Sudden Unexplained Infant Death Initiative  
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The number of SIDS deaths has declined since 1990. Standard data collection can help establish an accurate cause of death.

A thorough investigation of a sudden unexplained infant death (SUID) involves a complete autopsy, examination of the death scene, and a review of the child's clinical history. Sudden Infant Death Syndrome (SIDS) is diagnosed when infants between one month and one year of age suddenly die, but the investigation fails to identify a cause of death. Although the number of children who die from SIDS has declined substantially since 1990, rates of SUIDs have increased. This variation in the rates of infant death indicates a difference in how death scene investigators and certifiers of cause-of-death and death certificates are investigating and reporting these deaths.

Currently, SUIDs account for approximately 4,600 infant deaths each year. Yet, many unexplained infant deaths are not investigated at all or, if they are, are reported inconsistently, indicating that the number actually may be much higher. Without accurate data on causes of infant death, prevention efforts are severely hindered because researchers are not able to sufficiently monitor national trends or evaluate prevention programs.

In 2003, the Centers for Disease Control and Prevention (CDC) launched the Sudden, Unexplained Infant Death Initiative (SUIDI), creating a national standard for the collection of data at infant death scene investigations to improve the accuracy and consistency of SUID classifications. With implementation of the initiative, it will be possible to accurately survey infant deaths, conduct research to prevent SUID, and create policy to guide investigation and reporting of SUID.

In collaboration with national organizations that represent medical examiners, coroners, death scene investigators, infant death researchers, legislators and SIDS parent organizations, CDC has developed comprehensive guidelines, a standard investigation report form, and training curriculum and materials for the death scene investigation. The Sudden Unexplained Infant Death Investigation Report Form provides a national standard for the collection of data at infant death scene investigations; this is important for establishing an accurate cause of death. CDC will begin disseminating the form and its associated training materials at regional training academies this year.

Beginning this month, CDC will begin training academies that, over the course of two years, will be conducted in five regions across the country. The curriculum is designed to teach investigators and death certifiers how to consistently collect data at infant death scenes and accurately report their findings on death certificates. CDC will select 250 individuals—50 from each region—to attend the training.

Individuals selected from each state to attend the training will work in teams consisting of a medical examiner or coroner, law enforcement officer, child advocate or protection expert, college
faculty member or post trainer, and a medicolegal death scene investigator. Each team then will conduct at least one state or local training. In effect, the five regional training academies will produce 250 state trainers, who then will conduct trainings for state agencies and associations and at national conferences.

State Action

Many states have laws related to sudden infant death syndrome that vary significantly in scope and subject. Some state definitions vary in terms of the age at which a child may be considered to have died from SIDS. Most commonly, states have laws that provide guidance for coroners or medical examiners and protocol for autopsies of victims of SIDS. Nine states have SIDS advisory councils, education programs or counseling programs, and many also require that an expert on SIDS participate in child fatality review committees.

Ten states require special training about SIDS for child care personnel, firefighters, emergency medical technicians or law enforcement officials. Five states—Kentucky, New York, Oklahoma, Tennessee and Washington—require data collection or research on SIDS. Finally, five states—California, Florida, Minnesota, Texas and Wisconsin—specifically require that child care workers be educated about SIDS.

Selected Reference


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