

STATEID	death certificate ID number
FIRSTNAME	First name
MIDDLENAME	middle name
LASTNAME	last name
MAIDENNAME	maiden name (if applicable)
SUFFIX	suffix
BIRTHDATE	date of birth
DEATHDATE	date of death
GENDER	gender (M=male, F=female)
RACE	Race
HISPANICETHNICITY	Hispanic/Latino or not
AGEYEARS	Age at death (in years)
RESADDRESS	address of residence
RESSTATE	state of residence
RESCITY	city of residence
ZIP	zip of residence
ARMEDFORCES	Y or N -- ever in armed forces
YEAREducation	Years of education or highest educational attainment
OCCUPATION	occupation
INDUSTRY	industry
MARITALSTATUS	marital status
DEATH_PLACETYPE	place of death type (i.e. hospital, own home, other place, etc)
DEATHCITY	City of death
DEATHCOUNTY	county of death
MANNERDEATH	Manner of death (homicide, suicide, accidental, natural)
INJURY_DATE	Date of injury (that led to death; this may or may not be the same as date of death)
INJURYPLACE	place of injury that led to death
INJURYSTATE	state where injury occurred
INJURYCOUNTY	county where injury occurred (this was not well filled out in some years, so it is populated with the county of residence in cases where I could not determine the county)
INJURYDESC	Injury description (as written on death certificate)
CAUSEA_CLEANED	These are standardized versions of the cause of death fields from the death certificate
CAUSEB_CLEANED	These are standardized versions of the cause of death fields from the death certificate
SINGLE_MIXED	A field I added that indicates if this involved just one drug or if it involved multiple drugs
agegroup	A field I added that puts them into an age group