

**REQUEST FOR RECORDS DISPOSITION AUTHORITY**  
(See Instructions on reverse)

LEAVE BLANK

JOB NO

*NI-442-91-3*

TO **GENERAL SERVICES ADMINISTRATION**  
**NATIONAL ARCHIVES AND RECORDS SERVICE, WASHINGTON, DC 20408**

DATE RECEIVED

*2-1-91*

1 FROM (Agency or establishment)

NOTIFICATION TO AGENCY

2 MAJOR SUBDIVISION  
Department of Health and Human Services

In accordance with the provisions of 44 U.S.C. 3303a the disposal request, including amendments, is approved except for items that may be marked "disposition not approved" or "withdrawn" in column 10. If no records are proposed for disposal, the signature of the Archivist is not required.

3 MINOR SUBDIVISION  
Public Health Service

4 NAME OF PERSON WITH WHOM TO CONFER  
Centers for Disease Control

5 TELEPHONE EXT

DATE

ARCHIVIST OF THE UNITED STATES

*Johanna A. Bonnelycke*  
PHS Records Officer

301-443-2055

*2/27/91*

*[Signature]*

6 CERTIFICATE OF AGENCY REPRESENTATIVE

I hereby certify that I am authorized to act for this agency in matters pertaining to the disposal of the agency's records, that the records proposed for disposal in this Request of 7 page(s) are not now needed for the business of this agency or will not be needed after the retention periods specified, and that written concurrence from the General Accounting Office, if required under the provisions of Title 8 of the GAO Manual for Guidance of Federal Agencies, is attached

A GAO concurrence  is attached, or  is unnecessary

B DATE	C SIGNATURE OF AGENCY REPRESENTATIVE	D TITLE
1/28/91	<i>[Signature]</i>	HHS RECORDS MANAGEMENT OFFICER

7 ITEM NO	8 DESCRIPTION OF ITEM (With Inclusive Dates or Retention Periods)	9 GRS OR SUPERSEDED JOB CITATION	10 ACTION TAKEN (NARS USE ONLY)
	(See attached)  1. Vessel Sanitation Program (VSP Database) 2. Sudden Unexplained Death Syndrome (SUDS) Database 3. Medical Examiner/Coroner Information Sharing Program Database (MECISP)		

*Copies sent to agency, NNA, NNX, NIA 9/16/91*

## Center for Environmental Health and Injury Control

Plans, directs, and coordinates a national program to maintain and improve the health of the American people by promoting a healthy environment and by preventing premature death and avoidable illness and disability caused by non-infectious, non-occupational environmental and related factors. Also, provides services, advice, technical assistance, and information to State and local public health officials, other Federal agencies, academic, professional, international, and private organizations, and the general public.

### Office of the Director

Manages, directs, coordinates, and evaluates the activities of the Center for Environmental Health and Injury Control (CEHIC); develops goals and objectives and provides leadership, policy formulation, scientific oversight, and guidance in program planning and development; coordinates assistance provided by CEHIC to other CDC components, other Federal, State, and local government agencies, the private sector, and other nations; provides administrative, fiscal, information, publications, and distribution services to the Center; coordinates CEHIC program activities with other PHS agencies and other Federal agencies, as appropriate.

### Vessel Sanitation Program

The Vessel Sanitation Program located in the Special Programs Branch, is responsible for inspecting international cruise ships approved to sail in U.S. waters and recommending improvements in sanitary conditions aboard the ships. Physical inspections are performed aboard the ships. Some of the purposes of the program include reporting the occurrence of transient illnesses found during vessel sanitation inspections, and monitoring the sanitary conditions aboard ships sailing in U.S. waters.

#### 1. Vessel Sanitation Program (VSP) Database

Contains medical illness data on passengers and crew members and laboratory analysis data by individual ship. Also includes information on sanitary conditions found aboard the ships as the result of inspections. Information on sanitary conditions is collected on forms by inspection personnel and entered into the system. Data on illness are entered into the system from illness logs. The data base is primarily used to produce statistical information on specific ships and as a management tool to assign work and to ensure that the

inspections are being conducted properly. The system has been operational from 1989 to the present.

- a. Input. Data is collected on a 42 item inspection form entitled the Vessel Sanitation Inspection Report form. The form contains data from the ship illness logs, ship inspections and data from laboratory analyses. This data is converted to electronic media via RBASE and Multimate software.

Disposition: Destroy when five (5) years old or when no longer needed for administrative purposes, whichever is sooner.

- b. Data Contained in the VSP Database. The VSP database currently contains approximately three (3) years of inspection data maintained in electronic form. The database contains core information on the deficiency ratings on a ship's water, food, personnel, equipment, solid/liquid waste disposal quality status, information on various outbreaks of illnesses, etc.

Disposition: Erase data when five (five) years old or when no longer needed for administrative purposes, whichever is sooner.

c. Outputs

- (1) Vessel Sanitation Reports. Vessel sanitation inspection reports and related documentation for international cruise ships inspected by CDC.

Disposition: Cutoff at the end of the fiscal year in which the CDC inspection took place. Hold in office for three (3) years, then retire to the Federal Records Center (FRC). Destroy ten (10) years after cutoff. (Disposition approved under NARA Job No. N1-442-90-4, item 1.a.)

- (2) Bi-weekly Inspection and Summary Reports. Includes the work schedule certification log and other management information reports in hardcopy and electronic form.

Disposition: Destroy when no longer needed for administrative purposes.

~~(3) Additional Sanitation Reports. Includes rodent control records, aircraft disinfection reports, records relating to mosquito control at seaports and airports, and related X-rays.~~

~~Disposition: Transfer to the FRC upon completion of project and destroy five (5) years thereafter. Disposition approved under CDC Records Control Schedule B-321, item 74.~~

### Division of Environmental Hazards and Health Effects

Conducts and disseminates findings of surveillance and epidemiologic research and investigations of human exposure to environmental hazards, including radiation, man-made and naturally occurring toxins, and resultant and presumed health effects including environmentally related syndromes of unknown etiology; maintains liaison with and serves as a primary Federal source of specialized technical and managerial assistance and consultation to Federal, State, and local agencies, and other national, international, and private organizations on a wide range of environmental health issues including natural and other environmental disasters.

#### Surveillance and Program Branch

Coordinates surveillance activities, technical information resources, and programs directed at reducing human exposure to environmental hazards with Federal, State, and local agencies. Also develops strategies and methods for environmental surveillance and information sharing.

#### 2. Sudden Unexplained Death Syndrome (SUDS) Database

SUDS involves the unexpected and unexplained death of individuals in the United States who are at least two years of age and are of Southeast Asian heritage (including those of Vietnamese, Cambodian, Laotian, Thai or Filipino heritage). For unexplained reasons there are higher than normal rates of unexpected deaths among this U.S. population group. The deaths typically occur during sleep and postmortem examinations fail to identify the underlying cause of death. The SUDS database is designed to assist in data collection and analytical efforts regarding these unexplained deaths. SUDS is designed to collect surveillance information, in a uniform manner, on most of the 5 to 10 cases which occur annually in the U.S. By collecting and analyzing these data it is hoped to understand the causes of this problem and prevent the deaths.

- a. Input Forms (circa 1985 to the present). The major input form is called the Sudden Unexplained Death Syndrome form (OMB Form No. 0920-0171). Data on the form is collected from a variety of sources including persons knowing the deceased individual and the circumstances surrounding the death. Data elements on the form include name of the deceased, sex, date of death, country of birth, etc. Reports are compiled by using medical examiner's or coroner's reports, autopsy findings, toxicological results, death certificates, and other material. Once complete, the forms are forwarded periodically in hardcopy format to CDC from State SUDS coordinators, medical examiners, or coroners for input into the SUDS Database.

Disposition: Destroy SUDS reporting forms after they have been entered into data base and verified for accuracy or when no longer needed for administrative purposes, whichever is sooner.

- b. Data Contained in the SUDS Database. The database file structure contains 66 fields. The fields contains a wide variety of data regarding the circumstances surrounding death, demographic, toxicological and related background material.

Disposition: PERMANENT--Transfer a "snapshot" copy of the database to the National Archives and Records Administration (NARA) every five (5) years. NOTE: the data will be transferred to the Archives on tapes formatted in accordance with regulations noted in 36 CFR 1228.188; transfer of machine-readable records to NARA.

Rate of accumulation: Negligible.

Volume on Hand: Less than one cubic foot.

- c. System Documentation, SUDS Data sets. Includes pertinent information regarding tape specifications, variable names and column layouts for each file, and hard copy version of relevant code books.

Disposition: PERMANENT--Transfer in conjunction with the transfer of electronic records under item 2.b. above.

d. Outputs

- ~~(1) Hardcopy Morbidity and Mortality Weekly Reports, CDC Surveillance Reports, and Journal Articles that are published periodically represent the only SUDS output.~~

~~Disposition: PERMANENT--Transfer to the FRC when five (5) years old and offer to NARA when twenty (20) years old. Disposition approved in CDC Records Control Schedule B-321, item 64a.~~

- (2) Additional copies of special reports and data sets.

Disposition: Destroy when no longer needed for administrative purposes.

3. Medical Examiner/Coroner Information Sharing Program Database (MECISP)

The function of the system is to improve the quality of death investigation in the United States. The database contains information on death investigation cases resulting from sudden, violent, unexpected, or suspicious means. MECISP is designed to improve the quality of information and promote the sharing of information with responsible staff of State medical examiners, other government offices, and need-to-know persons. The system has been operational from 1987 to the present.

- a. Input. (circa 1987 to the present). State and county medical examiners/coroners transfer data to CDC in electronic form (floppy disks and tapes).

Disposition: Delete after one cycle update or when no longer needed for administrative purposes, whichever is sooner.

- b. Data Contained in the MECISP Database. Contains data on deaths for various States and counties. Data sets are purchased by CDC or are given to CDC by the States and counties. Not all States participate in this program. Data in the database is categorized by CDC. CDC provides statistical data from the database to the States and counties.

Disposition: Delete data from the master file when no longer needed to conduct current business.

c. Outputs


- (1) Hardcopy internal annual reports and other special reports and data sets provided to States.

Disposition: Destroy when no longer needed for administrative purposes.

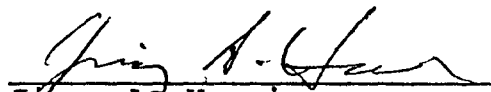
- (2) Additional copies of special reports and data sets.

Disposition: Destroy when no longer needed for administrative purposes.

Concurrences

  
\_\_\_\_\_  
Arthur C. Jackson  
Deputy Director, Center for  
Environmental Health and Injury  
Control

1/9/91  
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date

  
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Jimmy A. Harrison  
CDC Records Officer

1/10/91  
\_\_\_\_\_  
date