	0	76
70-74 YEARS	0	0	0	0	1	0	0	0	3	4	8	8	14	2	0	0	40
75+ YEARS	0	0	0	0	0	2	1	0	0	0	5	3	2	9	0	0	22
UNKNOWN	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTAL	1	65	377	1382	1190	530	375	297	260	202	140	57	40	16	0	0	4932

**TABLE F-4
2017 VERMONT MARRIAGES**

MARRIAGE NUMBER OF APPLICANT B BY MARRIAGE NUMBER OF APPLICANT A

MARRIAGE NUMBER OF APPLICANT A	MARRIAGE NUMBER OF APPLICANT B				TOTAL
	FIRST	SECOND	THIRD +	UNKNOWN	
FIRST	3022	417	72	3	3514
SECOND	381	488	160	4	1033
THIRD +	68	171	117	0	356
UNKNOWN	0	0	0	29	29
TOTAL	3471	1076	349	36	4932

TABLE F-5
2017 VERMONT MARRIAGES

MONTH OF MARRIAGE BY COUNTY OF MARRIAGE
MONTH OF MARRIAGE

COUNTY OF MARRIAGE	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
ADDISON	11	8	7	6	18	25	55	42	49	31	5	15	272
BENNINGTON	12	11	8	15	24	41	57	46	71	54	17	25	381
CALEDONIA	3	6	9	6	9	26	26	27	41	21	4	9	187
CHITTENDEN	55	34	42	52	68	121	142	123	178	126	47	64	1052
ESSEX	1	2	0	2	1	2	7	7	4	0	1	0	27
FRANKLIN	8	10	9	10	15	31	60	33	47	33	11	6	273
GRAND ISLE	3	2	0	2	7	14	19	26	18	3	3	7	104
LAMOILLE	17	13	15	7	13	40	45	51	62	47	10	19	339
ORANGE	7	8	0	2	19	31	29	41	45	27	6	9	224
ORLEANS	10	6	9	8	7	31	42	41	52	31	5	10	252
RUTLAND	23	18	19	12	37	65	86	76	83	65	16	30	530
WASHINGTON	8	10	11	9	25	58	61	72	76	39	21	28	418
WINDHAM	16	19	17	12	29	33	43	61	60	55	10	24	379
WINDSOR	15	16	13	12	30	50	73	78	101	70	10	26	494
UNKNOWN	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTAL	189	163	159	155	302	568	745	724	887	602	166	272	4932

**TABLE F-6
2017 VERMONT MARRIAGES**

TYPE OF CEREMONY BY PREVIOUS MARITAL STATUS OF APPLICANT B AND APPLICANT A

PREVIOUS MARITAL STATUS	APPLICANT B				APPLICANT A			
	CIVIL	RELIGIOUS	UNKNOWN	TOTAL	CIVIL	RELIGIOUS	UNKNOWN	TOTAL
SINGLE	1780	1244	449	3473	1777	1264	468	3509
PREVIOUSLY MARRIED								
ANNULMENT	7	3	0	10	2	3	0	5
WIDOWED	49	34	3	86	39	37	4	80
DIVORCED	813	374	100	1287	827	354	84	1265
DISSOLUTION	7	2	5	14	9	3	2	14
MARRYING CU PARTNER	4	3	1	8	4	3	1	8
UNKNOWN	19	25	10	54	21	21	9	51
TOTAL	2679	1685	568	4932	2679	1685	568	4932

TABLE G-1
2017 VERMONT DIVORCES

MONTH OF DIVORCE BY COUNTY OF DECREE
MONTH OF DIVORCE

COUNTY OF DECREE	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
ADDISON	10	5	10	8	6	8	11	12	18	5	10	0	103
BENNINGTON	11	9	8	9	7	13	6	14	10	9	10	17	123
CALEDONIA	12	6	7	3	9	7	6	7	14	10	7	13	101
CHITTENDEN	30	21	31	31	22	45	35	31	37	38	31	48	400
ESSEX	0	2	1	1	0	4	0	2	2	0	2	2	16
FRANKLIN	11	7	20	15	15	17	14	16	19	13	18	13	178
GRAND ISLE	1	1	0	4	0	2	1	0	0	1	0	0	10
LAMOILLE	8	5	4	8	8	7	4	5	10	8	6	3	76
ORANGE	8	5	2	5	11	6	9	6	6	3	2	2	65
ORLEANS	8	8	11	6	4	5	3	6	4	5	4	4	68
RUTLAND	19	20	16	20	20	17	10	4	19	19	10	5	179
WASHINGTON	15	14	6	14	20	18	15	14	18	12	9	15	170
WINDHAM	15	17	13	11	13	6	12	9	9	8	12	15	140
WINDSOR	21	20	13	18	18	18	19	15	11	18	17	9	197
STATE TOTAL	169	140	142	153	153	173	145	141	177	149	138	146	1826

TABLE G-2
2017 VERMONT DIVORCES

AGE OF APPLICANT B BY AGE OF APPLICANT A AT TIME OF DIVORCE
AGE OF APPLICANT B

AGE OF APPLICANT A	<18	18-20	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75+	UNK	TOTAL
<18 YEARS	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
18-20 YEARS	0	2	1	1	0	1	0	0	0	0	0	0	0	0	0	5
20-24 YEARS	0	4	25	24	8	4	0	0	0	0	0	0	0	0	0	65
25-29 YEARS	0	0	14	67	53	13	4	3	1	0	1	0	0	0	1	157
30-34 YEARS	0	1	3	42	98	64	30	12	4	1	1	0	0	0	0	256
35-39 YEARS	0	0	2	9	50	114	69	34	8	3	0	0	0	0	1	290
40-44 YEARS	0	0	0	2	11	42	101	67	20	6	3	0	1	0	0	253
45-49 YEARS	0	0	0	0	10	22	39	104	56	24	9	0	0	0	3	267
50-54 YEARS	0	0	0	0	1	4	21	35	81	34	11	5	2	0	0	194
55-59 YEARS	0	0	1	0	2	1	0	15	43	66	30	10	0	2	0	170
60-64 YEARS	0	0	0	0	1	1	1	3	12	19	29	14	7	4	0	91
65-69 YEARS	0	0	0	1	0	0	1	0	4	6	7	12	7	3	1	42
70-74 YEARS	0	0	0	0	0	1	0	0	3	2	4	4	11	3	1	29
75+ YEARS	0	0	0	0	0	0	0	0	0	0	1	0	1	4	0	6
UNKNOWN	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
STATE TOTAL	0	7	46	146	234	267	266	273	232	162	96	45	29	16	7	1826

TABLE G-3
2017 VERMONT DIVORCES

NUMBER OF YEARS MARRIED BY COUNTY OF DECREE

COUNTY OF DECREE	YEARS MARRIED													UNK	TOTAL
	<2	2	3	4	5	6	7	8	9	10-14	15-19	20-24	25+		
ADDISON	8	8	4	3	3	7	9	2	1	22	11	10	15	0	103
BENNINGTON	15	6	8	5	8	4	3	2	4	17	21	11	19	0	123
CALEDONIA	4	3	9	11	5	5	4	2	4	21	13	10	10	0	101
CHITTENDEN	22	28	38	28	25	17	22	17	13	60	52	34	43	1	400
ESSEX	2	1	4	0	0	0	1	0	0	5	3	0	0	0	16
FRANKLIN	6	12	7	8	4	9	12	8	7	37	19	21	28	0	178
GRAND ISLE	1	0	0	1	2	1	1	0	0	1	1	0	2	0	10
LAMOILLE	8	3	2	0	5	5	4	3	4	17	11	6	8	0	76
ORANGE	4	3	4	3	1	2	3	3	3	15	7	5	12	0	65
ORLEANS	7	8	3	3	2	3	3	2	4	9	9	8	7	0	68
RUTLAND	9	11	6	12	9	10	9	10	8	27	21	23	23	1	179
WASHINGTON	17	14	5	13	10	9	6	10	4	25	20	12	25	0	170
WINDHAM	9	8	5	3	6	10	2	10	5	29	20	9	24	0	140
WINDSOR	7	13	17	13	14	9	11	7	9	36	22	16	23	0	197
STATE TOTAL	119	118	112	103	94	91	90	76	66	321	230	165	239	2	1826

Appendices

APPENDIX A
VERMONT HOSPITALS

HOSPITAL	COUNTY	TOWN
Brattleboro Memorial Hospital	Windham	Brattleboro
Central Vermont Medical Center	Washington	Berlin
Copley Hospital	Lamoille	Morrisville
Gifford Medical Center	Orange	Randolph
Grace Cottage Hospital	Windham	Townshend
Mt. Ascutney Hospital and Health Center	Windsor	Windsor
North Country Hospital and Health Center	Orleans	Newport
Northeastern Vermont Regional Hospital	Caledonia	St. Johnsbury
Northwestern Medical Center	Franklin	St. Albans
Porter Medical Center	Addison	Middlebury
Rutland Regional Medical Center	Rutland	Rutland
Southwestern Vermont Medical Center	Bennington	Bennington
Springfield Hospital	Windsor	Springfield
University of Vermont Medical Center	Chittenden	Burlington
Vermont State Hospital	Washington	Waterbury
Veterans Administration Medical Center	Windsor	White River Junction

APPENDIX B

OBSTETRIC DATES AND INTERVALS AND WEIGHT GAIN RECOMMENDATIONS

MONTH PRENATAL CARE BEGAN

Since 1988, the Vermont Department of Health has used the National Center for Health Statistics method of calculating the month prenatal care began. This allows Vermont data to be more easily compared to national data, and eliminates any errors that could be introduced by hospitals using different reporting methods.

The calculation for month prenatal care began changed at the national level with the 2003 Revision of the U.S. Standard Certificate of Live Birth. Vermont implemented its' new birth certificate on July 1, 2005, based on the 2003 Revision of the U.S. Standard, so the Department of Health began using the new calculation in 2005. The new calculation converts to century dates the date of last menses and the date of the first prenatal visit, determines the difference in number of days between these dates, and then converts the days to months of pregnancy. For example, if the date of last menses was March 15, 2005 and the date of the first prenatal visit was June 30, 2005, then the difference is 107 days which means that prenatal care began in the fourth month.

Please note that this change in calculation affects the rate of entry into first trimester prenatal care. Analysis done by the Vermont Department of Health shows that this change in calculation reduces the rate of entry into first trimester prenatal care by about 7%, so rates for years 2005 and later should not be compared to rates for prior years.

GESTATIONAL AGE

Live Births and Fetal Deaths: The methodology used to determine gestational age matches that used by the National Center for Health Statistics.

Two measures of gestational age are available from the standard certificates. The standard certificates collect information on the first day of the mother's last menstrual period (LMP). The interval between the LMP and the date of birth is the *calculated* gestational age. The standard certificate also collects a *clinical estimate* of gestation.

The primary measure used by NCHS to determine the gestational age of the newborn was previously the *calculated* weeks of gestation, supplemented by an algorithm that determined if the calculated gestational age and birth weight were compatible, and the clinical estimate of gestational age may replace the calculated age in some cases. However this method is subject to error due to imperfect maternal recall and to misidentification of the LMP. Therefore, beginning in 2014 the clinical estimate of gestational age is assigned as the gestational age in all cases.

Abortions: Gestational age is calculated from the date of last normal menses and date of abortion. The clinically estimated weeks is used if the date of last normal menses is unknown, or if the calculated weeks and the clinically estimated weeks are more than two weeks apart.

WEIGHT GAIN DURING PREGNANCY

The weight gain guidelines reflected in this report were taken from “Weight Gain During Pregnancy: Reexamining the Guidelines” Institute of Medicine, National Academies Press, 2009. The recommendations are as follows for singleton, full term births:

PRE-PREGNANCY BMI	RECOMMENDED WEIGHT GAIN
< 18.5	28 - 40 lbs
18.5 - 24.9	25 - 35 lbs
25.0 - 29.9	15 - 25 lbs
\geq 30.0	11 - 20 lbs

APPENDIX C

DEFINITIONS OF THE 113 SELECTED CAUSES OF DEATH

Causes of Death	Category Codes According to the <i>International Classification of Diseases</i>	
	Tenth Revision	Ninth Revision Adapted
Salmonella infections	A01-A02	002-003
Shigellosis and amebiasis	A03, A06	004, 006
Certain other intestinal infections	A04, A07-A09	007-009
Tuberculosis	A16-A19	010-018
.. Respiratory tuberculosis	A16	010-012
.. Other tuberculosis	A17-A19	013-018
Whooping cough	A37	033
Scarlet fever and erysipelas	A38, A46	034.1-035
Meningococcal infection	A39	036
Septicemia	A40-A41	038
Syphilis	A50-A53	090-097
Acute poliomyelitis	A80	045
Arthropod-borne viral encephalitis	A83-A84, A85.2	062-064
Measles	B05	055
Viral hepatitis	B15-B19	070
Human immunodeficiency virus (HIV) disease	B20-B24	042-044
Malaria	B50-B54	084
Other and unspecified infectious and parasitic diseases and their sequelae	A00, A05, A20-A36, A42-A44, A48-A49, A54-A79, A81-A82, A85.0-A85.1, A85.8, A86-B04, B06-B09, B25-B49, B55-B99	001, 005, 020-032, 037, 039-041, 046-054, 056-061, 065-066, 071-083, 085-088, 098-134, 136-139, 771.3
Malignant neoplasms	C00-C97	140-208
.. of lip, oral cavity and pharynx	C00-C14	140-149
.. of esophagus	C15	150
.. of stomach	C16	151
.. of colon, rectum and anus	C18-C21	153-154
.. of liver and intrahepatic bile ducts	C22	155
.. of pancreas	C25	157
.. of larynx	C32	161

APPENDIX C

DEFINITIONS OF THE 113 SELECTED CAUSES OF DEATH

Causes of Death	Category Codes According to the <i>International Classification of Diseases</i>	
	Tenth Revision	Ninth Revision Adapted
.. of trachea, bronchus and lung	C33-C34	162
.. of skin	C43	172
.. of breast	C50	174-175
.. of cervix uteri	C53	180
.. of corpus uteri and uterus, part unspecified	C54-C55	179, 182
.. of ovary	C56	183.0
.. of prostate	C61	185
.. of kidney and renal pelvis	C64-C65	189.0, 189.1
.. of bladder	C67	188
.. of meninges, brain and other parts of central nervous system	C70-C72	191-192
.. of lymphoid, hematopoietic and related tissue	C81-C96	200-208
.... Hodgkin's disease	C81	201
.... Non-Hodgkin's lymphoma	C82-C85	200, 202
.... Leukemia	C91-C95	204-208
.... Multiple myeloma and immunoproliferative neoplasms	C88, C90	203
.... Other and unspecified malignant neoplasms of lymphoid, hematopoietic and related tissue	C96	- - -
.. All other and unspecified malignant neoplasms	C17, C23-C24, C26-C31, C37-C41, C44-C49, C51- C52, C57-C60, C62-C63, C66, C68-C69, C73-C80, C97	152, 156, 158-160, 163-171, 173, 181, 183.2-184, 186-187, 189.2-190, 193-199
In situ neoplasms, benign neoplasms and neoplasms of uncertain or unknown behavior	D00-D48	210-239
Anemias	D50-D64	280-285
Diabetes mellitus	E10-E14	250
Nutritional deficiencies	E40-E64	260-269
.. Malnutrition	E40-E46	260-263
.. Other nutritional deficiencies	E50-E64	264-269
Meningitis	G00, G03	320-322

APPENDIX C

DEFINITIONS OF THE 113 SELECTED CAUSES OF DEATH

Causes of Death	Category Codes According to the <i>International Classification of Diseases</i>	
	Tenth Revision	Ninth Revision Adapted
Parkinson's disease	G20-G21	332
Alzheimer's disease	G30	331.0
Major cardiovascular diseases	I00-I78	390-434, 436-448
.. Diseases of heart	I00-I09, I11, I13, I20-I51	390-398, 402, 404, 410-429
.... Acute rheumatic fever and chronic rheumatic heart diseases	I00-I09	390-398
.... Hypertensive heart disease	I11	402
.... Hypertensive heart and renal disease	I13	404
.... Ischemic heart diseases	I20-I25	410-414, 429.2
..... Acute myocardial infarction	I21-I22	410
..... Other acute ischemic heart diseases	I24	411
..... Other forms of chronic ischemic heart disease	I20, I25	412-414, 429.2
..... Atherosclerotic cardiovascular disease, so described	I25.0	429.2
..... All other forms of chronic ischemic heart disease	I20, I25.1-I25.9	412-414
.... Other heart diseases	I26-I51	415-429.1, 429.3-429.9
..... Acute and subacute endocarditis	I33	421
..... Diseases of pericardium and acute myocarditis	I30-I31, I40	420, 422-423
..... Heart failure	I50	428
..... All other forms of heart disease	I26-I28, I34-I38, I42-I49, I51	415-417, 424-427, 429.0-429.1, 429.3-429.9
.. Essential hypertension and hypertensive renal disease	I10, I12, I15	401, 403
.. Cerebrovascular diseases	I60-I69	430-434, 436-438
.. Atherosclerosis	I70	440
.. Other diseases of circulatory system	I71-I78	441-448
.... Aortic aneurysm and dissection	I71	441
.... Other diseases of arteries, arterioles and capillaries	I72-I78	442-448

APPENDIX C

DEFINITIONS OF THE 113 SELECTED CAUSES OF DEATH

Causes of Death	Category Codes According to the <i>International Classification of Diseases</i>	
	Tenth Revision	Ninth Revision Adapted
Other disorders of circulatory system	I80-I99	451-459
Influenza and pneumonia	J09-J18	480-487
.. Influenza	J09-J11	487
.. Pneumonia	J12-J18	480-486
Other acute lower respiratory infections	J20-J22, U04	466
.. Acute bronchitis and bronchiolitis	J20-J21	466
.. Other and unspecified acute lower respiratory infection	J22, U04	- - -
Chronic lower respiratory diseases	J40-J47	490-494, 496
.. Bronchitis, chronic and unspecified	J40-J42	490-491
.. Emphysema	J43	492
.. Asthma	J45-J46	493
.. Other chronic lower respiratory diseases	J44, J47	494, 496
Pneumoconioses and chemical effects	J60-J66, J68	500-506
Pneumonitis due to solids and liquids	J69	507
Other diseases of respiratory system	J00-J06, J30-J39, J67, J70-J98	034.0, 460-465, 470-478, 495, 508-519
Peptic ulcer	K25-K28	531-534
Diseases of appendix	K35-K38	540-543
Hernia	K40-K46	550-553
Chronic liver disease and cirrhosis	K70, K73-K74	571
.. Alcoholic liver disease	K70	571.0-571.3
.. Other chronic liver disease and cirrhosis	K73-K74	571.4-571.9
Cholelithiasis and other disorders of gallbladder	K80-K82	574-575
Nephritis, nephrotic syndrome and nephrosis	N00-N07, N17-N19, N25-N27	580-589
.. Acute and rapidly progressive nephritic and nephrotic syndrome	N00-N01, N04	580-581
.. Chronic glomerulonephritis, nephritis and nephropathy not specified as acute or chronic, and renal sclerosis unspecified	N02-N03, N05-N07, N26	582-583, 587

APPENDIX C

DEFINITIONS OF THE 113 SELECTED CAUSES OF DEATH

Causes of Death	Category Codes According to the <i>International Classification of Diseases</i>	
	Tenth Revision	Ninth Revision Adapted
.. Renal failure	N17-N19	584-586
.. Other disorders of kidney	N25, N27	588-589
Infections of kidney	N10-N12, N13.6, N15.1	590
Hyperplasia of prostate	N40	600
Inflammatory diseases of female pelvic organs	N70-N76	614-616
Pregnancy, childbirth and the puerperium	O00-O99	630-676
.. Pregnancy with abortive outcome	O00-O07	630-639
.. Other complications of pregnancy, childbirth and the puerperium	O10-O99	640-676
Certain conditions originating in the perinatal period	P00-P96	760-771.2, 771.4-779
Congenital malformations, deformations and chromosomal abnormalities	Q00-Q99	740-759
Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified	R00-R99	780-799
All other diseases (Residual)	D65-E07, E15-E34, E65-F99, G04-G14, G23-G25, G31-H93, K00-K22, K29-K31, K50-K66, K71-K72, K75-K76, K83-M99, N13.0-N13.5, N13.7-N13.9, N14, N15.0, N15.8-N15.9, N20-N23, N28-N39, N41-N64, N80-N98	Residual
Accidents (unintentional injuries)	V01-X59, Y85-Y86	E800-E869, E880-E929
.. Transport accidents	V01-V99, Y85	E800-E848, E929.0-E929.1
.. Motor vehicle accidents	V02-V04, V09.0, V09.2, V12-V14, V19.0-V19.2, V19.4-V19.6, V20-V79, V80.3-V80.5, V81.0-V81.1, V82.0-V82.1, V83-V86, V87.0-V87.8, V88.0-V88.8, V89.0, V89.2	E810-E825
.... Other land transport accidents	V01, V05-V06, V09.1, V09.3-V09.9, V10-V11, V15-V18, V19.3, V19.8- V19.9, V80.0-V80.2, V80.6-V80.9, V81.2- V81.9, V82.2-V82.9, V87.9, V88.9, V89.1, V89.3, V89.9	E800-E807, E826-E829

APPENDIX C

DEFINITIONS OF THE 113 SELECTED CAUSES OF DEATH

Causes of Death	Category Codes According to the <i>International Classification of Diseases</i>	
	Tenth Revision	Ninth Revision Adapted
.... Water, air and space, and other and unspecified transport accidents and their sequelae	V90-V99, Y85	E830-E848, E929.0, E929.1
.. Nontransport accidents	W00-X59, Y86	E850-E869, E880-E928, E929.2-E929.9
.... Falls	W00-W19	E880-E888
.... Accidental discharge of firearms	W32-W34	E922
.... Accidental drowning and submersion	W65-W74	E910
.... Accidental exposure to smoke, fire and flames	X00-X09	E890-E899
.... Accidental poisoning and exposure to noxious substances	X40-X49	E850-E869, E924.1
.... Other and unspecified nontransport accidents and their sequelae	W20-W31, W35-W64, W75-W99, X10-X39, X50-X59, Y86	E900-E909, E911-E921, E923-E924.0, E924.8-E928, E929.2-E929.9
Intentional self-harm (suicide)	U03, X60-X84, Y87.0	E950-E959
.. Intentional self-harm (suicide) by discharge of firearms	X72-X74	E955.0-E955.4
.. Intentional self-harm (suicide) by other and unspecified means and their sequelae	U03, X60-X71, X75-X84, Y87.0	E950-E954, E955.5-E959
Assault (homicide)	U01-U02, X85-Y09, Y87.1	E960-E969
.. Assault (homicide) by discharge of firearms	U01.4, X93-X95	E965.0-E965.4
.. Assault (homicide) by other and unspecified means and their sequelae	U01.0-U01.3, U01.5-U01.9, U02, X85-X92, X96-Y09, Y87.1	E960-E964, E965.5-E969
Legal intervention	Y35, Y89.0	E970-E978
Events of undetermined intent	Y10-Y34, Y87.2, Y89.9	E980-E989
.. Discharge of firearms, undetermined intent	Y22-Y24	E985.0-E985.4
.. Other and unspecified events of undetermined intent and their sequelae	Y10-Y21, Y25-Y34, Y87.2, Y89.9	E980-E984, E985.5-E989
Operations of war and their sequelae	Y36, Y89.1	E990-E999
Complications of medical and surgical care	Y40-Y84, Y88	E870-E879, E930-E949

APPENDIX D

VITAL STATISTICS SUMMARY FOR U.S. POPULATION*
1960 - 2017

YEAR	CRUDE BIRTH RATE ⁽¹⁾	FERTILITY RATE ⁽¹⁾	LOW BIRTH WEIGHT PERCENT	CRUDE DEATH RATE ⁽²⁾	INFANT DEATH RATE ⁽³⁾	NEONATAL DEATH RATE ⁽³⁾	FETAL DEATH RATE ⁽³⁾	ABORTION RATIO ⁽⁴⁾	MARRIAGE RATE ⁽⁵⁾	DIVORCE RATE ⁽⁵⁾
1960	23.7	118.0	7.7	9.5	26.0	18.7	14.1		8.5	2.2
1965	19.4	96.3	8.3	9.4	24.7	17.7	13.9		9.3	2.5
1970	18.4	87.9	7.9	9.5	20.0	15.1	14.0		10.6	3.5
1975	14.6	66.0	7.4	8.8	16.1	11.6	10.6	272	10.0	4.8
1980	15.9	68.4	6.8	8.8	12.6	8.5	9.1	359	10.6	5.2
1985	15.8	66.3	5.8	8.8	10.6	7.0	7.8	354	10.2	5.0
1990	16.7	70.9	7.0	8.6	9.2	5.9	7.5	344	9.8	4.7
1995	14.6	64.6	7.3	8.7	7.6	4.9	7.0	278	8.9	4.4
1996	14.4	64.1	7.4	8.6	7.3	4.8	6.9	286	8.8	4.3
1997	14.2	63.6	7.5	8.5	7.2	4.8	6.8	274	8.9	4.3
1998	14.3	64.3	7.6	8.5	7.2	4.8	6.7	265	8.4	3.5
1999	14.2	64.4	7.6	8.6	7.1	4.7	6.7	257	8.6	4.1
2000	14.4	65.9	7.6	8.5	6.9	4.6	6.6	248	8.2	4.0
2001	14.1	65.1	7.7	8.5	6.9	4.5	6.5	249	8.2	4.0
2002	14.0	65.0	7.8	8.5	7.0	4.7	6.4	250	8.0	3.9
2003	14.0	66.1	7.9	8.4	6.9	4.6	6.3	245	7.7	3.8
2004	14.1	66.4	8.1	8.2	6.8	4.5	6.3	241	7.8	3.7
2005	14.1	66.7	8.2	8.3	6.9	4.5	6.2	236	7.6	3.6
2006	14.3	68.6	8.3	8.1	6.7	4.5	6.1	237	7.5	3.7
2007	14.3	69.3	8.2	8.0	6.8	4.4	6.1	230	7.3	3.6
2008	14.0	68.1	8.2	8.1	6.6	4.3	6.2	232	7.1	3.5
2009	13.5	66.2	8.2	7.9	6.4	4.2	6.0	227	6.8	3.5
2010	13.0	64.1	8.2	8.0	6.2	4.1	6.0	228	6.8	3.6
2011	12.7	63.2	8.1	8.1	6.1	4.1	6.1	219	6.8	3.6
2012	12.6	63.0	8.0	8.1	6.0	4.0	6.1	210	6.8	3.4
2013	12.4	62.5	8.0	8.2	6.0	4.0	6.0	200	6.8	3.3
2014	12.5	62.9	8.0	8.2	5.8	3.9	6.1	186	6.9	3.2
2015	12.4	62.5	8.1	8.4	5.9	3.9	n/a	188	6.9	3.1
2016	12.2	62.0	8.2	8.5	5.9	3.9	n/a	n/a	6.9	3.2
2017	11.8	60.3	8.3	8.6	5.8	3.9	n/a	n/a	6.9	2.9

1. Crude birth rates are per 1000 population. Fertility rates are per 1000 women aged 15-44.

2. Crude death rates are per 1000 population.

3. Rates are per 1000 live births. Fetal death rate is per 1000 live births plus fetal deaths.

4. Ratio is per 1000 live births.

5. Rates are events per 1000 population.

* Data for total U.S. population – previous publications (prior to 2012) reported data for the U.S. white population.

**APPENDIX E
VERMONT VITAL RECORDS FORMS**

DH-PHS-BIR-2012

DEPARTMENT OF HEALTH
VERMONT CERTIFICATE OF LIVE BIRTH

144

LOCAL FILE NUMBER

STATE FILE NUMBER

TYPE OR
PRINT IN
PERMANENT
BLACK INK

CHILD					
1. CHILD'S NAME - (FIRST, MIDDLE, LAST, SUFFIX)			2a. DATE OF BIRTH - (MONTH, DAY, YEAR)		2b. TIME OF BIRTH
3. SEX	4a. PLURALITY - SINGLE, TWIN, ETC. (SPECIFY)	4b. IF NOT SINGLE BIRTH - BORN FIRST, SECOND, ETC. (SPECIFY)	5a. PLACE OF BIRTH		
5b. CITY OR TOWN OF BIRTH			5c. FACILITY NAME - (IF NOT IN FACILITY, GIVE STREET ADDRESS AND NUMBER)		
PARENTS					
6. NAME - (FIRST, MIDDLE, LAST, SUFFIX)			7. DATE OF BIRTH - (MONTH, DAY, YEAR)		
8. LAST NAME AT BIRTH			9. BIRTHPLACE - (STATE OR FOREIGN COUNTRY)		
10a. RESIDENCE - STREET AND NUMBER			10b. CITY OR TOWN	10c. STATE	
11. NAME - (FIRST, MIDDLE, LAST, SUFFIX)			12. DATE OF BIRTH - (MONTH, DAY, YEAR)		
13. BIRTHPLACE - (STATE OR FOREIGN COUNTRY)					
CERTIFIER					
14a. CERTIFIER'S NAME			14b. TITLE	14c. DATE CERTIFIED - (MONTH, DAY, YEAR)	
15a. ATTENDANT'S NAME - (IF OTHER THAN CERTIFIER)			15b. TITLE		
REGISTRAR					
16a. REGISTRAR - SIGNATURE				16b. DATE RECEIVED BY LOCAL REGISTRAR - (MONTH, DAY, YEAR)	
17a. TRUE COPY - CLERK SIGNATURE			17b. TOWN	17c. DATE - (MONTH, DAY, YEAR)	
ATTEST					

TO BE SIGNED
BY THE
REGISTRAR
ON COPY
ONLY

INFORMATIONAL COPY ONLY

VERMONT CERTIFICATE OF DEATH

Date of Death: **Aliases:** **Age:** **State File Number**
Time of Death:

Date of Birth: **Birthplace:** **Sex:**
Mother's / Parent's Birth Name:
Father's / Parent's Birth Name:
Marital Status: **Spouse/Civil Union Partner:**
Residence:

Hispanic Origin: **Race:**
Occupation: **Business/Industry:**
Education:
Ever in U.S. Armed Forces: **Veteran of Any War:**

Hospice Care (in past 30 days):
Place of Death:
Informant: **Relationship:**

Disposition Date: **Place of Temporary Storage:**
Method: **Place of Final Disposition:**
Funeral Director/Authorized Person:
Address:

Cause of Death and Interval (Onset to Death): **Manner of Death:**

Other Contributing Conditions:

Did Tobacco Use Contribute to Death: **Pregnant at Time of Death:**
Date Pronounced Dead: **Time Pronounced Dead:**
Medical Examiner Contacted: **Autopsy Performed:**

Injury Date/Time: **Injury at Work:** **Transportation Injury:**
Injury Place: **Injury Location:**
How Injury Occurred:

Medical Certifier:
Title of Certifier: **Date Certified:** **Other Attending Physician:**

Registration: **Date Registered:**

INFORMATIONAL COPY ONLY

1. NAME OF FETUS (First, Middle, Last)		2. SEX	3. DATE OF DELIVERY (Mo/Day/Yr)	4. TIME OF DELIVERY (24hr)	
5a. PLURALITY - Single, Twin, Triplet, etc. (Specify)	6. PLACE WHERE DELIVERY OCCURRED (Check one) <input type="checkbox"/> Hospital <input type="checkbox"/> Clinic/Doctor's Office <input type="checkbox"/> Home Delivery: Planned to deliver at home? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Other (Specify) _____		7. FACILITY NAME (If not institution, give street and number)		
5b. IF NOT SINGLE DELIVERY - Delivered First, Second, etc. (Specify)			8. CITY/TOWN OF DELIVERY		
5c. IF NOT SINGLE DELIVERY - Number of Fetal Deaths in this delivery (Specify)					
9a. MOTHER'S CURRENT LEGAL NAME (First, Middle, Last)			9b. DATE OF BIRTH (Mo/Day/Yr)		
9c. MOTHER'S LAST NAME PRIOR TO FIRST MARRIAGE			9d. BIRTHPLACE (State, Territory, or Foreign Country)		
10a. RESIDENCE OF MOTHER-STATE OR FOREIGN COUNTRY		10b. IF CANADA, include Province		10c. CITY/TOWN OF RESIDENCE	
10d. STREET AND NUMBER (Include Apartment Number)			11a. MOTHER MARRIED? (at delivery, conception, or anytime between) <input type="checkbox"/> Yes <input type="checkbox"/> No		11b. IF NO, MOTHER PARTY TO A CIVIL UNION? <input type="checkbox"/> Yes <input type="checkbox"/> No
12. MOTHER'S EDUCATION (Check the box that best describes the highest degree or level of school completed at the time of delivery) <input type="checkbox"/> 8th grade or less <input type="checkbox"/> 9th - 12th grade, no diploma <input type="checkbox"/> High school graduate or GED completed <input type="checkbox"/> Some college credit but no degree <input type="checkbox"/> Associate degree (e.g., AA, AS) <input type="checkbox"/> Bachelor's degree (e.g., BA, AB, BS) <input type="checkbox"/> Master's degree (e.g., MA, MS, MEng, MEd, MSW, MBA) <input type="checkbox"/> Doctorate (e.g., PhD, EdD) or Professional degree (e.g., MD, DDS, DVM, LLB, JD)		13. MOTHER OF HISPANIC ORIGIN? (Check the box that best describes whether the mother is Spanish/Hispanic/Latina. Check the "No" box if mother is not Spanish/Hispanic/Latina) <input type="checkbox"/> No, not Spanish/Hispanic/Latina <input type="checkbox"/> Yes, Mexican, Mexican American, Chicana <input type="checkbox"/> Yes, Puerto Rican <input type="checkbox"/> Yes, Cuban <input type="checkbox"/> Yes, other Spanish/Hispanic/Latina (Specify) _____		14. MOTHER'S RACE (Check one or more races to indicate what the mother considers herself to be) <input type="checkbox"/> White <input type="checkbox"/> Black or African American <input type="checkbox"/> American Indian or Alaska Native (Name of the enrolled or principal tribe) _____ <input type="checkbox"/> Asian Indian <input type="checkbox"/> Chinese <input type="checkbox"/> Filipino <input type="checkbox"/> Japanese <input type="checkbox"/> Korean <input type="checkbox"/> Vietnamese <input type="checkbox"/> Other Asian (Specify) _____ <input type="checkbox"/> Native Hawaiian <input type="checkbox"/> Guamanian or Chamorro <input type="checkbox"/> Samoan <input type="checkbox"/> Other Pacific Islander (Specify) _____ <input type="checkbox"/> Other (Specify) _____	
15. MOTHER'S HEIGHT _____ (feet/inches)		18. CIGARETTE SMOKING BEFORE AND DURING PREGNANCY For each time period, enter either the number of cigarettes or the number of packs of cigarettes smoked. IF NONE, ENTER "0". Average number of cigarettes or packs of cigarettes smoked per day. # of cigarettes # of packs Three Months Before Pregnancy _____ OR _____ First Three Months of Pregnancy _____ OR _____ Second Three Months of Pregnancy _____ OR _____ Third Trimester of Pregnancy _____ OR _____			
16. MOTHER'S PREPREGNANCY WEIGHT _____ (pounds)		17. DID MOTHER GET WIC FOOD FOR HERSELF DURING THIS PREGNANCY? <input type="checkbox"/> Yes <input type="checkbox"/> No			
19a. FATHER'S/PARENT'S CURRENT LEGAL NAME (First, Middle, Last, Suffix)		19b. SEX	19c. DATE OF BIRTH (Mo/Day/Yr)		19d. BIRTHPLACE (State, Territory, or Foreign Country)
20. MOTHER'S MEDICAL RECORD NUMBER	21a. DATE OF FIRST PRENATAL CARE VISIT ____/____/____ <input type="checkbox"/> No Prenatal Care		21b. DATE OF LAST PRENATAL CARE VISIT ____/____/____		22. TOTAL NUMBER OF PRENATAL VISITS FOR THIS PREGNANCY _____ (If none, enter "0".)
23. DATE LAST NORMAL MENSES BEGAN ____/____/____	24a. NUMBER OF PREVIOUS LIVE BIRTHS NOW LIVING Number _____ <input type="checkbox"/> None	24b. NUMBER OF PREVIOUS LIVE BIRTHS NOW DEAD Number _____ <input type="checkbox"/> None	24c. DATE OF LAST LIVE BIRTH ____/____/____	25a. NUMBER OF OTHER PREGNANCY OUTCOMES (spontaneous or induced losses or ectopic pregnancies) Number _____ <input type="checkbox"/> None	25b. DATE OF LAST OTHER PREGNANCY OUTCOME ____/____/____
26. RISK FACTORS IN THIS PREGNANCY (Check all that apply): Diabetes <input type="checkbox"/> Prepregnancy (Diagnosis prior to this pregnancy) <input type="checkbox"/> Gestational (Diagnosis in this pregnancy) Hypertension <input type="checkbox"/> Prepregnancy (Chronic) <input type="checkbox"/> Gestational (PIH, preeclampsia) <input type="checkbox"/> Eclampsia <input type="checkbox"/> Previous preterm birth <input type="checkbox"/> Other previous poor pregnancy outcome (Includes perinatal death, small-for-gestational age/intrauterine growth restricted birth) <input type="checkbox"/> Pregnancy resulted from infertility treatment-If yes, check all that apply: <input type="checkbox"/> Fertility-enhancing drugs, Artificial insemination or Intrauterine insemination <input type="checkbox"/> Assisted reproductive technology (e.g., in vitro fertilization (IVF), gamete intrafallopian transfer (GIFT)) <input type="checkbox"/> Mother had a previous cesarean delivery If yes, how many _____ <input type="checkbox"/> None of the above			27. INFECTIONS PRESENT AND/OR TREATED DURING THIS PREGNANCY (Check all that apply) <input type="checkbox"/> Gonorrhea <input type="checkbox"/> Syphilis <input type="checkbox"/> Chlamydia <input type="checkbox"/> Listeria <input type="checkbox"/> Group B Streptococcus <input type="checkbox"/> Cytomegalovirus <input type="checkbox"/> Parvovirus <input type="checkbox"/> Toxoplasmosis <input type="checkbox"/> None of the above <input type="checkbox"/> Other (Specify) _____		

28. MOTHER TRANSFERRED FOR MATERNAL MEDICAL OR FETAL INDICATIONS FOR DELIVERY? <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, ENTER NAME OF FACILITY MOTHER TRANSFERRED FROM: _____		29. MOTHER'S WEIGHT AT DELIVERY _____ (pounds)
30a. FETAL PRESENTATION AT DELIVERY <input type="checkbox"/> Cephalic <input type="checkbox"/> Breech <input type="checkbox"/> Other	31. MATERNAL MORBIDITY (Check all that apply) (Complications associated with labor and delivery) <input type="checkbox"/> Maternal transfusion <input type="checkbox"/> Third or fourth degree perineal laceration <input type="checkbox"/> Ruptured uterus <input type="checkbox"/> Unplanned hysterectomy <input type="checkbox"/> Admission to intensive care unit <input type="checkbox"/> Unplanned operating room procedure following delivery <input type="checkbox"/> None of the above	32. CONGENITAL ANOMALIES OF THE FETUS (Check all that apply) <input type="checkbox"/> Anencephaly <input type="checkbox"/> Meningocele/Spina bifida <input type="checkbox"/> Cyanotic congenital heart disease <input type="checkbox"/> Congenital diaphragmatic hernia <input type="checkbox"/> Omphalocele <input type="checkbox"/> Gastroschisis <input type="checkbox"/> Limb reduction defect (excluding congenital amputation and dwarfing syndromes) <input type="checkbox"/> Cleft Lip with or without Cleft Palate <input type="checkbox"/> Cleft Palate alone <input type="checkbox"/> Down Syndrome <input type="checkbox"/> Karyotype confirmed <input type="checkbox"/> Karyotype pending <input type="checkbox"/> Suspected chromosomal disorder <input type="checkbox"/> Karyotype confirmed <input type="checkbox"/> Karyotype pending <input type="checkbox"/> Hypospadias <input type="checkbox"/> None of the anomalies listed above
30b. FINAL ROUTE AND METHOD OF DELIVERY (Check one) <input type="checkbox"/> Vaginal/Spontaneous <input type="checkbox"/> Vaginal/Forceps <input type="checkbox"/> Vaginal/Vacuum <input type="checkbox"/> Cesarean If cesarean, was a trial of labor attempted? <input type="checkbox"/> Yes <input type="checkbox"/> No		
30c. HYSTEROTOMY/HYSTERECTOMY <input type="checkbox"/> Yes <input type="checkbox"/> No		
33. WEIGHT OF FETUS (grams preferred, specify unit) _____ grams <input type="checkbox"/> lb/oz <input type="checkbox"/>		34. OBSTETRIC ESTIMATE OF GESTATION AT DELIVERY _____ (completed week)
35. CAUSE/CONDITIONS CONTRIBUTING TO FETAL DEATH		
35a. INITIATING CAUSE/CONDITION (AMONG THE CHOICES BELOW, PLEASE SELECT THE <u>ONE</u> 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 <input type="checkbox"/> Rupture of membranes prior to onset of labor <input type="checkbox"/> Abruptio placenta <input type="checkbox"/> Placental insufficiency <input type="checkbox"/> Prolapsed cord <input type="checkbox"/> Chorioamnionitis <input type="checkbox"/> Other (Specify) _____ Other Obstetrical or Pregnancy Complications (Specify) _____ _____ Fetal Anomaly (Specify) _____ _____ Fetal Injury (Specify) _____ Fetal Infection (Specify) _____ Other Fetal Conditions/Disorders (Specify) _____ _____ <input type="checkbox"/> Unknown		35b. OTHER SIGNIFICANT CAUSES OR CONDITIONS (SELECT OR SPECIFY ALL OTHER CONDITIONS CONTRIBUTING TO DEATH) Maternal Conditions/Diseases (Specify) _____ _____ Complications of Placenta, Cord, or Membranes <input type="checkbox"/> Rupture of membranes prior to onset of labor <input type="checkbox"/> Abruptio placenta <input type="checkbox"/> Placental insufficiency <input type="checkbox"/> Prolapsed cord <input type="checkbox"/> Chorioamnionitis <input type="checkbox"/> Other (Specify) _____ Other Obstetrical or Pregnancy Complications (Specify) _____ _____ Fetal Anomaly (Specify) _____ _____ Fetal Injury (Specify) _____ Fetal Infection (Specify) _____ Other Fetal Conditions/Disorders (Specify) _____ _____ <input type="checkbox"/> Unknown
36. ESTIMATED TIME OF FETAL DEATH <input type="checkbox"/> Dead at time of first assessment, no labor ongoing <input type="checkbox"/> Dead at time of first assessment, labor ongoing <input type="checkbox"/> Died during labor, after first assessment <input type="checkbox"/> Unknown time of fetal death		37a. WAS AN AUTOPSY PERFORMED? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Planned
		37b. WAS A HISTOLOGICAL PLACENTAL EXAMINATION PERFORMED? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Planned
		37c. WERE AUTOPSY OR HISTOLOGICAL PLACENTAL EXAMINATION RESULTS USED IN DETERMINING THE CAUSE OF FETAL DEATH? <input type="checkbox"/> Yes <input type="checkbox"/> No
38. METHOD OF DISPOSITION: <input type="checkbox"/> Burial <input type="checkbox"/> Cremation <input type="checkbox"/> Hospital Disposition <input type="checkbox"/> Donation <input type="checkbox"/> Removal from State <input type="checkbox"/> Temporary Storage <input type="checkbox"/> Other (Specify) _____		
39a. ATTENDANT'S NAME AND TITLE NAME: _____ TITLE (Check one): <input type="checkbox"/> MD <input type="checkbox"/> DO <input type="checkbox"/> CNM/CM <input type="checkbox"/> LICENSED MIDWIFE <input type="checkbox"/> OTHER (Specify) _____	39b. ATTENDANT'S LICENSE NUMBER _____	40. NAME AND TITLE OF PERSON COMPLETING REPORT NAME: _____ TITLE (Check one): <input type="checkbox"/> MD <input type="checkbox"/> DO <input type="checkbox"/> CNM/CM <input type="checkbox"/> LICENSED MIDWIFE <input type="checkbox"/> HOSPITAL ADMINISTRATOR <input type="checkbox"/> OTHER (Specify) _____
		41. DATE REPORT COMPLETED ____/____/____ MM DD YYYY

IF REMAINS ARE RELEASED TO A FUNERAL DIRECTOR OR OTHER PERSON, A BURIAL-TRANSIT PERMIT MUST BE COMPLETED.

**VERMONT DEPARTMENT OF HEALTH
REPORT OF INDUCED TERMINATION OF PREGNANCY**

DH-PHS-ABO-02

State File Number

FACILITY

Name of Facility or Physician:	City or Town:
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PATIENT INFORMATION

Patient Identification Number:	Date of Birth: <i>(Month,Day,Year)</i>
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Residence-State:	City or Town:	Zip Code:
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Domestic Relationship: <input type="checkbox"/> Not married/ not in civil union <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced	Of Hispanic Origin? <i>(If Yes, specify Cuban, Mexican, Puerto Rican, etc.)</i> <input type="checkbox"/> No <input type="checkbox"/> Yes (Specify) _____	Race: <input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Amer. Indian <input type="checkbox"/> Other <i>(Specify)</i> _____	Education <i>(Specify only highest grade completed)</i>	
			Elementary/Secondary (0-12)	College (1-4 or 5+)

MEDICAL INFORMATION

Date of Procedure: <i>(Month,Day,Year)</i>	Clinical Estimate of Gestation <i>(Weeks)</i>	Previous Pregnancies <i>(Complete each section)</i>			
Date Last Normal Menses Began: <i>(Month,Day,Year)</i>		Live Births		Other Terminations	
		Now Living	Now Dead	Spontaneous	Induced
		# _____	# _____	# _____	# _____
		None <input type="checkbox"/>	None <input type="checkbox"/>	None <input type="checkbox"/>	None <input type="checkbox"/>

TERMINATION

TYPE OF TERMINATION PROCEDURE
(Check only one)

Suction Curettage/Early Uterine Evacuation
 Medical (Nonsurgical)
 Dilation and Evacuation (D&E)
 Intra-Uterine Instillation (Saline or Prostaglandin)
 Sharp Curettage (D&C)
 Hysterotomy/Hysterectomy
 Other *(Specify)* _____

CERTIFICATION

I hereby certify that this procedure was performed on the date stated above.

Signature _____ Date _____

Address _____

This certification constitutes permission for final disposition.
If remains are released to a funeral director or other person, a burial transit permit must be completed.

SEND THIS REPORT WITHIN SEVEN DAYS TO:

Vital Records
Vermont Department of Health
P.O. Box 70, 108 Cherry Street
Burlington, VT 05402-0070

(Title 18, Section 5222, V.S.A)

VERMONT LICENSE AND CERTIFICATE OF CIVIL MARRIAGE

LOCAL FILE NUMBER

STATE FILE NUMBER

TYPE OR
PRINT IN
BLACK INK

APPLICANT A		<input type="checkbox"/> BRIDE		<input type="checkbox"/> GROOM		<input type="checkbox"/> SPOUSE		(check one)	
1a. LEGAL NAME (First, Middle, Last)						1b. LAST NAME AT BIRTH (Maiden Surname)			
2. SEX		3. DATE OF BIRTH (Month, Day, Year)			4. BIRTHPLACE (State or Foreign Country)				
5a. RESIDENCE ADDRESS (Number and Street)						5b. CITY OR TOWN OF RESIDENCE			
5c. STATE OF RESIDENCE						5d. COUNTRY OF RESIDENCE			
6a. FATHER'S OR PARENT'S NAME (First, Middle, Last Name at Birth)						6b. BIRTHPLACE (State or Foreign Country)			
7a. MOTHER'S OR PARENT'S NAME (First, Middle, Last Name at Birth)						7b. BIRTHPLACE (State or Foreign Country)			
APPLICANT B		<input type="checkbox"/> BRIDE		<input type="checkbox"/> GROOM		<input type="checkbox"/> SPOUSE		(check one)	
8a. LEGAL NAME (First, Middle, Last)						8b. LAST NAME AT BIRTH (Maiden Surname)			
9. SEX		10. DATE OF BIRTH (Month, Day, Year)			11. BIRTHPLACE (State or Foreign Country)				
12a. RESIDENCE ADDRESS (Number and Street)						12b. CITY OR TOWN OF RESIDENCE			
12c. STATE OF RESIDENCE						12d. COUNTRY OF RESIDENCE			
13a. FATHER'S OR PARENT'S NAME (First, Middle, Last Name at Birth)						13b. BIRTHPLACE (State or Foreign Country)			
14a. MOTHER'S OR PARENT'S NAME (First, Middle, Last Name at Birth)						14b. BIRTHPLACE (State or Foreign Country)			
We/I hereby certify that the information provided is correct to the best of our/my knowledge and belief and that we are free to marry under the laws of Vermont.									
15a. SIGNATURE (Applicant A)				15b. DATE SIGNED		16a. SIGNATURE (Applicant B)		16b. DATE SIGNED	
CERTIFICATION I hereby certify that the above named persons have made oath to the truth of the facts stated in the foregoing declaration of intention of marriage and complied with the marriage laws of the State of Vermont.					REGISTRAR (See instructions on back) This license authorizes the marriage IN VERMONT ONLY of the above named parties by any person duly authorized to perform a marriage.				
17a. DATE ON WHICH LICENSE WAS ISSUED (Month, Day, Year)					18a. I CERTIFY THAT THE ABOVE PERSONS WERE MARRIED ON (Month, Day, Year)		18b. WHERE MARRIED – CITY OR TOWN		
17b. TOWN CLERK (Signature)					18c. SIGNATURE OF PERSON PERFORMING CEREMONY			18d. TITLE	
17c. TOWN OR CITY					18e. NAME (Type/Print)			18f. TELEPHONE NUMBER	
17d. THIS LICENSE IS VALID FROM _____ DATE TO _____ DATE					18g. MAILING ADDRESS OF PERSON PERFORMING CEREMONY (Number and Street, City or Town, State, Zip Code)				
REGISTRATION									
19a. CLERK'S SIGNATURE					19b. DATE RECEIVED BY LOCAL REGISTRAR				
20a. TRUE COPY – (Clerk's Signature)					20b. TOWN		20c. DATE		
ATTEST:									

CONFIDENTIAL INFORMATION

THE INFORMATION BELOW MUST BE COMPLETED. IT WILL NOT APPEAR ON CERTIFIED COPIES OF THE RECORD.

APPLICANT A		
21. LEGAL NAME (First, Middle, Last)		21a. I FREELY AND VOLUNTARILY AGREE TO DISSOLVE OUR CIVIL UNION CERTIFIED IN VERMONT. SIGNATURE: _____
22. TOTAL NO. OF MARRIAGES AND CIVIL UNIONS, INCLUDING THIS ONE	23a. LAST MARRIAGE OR CIVIL UNION ENDED BY (check one) ____ Death ____ Divorce ____ Dissolution ____ Annulment ____ Civil union did not end; marrying civil union partner	23b. DATE LAST MARRIAGE OR CIVIL UNION ENDED Month _____ Year _____
APPLICANT B		
24. LEGAL NAME (First, Middle, Last)		24a. I FREELY AND VOLUNTARILY AGREE TO DISSOLVE OUR CIVIL UNION CERTIFIED IN VERMONT. SIGNATURE: _____
25. TOTAL NO. OF MARRIAGES AND CIVIL UNIONS, INCLUDING THIS ONE	26a. LAST MARRIAGE OR CIVIL UNION ENDED BY (check one) ____ Death ____ Divorce ____ Dissolution ____ Annulment ____ Civil union did not end; marrying civil union partner	26b. DATE LAST MARRIAGE OR CIVIL UNION ENDED Month _____ Year _____

**DEPARTMENT OF HEALTH
VERMONT RECORD OF DIVORCE OR ANNULMENT**

Docket # _____

Dept. of Health Use ONLY
State File # _____

APPLICANT A <input type="checkbox"/> HUSBAND <input type="checkbox"/> WIFE <input type="checkbox"/> SPOUSE (Check one)		
1a. Name (First, Middle, Last)	1b. Last Name at Birth	1c. Sex <input type="checkbox"/> Female <input type="checkbox"/> Male
2a. State of Residence	2b. City or Town of Residence	3. Date of Birth (month, day, year) ____ / ____ / ____

APPLICANT B <input type="checkbox"/> HUSBAND <input type="checkbox"/> WIFE <input type="checkbox"/> SPOUSE (Check one)		
4a. Name (First, Middle, Last)	4b. Last Name at Birth	4c. Sex <input type="checkbox"/> Female <input type="checkbox"/> Male
5a. State of Residence	5b. City or Town of Residence	6. Date of Birth (month, day, year) ____ / ____ / ____

MARRIAGE		
7a. State or foreign country of this marriage	7b. City or Town of this marriage	7c. Date of this marriage (month, day, year) ____ / ____ / ____
8a. Date couple last resided in same household (month, day, year) ____ / ____ / ____	8b. Number of children under 18 in this household as of the date in item 8a.	
9a. Name of Petitioner's Attorney _____ _____	9b. Attorney's Address (street, city/town, state, zip) _____ _____ _____	
<input type="checkbox"/> NO ATTORNEY		

DECREE		
10. I certify that this decree became absolute (final) on (month, day, year) ____ / ____ / ____	11. Type of decree (check one) <input type="checkbox"/> Divorce <input type="checkbox"/> Annulment	12. County of decree
13. Legal grounds for decree (specify)	14. Court Manager's Name	15. Date signed (month, day, year) ____ / ____ / ____

**DEPARTMENT OF HEALTH
VERMONT RECORD OF
CIVIL UNION DISSOLUTION OR ANNULMENT**

Docket # _____

Dept. of Health Use ONLY
State File # _____

PARTY A		
1a. Name (First, Middle, Last)	1b. Sex	1c. Maiden Surname (If Applicable)
2a. State of Residence	2b. City or Town	3. Date of Birth (month, day, year) ____ / ____ / ____

PARTY B		
4a. Name (First, Middle, Last)	4b. Sex	4c. Maiden Surname (If Applicable)
5a. State of Residence	5b. City or Town	6. Date of Birth (month, day, year) ____ / ____ / ____

CIVIL UNION		
7a. State or foreign country of this civil union	7b. City or Town of this civil union	7c. Date of this civil union (month, day, year) ____ / ____ / ____
8a. Date couple last resided in same household (month, day, year) ____ / ____ / ____	8b. Number of children under 18 in this household as of the date in item 8a.	
9a. Name of Petitioner's Attorney _____ _____	9b. Attorney's Address (street, city/town, state, zip) _____ _____ _____	
<input type="checkbox"/> NO ATTORNEY		

DECREE		
10. I certify that this decree became absolute (final) on (month, day, year) ____ / ____ / ____	11. Type of decree (check one) <input type="checkbox"/> Absolute Dissolution <input type="checkbox"/> Annulment	12. County of decree
13. Legal grounds for decree <i>(specify)</i>	14. Court Manager	15. Date signed (month, day, year) ____ / ____ / ____