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Fetal Mortality: United States, 2024

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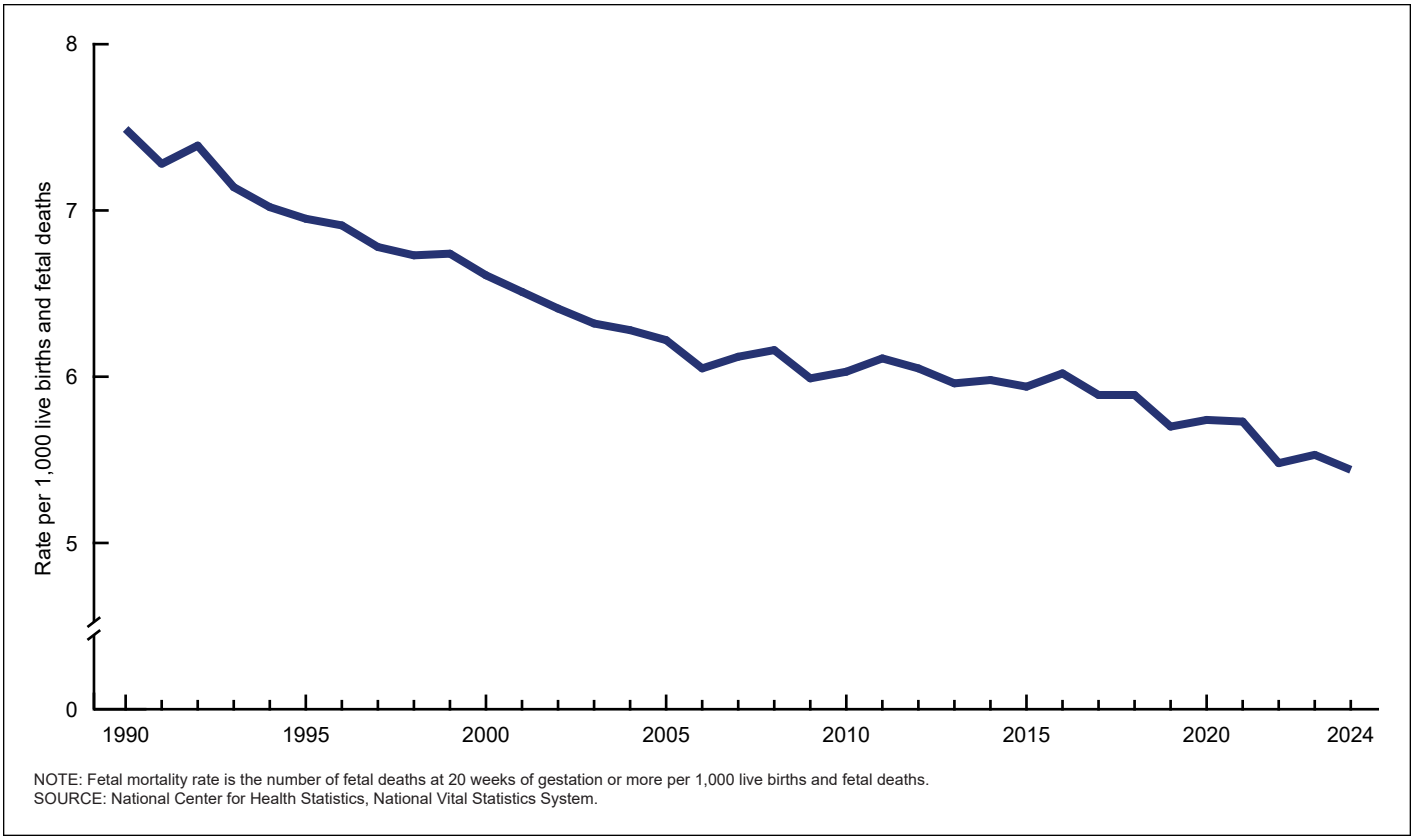
Abstract

Objectives—This report presents 2024 fetal mortality data by maternal race and Hispanic origin, age, tobacco use during pregnancy, and state of residence, as well as by plurality, sex, gestational age, birthweight, and selected causes of death. Trends in fetal mortality are also examined.

Methods—Descriptive tabulations of data are presented and interpreted for all fetal deaths reported for the United States for 2024 with a stated or presumed period of gestation of 20 weeks or more. Cause-of-fetal-death data only are restricted to residents of the 43 states and the District of Columbia where less than 50% of deaths were attributed to Fetal death of unspecified cause (P95).

Results—A total of 19,837 fetal deaths at 20 weeks of gestation or more were reported in the United States in 2024. The 2024 U.S. fetal mortality rate was 5.44 fetal deaths at 20 weeks of gestation or more per 1,000 live births and fetal deaths, not significantly different from the rate of 5.53 in 2023. The fetal mortality rate in 2024 for deaths occurring at 20–27 weeks of gestation was 2.89, unchanged from the rate in 2023.

Figure 1. Fetal mortality rate: United States, 1990–2024



NOTE: Fetal mortality rate is the number of fetal deaths at 20 weeks of gestation or more per 1,000 live births and fetal deaths.
SOURCE: National Center for Health Statistics, National Vital Statistics System.

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In 2024, the fetal mortality rate for deaths occurring at 28 weeks of gestation or more was 2.57, a 3% decline from 2023 (2.66). In 2024, the fetal mortality rate was highest for Native Hawaiian or Other Pacific Islander non-Hispanic (10.21) and Black non-Hispanic (10.00) women and lowest for Asian non-Hispanic women (3.89). Fetal mortality rates were generally highest for women 45 and older, for women who smoked during pregnancy, and for women with multiple gestation pregnancies. Five selected causes accounted for 89.6% of fetal deaths in the 43-state and the District of Columbia reporting area.

Keywords: fetal death • stillbirth • pregnancy loss • National Vital Statistics System (NVSS)

Introduction

Fetal mortality—the intrauterine death of a fetus at any gestational age—is a major but often overlooked public health issue. Much of the public concern surrounding pregnancy and infant loss has focused on infant mortality, due in part to lesser knowledge of the incidence, causes (etiology), and prevention strategies for fetal mortality. This report presents detailed data on numbers and rates of fetal deaths for the United States for 2024. Data are presented by maternal race and Hispanic origin, age, tobacco use during pregnancy, and state of residence, as well as by plurality, sex, gestational age at delivery, birthweight, and selected causes of death. Trends in fetal mortality are also examined.

In addition to the tabulations included in this report, more detailed analysis of fetal mortality is possible by using the annual fetal death public-use file. The public-use file does not include geographic detail; a file with this information may be available upon special request (see the Division of Vital Statistics data release policy). National and state-level fetal death data may also be accessed via the Centers for Disease Control and Prevention's (CDC) WONDER, a web-based data query system that makes CDC data available to public health professionals and the public (1).

Methods

Data sources

Data in this report are drawn from two National Center for Health Statistics (NCHS) vital statistics data files: the 2024 fetal death data set (for fetal deaths) and the 2024 birth data set (for births). The 2024 fetal death data set contains information from all reports of fetal death filed in the 50 states, the District of Columbia (D.C.), Guam, and Puerto Rico (data for American Samoa, the Commonwealth of the Northern Mariana Islands (subsequently, Northern Marianas), and the U.S. Virgin Islands were excluded to protect confidentiality due to the small number of events reported) (2). The 2024 birth data set contains information from all U.S. Standard Certificates of Live Birth filed in the 50 states, D.C., American Samoa, Guam, Northern Marianas, Puerto Rico, and the U.S. Virgin Islands. Tables showing data by jurisdiction also provide separate information for Guam and Puerto Rico; however, these data are not included in U.S. totals.

Fetal mortality

Fetal death refers to the intrauterine death of a fetus prior to delivery (Technical Notes). Fetal mortality is generally divided into three periods based on gestational age: less than 20 completed weeks of gestation (commonly referred to as miscarriages), 20–27 weeks of gestation (early fetal deaths), and 28 weeks of gestation or more (late fetal deaths). Although the vast majority of fetal deaths occur early in pregnancy, most U.S. states require the reporting of fetal deaths only at 20 weeks of gestation or more (2), and fetal mortality data from the National Vital Statistics System are usually presented for fetal deaths at 20 weeks of gestation or more. As a result, only fetal deaths reported at 20 weeks of gestation or more are included in this report. Numbers and rates for early and late fetal deaths are shown separately for selected variables. Statistics on fetal death exclude data for induced terminations of pregnancy. Fetal mortality rates in this report are computed as the number of fetal deaths at 20 weeks of gestation or more per 1,000 live births and fetal deaths at 20 weeks or more (Technical Notes). See Technical Notes for new count, rate, and proportion presentation standards.

Data limitations

Variation exists among states in reporting requirements and possibly in completeness of reporting of fetal death data, and these variations can have implications for data quality and completeness (Technical Notes). Correct interpretation of fetal death data should include an evaluation of the completeness of reporting of fetal deaths, as well as an evaluation of the completeness of reporting for the specific variables of interest (3–5). The percentage of not-stated responses for fetal death data varies markedly among variables and states; see "User Guide to the 2024 Fetal Death Public Use File" (2).

2003 revision of U.S. Standard Report of Fetal Death

Starting in 2018, all 50 states, D.C., Guam, Northern Marianas, Puerto Rico, and the U.S. Virgin Islands reported data based on the 2003 U.S. Standard Report of Fetal Death. American Samoa started reporting data based on the revised report in 2024.

Data on items such as mother's date of birth, race, Hispanic origin, level of education, tobacco use during pregnancy, and place of residence are recommended to come from the mother (see the Patient's Worksheet [6]). Data on items such as prenatal care, medical risk factors, maternal morbidity, plurality, sex of fetus, gestational age, birthweight, and cause of death are recommended to come from the medical records (see the Facility Worksheet [7]). Detailed definitions for data items that are collected from the Facility Worksheet are in the "Guide to the Facility Worksheet" (8). Further information

on fetal death reporting is available in the eLearning training, "Applying Best Practices for Reporting Medical and Health Information on Birth Certificates," available from: https://www.cdc.gov/nchs/training/BirthCertificateElearning.

This report uses final fetal death data to present information on fetal deaths and fetal death rates by race and Hispanic origin, maternal age, tobacco use during pregnancy, plurality, sex of fetus, gestational age, birthweight, state of residence, and selected causes of death.

Race and Hispanic origin

The 2003 revision of the U.S. Standard Report of Fetal Death allows the reporting of more than one race (multiple races) for the mother (9), according to the revised standards issued by the Office of Management and Budget in 1997 (10). Starting in 2018, all 50 states and D.C., Guam, Northern Marianas, Puerto Rico, and the U.S. Virgin Islands reported race data according to these 1997 standards, which require the reporting of a minimum of five race categories and allow for reporting of race by either single race (reported alone) or in combination (more than one race or multiple races) (10). American Samoa started reporting race data based on the revised standards in 2024. The race and Hispanic-origin groups shown in this report follow the 1997 standards and differ from the bridged-race categories shown in reports before 2018 (11). The current categories are American Indian and Alaska Native non-Hispanic single race, Asian non-Hispanic single race, Black or African American non-Hispanic single race, Native Hawaiian or Other Pacific Islander non-Hispanic single race, White non-Hispanic single race, and Hispanic (for brevity in text, references to the race groups omit "non-Hispanic single race").

Race and Hispanic origin are reported independently on the report of fetal death. Most tables in this report show data for the categories of Asian, Black, White, and Hispanic. Selected tables also include data for the categories American Indian and Alaska Native and Native Hawaiian or Other Pacific Islander. Data are also presented in some tables for Hispanic subgroups: Central and South American, Cuban, Dominican, Mexican, Puerto Rican, and other and unknown Hispanic. Data were presented separately for Dominican women for the first time beginning with the 2018 data year. Data for this subgroup had previously been included in the category other and unknown Hispanic. Beginning in 2022, data for Central and South American exclude Latin American, which has been reclassified as other and unknown Hispanic to follow the U.S. Census Bureau standards. American Samoa does not collect information on Hispanic origin.

Fetal deaths by state

Comparisons of fetal mortality rates by state can be affected by differences in reporting requirements for fetal deaths among registration areas, particularly for fetal deaths occurring at gestational ages early in the reporting period (Technical Notes). Additionally, the small numbers of fetal deaths in some states by year can result in lack of reliability for state-specific fetal mortality rates. To try to address these issues, in addition to showing fetal mortality rates at 20 weeks or more by state for 2024, this report also presents fetal deaths and fetal mortality rates by state for fetal deaths at 24 weeks of gestation or more for the latest combined 3-year period (2022–2024).

Cause of death

NCHS codes the cause of fetal death reported by the certifier using the *International Classification of Diseases, 10th Revision* (12). In this report, the five most frequently reported causes of death shown, including unspecified cause, are drawn from 45 causes in the List of 124 Selected Causes of Fetal Death, as defined in Instruction manual, part 9 (13) and ranked according to the number of fetal deaths.

Starting in 2024, all 50 states, D.C., American Samoa, Guam, Northern Marianas, Puerto Rico, and the U.S. Virgin Islands reported cause-of-death data based on the 2003 U.S. Standard Report of Fetal Death. In this report, data on the five most frequently reported causes of death are included for the 43 states and D.C. that met the reporting requirement of having less than 50% of records assigned to unspecified cause (P95). This reporting area includes 16,514 fetal deaths, representing 83.2% of all fetal deaths in 2024. These statistics based on a subnational area are not generalizable to the entire United States. In tables and figures, the five selected causes are shown in descending order according to the number of deaths assigned to each cause.

Statistical significance

Statements in this report have been tested for statistical significance. A statement that a given mortality rate is higher or lower than another rate indicates that the rates are significantly different unless otherwise noted. For information on the methods used to test for statistical significance, as well as more detailed information on the collection, interpretation, and availability of fetal death data, see the 2024 User Guide (2).

Results

Trends in fetal mortality

- In 2024, 19,837 fetal deaths occurring at 20 weeks of gestation or more were reported in the United States, not significantly different from the number of fetal deaths in 2023 (20,005) (Figure 1, Table 1).
- The fetal mortality rate was 5.44 fetal deaths at 20 weeks of gestation or more per 1,000 live births and fetal deaths in 2024, not significantly different from the 2023 rate of 5.53. With minor fluctuations, the total U.S. fetal mortality rate has declined 27% since 1990 (7.49).
- The early fetal mortality rate (20–27 weeks of gestation) was 2.89 in 2024, unchanged from the rate in 2023. The rate has generally trended downward and has declined 9% since 2014 (3.16).
- The late fetal mortality rate (28 weeks of gestation or more)

was 2.57 in 2024, a 3% decline from the 2023 rate of 2.66. The rate fluctuated from 2014 (2.83) to 2021 (2.80) and declined 8% from 2021 to 2024.

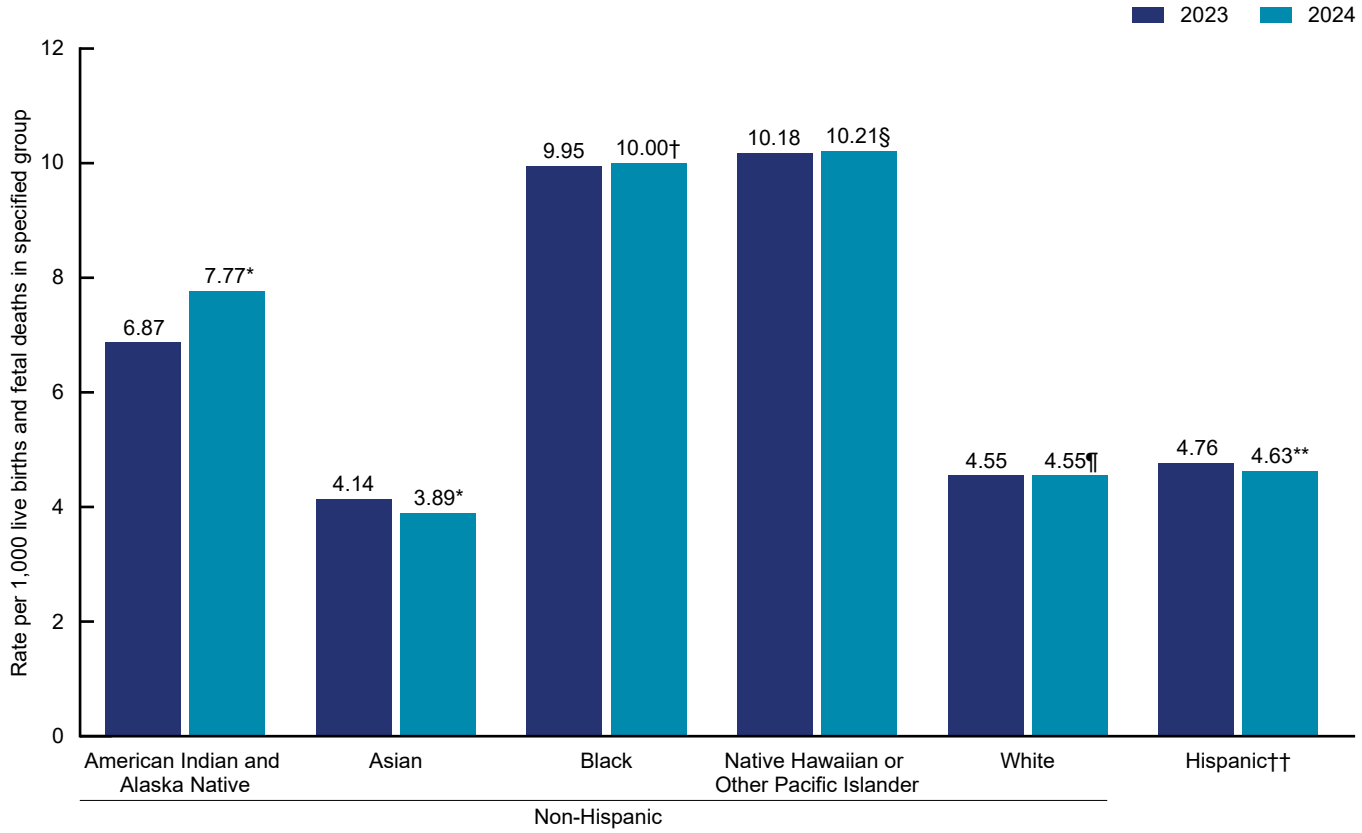
Race and Hispanic origin

- Among race and Hispanic-origin groups, no significant changes in fetal mortality rates were seen for 2023 to 2024: American Indian and Alaska Native (6.87 to 7.77), Asian (4.14 to 3.89), Black (9.95 to 10.00), Native Hawaiian or Other Pacific Islander (10.18 to 10.21), White (4.55 for both years), and Hispanic (4.76 to 4.63) (Figure 2, Table 2).
- From 2023 to 2024, the fetal mortality rate declined 11% for Central and South American women (4.31 to 3.84). No significant changes in fetal mortality rates were observed for women of the remaining Hispanic-origin subgroups: Cuban (4.81 to 4.83), Dominican (4.24 to 4.13), Mexican (4.63 to 4.64), Puerto Rican (4.89 to 4.94), and other and unknown Hispanic (6.44 to 6.32) (Table 3).
- In 2024, fetal mortality rates continued to vary by race and Hispanic origin; rates were highest for Native Hawaiian or Other Pacific Islander (10.21) and Black (10.00) women, followed by American Indian and Alaska Native women (7.77).
- The rate was lowest for Asian women (3.89), followed by White (4.55) and Hispanic (4.63) women.
- Among Hispanic-origin subgroups, in 2024, the rate was highest for other and unknown Hispanic women (6.32). Rates for the other subgroups ranged from 3.84 for Central and South American women to 4.94 for Puerto Rican women.

Maternal age

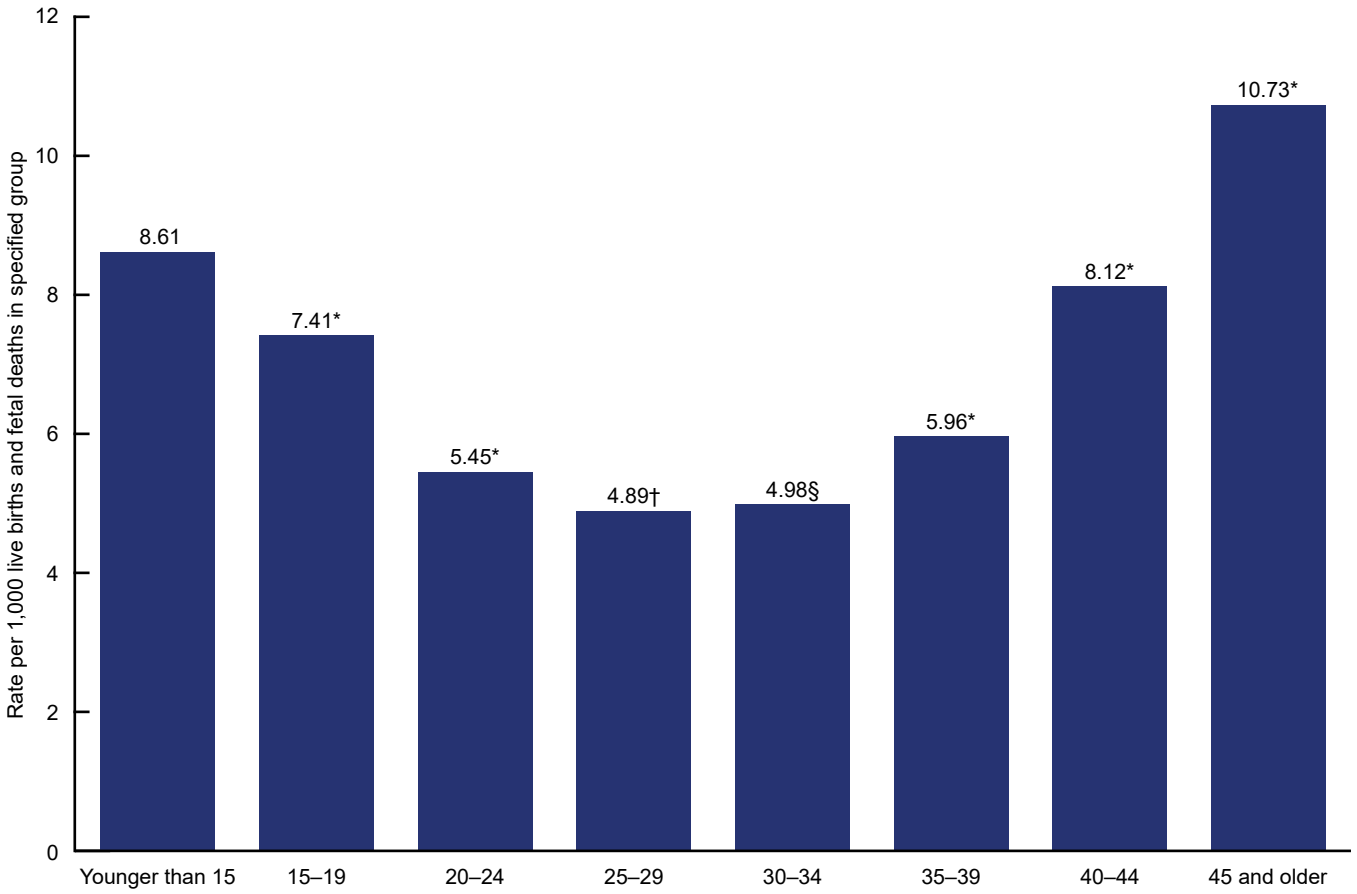
- In 2024, fetal mortality rates varied by maternal age for females age 15 and older (Figure 3, Table 4). The fetal mortality rate was 7.41 for females ages 15–19, declined to a low for women ages 25–29 (4.89) and 30–34 (4.98), and then increased among older women, reaching a high of 10.73 for women age 45 and older. The rate for females younger than 15 was not significantly different from any other maternal age group due to a small number of events (n = 15).

Figure 2. Fetal mortality rate, by race and Hispanic origin of mother: United States, 2023 and 2024



* Significant difference from all other groups (p < 0.05).
† Significant difference from all groups except Native Hawaiian or Other Pacific Islander non-Hispanic (p < 0.05).
§ Significant difference from all groups except Black non-Hispanic (p < 0.05).
¶ Significant difference from all groups except Hispanic (p < 0.05).
** Significant difference from all groups except White non-Hispanic (p < 0.05).
†† People of Hispanic origin may be of any race.
NOTE: Fetal mortality is the number of fetal deaths at 20 weeks of gestation or more per 1,000 live births and fetal deaths in each specified group.
SOURCE: National Center for Health Statistics, National Vital Statistics System.

Figure 3. Fetal mortality rate, by age of mother: United States, 2024



* Significant difference from all other groups except younger than 15 ($p < 0.05$).
† Significant difference from all other groups except younger than 15 and 30–34 ($p < 0.05$).
§ Significant difference from all other groups except younger than 15 and 25–29 ($p < 0.05$).
NOTE: Fetal mortality is the number of fetal deaths at 20 weeks of gestation or more per 1,000 live births and fetal deaths in each specified group.
SOURCE: National Center for Health Statistics, National Vital Statistics System.

- The fetal mortality rate for teenagers ages 15–17 (8.63) was more than 70% higher, and the rate for teenagers ages 18–19 (7.00) was 41%–43% higher, than the rates for women ages 25–29 (4.89) and 30–34 (4.98).
- Age-specific fetal mortality rates for Black females were higher than those for White and Hispanic females age 15 and older, and higher than those for Asian women ages 20–44.

Tobacco use during pregnancy

- The fetal mortality rate for women who smoked cigarettes during pregnancy (10.30) was more than two times higher than that for women who did not smoke during pregnancy (4.84) (Table 5).
- The pattern was generally similar for the three largest race and Hispanic-origin groups. The fetal mortality rate for women who smoked during pregnancy compared with those who did not was 1.8 times higher for Black women (16.61 and 9.07, respectively), and more than two times higher for White (9.07 and 4.07), and Hispanic (11.06 and 4.22) women. See Table 5 for fetal mortality rates by tobacco use during pregnancy by age.

Plurality

- The fetal mortality rate for twins (11.45) was more than twice that for singletons (5.24) (Table A). The rate for triplet or higher-order deliveries (19.33) was nearly four times that for singletons.
- Comparing twins and singletons, the pattern was similar for the five largest race and Hispanic-origin groups. The fetal mortality rate for twins was more than twice as high as that for singletons for American Indian and Alaska Native (26.36 and 7.26, respectively), Asian (11.94 and 3.68), White (9.25 and 4.39), and Hispanic (10.97 and 4.47) women, and nearly twice as high for Black women (16.77 and 9.69).

Table A. Fetal mortality rate, by selected characteristics and race and Hispanic origin of mother: United States, 2024

Characteristic	Total†	Non-Hispanic, single race*					Hispanic§
		American Indian and Alaska Native	Asian	Black	Native Hawaiian or Other Pacific Islander	White	
				Fetal mortality rate¶			
Total	5.44	7.77	3.89	10.00	10.21	4.55	4.63
Plurality							
Single	5.24	7.26	3.68	9.69	9.79	4.39	4.47
Twin	11.45	26.36	11.94	16.77	**	9.25	10.97
Triplet or higher order	19.33	**	**	24.30	**	14.61	**
Sex							
Male	5.50	7.21	3.89	10.66	10.26	4.49	4.72
Female	5.37	8.36	3.89	9.33	10.15	4.62	4.54
Male–female ratio	1.02	0.86	1.00	1.14	1.01	0.97	1.04
				Fetal deaths			
Total	19,837	188	886	4,784	107	8,158	4,578
Plurality							
Single	18,521	171	819	4,432	100	7,617	4,310
Twin	1,265	17	64	339	**	521	256
Triplet or higher order	51	**	**	13	**	20	12
Sex							
Male	10,248	90	456	2,592	55	4,118	2,374
Female	9,589	98	430	2,192	52	4,040	2,204
Male–female ratio	…	…	…	…	…	…	…
				Live births			
Total	3,628,934	24,021	226,860	473,377	10,375	1,783,156	984,092
Plurality							
Single	3,517,151	23,373	221,449	452,981	10,118	1,726,015	960,531
Twin	109,195	628	5,294	19,874	254	55,792	23,076
Triplet or higher order	2,588	20	117	522	**	1,349	485
Sex							
Male	1,853,969	12,399	116,716	240,537	5,306	913,082	501,012
Female	1,774,965	11,622	110,144	232,840	5,069	870,074	483,080
Male–female ratio	…	…	…	…	…	…	…

* Race and Hispanic origin are reported separately on the report of fetal death; people of Hispanic origin may be of any race. In this table, non-Hispanic women are classified by race. Race categories are consistent with the 1997 Office of Management and Budget standards; see Technical Notes in this report. Single race is defined as only one race reported on the report of fetal death.
† Includes fetal deaths to race and Hispanic-origin groups not shown separately.
§ Includes all people of Hispanic origin of any race; see Technical Notes.
¶ Number of fetal deaths in specified group per 1,000 live births and fetal deaths.
** Estimate does not meet National Center for Health Statistics standards of reliability.
… Category not applicable.

SOURCE: National Center for Health Statistics, National Vital Statistics System.

Sex of fetus

- In 2024, the fetal mortality rate for male fetuses was 5.50, not significantly different from the rate for female fetuses (5.37) (Table A).
- The fetal mortality rate for male fetuses compared with female fetuses was 14% higher for Black women (10.66 and 9.33, respectively). No significant difference was seen for American Indian and Alaska Native (7.21 and 8.36), Asian (both 3.89), Native Hawaiian or Other Pacific Islander (10.26 and 10.15), White (4.49 and 4.62), and Hispanic (4.72 and 4.54) women.

Period of gestation

- In 2024, just over one-half of all fetal deaths at 20 weeks of gestation or more (53.0%) occurred at 20–27 weeks (early fetal deaths), and 47.0% occurred at 28 weeks of gestation or more (late fetal deaths) (Table 6).
- The fetal mortality rate was highest at 20–23 weeks of gestation (528.48), declined to a low of 0.57 at 39–40 weeks, and then increased to 4.79 at 42 weeks of gestation or more.

Birthweight

- In 2024, more than one-third of fetal deaths at 20 weeks of gestation or more (36.5%) weighed less than 500 grams (1 lb. 1 oz.) at delivery, and nearly one-half (47.8%) weighed less than 750 grams (1 lb. 12 oz.) (Table 6).
- The fetal mortality rate was highest for fetuses weighing less than 500 grams (578.62) and decreased with increasing birthweight to a low of 0.59 for fetuses weighing 3,500–3,999 grams. Fetal mortality rates then increased slightly for fetuses weighing 4,000 grams or more (1.15).

Fetal mortality rates by state

- For combined years 2022–2024, the U.S. fetal mortality rate for fetal deaths at 24 weeks or more was 3.50 per 1,000 live births and fetal deaths (Table B).
- For combined years 2022–2024, fetal mortality rates were highest (above 5.00) in Mississippi (5.70) and lowest (below 3.00) in Vermont (2.40), Maine (2.51), New Hampshire (2.65), Massachusetts (2.76), New Mexico (2.81), Montana (2.85), West Virginia (2.86), Texas (2.87), Iowa (2.93), and Pennsylvania (2.99).
- See Table 7 for fetal deaths at 20 weeks of gestation or more by state and territory for 2024.

Selected causes of fetal death

- The five most common selected causes of fetal death accounted for 89.6% of fetal deaths in the 43-state and D.C. reporting area (Figure 4, Table 8). By order of frequency, these were: 1) Fetal death of unspecified cause (unspecified cause); 2) Fetus affected by complications of placenta, cord and membranes (placental, cord and membrane complications); 3) Fetus affected by maternal complications of pregnancy (maternal complications); 4) Congenital malformations, deformations and chromosomal abnormalities (congenital malformations); and 5) Fetus affected by maternal conditions that may be unrelated to present pregnancy (maternal conditions unrelated to pregnancy).

Table B. Number of fetal deaths at 24 weeks of gestation or more and fetal mortality rate, by state and territory: United States, 2022–2024

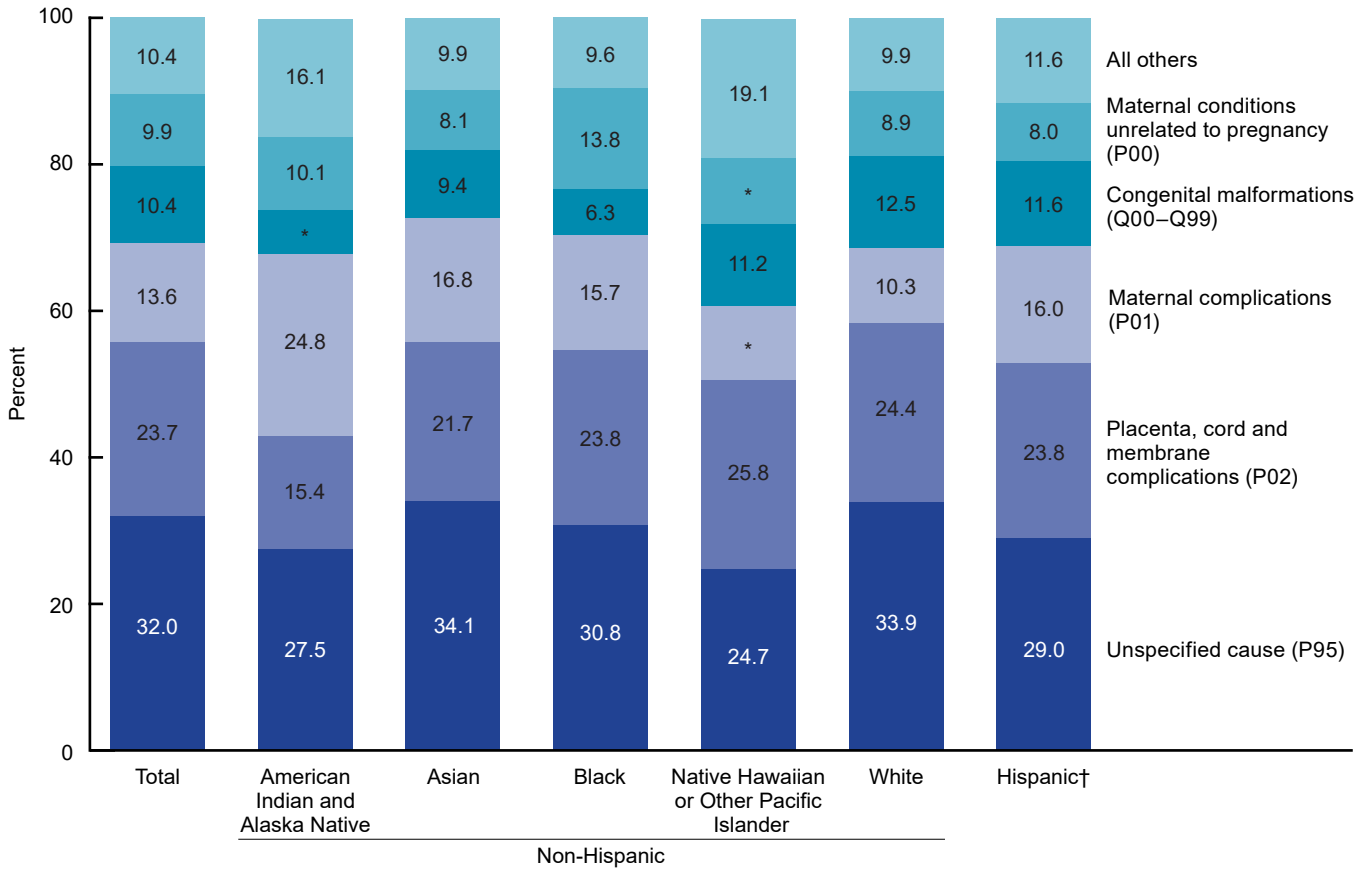
Area	Fetal deaths	Fetal mortality rate*	Area	Fetal deaths	Fetal mortality rate*
Total	38,240	3.50	New Jersey	962	3.14
Alabama	845	4.83	New Mexico	180	2.81
Alaska	91	3.32	New York	2,083	3.37
Arizona	969	4.10	North Carolina	1,371	3.75
Arkansas	474	4.45	North Dakota	101	3.49
California	3,964	3.24	Ohio	1,417	3.70
Colorado	610	3.23	Oklahoma	568	3.92
Connecticut	315	3.01	Oregon	386	3.30
Delaware	131	4.10	Pennsylvania	1,152	2.99
District of Columbia	108	4.56	Rhode Island	94	3.11
Florida	2,812	4.18	South Carolina	723	4.13
Georgia	1,701	4.48	South Dakota	128	3.77
Hawaii	180	3.96	Tennessee	1,044	4.17
Idaho	227	3.32	Texas	3,361	2.87
Illinois	1,248	3.28	Utah	478	3.47
Indiana	914	3.81	Vermont	37	2.40
Iowa	320	2.93	Virginia	896	3.16
Kansas	364	3.54	Washington	809	3.26
Kentucky	554	3.51	West Virginia	145	2.86
Louisiana	589	3.56	Wisconsin	575	3.19
Maine	89	2.51	Wyoming	65	3.57
Maryland	731	3.64	American Samoa	---	---
Massachusetts	565	2.76	Guam	80	10.97
Michigan	1,104	3.65	Northern Marianas	---	---
Minnesota	617	3.27	Puerto Rico	324	5.77
Mississippi	588	5.70	U.S. Virgin Islands	---	---
Missouri	706	3.45			
Montana	96	2.85			
Nebraska	240	3.27			
Nevada	424	4.34			
New Hampshire	95	2.65			

* Number of fetal deaths in specified group per 1,000 live births and fetal deaths.
--- Data unavailable.

NOTES: Fetal deaths with not-stated period of gestation are proportionally distributed to less than 24 weeks and 24 weeks or more; see Technical Notes in this report. Fetal deaths by state may not add to total due to rounding.

SOURCE: National Center for Health Statistics, National Vital Statistics System.

Figure 4. Percent distribution of fetal deaths, by selected causes of death and race and Hispanic origin of mother: 43 states and the District of Columbia, 2024



* Estimate does not meet National Center for Health Statistics standards of reliability.
† People of Hispanic origin may be of any race.
NOTES: Codes in parentheses are cause-of-death codes as classified by the *International Statistical Classification of Diseases and Related Health Problems, 10th Revision*. Excludes data for jurisdictions (Arizona, Georgia, Michigan, Mississippi, Nevada, North Dakota, Oregon, and New York City) for which the cause of death was unspecified (P95) for 50% or more of records. Percentages may not add to 100.0 because of rounding.
SOURCE: National Center for Health Statistics, National Vital Statistics System.

- The five most common selected causes of fetal death were the same for the six largest race and Hispanic-origin groups. The ranking of these causes for Asian and Hispanic women was the same as that for all women, whereas the rankings differed for all other race and Hispanic-origin groups.
- Among American Indian and Alaska Native women, unspecified cause was the most common cause of fetal death category; maternal complications was second; placental, cord and membrane complications was third; maternal conditions unrelated to pregnancy was fourth; and congenital malformations was fifth.
- Among Black women, unspecified cause was the most common cause of fetal death, followed by placental, cord and membrane complications; maternal complications; maternal conditions unrelated to pregnancy; and congenital malformations.
- Among Native Hawaiian or Other Pacific Islander women, placental, cord and membrane complications was the most common cause of fetal death, followed by unspecified cause, congenital malformations, maternal complications, and maternal conditions unrelated to pregnancy.
- Among White women, unspecified cause was the most common cause of fetal death, followed by placental, cord and membrane complications, congenital malformations, maternal complications, and maternal conditions unrelated to pregnancy.

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List of Detailed Tables

Table 1. Number of fetal deaths and live births and fetal mortality rate for 1990–2024 and early and late fetal deaths and fetal mortality rate for 2014–2024: United States

Year	Fetal deaths			Live births	Fetal mortality rate*		
	Total†	20–27 weeks§	28 weeks or more§		Total†	20–27 weeks§	28 weeks or more§
2024.	19,837	10,504	9,333	3,628,934	5.44	2.89	2.57
2023.	20,005	10,431	9,574	3,596,017	5.53	2.89	2.66
2022.	20,202	10,246	9,956	3,667,758	5.48	2.79	2.71
2021.	21,105	10,824	10,281	3,664,292	5.73	2.95	2.80
2020.	20,854	10,764	10,090	3,613,647	5.74	2.97	2.78
2019.	21,478	11,216	10,262	3,747,540	5.70	2.98	2.73
2018.	22,459	11,844	10,615	3,791,712	5.89	3.11	2.79
2017.	22,827	11,861	10,966	3,855,500	5.89	3.07	2.84
2016.	23,880	12,486	11,394	3,945,875	6.02	3.15	2.88
2015.	23,776	12,407	11,369	3,978,497	5.94	3.11	2.85
2014¶.	23,980	12,652	11,328	3,988,076	5.98	3.16	2.83
2013.	23,595	---	---	3,932,181	5.96	---	---
2012.	24,073	---	---	3,952,841	6.05	---	---
2011.	24,289	---	---	3,953,590	6.11	---	---
2010.	24,258	---	---	3,999,386	6.03	---	---
2009.	24,872	---	---	4,130,665	5.99	---	---
2008.	26,335	---	---	4,247,726	6.16	---	---
2007.	26,593	---	---	4,316,233	6.12	---	---
2006.	25,972	---	---	4,265,593	6.05	---	---
2005.	25,894	---	---	4,138,573	6.22	---	---
2004.	26,001	---	---	4,112,055	6.28	---	---
2003.	26,004	---	---	4,090,007	6.32	---	---
2002.	25,943	---	---	4,021,825	6.41	---	---
2001.	26,373	---	---	4,026,036	6.51	---	---
2000.	27,003	---	---	4,058,882	6.61	---	---
1995.	27,294	---	---	3,899,589	6.95	---	---
1990.	31,386	---	---	4,158,445	7.49	---	---

* Number of fetal deaths in specified group per 1,000 live births and fetal deaths.
† Fetal deaths with stated or presumed period of gestation of 20 weeks or more.
§ Not stated gestational age proportionally distributed.
¶ Beginning with the 2014 data year, the obstetric estimate of gestation at delivery replaces the measure based on the date of last normal menses as the standard for measuring gestational age; see Technical Notes in this report.
--- Data not available.

SOURCE: National Center for Health Statistics, National Vital Statistics System.

Table 2. Number of fetal deaths and mortality rate, by race and Hispanic origin of mother: United States, 2018–2024

Year	All races and origins†	Non-Hispanic, single race*					Hispanic§
		American Indian and Alaska Native	Asian	Black	Native Hawaiian or Other Pacific Islander	White	
				Rate¶			
2024	5.44	7.77	3.89	10.00	10.21	4.55	4.63
2023	5.53	6.87	4.14	9.95	10.18	4.55	4.76
2022	5.48	7.22	3.70	10.05	10.36	4.48	4.63
2021	5.73	7.48	3.94	9.89	9.87	4.85	4.82
2020	5.74	7.84	3.93	10.34	10.59	4.73	4.86
2019	5.70	7.47	4.02	10.41	10.03	4.71	4.79
2018	5.89	6.25	4.26	10.64	9.93	4.89	5.06
				Fetal deaths			
2024	19,837	188	886	4,784	107	8,158	4,578
2023	20,005	170	897	4,941	104	8,171	4,520
2022	20,202	187	813	5,194	106	8,280	4,359
2021	21,105	197	846	5,173	95	9,196	4,290
2020	20,854	212	864	5,536	103	8,753	4,231
2019	21,478	214	963	5,766	99	9,067	4,264
2018	22,459	183	1,029	5,938	95	9,621	4,510

* Race and Hispanic origin are reported separately on reports of fetal death. In this table, non-Hispanic women are classified by race. Race categories are consistent with the 1997 Office of Management and Budget standards; see Technical Notes in this report. Single race is defined as only one race reported on the report of fetal death.
† Includes fetal deaths to race and Hispanic-origin groups not shown separately.
§ Includes all people of Hispanic origin of any race.
¶ Number of fetal deaths in specified group per 1,000 live births and fetal deaths.

SOURCE: National Center for Health Statistics, National Vital Statistics System.

Table 3. Number of fetal deaths and mortality rate, by Hispanic origin of mother: United States, 2018–2024

Year	Total	Central and South American	Cuban	Dominican	Mexican	Puerto Rican	Other and Unknown Hispanic
				Rate*			
2024	4.63	3.84	4.83	4.13	4.64	4.94	6.32
2023	4.76	4.31	4.81	4.24	4.63	4.89	6.44
2022	4.63	4.02	3.85	4.22	4.68	4.64	5.81
2021	4.82	---	4.81	4.39	4.77	5.11	---
2020	4.86	---	5.23	4.41	4.79	4.98	---
2019	4.79	---	4.71	4.75	4.86	5.17	---
2018	5.06	---	4.16	5.09	5.19	5.07	---
				Fetal deaths			
2024	4,578	893	157	142	2,430	325	631
2023	4,520	902	145	143	2,365	325	640
2022	4,359	779	102	142	2,400	323	613
2021	4,290	---	118	147	2,325	363	---
2020	4,231	---	122	140	2,312	349	---
2019	4,264	---	112	155	2,427	369	---
2018	4,510	---	98	164	2,587	365	---

* Number of fetal deaths in specified group per 1,000 live births and fetal deaths.
--- Data not available.

NOTES: People of Hispanic origin may be of any race. In this table, Hispanic women are classified only by place of origin; non-Hispanic women are not shown.

SOURCE: National Center for Health Statistics, National Vital Statistics System.

Table 4. Number and rate of total, early, and late fetal deaths, by age and race and Hispanic origin of mother: United States, 2024

Race and Hispanic origin and age of mother	Fetal deaths			Fetal mortality rate*		
	Total	20–27 weeks†	28 weeks or more†	Total	20–27 weeks†	28 weeks or more†
All races and origins§	19,837	10,504	9,333	5.44	2.89	2.57
Younger than 15	15	12	¶	8.61	¶	¶
15–19	1,025	569	456	7.41	4.13	3.31
15–17	300	174	126	8.63	5.02	3.64
18–19	725	395	330	7.00	3.83	3.20
20–24	3,350	1,741	1,609	5.45	2.84	2.62
25–29	4,865	2,520	2,345	4.89	2.54	2.36
30–34	5,572	2,975	2,597	4.98	2.67	2.33
35–39	3,734	1,994	1,740	5.96	3.19	2.79
40–44	1,158	623	535	8.12	4.38	3.77
45 and older	118	70	48	10.73	6.40	4.39
Non-Hispanic, single race**:						
Asian	886	494	392	3.89	2.17	1.72
Younger than 15	¶	¶	¶	¶	¶	¶
15–19	¶	¶	¶	¶	¶	¶
15–17	¶	¶	¶	¶	¶	¶
18–19	¶	¶	¶	¶	¶	¶
20–24	49	29	20	5.34	3.17	2.19
25–29	151	80	71	3.60	1.91	1.70
30–34	322	184	138	3.42	1.96	1.47
35–39	260	139	121	3.98	2.13	1.86
40–44	86	49	37	5.70	3.26	2.46
45 and older	11	¶	¶	¶	¶	¶
Black	4,784	2,721	2,063	10.00	5.72	4.34
Younger than 15	¶	¶	¶	¶	¶	¶
15–19	317	201	116	11.84	7.54	4.37
15–17	99	67	32	13.12	8.92	4.28
18–19	218	134	84	11.34	7.00	4.40
20–24	920	537	383	9.48	5.55	3.97
25–29	1,171	636	535	9.34	5.09	4.29
30–34	1,215	686	529	9.39	5.32	4.11
35–39	844	477	367	11.04	6.27	4.83
40–44	271	155	116	13.10	7.53	5.65
45 and older	40	23	17	20.51	11.90	8.82
White	8,158	4,174	3,984	4.55	2.34	2.23
Younger than 15	¶	¶	¶	¶	¶	¶
15–19	278	144	134	6.35	3.30	3.07
15–17	62	35	27	6.68	3.78	2.92
18–19	216	109	107	6.26	3.17	3.11
20–24	1,186	559	627	4.58	2.17	2.43
25–29	2,020	1,002	1,018	4.04	2.01	2.04
30–34	2,528	1,342	1,186	4.24	2.26	1.99
35–39	1,634	858	776	5.07	2.67	2.41
40–44	468	245	223	7.14	3.75	3.41
45 and older	44	24	20	9.44	5.17	4.31

See footnotes at end of table.

Table 4. Number and rate of total, early, and late fetal deaths, by age and race and Hispanic origin of mother: United States, 2024—Con.

Race and Hispanic origin and age of mother	Fetal deaths			Fetal mortality rate*		
	Total	20–27 weeks†	28 weeks or more†	Total	20–27 weeks†	28 weeks or more†
Hispanic††	4,578	2,389	2,189	4.63	2.42	2.22
Younger than 15	¶	¶	¶	¶	¶	¶
15–19	334	175	159	5.76	3.02	2.75
15–17	104	53	51	6.77	3.46	3.33
18–19	230	122	108	5.39	2.87	2.54
20–24	939	494	445	4.32	2.28	2.05
25–29	1,167	616	551	4.10	2.17	1.94
30–34	1,153	586	567	4.54	2.31	2.24
35–39	715	373	342	5.22	2.73	2.51
40–44	247	130	117	7.08	3.74	3.37
45 and older	17	12	¶	7.49	¶	¶

* Number of fetal deaths in specified group per 1,000 live births and fetal deaths.
† Fetal deaths with gestational age not stated were proportionally distributed; see Technical Notes in this report.
§ Includes fetal deaths to race and Hispanic-origin groups not shown separately.
¶ Estimate does not meet National Center for Health Statistics standards of reliability.
** Race and Hispanic origin are reported separately on reports of fetal death; people of Hispanic origin may be of any race. In this table, non-Hispanic women are classified by race. Race categories are consistent with the 1997 Office of Management and Budget standards; see Technical Notes. Single race is defined as only one race reported on the report of fetal death.
†† Includes all people of Hispanic origin of any race.

SOURCE: National Center for Health Statistics, National Vital Statistics System.

Table 5. Fetal mortality rate, by tobacco use during pregnancy, age, and race and Hispanic origin of mother: United States, 2024

Tobacco use during pregnancy and race and Hispanic origin of mother	Fetal deaths	All ages	Under 20	20–24	25–29	30–34	35–39	40–54	Not stated
All races and origins*	Number	Fetal mortality rate†							Number
Total	19,837	5.44	7.43	5.45	4.89	4.98	5.96	8.30	1,785
Yes	901	10.30	8.03	8.54	8.54	10.86	12.94	15.21	…
No	17,151	4.84	6.69	4.89	4.37	4.40	5.29	7.42	…
Non-Hispanic, single race§									
Asian:									
Total	886	3.89	¶	5.34	3.60	3.42	3.98	5.91	63
Yes	¶	¶	¶	¶	¶	¶	¶	¶	…
No	817	3.60	¶	4.61	3.40	3.19	3.69	5.39	…
Black:									
Total	4,784	10.00	11.86	9.48	9.34	9.39	11.04	13.73	392
Yes	181	16.61	¶	17.04	16.13	15.54	17.34	27.12	…
No	4,211	9.07	10.95	8.56	8.45	8.44	10.07	12.57	…
White:									
Total	8,158	4.55	6.30	4.58	4.04	4.24	5.07	7.29	577
Yes	574	9.07	8.39	7.17	7.32	10.10	11.22	13.00	…
No	7,007	4.07	5.77	4.12	3.67	3.75	4.53	6.43	…
Hispanic**									
Total	4,578	4.63	5.78	4.32	4.10	4.54	5.22	7.10	378
Yes	70	11.06	¶	11.27	10.52	8.80	16.47	¶	…
No	4,130	4.22	5.12	3.97	3.74	4.14	4.69	6.76	…

* Includes fetal deaths to race and Hispanic-origin groups not shown separately.
† Number of fetal deaths in specified group per 1,000 live births and fetal deaths.
… Category not applicable.
§ Race and Hispanic origin are reported separately on the report of fetal death; people of Hispanic origin may be of any race. In this table, non-Hispanic women are classified by race. Race categories are consistent with the 1997 Office of Management and Budget standards; see Technical Notes in this report. Single race is defined as only one race reported on the report of fetal death.
¶ Estimate does not meet National Center for Health Statistics standards of reliability.
** Includes all people of Hispanic origin of any race; see Technical Notes.

SOURCE: National Center for Health Statistics, National Vital Statistics System.

Table 6. Number of fetal deaths and mortality rate, by birthweight, gestational age, and race and Hispanic origin of mother: United States, 2024

Race and Hispanic origin of mother and birthweight (grams)	Total	Gestational age (weeks)										Fetal mortality rate*
		20–23	24–27	28–31	32–33	34–36	37–38	39–40	41	42 or more	Not stated	
All races and origins†	19,837	7,367	3,071	2,485	1,359	2,351	1,779	1,121	135	44	125	5.44
Less than 500	6,701	5,451	917	221	29	25	33	§	§	§	15	578.62
500–749	2,087	820	972	239	29	16	§	§	§	§	§	204.81
750–999	1,295	166	625	392	67	28	§	§	§	§	§	121.29
1,000–1,249	1,013	47	215	563	103	59	14	§	§	§	§	83.66
1,250–1,499	809	22	58	435	161	104	18	§	§	§	§	52.25
1,500–1,999	1,626	23	46	406	550	471	102	13	§	§	10	26.64
2,000–2,499	1,446	§	17	68	274	702	287	86	§	§	§	7.13
2,500–2,999	1,436	§	§	18	65	545	508	253	24	§	10	2.00
3,000–3,499	1,115	§	§	§	18	201	459	375	40	12	§	0.79
3,500–3,999	543	§	§	§	§	78	184	229	33	§	§	0.59
4,000 or more	296	§	§	§	§	44	103	105	20	§	10	1.15
Not stated	1,470	838	216	134	55	78	62	38	§	§	34	…
Fetal mortality rate*	5.44	528.48	170.37	70.24	30.66	8.37	1.62	0.57	0.83	4.79	…	…
Non-Hispanic, single race¶:												
Asian	886	358	133	97	59	99	79	55	§	§	§	3.89
Less than 500	315	265	39	§	§	§	§	§	§	§	§	564.52
500–749	97	41	43	§	§	§	§	§	§	§	§	184.41
750–999	47	§	29	§	§	§	§	§	§	§	§	82.17
1,000–1,249	39	§	§	26	§	§	§	§	§	§	§	58.65
1,250–1,499	42	§	§	21	§	§	§	§	§	§	§	44.63
1,500–1,999	69	§	§	16	30	15	§	§	§	§	§	18.04
2,000–2,499	70	§	§	§	10	36	16	§	§	§	§	4.59
2,500–2,999	56	§	§	§	§	20	21	12	§	§	§	0.95
3,000–3,499	62	§	§	§	§	§	27	26	§	§	§	0.66
3,500–3,999	16	§	§	§	§	§	§	11	§	§	§	0.37
4,000 or more	§	§	§	§	§	§	§	§	§	§	§	§
Not stated	64	46	§	§	§	§	§	§	§	§	§	…
Fetal mortality rate*	3.89	513.63	145.51	51.73	25.43	6.33	1.09	0.44	§	§	…	…
Black	4,784	1,865	838	690	302	492	368	172	20	§	31	10.00
Less than 500	1,800	1,445	258	71	10	§	§	§	§	§	§	527.86
500–749	567	201	284	66	§	§	§	§	§	§	§	179.77
750–999	344	29	173	115	13	11	§	§	§	§	§	113.16
1,000–1,249	259	11	53	158	19	15	§	§	§	§	§	82.33
1,250–1,499	220	§	11	130	42	26	§	§	§	§	§	57.77
1,500–1,999	407	§	§	102	144	118	24	§	§	§	§	28.52
2,000–2,499	299	§	§	10	42	158	73	11	§	§	§	6.79
2,500–2,999	266	§	§	§	13	83	121	40	§	§	§	2.12
3,000–3,499	157	§	§	§	§	32	65	52	§	§	§	0.89
3,500–3,999	87	§	§	§	§	14	37	29	§	§	§	1.05
4,000 or more	61	§	§	§	§	§	26	21	§	§	§	3.27
Not stated	317	172	50	35	§	19	12	10	§	§	§	…
Fetal mortality rate*	10.00	465.20	165.84	84.40	33.72	10.29	2.29	0.76	1.26	§	…	…
White	8,158	2,968	1,188	940	546	1,032	814	529	80	26	35	4.55
Less than 500	2,620	2,161	346	72	10	§	15	§	§	§	§	627.85
500–749	813	326	379	91	15	§	§	§	§	§	§	234.84
750–999	508	78	240	153	21	10	§	§	§	§	§	133.68
1,000–1,249	406	21	83	222	46	23	§	§	§	§	§	88.13
1,250–1,499	286	§	26	137	67	37	§	§	§	§	§	46.50
1,500–1,999	637	12	15	170	200	196	35	§	§	§	§	25.50
2,000–2,499	627	§	§	27	126	301	126	35	§	§	§	7.57
2,500–2,999	682	§	§	§	26	272	230	120	17	§	§	2.27
3,000–3,499	549	§	§	§	§	105	227	175	24	§	§	0.80
3,500–3,999	270	§	§	§	§	31	91	121	18	§	§	0.52
4,000 or more	136	§	§	§	§	18	44	47	10	§	§	0.87
Not stated	624	363	89	57	26	29	28	15	§	§	§	…
Fetal mortality rate*	4.55	596.22	184.50	65.74	27.49	7.96	1.59	0.53	0.87	4.30	…	…

See footnotes at end of table.

Table 6. Number of fetal deaths and mortality rate, by birthweight, gestational age, and race and Hispanic origin of mother: United States, 2024—Con.

Race and Hispanic origin of mother and birthweight (grams)	Total	Gestational age (weeks)										Fetal mortality rate*
		20–23	24–27	28–31	32–33	34–36	37–38	39–40	41	42 or more	Not stated	
Hispanic**	4,578	1,682	694	581	339	549	397	278	27	§	25	4.63
Less than 500	1,572	1,265	223	48	§	§	11	§	§	§	§	568.12
500–749	475	197	207	58	§	§	§	§	§	§	§	187.01
750–999	306	42	143	92	21	§	§	§	§	§	§	113.12
1,000–1,249	229	12	47	125	29	§	§	§	§	§	§	75.78
1,250–1,499	207	§	14	119	34	27	§	§	§	§	§	54.33
1,500–1,999	398	§	16	89	136	111	35	§	§	§	§	26.74
2,000–2,499	325	§	§	20	65	153	57	26	§	§	§	6.38
2,500–2,999	329	§	§	§	19	134	101	61	§	§	§	1.64
3,000–3,499	269	§	§	§	§	41	108	98	10	§	§	0.67
3,500–3,999	130	§	§	§	§	22	42	53	§	§	§	0.54
4,000 or more	67	§	§	§	§	18	20	25	§	§	§	1.10
Not stated	271	153	42	20	13	15	12	§	§	§	§	…
Fetal mortality rate*	4.63	494.42	149.28	63.27	31.11	7.38	1.31	0.51	0.68	§	…	…

* Number of fetal deaths in specified group per 1,000 live births and fetal deaths.
† Includes fetal deaths to race and Hispanic-origin groups not shown separately.
§ Estimate does not meet National Center for Health Statistics standards of reliability.
… Category not applicable.
¶ Race and Hispanic origin are reported separately on the report of fetal death; people of Hispanic origin may be of any race. In this table, non-Hispanic women are classified by race. Race categories are consistent with the 1997 Office of Management and Budget standards; see Technical Notes in this report. Single race is defined as only one race reported on the report of fetal death.
** Includes all people of Hispanic origin of any race; see Technical Notes.

SOURCE: National Center for Health Statistics, National Vital Statistics System.

Table 7. Number of fetal deaths at 20 weeks of gestation or more and fetal mortality rate: United States and each state and territory, 2024

Area	Fetal deaths*	Fetal mortality rate†	Area	Fetal deaths*	Fetal mortality rate†
Total	19,837	5.44	New Jersey	676	6.62
Alabama	460	7.88	New Mexico	82	3.83
Alaska	43	4.79	New York	1,166	5.64
Arizona	479	6.05	North Carolina	721	5.83
Arkansas	246	6.90	North Dakota	63	6.50
California	1,926	4.77	Ohio	702	5.51
Colorado	337	5.22	Oklahoma	296	6.13
Connecticut	168	4.83	Oregon	168	4.29
Delaware	62	5.84	Pennsylvania	611	4.78
District of Columbia	60	7.82	Rhode Island	51	5.07
Florida	1,479	6.55	South Carolina	334	5.65
Georgia	908	7.13	South Dakota	63	5.47
Hawaii	87	5.80	Tennessee	509	6.03
Idaho	121	5.17	Texas	1,631	4.16
Illinois	739	5.84	Utah	258	5.50
Indiana	563	6.97	Vermont	16	3.18
Iowa	165	4.51	Virginia	506	5.35
Kansas	165	4.83	Washington	398	4.77
Kentucky	269	5.06	West Virginia	57	3.34
Louisiana	315	5.87	Wisconsin	293	4.89
Maine	41	3.52	Wyoming	31	5.07
Maryland	388	5.86	American Samoa	---	---
Massachusetts	258	3.77	Guam	30	12.66
Michigan	567	5.66	Northern Marianas	---	---
Minnesota	300	4.81	Puerto Rico	207	11.29
Mississippi	264	7.83	Virgin Islands	---	---
Missouri	348	5.09			
Montana	54	4.74			
Nebraska	113	4.54			
Nevada	243	7.45			
New Hampshire	37	3.13			

* Fetal deaths with stated or presumed period of gestation of 20 weeks or more.
† Number of fetal deaths per 1,000 live births and fetal deaths.
--- Data not available.

NOTE: Data for American Samoa, the Northern Marianas, and the Virgin Islands were excluded due to small numbers.

SOURCE: National Center for Health Statistics, National Vital Statistics System.

Table 8. Number of fetal deaths and percentage of total deaths for the five selected causes, by race and Hispanic origin of mother: 43 states and the District of Columbia, 2024

Rank	Cause and race and Hispanic origin of mother	Fetal deaths	Percent
	All races and origins*		
…	All causes	16,514	100.0
1	Fetal death of unspecified cause (P95)	5,279	32.0
2	Fetus affected by complications of placenta, cord and membranes (P02)	3,913	23.7
3	Fetus affected by maternal complications of pregnancy (P01)	2,242	13.6
4	Congenital malformations, deformations and chromosomal abnormalities (Q00–Q99)	1,721	10.4
5	Fetus affected by maternal conditions that may be unrelated to present pregnancy (P00)	1,634	9.9
…	All other causes	1,725	10.4
	Non-Hispanic, single race†		
	American Indian and Alaska Native:		
…	All causes	149	100.0
1	Fetal death of unspecified cause (P95)	41	27.5
2	Fetus affected by maternal complications of pregnancy (P01)	37	24.8
3	Fetus affected by complications of placenta, cord and membranes (P02)	23	15.4
4	Fetus affected by maternal conditions that may be unrelated to present pregnancy (P00)	15	10.1
5	Congenital malformations, deformations and chromosomal abnormalities (Q00–Q99)	§	§
…	All other causes	24	16.1
	Asian:		
…	All causes	727	100.0
1	Fetal death of unspecified cause (P95)	248	34.1
2	Fetus affected by complications of placenta, cord and membranes (P02)	158	21.7
3	Fetus affected by maternal complications of pregnancy (P01)	122	16.8
4	Congenital malformations, deformations and chromosomal abnormalities (Q00–Q99)	68	9.4
5	Fetus affected by maternal conditions that may be unrelated to present pregnancy (P00)	59	8.1
…	All other causes	72	9.9
	Black:		
…	All causes	3,712	100.0
1	Fetal death of unspecified cause (P95)	1,144	30.8
2	Fetus affected by complications of placenta, cord and membranes (P02)	882	23.8
3	Fetus affected by maternal complications of pregnancy (P01)	584	15.7
4	Fetus affected by maternal conditions that may be unrelated to present pregnancy (P00)	512	13.8
5	Congenital malformations, deformations and chromosomal abnormalities (Q00–Q99)	232	6.3
…	All other causes	358	9.6
	Native Hawaiian or Other Pacific Islander:		
…	All causes	89	100.0
1	Fetus affected by complications of placenta, cord and membranes (P02)	23	25.8
2	Fetal death of unspecified cause (P95)	22	24.7
3	Congenital malformations, deformations and chromosomal abnormalities (Q00–Q99)	10	11.2
4	Fetus affected by maternal complications of pregnancy (P01)	§	§
5	Fetus affected by maternal conditions that may be unrelated to present pregnancy (P00)	§	§
…	All other causes	17	19.1
	White:		
…	All causes	7,016	100.0
1	Fetal death of unspecified cause (P95)	2,378	33.9
2	Fetus affected by complications of placenta, cord and membranes (P02)	1,712	24.4
3	Congenital malformations, deformations and chromosomal abnormalities (Q00–Q99)	878	12.5
4	Fetus affected by maternal complications of pregnancy (P01)	725	10.3
5	Fetus affected by maternal conditions that may be unrelated to present pregnancy (P00)	626	8.9
…	All other causes	697	9.9

See footnotes at end of table.

Table 8. Number of fetal deaths and percentage of total deaths for the five selected causes, by race and Hispanic origin of mother: 43 states and the District of Columbia, 2024—Con.

Rank	Cause and race and Hispanic origin of mother	Fetal deaths	Percent
	Hispanic¶		
…	All causes	3,863	100.0
1	Fetal death of unspecified cause (P95)	1,121	29.0
2	Fetus affected by complications of placenta, cord and membranes (P02)	918	23.8
3	Fetus affected by maternal complications of pregnancy (P01)	619	16.0
4	Congenital malformations, deformations and chromosomal abnormalities (Q00–Q99)	447	11.6
5	Fetus affected by maternal conditions that may be unrelated to present pregnancy (P00)	310	8.0
…	All other causes	448	11.6

* Includes fetal deaths to race and Hispanic-origin groups not shown separately.
… Category not applicable.
† Race and Hispanic origin are reported separately on the report of fetal death; people of Hispanic origin may be of any race. In this table, non-Hispanic women are classified by race. Race categories are consistent with the 1997 Office of Management and Budget standards; see Technical Notes in this report. Single race is defined as only one race reported on the report of fetal death.
§ Estimate does not meet National Center for Health Statistics standards of reliability.
¶ Includes all people of Hispanic origin of any race; see Technical Notes.

NOTE: Excludes data for jurisdictions (Arizona, Georgia, Michigan, Mississippi, Nevada, North Dakota, Oregon, and New York City) for which the cause of death was unspecified ((P95)) for 50% or more of records.

SOURCE: National Center for Health Statistics, National Vital Statistics System.

Technical Notes

Definition of fetal death

Fetal death means "death prior to the complete expulsion or extraction from its mother of a product of human conception, irrespective of the duration of pregnancy and which is not an induced termination of pregnancy." 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.

This definition (14) has been adopted by the Centers for Disease Control and Prevention, National Center for Health Statistics (NCHS) as the nationally recommended standard and is based on the definition published by the World Health Organization in 1950 and revised in 1988. The term fetal death is defined on an all-inclusive basis to end confusion arising from the use of such terms as stillbirth, spontaneous abortion, and miscarriage. All U.S. states and registration areas have definitions similar to the standard definition, except for Puerto Rico and Wisconsin, which have no formal definition (15). Fetal deaths do not include induced terminations of pregnancy.

Reporting requirements for fetal death data

Variation exists among states in reporting requirements (2) and possibly in completeness of reporting for fetal death data, and this can have important implications for comparisons of fetal mortality rates by state. All jurisdictions require reporting of fetal deaths of at least 20 weeks of gestation or more, or a minimum birthweight of 350 grams (roughly equal to 20 weeks), or some combination of the two. However, six states, New York City, American Samoa, and the U.S. Virgin Islands require reporting of fetal deaths at all periods of gestation, two states require reporting beginning at 12 weeks of gestation, and one state requires reporting beginning at 16 weeks of gestation. Areas that report fetal deaths at all periods of gestation appear to have a higher percentage of fetal deaths occurring at 20–27 weeks of gestation than those that begin reporting at later gestational ages. Table B presents fetal mortality rates for fetal deaths at 24 weeks of gestation or more for a combined 3-year period to better account for state differences in reporting requirements and to improve the reliability of rates based on smaller numbers. Aside from this exception, this report presents data on fetal deaths with a stated or presumed period of gestation of 20 weeks or more.

Percentage of unknown responses

In the tables in this report, unknown responses are shown in frequencies tables but are excluded from the computation of percent distributions and fetal mortality rates. As a result, rates published in this report by variables with a substantial percentage of unknown responses (such as birthweight) may understate the true rates of fetal mortality for that characteristic.

2003 revision of U.S. Standard Report of Fetal Death

Data for 2018–2024 presented in this report are based on the 2003 revision of the U.S. Standard Report of Fetal Death; data for earlier years are based on both the 1989 and the 2003 fetal death report revisions. The 2003 revision is described in detail elsewhere (16).

Computation of rates

Fetal mortality rates in this report are computed as the number of fetal deaths at 20 weeks of gestation or more per 1,000 live births and fetal deaths at 20 weeks or more. The denominators for all fetal mortality rates are live births plus fetal deaths in the specified gestational age group, to represent the population at risk of the event.

$$\textit{Fetal mortality rate} = \frac{\textit{Fetal deaths at 20 weeks of gestation or more}}{\textit{Live births and fetal deaths at 20 weeks or more}} \bullet 1{,}000$$

In each case, the fetal deaths included in the denominator of each rate mirror the fetal deaths included in the numerator. A previous NCHS report (17) contains information on the historical development of various perinatal measures.

Presentation of counts, rates, and percentages

Counts, rates, or percentages that do not meet NCHS standards of reliability are noted in the tables (18,19). Three separate criteria are used to determine if a count (number of events), rate, or proportion meets these standards (2).

Presentation of counts and rates

New criteria for showing counts and rates were adopted by NCHS beginning with 2023 data (18). For counts, the number of deaths or births is shown depending on the count of deaths or births and on the relative width of the confidence interval of the count, based on a gamma distribution. Before the 2023 data year, the number of deaths or births was shown regardless of the count. For rates, whether a rate is shown depends on the count for the numerator and on the relative width of the confidence interval of the rate based on a Student's *t* interval for the logarithm of the rate. Rates published for data years before 2023 were represented by an asterisk when the numerator was fewer than 20 deaths. For detailed information on the new criteria, see "National Center for Health Statistics Data Presentation Standards for Rates and Counts" (18).

Presentation of percentages

For proportions (or percentages), new criteria were adopted by NCHS beginning with 2017 data but were only implemented for fetal deaths starting with 2023 data. For 2023 and later, a proportion (percentage) is shown based on the denominator size and on the absolute or relative widths of the confidence interval of the proportion or percentage calculated using the Clopper–Pearson method. Additionally, proportions or percentages based on fewer than 10 deaths in the numerator are no longer shown. For earlier years, percentages were represented by an asterisk when the numerator was fewer than 20 deaths. For detailed information on these criteria, see "National Center for Health Statistics Data Presentation Standards for Proportions" (19).

Hispanic origin and race

Hispanic origin

Hispanic origin and race are reported separately on the report of fetal death. Data are presented in some tables for specific Hispanic subgroups: Central and South American, Cuban, Dominican, Mexican, other and unknown Hispanic, and Puerto Rican. Data are presented separately for Dominican women beginning in 2018. Data for this subgroup had previously been included in the category other and unknown Hispanic. In tabulations of fetal death data by race and Hispanic origin, data for people of Hispanic origin are not further classified by race because most fetal deaths to Hispanic women are reported as White.

Beginning in 2022, fetal death records for which the mother's detailed Hispanic origin is reported as "Latin American" are recoded to "other and unknown Hispanic origin" for the mother's Hispanic origin recode shown in this report (2). In previous years, a record with a reported detailed Hispanic origin of Latin American was recoded to "Central and South American" (2). This change resulted in a substantial shift in the number of women reported in these two categories (20). Accordingly, fetal mortality rates calculated for these two groups are considered not comparable beginning with 2022.

Race

This report presents data on race and Hispanic origin based on the 1997 Office of Management and Budget standards (10). The 2003 revision of the U.S. Standard Report of Fetal Death requires the reporting of a minimum of five race categories and allows for the reporting of race either alone (single race) or in combination (more than one race or multiple races) for the mother (9), according to the Office of Management and Budget's 1997 revised standards (10). The five categories for race specified in the revised standards are: American Indian and Alaska Native, Asian, Black or African American, Native Hawaiian or Other Pacific Islander, and White.

Beginning in 2018, all states and the District of Columbia, in addition to Guam, Northern Marianas, Puerto Rico, and the U.S. Virgin Islands, were reporting race on fetal death reports according to the 1997 revised Office of Management and Budget's standards. American Samoa started reporting race data based on the revised standards in 2024. In 2024, 2.2% of women in the United States reported more than one race. Before 2018, the number of states that reported multiple-race information varied widely, increasing from 1 state in 2003 to all 50 states, the District of Columbia, Guam, Northern Marianas, Puerto Rico, and the U.S. Virgin Islands in 2018.

Period of gestation

Beginning with the 2014 data year, NCHS began using the obstetric estimate of gestation at delivery as the primary measure for estimating gestational age (21). Obstetric estimate of gestation at delivery data are edited for gestational ages that are clearly inconsistent with birthweight. If the obstetric estimate of gestation at delivery is not reported, or is inconsistent with birthweight, the last menstrual period-based gestational age is used (0.5% of fetal death records and 0.1% of live birth records in 2024). These procedures are described in more detail elsewhere (22).

See the "User Guide to the 2017 Fetal Death Data File" for a more detailed description of the transition and Table 1 of the "User Guide to the 2018 Fetal Death Data File" for trends in total, early, and late fetal mortality based on both the obstetric estimate of gestation at delivery and last menstrual period measures (23,24).

Gestational age not stated

Fetal deaths with not-stated gestational age are presumed to be 20 weeks of gestation or more if the state requires reporting of all fetal deaths at 20 weeks or more, or if the fetus weighed 350 grams or more in those states requiring reporting of all fetal deaths regardless of gestational age. In Tables 1 and 4, fetal deaths with not-stated gestational age are allocated to the 20–27 weeks and 28 weeks or more categories according to the proportion of fetal deaths with stated gestational age that fall into each category (proportional distribution). Similarly, for Table B, fetal deaths with not-stated gestational age are proportionally distributed into the 20–23 weeks and 24 weeks or more categories. Proportional distribution is not performed for data in tables that show more detailed gestational age categories (Table 6). The allocation of not-stated gestational age for fetal deaths is made individually for each maternal age, race and Hispanic-origin group, and state in the computation of fetal mortality rates.

Cause of death

Starting in 2024, all 50 states, D.C., American Samoa, Guam, Northern Marianas, Puerto Rico, and the U.S. Virgin Islands reported cause-of-death data based on the 2003 U.S. Standard Report of Fetal Death. However, in this report, cause-of-death data are only shown for the 43 states and the District of Columbia that met the reporting requirement of having less than 50% of records assigned to unspecified cause (P95) (cause-of-death data did not meet this requirement for Arizona,

Georgia, Michigan, Mississippi, Nevada, North Dakota, Oregon, and New York City).

Random variation in fetal mortality

See the "User Guide to the 2024 Fetal Death Public Use File" (2) for more detailed information and formulas.

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Contents

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