



U.S. Department
of Transportation

**National Highway
Traffic Safety
Administration**

400 Seventh Street, S.W.
Washington, D.C. 20590

Dear Crash Data Researchers/Users:

Thank you for choosing crash data from the National Highway Traffic Safety Administration (NHTSA) for your research or other use. The information contained in this motor vehicle crash report is collected, maintained and distributed in accordance with Public Law 89-564. In accordance with this Public Law, NHTSA is required not to release any case information until completion of quality control procedures. These procedures include a review of the case material to extract all names, licenses and registration numbers, non-coded interview material, non-research related researcher comments in the margins, non-factual data, and the production number portion of the vehicle identification number (VIN).

If you requested NHTSA to query its database files in order to identify a specific crash, then that query was made using non-personal descriptors you provided for use in our search. This motor vehicle crash may have been identified from a data search and matches the general, non-personal descriptors you provided, but we cannot confirm that this is the specific crash report you requested.

If you have any questions with regard to the above procedures, please contact the Field Operations Branch, Crash Investigation Division, National Center for Statistics and Analysis at 202-366-4820. Again, please be advised that we cannot confirm that this is the case that you have specifically requested nor can we certify the information to be correct.

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AUTO SAFETY HOTLINE
(800) 424-9393
Wash. D.C. Area 366-0123



CASE SUMMARY

PSU 73 CASE NO. 143C TYPE OF ACCIDENT Car - Rollover

A. DESCRIPTION OF THE ACCIDENT SEQUENCE AND ACCIDENT PECULIARITIES

(Provide a summary of the accident sequence as well as any particular event of the accident that is noteworthy. Injury mechanism and vehicle crashworthiness is the focus, not driver culpability. Do not include any personal identifiers. Use reverse side if needed.)

V1 was headed west in the left lane of an interstate highway and lost control of vehicle. V1 rolled over side to side approximately 2 1/4 turns before coming to rest on the passenger side on the inner berm. Two of the occupants seated in the back seat were completely ejected from the vehicle through the back window. All four occupants in V1 were transported to an area hospital for treatment to injuries sustained in the accident. The vehicle was towed from the scene due to damage.

B. VEHICLE PROFILE(S)

Vehicle No.	Class of Vehicle	Year/Make/Model	Most Severe Damage		Component Failure
			Damage Plane	Severity Description	
01	Subcompact	87/Chevrolet/Nova	Top	Severe	Windshield

C. PERSON PROFILE(S)

Vehicle No.	Person Role	Seat Position	Restraint Use	Most Severe Injury			
				Body Region	Lesion	AIS	Injury Source
01	Driver	Front left	Harness	Wrist	Sprain	1	Steering wheel
01	Passenger	Front right	Harness	Head	Laceration	1	Roof
01	Passenger	Back left	None	Lung	Contusion	3	Ground
01	Passenger	Back right	None	Brain	Contusion	4	Ground

DO NOT SANITIZE THIS FORM



U.S. Department of Transportation
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Administration

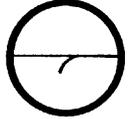
NATIONAL ACCIDENT SAMPLING SYSTEM
CRASHWORTHINESS DATA SYSTEM

ACCIDENT COLLISION DIAGRAM

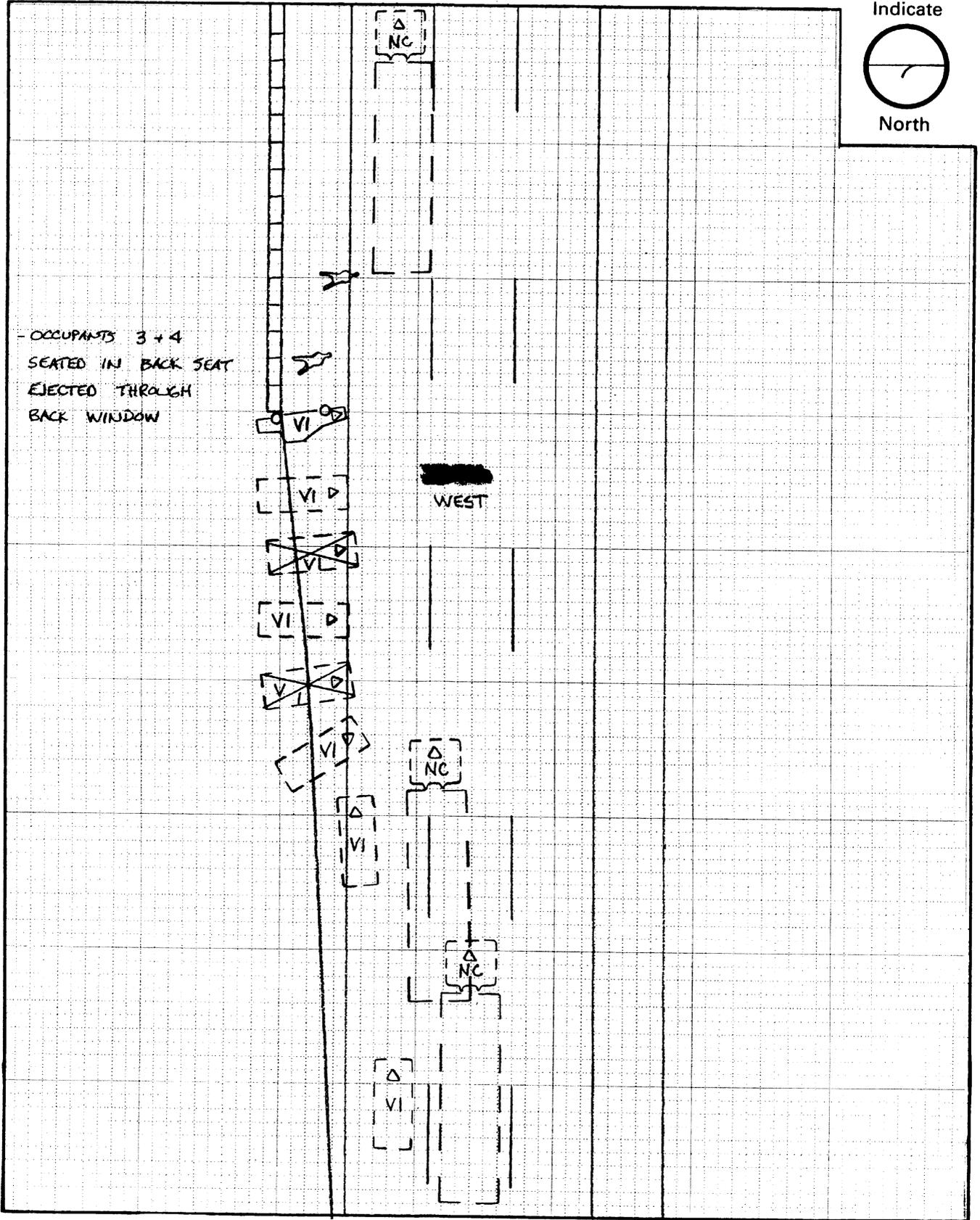
PSU No. 73

Case Number - Stratum 143C

Indicate



North



VEHICLE DAMAGE SKETCH

TIRE – WHEEL DAMAGE
 a. Rotation physically restricted
 RF 2
 LF 2
 RR 2
 LR 2
 (1) Yes (2) No (8) NA (9) Unk.

b. Tire deflated
 RF 2
 LF 1
 RR 2
 LR 2

ORIGINAL SPECIFICATIONS

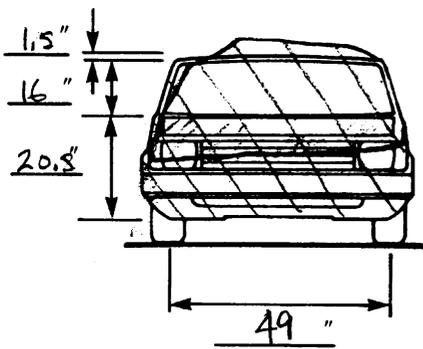
Wheelbase 95.1
 Overall Length 166.3
 Maximum Width 64.4
 Curb Weight 2,227
 Average Track ^{56.1} _{55.3} 55.7
 Front Overhang 33.3
 Rear Overhang 37.4
 Engine Size: cyl./ displ. 1.6L-4A-2BBL
 Undeformed End Width _____

WHEEL STEER ANGLES
 (For locked front wheels or displaced rear axles only)
 RF ± 0°
 LF ± 1.5°
 RR ± 0°
 LR ± 0°
 Within ±5 degrees

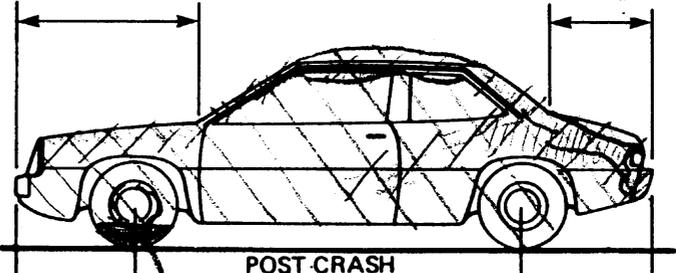
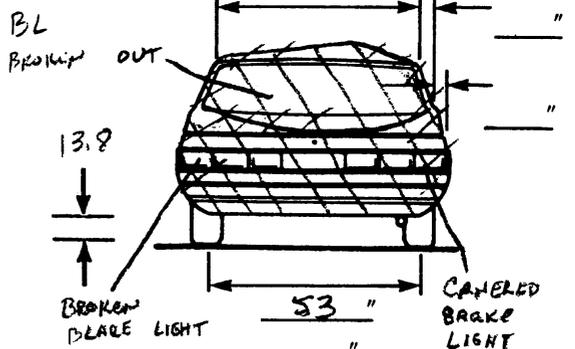
DRIVE WHEELS
 FWD RWD 4WD

Approximate Cargo Weight < 50 LBS.

TYPE OF TRANSMISSION
 Manual Automatic

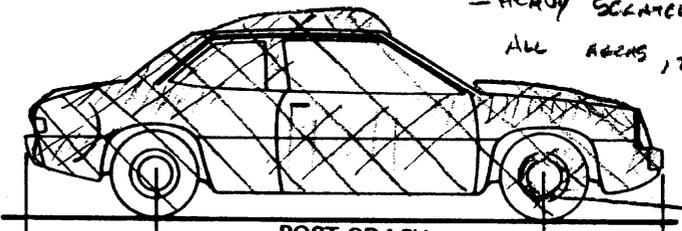
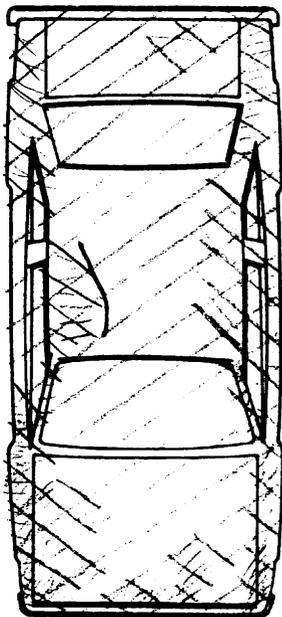


*ALL GLASS BROKEN OUT
 15.0
 Original Bumper height



POST-CRASH
 Bumper corner 31.5 " Stringline _____ " Bumper corner 36 " Stringline _____ "

- TIRE FLAT, RIM BEAT



POST-CRASH
 Bumper corner 36 " Stringline _____ " Bumper corner 29 " Stringline _____ "

REAR DAMAGE SCUFFING

NOTES: Sketch new perimeter and cross hatch direct damage and single hatch induced damage on all views. Annotate observations which might be useful in reconstructing the accident (e.g., grass in tire bead, direction of striations, scuff on sidewall, etc.). If pulling trailer, sketch type of trailer and damage received on the back of this page. Annotate any damage caused by extrication such as component removal by torching, prying, or hydraulic shears.



1. Primary Sampling Unit Number 73
 2. Case Number—Stratum 143C
 3. Vehicle Number 01

INTEGRITY

4. Passenger Compartment Integrity 98

(00) No integrity loss
 Yes, Integrity Was Lost Through
 (01) Windshield
 (02) Door (side)
 (03) Door/hatch (rear)
 (04) Roof
 (05) Roof glass
 (06) Side window
 (07) Rear window
 (08) Roof and roof glass
 (09) Windshield and door (side)
 (10) Windshield and roof
 (11) Side and rear window
 (12) Windshield and side window
 (13) Door and side window
 (98) Other combination of above (specify):
BL, SIDE WINDOWS + WINDSHIELD
 (99) Unknown

Door, Tailgate Or Hatch Opening

5. LF 1 6. RF 1 7. LR 1 8. RR 1 9. TG/H 0

(0) No door/gate/hatch
 (1) Door/gate/hatch remained closed and operational
 (2) Door/gate/hatch came open during collision
 (3) Door/gate/hatch jammed shut
 (8) Other (specify):

 (9) Unknown

Damage/Failure Associated with Door, Tailgate or Hatch Opening in Collision. If IV05-IV09 ≠ 2, Then Code 0.

10. LF 0 11. RF 0 12. LR 0 13. RR 0 14. TG/H 0

(0) No door/gate/hatch or door not opened

Door, Tailgate, or Hatch Came Open During Collision
 (1) Door operational (no damage)
 (2) Latch/striker failure due to damage
 (3) Hinge failure due to damage
 (4) Door structure failure due to damage
 (5) Door support (i.e., pillar, sill, roof side rail, etc.) failure due to damage
 (6) Latch/striker and hinge failure due to damage
 (8) Other failure (specify):

 (9) Unknown

GLAZING

Glazing Damage from Impact Forces

15. WS 4 16. LF 6 17. RF 6 18. LR 6 19. RR 6
 20. BL 6 21. Roof 8 22. Other 6 - REAR WINGS

(0) No glazing damage from impact forces
 (2) Glazing in place and cracked from impact forces
 (3) Glazing in place and holed from impact forces
 (4) Glazing out-of-place (cracked or not) and not holed from impact forces
 (5) Glazing out-of-place and holed from impact forces
 (6) Glazing disintegrated from impact forces
 (7) Glazing removed prior to accident
 (8) No glazing
 (9) Unknown if damaged

Glazing Damage from Occupant Contact

23. WS 9 24. LF 9 25. RF 9 26. LR 9 27. RR 9
 28. BL 9 29. Roof 0 30. Other 0

(0) No occupant contact to glazing or no glazing
 (1) Glazing contacted by occupant but no glazing damage
 (2) Glazing in place and cracked by occupant contact
 (3) Glazing in place and holed by occupant contact
 (4) Glazing out-of-place (cracked or not) by occupant contact and not holed by occupant contact
 (5) Glazing out-of-place by occupant contact and holed by occupant contact
 (6) Glazing disintegrated by occupant contact
 (9) Unknown if contacted by occupant

If No Glazing Damage **And** No Occupant Contact or No Glazing, Then Code IV 31 Through IV 46 As 0

Type of Window/Windshield Glazing

31. WS 1 32. LF 2 33. RF 2 34. LR 2 35. RR 2
 36. BL 2 37. Roof 0 38. Other 2

(0) No glazing contact and no damage, or no glazing
 (1) AS-1 – Laminated
 (2) AS-2 – Tempered
 (3) AS-3 – Tempered-tinted
 (4) AS-14 – Glass/Plastic
 (8) Other (specify):

 (9) Unknown

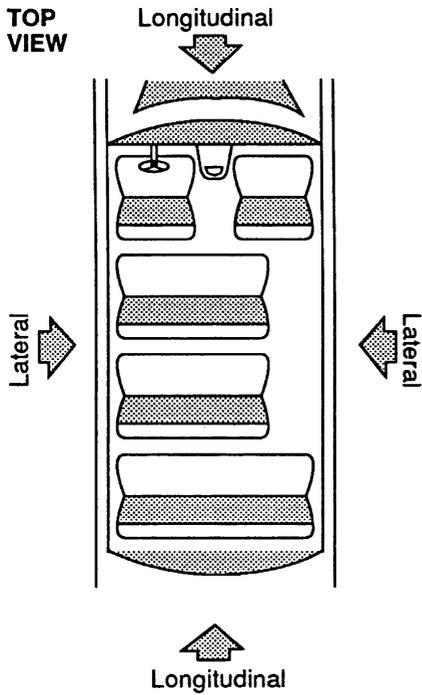
Window Precrash Glazing Status

39. WS 1 40. LF 2 41. RF 2 42. LR 2 43. RR 2
 44. BL 1 45. Roof 0 46. Other 1

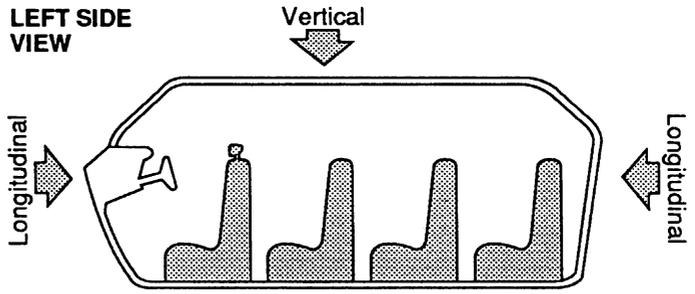
(0) No glazing contact and no damage, or no glazing
 (1) Fixed
 (2) Closed
 (3) Partially opened
 (4) Fully opened
 (9) Unknown

INTRUSION WORK SHEET

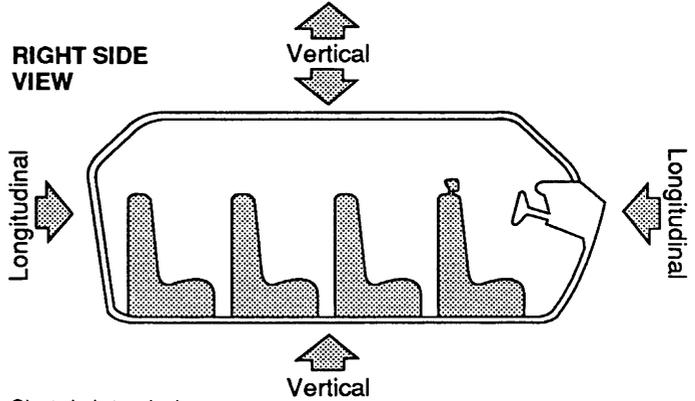
TOP VIEW



LEFT SIDE VIEW



RIGHT SIDE VIEW



Note: Sketch intruded areas

LOCATION OF INTRUSION	INTRUDED COMPONENT	COMPARISON VALUE	-	INTRUDED VALUE	=	INTRUSION	DOMINANT CRUSH DIRECTION
13	ROOF (SIDE)		-		=	~4"	VERT.
13	A-PILLAR	6	-	8.3	=	2.3"	LAT.
11	ROOF (SIDE)		-		=	~1"	VERT.
23	B-PILLAR		-		=	~2"	LAT.
21	B-PILLAR		-		=	~1"	LAT.
23	C-PILLAR		-		=	.5"	LAT.
21	C-PILLAR		-		=	.8"	LAT.
11	A-PILLAR	6	-	6	=	0"	LAT.
11	ROOF (SIDE)		-		=	~1"	LAT.
21	" "		-		=	~1"	LAT.
23	" "		-		=	~1.5"	LAT.
			-		=		
			-		=		
			-		=		
			-		=		

MENSURE ROOF

TOP

TOP

Document no more than the 15 most severe intrusions

OCCUPANT AREA INTRUSION

Note: If no intrusions, leave variables IV 47-IV 86 blank.

	Location of Intrusion	Intruding Component	Magnitude of Intrusion	Dominant Crush Direction
1st	47. <u>1 3</u>	48. <u>1 2</u>	49. <u>2</u>	50. <u>1</u>
2nd	51. <u>1 3</u>	52. <u>4 6</u>	53. <u>1</u>	54. <u>3</u>
3rd	55. <u>2 3</u>	56. <u>4 7</u>	57. <u>1</u>	58. <u>3</u>
4th	59. <u>2 3</u>	60. <u>1 3</u>	61. <u>1</u>	62. <u>3</u>
5th	63. <u>1 1</u>	64. <u>1 3</u>	65. <u>1</u>	66. <u>1</u>
6th	67. <u>2 1</u>	68. <u>4 7</u>	69. <u>1</u>	70. <u>3</u>
7th	71. <u>2 1</u>	72. <u>1 3</u>	73. <u>1</u>	74. <u>3</u>
8th	75. _____	76. _____	77. _____	78. _____
9th	79. _____	80. _____	81. _____	82. _____
10th	83. _____	84. _____	85. _____	86. _____

LOCATION OF INTRUSION

- | | |
|---|---|
| <p>Front Seat</p> <ul style="list-style-type: none"> (11) Left (12) Middle (13) Right <p>Second Seat</p> <ul style="list-style-type: none"> (21) Left (22) Middle (23) Right <p>Third Seat</p> <ul style="list-style-type: none"> (31) Left (32) Middle (33) Right | <p>Fourth Seat</p> <ul style="list-style-type: none"> (41) Left (42) Middle (43) Right <p>(97) Catastrophic</p> <p>(98) Other enclosed area (specify): _____</p> <p>(99) Unknown</p> |
|---|---|

INTRUDING COMPONENT

Interior Components

- (01) Steering assembly
- (02) Instrument panel left
- (03) Instrument panel center
- (04) Instrument panel right
- (05) Toe pan
- (06) A-pillar
- (07) B-pillar
- (08) C-pillar
- (09) D-pillar
- (10) Door panel
- (12) Roof (or convertible top)
- (13) Roof side rail
- (14) Windshield
- (15) Windshield header
- (16) Window frame
- (17) Floor pan
- (18) Backlight header
- (19) Front seat back
- (20) Second seat back
- (21) Third seat back
- (22) Fourth seat back
- (23) Fifth seat back
- (24) Seat cushion
- (25) Back panel or door surface
- (26) Other interior component (specify): _____

- (27) Side panel - forward of the A-pillar
- (28) Side panel - rear of the A-pillar

Exterior Components

- (30) Hood
- (31) Outside surface of vehicle (specify): _____
- (32) Other exterior object in the environment (specify): _____
- (33) Unknown exterior object
- (97) Catastrophic
- (98) Intrusion of unlisted component(s) (specify): _____
- (99) Unknown

MAGNITUDE OF INTRUSION

- (1) ≥ 1 inch but < 3 inches
- (2) ≥ 3 inches but < 6 inches
- (3) ≥ 6 inches but < 12 inches
- (4) ≥ 12 inches but < 18 inches
- (5) ≥ 18 inches but < 24 inches
- (6) ≥ 24 inches
- (7) Catastrophic
- (9) Unknown

DOMINANT CRUSH DIRECTION

- (1) Vertical
- (2) Longitudinal
- (3) Lateral
- (7) Catastrophic
- (9) Unknown

STEERING COLUMN WORKING DIAGRAMS

STEERING COLUMN COLLAPSE

N/A

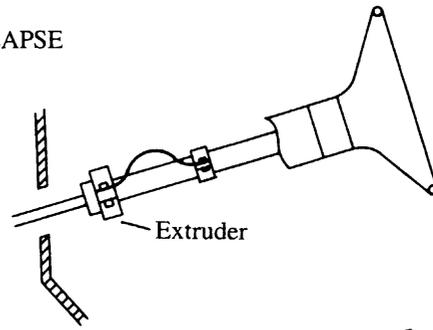
Steering Column Shear Module Movement



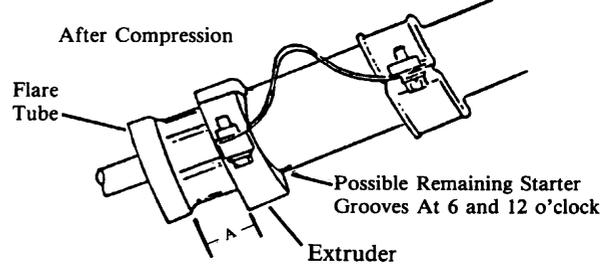
Left _____

Right _____ V = _____"

Direction and Magnitude of Steering Column Movement



After Compression



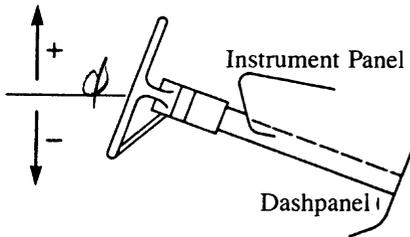
Compression = Measurement A

A = _____

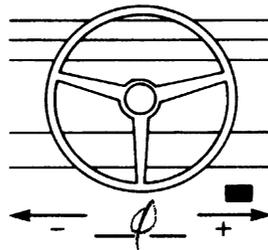
STEERING COLUMN MOVEMENT

N/A

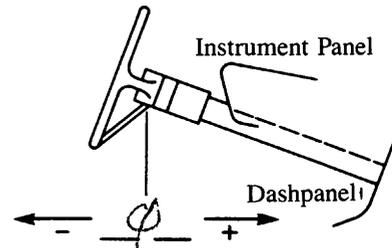
Vertical Movement



Lateral Movement



Longitudinal Movement



	COMPARISON VALUE	-	DAMAGED VALUE	=	MOVEMENT
VERTICAL		-		=	
LATERAL		-		=	
LONGITUDINAL		-		=	

STEERING RIM/SPOKE DEFORMATION

COMPARISON VALUE	-	DAMAGED VALUE	=	DEFORMATION
	-		=	
	-		=	

STEERING COLUMN

87. Steering Column Type 1

- (1) Fixed column
- (2) Tilt column
- (3) Telescoping column
- (4) Tilt and telescoping column
- (8) Other column type (specify):

(9) Unknown

If PDOF ≠ 11, 12 or 1, Then Code IV88-IV91 As 96

88. Steering Column Collapse Due to Occupant Loading 96

Code actual measured movement to the nearest inch. See coding manual for measurement technique(s).

- (00) No movement, compression, or collapse
- (01-19) Actual measured value
- (20) 20 inches or greater

Estimated movement from observation

- (81) Less than 1 inch
- (82) ≥ 1 inch but < 2 inches
- (83) ≥ 2 inches but < 4 inches
- (84) ≥ 4 inches but < 6 inches
- (85) ≥ 6 inches but < 8 inches
- (86) Greater than or equal to 8 inches
- (96) Not assessed (PDOF ≠ 11, 12, 1)
- (97) Apparent movement, value undetermined or cannot be measured or estimated
- (98) Nonspecified type column
- (99) Unknown

Direction And Magnitude of Steering Column Movement

89. Vertical Movement + 96

90. Lateral Movement + 96

91. Longitudinal Movement + 96

Code the actual measured movement to the nearest inch. See Coding Manual for measurement technique(s)

- (00) No steering column movement
- (± 01 – ± 49) Actual measured value
- (± 50) 50 inches or greater

Estimated movement from observation

- (± 81) ≥ 1 inch but < 3 inches
- (± 82) ≥ 3 inches but < 6 inches
- (± 83) ≥ 6 inches but < 12 inches
- (± 84) ≥ 12 inches
- (__96) Not assessed (PDOF ≠ 11, 12, 1)
- (__97) Apparent movement > 1 inch but cannot be measured or estimated
- (__99) Unknown

92. Steering Rim/Spoke Deformation Ø

Code actual measured deformation to the nearest inch.

- (0) No steering rim deformation
- (1-5) Actual measured value
- (6) 6 inches or more
- (8) Observed deformation cannot be measured
- (9) Unknown

93. Location of Steering Rim/Spoke Deformation ØØ

(00) No steering rim deformation

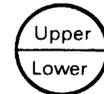
Quarter Sections

- (01) Section A
- (02) Section B
- (03) Section C
- (04) Section D



Half Sections

- (05) Upper half of rim/spoke
- (06) Lower half of rim/spoke
- (07) Left half of rim/spoke
- (08) Right half of rim/spoke



- (09) Complete steering wheel collapse
- (10) Undetermined location
- (99) Unknown

INSTRUMENT PANEL

94. Odometer Reading Ø 6 Ø,000

60,434 miles – Code mileage to the nearest 1,000 miles

- (000) No odometer
- (001) Less than 1,500 miles
- (300) 299,500 miles or more
- (999) Unknown

Source: _____

95. Instrument Panel Damage from Occupant Contact? Ø

- (0) No
- (1) Yes
- (9) Unknown

96. Knee Bolsters Deformed from Occupant Contact? 8

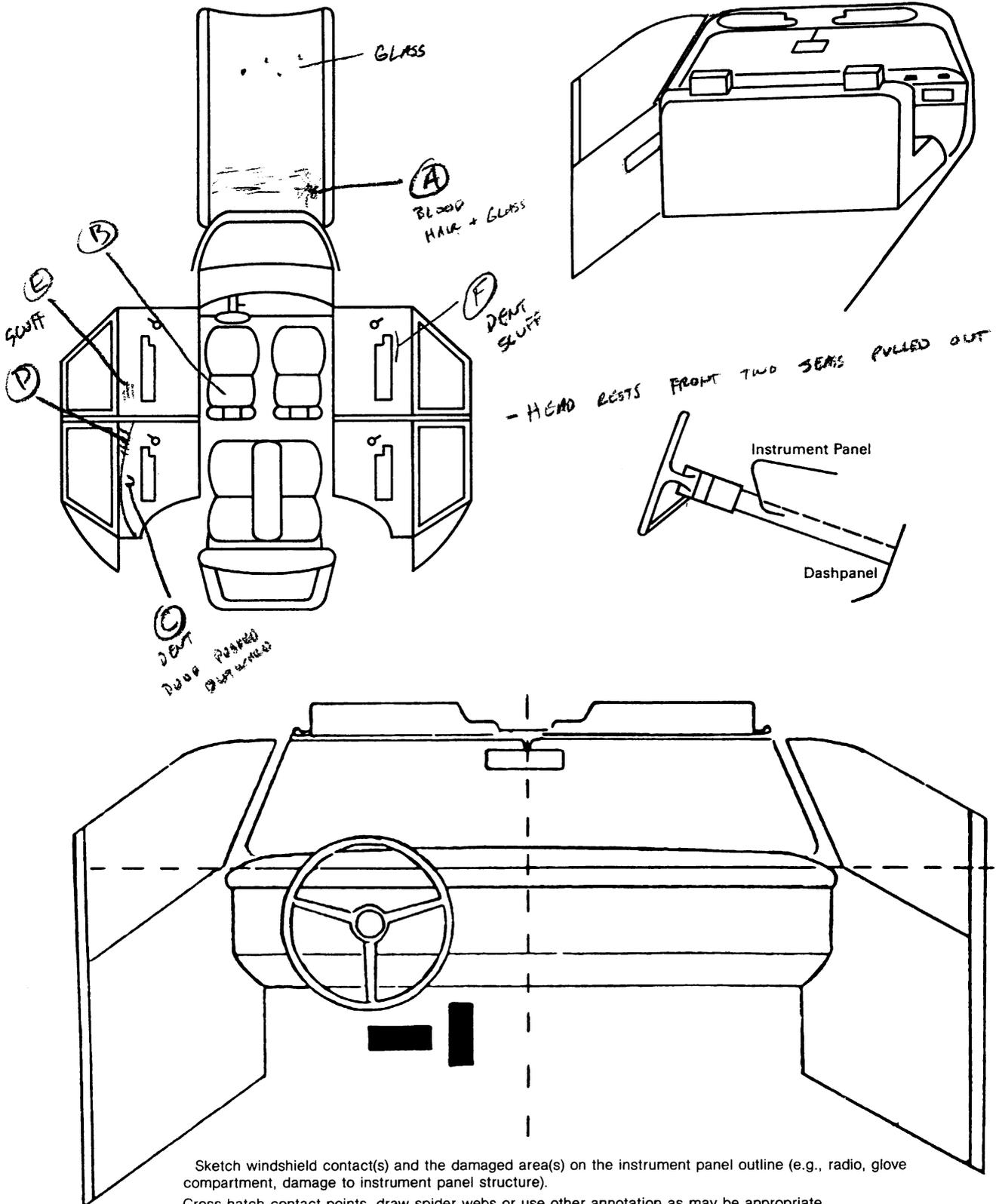
- (0) No
- (1) Yes
- (8) Not present
- (9) Unknown

97. Did Glove Compartment Door Open During Collision(s)? Ø

- (0) No
- (1) Yes
- (8) Not present
- (9) Unknown

VEHICLE INTERIOR SKETCHES

Note area of ejection/entrapment



Sketch windshield contact(s) and the damaged area(s) on the instrument panel outline (e.g., radio, glove compartment, damage to instrument panel structure).

Cross hatch contact points, draw spider webs or use other annotation as may be appropriate.

Annotate the contacted area with a letter (begin with A) and list on the Points of Occupant Contact page.

POINTS OF OCCUPANT CONTACT

Contact	Interior Component Contacted	Occupant No. If Known	Body Region If Known	Supporting Physical Evidence	Confidence Level of Contact Point
A	S4	02	HEAD	BLOOD	2
B	40	01	BACK	SEAT BACK FORCED BACK	2
C	20	03	① SIDE	DENT	2
D	20	03	① SIDE	SCUFF	2
E	20	01	② SIDE	SCUFF	2
F	30	02	② SIDE	DENT, SCUFF	2
G					
H					
I					
J					
K					
L					
M					
N					

CODES FOR INTERIOR COMPONENTS

FRONT

- (01) Windshield
- (02) Mirror
- (03) Sunvisor
- (04) Steering wheel rim
- (05) Steering wheel hub/spoke
- (06) Steering wheel (combination of codes 04 and 05)
- (07) Steering column, transmission selector lever, other attachment
- (08) Add on equipment (e.g., CB, tape deck, air conditioner)
- (09) Left instrument panel and below
- (10) Center instrument panel and below
- (11) Right instrument panel and below
- (12) Glove compartment door
- (13) Knee bolster
- (14) Windshield including one or more of the following: front header, A-pillar, instrument panel, mirror, or steering assembly (driver side only)
- (15) Windshield including one or more of the following: front header, A-pillar, instrument panel, or mirror (passenger side only)
- (16) Other front object (specify): _____

LEFT SIDE

- (20) Left side interior surface, excluding hardware or armrests
- (21) Left side hardware or armrest
- (22) Left A pillar
- (23) Left B pillar
- (24) Other left pillar (specify): _____
- (25) Left side window glass or frame

- (26) Left side window glass including one or more of the following: frame, window sill, A-pillar, B-pillar, or roof side rail
- (27) Other left side object (specify): _____

RIGHT SIDE

- (30) Right side interior surface, excluding hardware or armrests
- (31) Right side hardware or armrest
- (32) Right A pillar
- (33) Right B pillar
- (34) Other right pillar (specify): _____
- (35) Right side window glass or frame
- (36) Right side window glass including one or more of the following: frame, window sill, A-pillar, B-pillar, or roof side rail
- (37) Other right side object (specify): _____

INTERIOR

- (40) Seat, back support
- (41) Belt restraint webbing/buckle
- (42) Belt restraint B-pillar attachment point
- (43) Other restraint system component (specify): _____
- (44) Head restraint system
- (45) Air bag
- (46) Other occupants (specify): _____
- (47) Interior loose objects

- (48) Child safety seat (specify): _____

- (49) Other interior object (specify): _____

ROOF

- (50) Front header
- (51) Rear header
- (52) Roof left side rail
- (53) Roof right side rail
- (54) Roof or convertible top

FLOOR

- (56) Floor including toe pan
- (57) Floor or console mounted transmission lever, including console
- (58) Parking brake handle
- (59) Foot controls including parking brake

REAR

- (60) Backlight (rear window)
- (61) Backlight storage rack, door, etc.
- (62) Other rear object (specify): _____

CONFIDENCE LEVEL OF CONTACT POINT

- (1) Certain
- (2) Probable
- (3) Possible
- (4) Unknown

AUTOMATIC RESTRAINTS

NOTES: Encode the data for each applicable front seat position. The attributes for the variables may be found below. Restraint systems should be assessed during the vehicle inspection then coded on the Occupant Assessment Form.

		Left	Center	Right
F I R S T	Availability	0	0	0
	Function	0	0	0
	Failure	0	0	0

Automatic (Passive) Restraint System Availability

- (0) Not equipped/not available
- (1) Airbag
- (2) Airbag disconnected (specify): _____
- (3) Airbag not reinstalled
- (4) 2 point automatic belts
- (5) 3 point automatic belts
- (6) Automatic belts destroyed or rendered inoperative
- (9) Unknown

Automatic (Passive) Restraint Function

- (0) Not equipped/not available

Automatic Belt

- (1) Automatic belt in use
- (2) Automatic belt not in use
- (3) Automatic belt use unknown

Air Bag

- (4) Airbag deployed during accident
- (5) Airbag deployed inadvertently just prior to accident
- (6) Deployed, accident sequence undetermined
- (7) Nondeployed
- (8) Unknown if deployed
- (9) Unknown

Did Automatic (Passive) Restraint Fail

- (0) Not equipped/not available
- (1) No
- (2) Yes (specify): _____
- (9) Unknown

MANUAL RESTRAINTS

NOTES: Encode the applicable data for each seat position in the vehicle. The attributes for the variables may be found below. Restraint systems should be assessed during the vehicle inspection then coded on the Occupant Assessment Form.

If a child safety seat is present, encode the data on the back of this page.

If the vehicle has automatic restraints available, encode the appropriate data on the back of the previous page.

		Left	Center	Right
FIRST	Availability	4	∅	4
	Use	∅4	∅∅	∅4
	Failure Modes	1	∅	1
SECOND	Availability	3	3	3
	Use	∅∅	∅∅	∅∅
	Failure Modes	∅	∅	∅
THIRD	Availability			
	Use			
	Failure Modes			
OTHER	Availability			
	Use			
	Failure Modes			

Manual (Active) Belt System Availability

- (0) Not available
- (1) Belt removed/destroyed
- (2) Shoulder belt
- (3) Lap belt
- (4) Lap and shoulder belt
- (5) Belt available – type unknown
- (8) Other belt (specify):

(9) Unknown

(08) Other belt used (specify):

- (12) Shoulder belt used with child safety seat
- (13) Lap belt used with child safety seat
- (14) Lap and shoulder belt used with child safety seat
- (15) Belt used with child safety seat – type unknown
- (18) Other belt used with child safety seat (specify):

(99) Unknown if belt used

Manual (Active) Belt System Use

- (00) None used, not available, or belt removed/destroyed
- (01) Inoperative (specify):

- (02) Shoulder belt
- (03) Lap belt
- (04) Lap and shoulder belt
- (05) Belt used – type unknown

Manual (Active) Belt Failure Modes During Accident

- (0) No manual belt used or not available
- (1) No manual belt failure(s)
- (2) Torn webbing (stretched webbing not included)
- (3) Broken buckle or latchplate
- (4) Upper anchorage separated
- (5) Other anchorage separated (specify):

- (6) Broken retractor
- (7) Combination of above (specify):

(8) Other manual belt failure (specify):

(9) Unknown

CHILD SAFETY SEAT FIELD ASSESSMENT

When a child safety seat is present enter the occupant's number in the first row and complete the column below the occupant's number using the codes listed below. Complete a column for each child safety seat present.

Occupant Number						
1. Type of Child Safety Seat						
2. Child Safety Seat Orientation						
3. Child Safety Seat Harness Usage						
4. Child Safety Seat Shield Usage						
5. Child Safety Seat Tether Usage						
6. Child Safety Seat Make/Model	Specify Below for Each Child Safety Seat					

<p>1. Type of Child Safety Seat</p> <p>(0) No child safety seat (1) Infant seat (2) Toddler seat (3) Convertible seat (4) Booster seat (7) Other type child safety seat (specify): _____</p> <p>(8) Unknown child safety seat type (9) Unknown if child safety seat used</p> <p>2. Child Safety Seat Orientation</p> <p>(00) No child safety seat</p> <p>Designed for Rear Facing for This Age/Weight (01) Rear facing (02) Forward facing (03) Other orientation (specify): _____</p> <p>(04) Unknown orientation</p> <p>Designed for Forward Facing for This Age/Weight (11) Rear facing (12) Forward facing (18) Other orientation (specify): _____</p> <p>(19) Unknown orientation</p> <p>Unknown Design or Orientation for This Age/Weight, or Unknown Age/Weight (21) Rear facing (22) Forward facing (28) Other orientation (specify): _____</p> <p>(29) Unknown orientation</p> <p>(99) Unknown if child safety seat used</p>	<p>3. Child Safety Seat Harness Usage</p> <p>4. Child Safety Seat Shield Usage</p> <p>5. Child Safety Seat Tether Usage</p> <p>Note: Options Below Are Used for Variables 3-5.</p> <p>(00) No child safety seat</p> <p>Not Designed with Harness/Shield/Tether (01) After market harness/shield/tether added, not used (02) After market harness/shield/tether used (03) Child safety seat used, but no after market harness/shield/tether added (09) Unknown if harness/shield/tether added or used</p> <p>Designed with Harness/Shield/Tether (11) Harness/shield/tether not used (12) Harness/shield/tether used (19) Unknown if harness/shield/tether used</p> <p>Unknown if Designed with Harness/Shield/Tether (21) Harness/shield/tether not used (22) Harness/shield/tether used (29) Unknown if harness/shield/tether used</p> <p>(99) Unknown if child safety seat used</p> <p>6. Child Safety Seat Make/Model (Specify make/model and occupant number)</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
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HEAD RESTRAINTS/SEAT EVALUATION

NOTES: Encode the applicable data for each seat position in the vehicle. The attributes for these variables may be found at the bottom of the page. Head restraint type/damage and seat type/performance should be assessed during the vehicle inspection then coded on the Occupant Assessment Form.

		Left	Center	Right
FIRST	Head Restraint Type/Damage	8	0	8
	Seat Type	02	00	02
	Seat Performance	2(F)	0	1
SECOND	Head Restraint Type/Damage	0	0	0
	Seat Type	03	03	03
	Seat Performance	1	1	1
THIRD	Head Restraint Type/Damage			
	Seat Type			
	Seat Performance			
OTHER	Head Restraint Type/Damage			
	Seat Type			
	Seat Performance			

Head Restraint Type/Damage by Occupant at This Occupant Position

- (0) No head restraints
- (1) Integral – no damage
- (2) Integral – damaged during accident
- (3) Adjustable – no damage
- (4) Adjustable – damaged during accident
- (5) Add-on – no damage
- (6) Add-on – damaged during accident
- (8) Other (specify): ADJ, NO DAMAGE BUT
- (9) Unknown

Seat Performance (This Occupant Position)

- (0) No seat
- (1) No seat performance failure(s)
- (2) Seat performance failure(s)
(Encode all that apply)
- [A] Seat adjusters failed
- [B] Seat back folding locks failed
- [C] Seat tracks failed
- [D] Seat anchors failed
- [E] Deformed by impact of passenger from rear
- [F] Deformed by impact of passenger from front
- [G] Deformed by own inertial forces
- [H] Deformed by passenger compartment intrusion (specify):

Seat Type (This Occupant Position)

- (00) No seat
- (01) Bucket
- (02) Bucket with folding back
- (03) Bench
- (04) Bench with separate back cushions
- (05) Bench with folding back(s)
- (06) Split bench with separate back cushions
- (07) Split bench with folding back(s)
- (08) Pedestal (i.e., van type)
- (09) Other seat type (specify): _____
- (99) Unknown

FLEW OUT OF SEAT BACKS COMPLETELY

[I] Other (specify): _____

(9) Unknown

DESCRIBE ANY INDICATION OF ABNORMAL OCCUPANT POSTURE (I.E. UNUSUAL OCCUPANT CONTACT PATTERN)

EJECTION/ENTRAPMENT DATA

Complete the following if the researcher has any indications that an occupant was either ejected from or entrapped in the vehicle. Code the appropriate data on the Occupant Assessment Form.

EJECTION No [] Yes []

Describe indications of ejection and body parts involved in partial ejection(s):

THE TWO REAR PASSENGERS (COMPLETELY)

Occupant Number	3	4				
Ejection	1	1				
(Note on Vehicle Interior Sketch) Ejection Area	9	9				
Ejection Medium	9	9				
Medium Status	9	9				

Ejection

- (1) Complete ejection
- (2) Partial ejection
- (3) Ejection, unknown degree
- (9) Unknown

Ejection Area

- (1) Windshield
- (2) Left front
- (3) Right front
- (4) Left rear
- (5) Right rear
- (6) Rear

- (7) Roof
- (8) Other area (e.g., back of pickup, etc.) (specify):

- (9) Unknown

Ejection Medium

- (1) Door/hatch/tailgate
- (2) Nonfixed roof structure
- (3) Fixed glazing
- (4) Nonfixed glazing (specify):

- (5) Integral structure
- (8) Other medium (specify):

- (9) Unknown

Medium Status (Immediately Prior to Impact)

- (1) Open
- (2) Closed
- (3) Integral structure
- (9) Unknown

ENTRAPMENT No [] Yes []

Describe entrapment mechanism: _____

Component(s): _____

(Note in vehicle interior diagram)



OCCUPANT INJURY FORM

1. Primary Sampling Unit Number 73 3. Vehicle Number Ø1
 2. Case Number – Stratum 143C 4. Occupant Number Ø1

INJURY DATA

Record below the actual injuries sustained by this occupant that were identified from the official and unofficial data sources. Remember not to double count an injury just because it was identified from two different sources. If greater than ten injuries have been documented, encode the balance on the Occupant Injury Supplement.

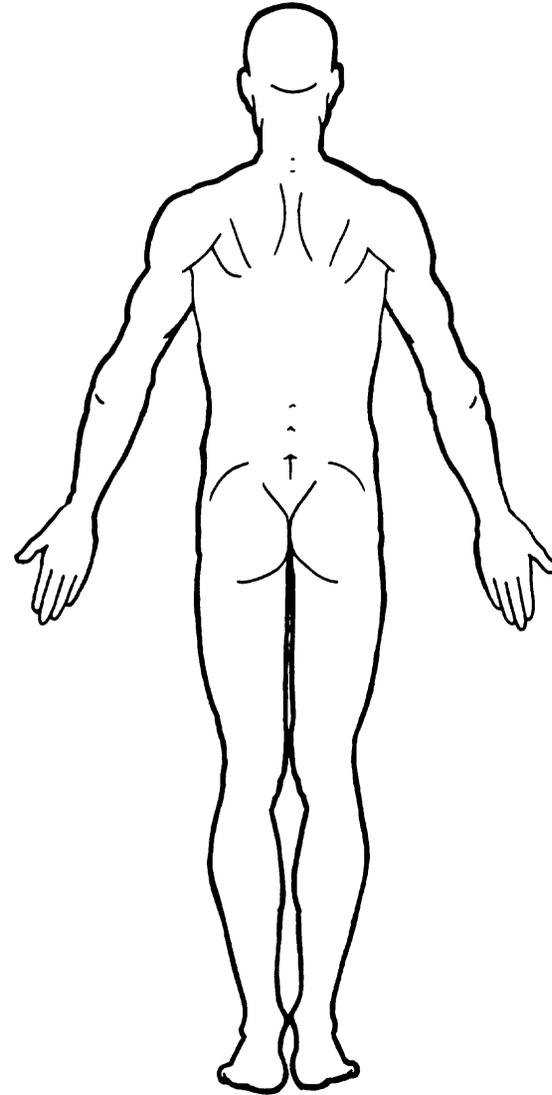
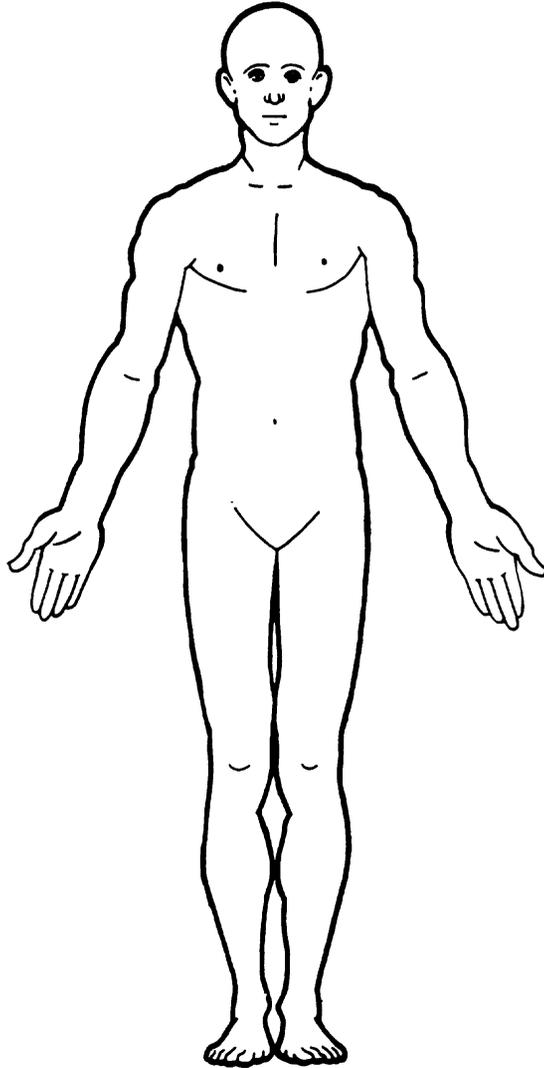
	Source of Injury Data	O.I.C.—A.I.S.					Injury Source	Injury Source Confidence Level	Direct/Indirect Injury	Occupant Area Intrusion No.
		Body Region	Aspect	Lesion	System Organ	A.I.S. Severity				
1st	5. <u>7</u>	6. <u>W</u>	7. <u>L</u>	8. <u>S</u>	9. <u>V</u>	10. <u>1</u>	11. <u>Ø4</u>	12. <u>1</u>	13. <u>2</u>	14. <u>ØØ</u>
2nd	15. ___	16. ___	17. ___	18. ___	19. ___	20. ___	21. ___	22. ___	23. ___	24. ___
3rd	25. ___	26. ___	27. ___	28. ___	29. ___	30. ___	31. ___	32. ___	33. ___	34. ___
4th	35. ___	36. ___	37. ___	38. ___	39. ___	40. ___	41. ___	42. ___	43. ___	44. ___
5th	45. ___	46. ___	47. ___	48. ___	49. ___	50. ___	51. ___	52. ___	53. ___	54. ___
6th	55. ___	56. ___	57. ___	58. ___	59. ___	60. ___	61. ___	62. ___	63. ___	64. ___
7th	65. ___	66. ___	67. ___	68. ___	69. ___	70. ___	71. ___	72. ___	73. ___	74. ___
8th	75. ___	76. ___	77. ___	78. ___	79. ___	80. ___	81. ___	82. ___	83. ___	84. ___
9th	85. ___	86. ___	87. ___	88. ___	89. ___	90. ___	91. ___	92. ___	93. ___	94. ___
10th	95. ___	96. ___	97. ___	98. ___	99. ___	100. ___	101. ___	102. ___	103. ___	104. ___

OCCUPANT INJURY DATA

	Source of Injury Data	O.I.C.—A.I.S.					Injury Source	Injury Source Confidence Level	Direct/Indirect Injury	Occupant Area Intrusion No.
		Body Region	Aspect	Lesion	System Organ	A.I.S. Severity				
11th	—	—	—	—	—	—	---	—	—	---
12th	—	—	—	—	—	—	---	—	—	---
13th	—	—	—	—	—	—	---	—	—	---
14th	—	—	—	—	—	—	---	—	—	---
15th	—	—	—	—	—	—	---	—	—	---
16th	—	—	—	—	—	—	---	—	—	---
17th	—	—	—	—	—	—	---	—	—	---
18th	—	—	—	—	—	—	---	—	—	---
19th	—	—	—	—	—	—	---	—	—	---
20th	—	—	—	—	—	—	---	—	—	---
21st	—	—	—	—	—	—	---	—	—	---
22nd	—	—	—	—	—	—	---	—	—	---
23rd	—	—	—	—	—	—	---	—	—	---

OFFICIAL INJURY DATA – SOFT TISSUE INJURIES

Indicate the *Location, Lesion, Detail* (size, depth, fracture type, head injury clinical signs and neurological deficits), and *Source* of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



SOURCE OF INJURY DATA

OFFICIAL

- (1) Autopsy records with or without hospital medical records
- (2) Hospital medical records other than emergency room (eg. discharge summary)
- (3) Emergency room records only (including associated X-rays or other lab reports)
- (4) Private physician, walk-in or emergency clinic

UNOFFICIAL

- (5) Lay coroner report
- (6) E.M.S. personnel
- (7) Interviewee
- (8) Other source (specify): _____
- (9) Police

- (26) Left side window glass including one or more of the following: frame, window sill, A-pillar, B-pillar, or roof side rail
- (27) Other left side object (specify): _____

RIGHT SIDE

- (30) Right side interior surface, excluding hardware or armrests
- (31) Right side hardware or armrest
- (32) Right A pillar
- (33) Right B pillar
- (34) Other right pillar (specify): _____
- (35) Right side window glass or frame
- (36) Right side window glass including one or more of the following: frame, window sill, A-pillar, B-pillar, roof side rail
- (37) Other right side object (specify): _____

INTERIOR

- (40) Seat, back support
- (41) Belt restraint webbing/buckle
- (42) Belt restraint B-pillar attachment point
- (43) Other restraint system component (specify): _____
- (44) Head restraint system
- (45) Air bag
- (46) Other occupants (specify): _____
- (47) Interior loose objects
- (48) Child safety seat (specify): _____
- (49) Other interior object (specify): _____

ROOF

- (50) Front header
- (51) Rear header
- (52) Roof left side rail
- (53) Roof right side rail
- (54) Roof or convertible top
- (56) Floor including toe pan
- (57) Floor or console mounted transmission lever, including console
- (58) Parking brake handle
- (59) Foot controls including parking brake

REAR

- (60) Backlight (rear window)
- (61) Backlight storage rack, door, etc.
- (62) Other rear object (specify): _____

EXTERIOR OF OCCUPANT'S VEHICLE

- (65) Hood
- (66) Outside hardware (e.g., outside mirror, antenna)
- (67) Other exterior surface or tires (specify): _____
- (68) Unknown exterior objects

EXTERIOR OF OTHER MOTOR VEHICLE

- (70) Front bumper
- (71) Hood edge
- (72) Other front of vehicle (specify): _____
- (73) Hood
- (74) Hood ornament
- (75) Windshield, roof rail, A-pillar
- (76) Side surface
- (77) Side mirrors
- (78) Other side protrusions (specify): _____
- (79) Rear surface
- (80) Undercarriage
- (81) Tires and wheels
- (82) Other exterior of other motor vehicle (specify): _____

OTHER VEHICLE OR OBJECT IN THE ENVIRONMENT

- (83) Unknown exterior of other motor vehicle
 - (84) Ground
 - (85) Other vehicle or object (specify): _____
 - (86) Unknown vehicle or object
- ### NONCONTACT INJURY
- (90) Fire in vehicle
 - (91) Flying glass
 - (92) Other noncontact injury source (specify): _____
 - (97) Injured, unknown source

INJURY SOURCE

FRONT

- (01) Windshield
- (02) Mirror
- (03) Sunvisor
- (04) Steering wheel rim
- (05) Steering wheel hub/spoke
- (06) Steering wheel (combination of codes 04 and 05)
- (07) Steering column, transmission selector lever, other attachment
- (08) Add-on equipment (e.g., CB, tape deck, air conditioner)
- (09) Left instrument panel and below
- (10) Center instrument panel and below
- (11) Right instrument panel and below
- (12) Glove compartment door
- (13) Knee bolster
- (14) Windshield including one or more of the following: front header, A-pillar, instrument panel, mirror, or steering assembly (driver side only)
- (15) Windshield including one or more of the following: front header, A-pillar, instrument panel, or mirror (passenger side only)
- (16) Other front object (specify): _____

LEFT SIDE

- (20) Left side interior surface, excluding hardware or armrests
- (21) Left side hardware or armrest
- (22) Left A pillar
- (23) Left B pillar
- (24) Other left pillar (specify): _____
- (25) Left side window glass or frame

INJURY SOURCE CONFIDENCE LEVEL

- (1) Certain
- (2) Probable
- (3) Possible
- (9) Unknown

DIRECT/INDIRECT INJURY

- (1) Direct contact injury
- (2) Indirect contact injury
- (3) Noncontact injury
- (7) Injured, unknown source

OCCUPANT INJURY CLASSIFICATION

O.I.C. Body Region

- (M) Abdomen
- (Q) Ankle-foot
- (A) Arm (upper)
- (B) Back-thoracolumbar spine
- (C) Chest
- (E) Elbow
- (F) Face
- (R) Forearm
- (H) Head-skull
- (U) Injured, unknown region
- (K) Knee
- (L) Leg (lower)
- (Y) Lower limb(s) (whole or unknown part)
- (N) Neck-cervical spine
- (P) Pelvic-hip
- (S) Shoulder
- (T) Thigh
- (X) Upper limb(s) (whole or unknown part)
- (O) Whole body

(W) Wrist-hand

Aspect of Injury

- (A) Anterior-front
- (B) Bilateral (rib fracture only)
- (C) Central
- (I) Inferior-lower
- (U) Injured, unknown aspect
- (L) Left
- (P) Posterior-back
- (R) Right
- (S) Superior-upper
- (W) Whole region

Lesion

- (A) Abrasion
- (M) Amputation
- (V) Avulsion
- (B) Burn
- (K) Concussion
- (C) Contusion
- (N) Crush

(G) Detachment, separation

(D) Dislocation

(F) Fracture

(Z) Fracture and dislocation

(U) Injured, unknown lesion

(L) Laceration

(O) Other

(P) Perforation, puncture

(R) Rupture

(S) Sprain

(T) Strain

(E) Total severance, transection

System/Organ

(W) All systems in region

(A) Arteries-veins

(B) Brain

(D) Digestive

(E) Ears

(O) Eye

(H) Heart

(U) Injured, unknown system

(I) Integumentary

(J) Joints

(K) Kidneys

(L) Liver

(M) Muscles

(N) Nervous system

(P) Pulmonary-lungs

(R) Respiratory

(S) Skeletal

(C) Spinal cord

(Q) Spleen

(T) Thyroid, other endocrine gland

(G) Urogenital

(V) Vertebrae

Abbreviated Injury Scale

(1) Minor injury

(2) Moderate injury

(3) Serious injury

(4) Severe injury

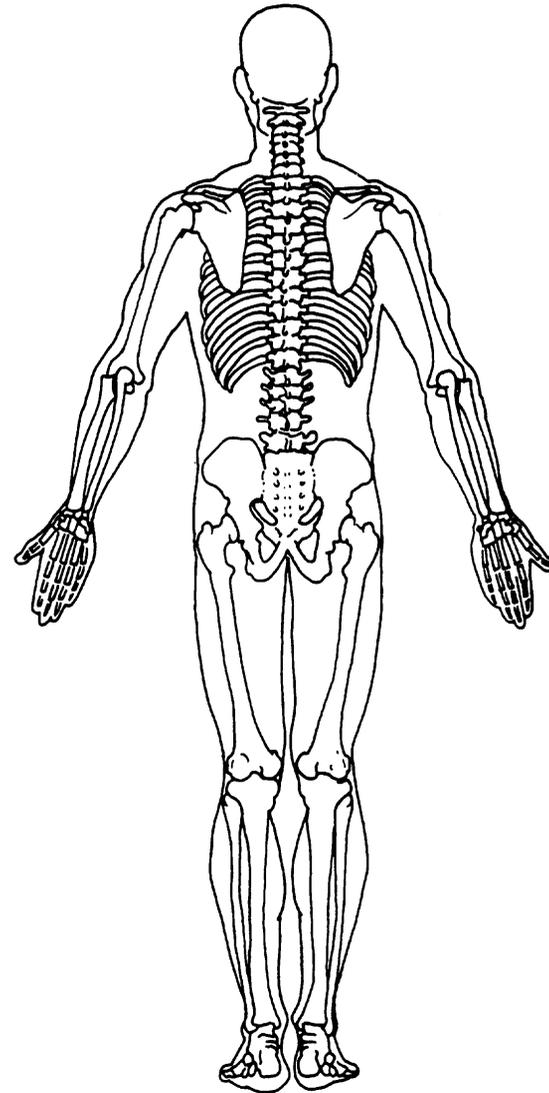
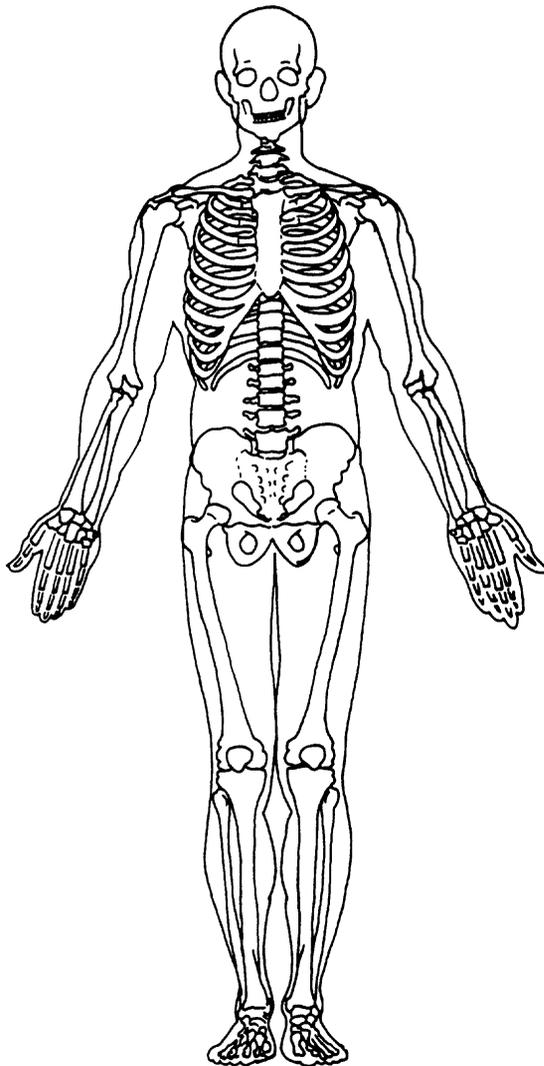
(5) Critical injury

(6) Maximum (untreatable)

(7) Injured, unknown severity

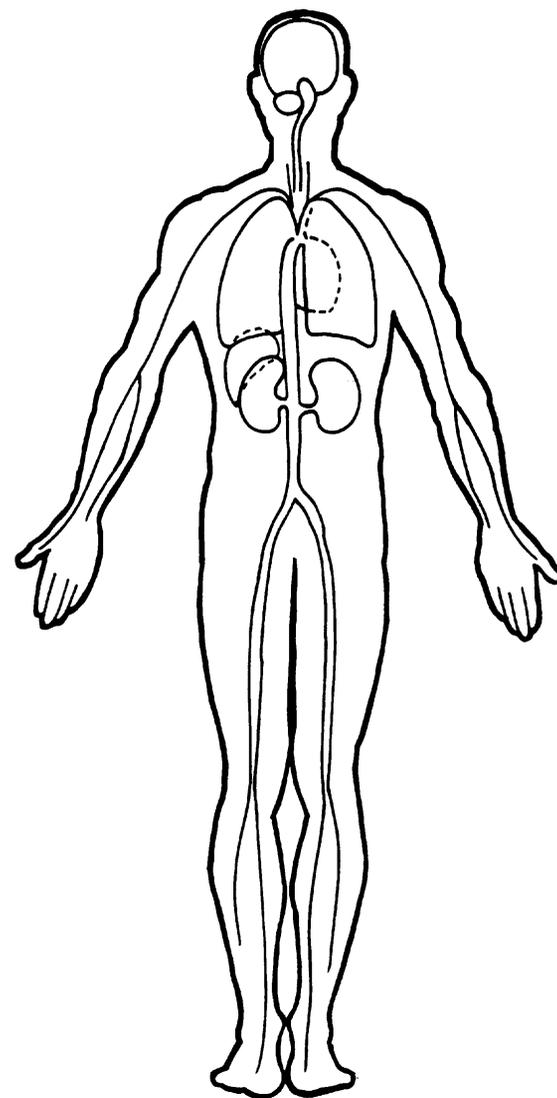
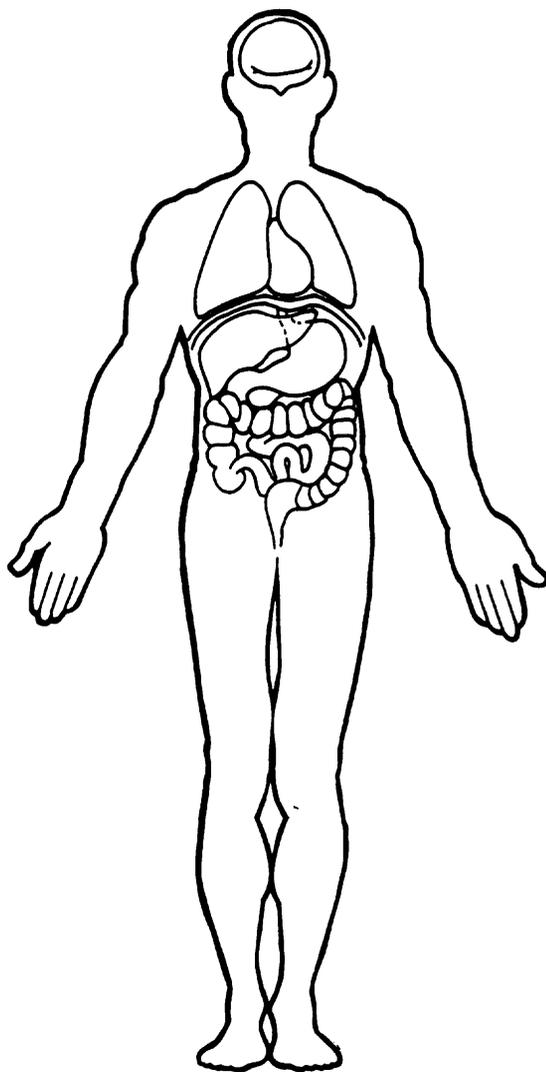
OFFICIAL INJURY DATA – SKELETAL INJURIES

Indicate the *Location, Lesion, Detail* (size, depth, fracture type, head injury clinical signs and neurological deficits), and *Source* of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



OFFICIAL INJURY DATA – INTERNAL INJURIES

Indicate the *Location, Lesion, Detail* (size, depth, fracture type, head injury clinical signs and neurological deficits), and *Source* of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)





OCCUPANT INJURY FORM

1. Primary Sampling Unit Number 73 3. Vehicle Number 01
2. Case Number—Stratum 143C 4. Occupant Number 02

INJURY DATA

Record below the actual injuries sustained by this occupant that were identified from the official and unofficial data sources. Remember not to double count an injury just because it was identified from two different sources. If greater than ten injuries have been documented, encode the balance on the Occupant Injury Supplement.

	Source of Injury Data	O.I.C.—A.I.S.					Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion No.
		Body Region	Aspect	Lesion	System Organ	A.I.S. Severity				
1st	5. <u>3</u>	6. <u>F</u>	7. <u>L</u>	8. <u>L</u>	9. <u>I</u>	10. <u>1</u>	11. <u>91</u>	12. <u>2</u>	13. <u>3</u>	14. <u>00</u>
2nd	15. <u>3</u>	16. <u>H</u>	17. <u>L</u>	18. <u>A</u>	19. <u>I</u>	20. <u>1</u>	21. <u>54</u>	22. <u>2</u>	23. <u>1</u>	24. <u>00</u>
3rd	25. <u>3</u>	26. <u>W</u>	27. <u>L</u>	28. <u>A</u>	29. <u>I</u>	30. <u>1</u>	31. <u>97</u>	32. <u>9</u>	33. <u>7</u>	34. <u>99</u>
4th	35. <u>3</u>	36. <u>W</u>	37. <u>L</u>	38. <u>L</u>	39. <u>I</u>	40. <u>1</u>	41. <u>97</u>	42. <u>9</u>	43. <u>7</u>	44. <u>99</u>
5th	45. ___	46. ___	47. ___	48. ___	49. ___	50. ___	51. ___	52. ___	53. ___	54. ___
6th	55. ___	56. ___	57. ___	58. ___	59. ___	60. ___	61. ___	62. ___	63. ___	64. ___
7th	65. ___	66. ___	67. ___	68. ___	69. ___	70. ___	71. ___	72. ___	73. ___	74. ___
8th	75. ___	76. ___	77. ___	78. ___	79. ___	80. ___	81. ___	82. ___	83. ___	84. ___
9th	85. ___	86. ___	87. ___	88. ___	89. ___	90. ___	91. ___	92. ___	93. ___	94. ___
10th	95. ___	96. ___	97. ___	98. ___	99. ___	100. ___	101. ___	102. ___	103. ___	104. ___

OCCUPANT INJURY DATA

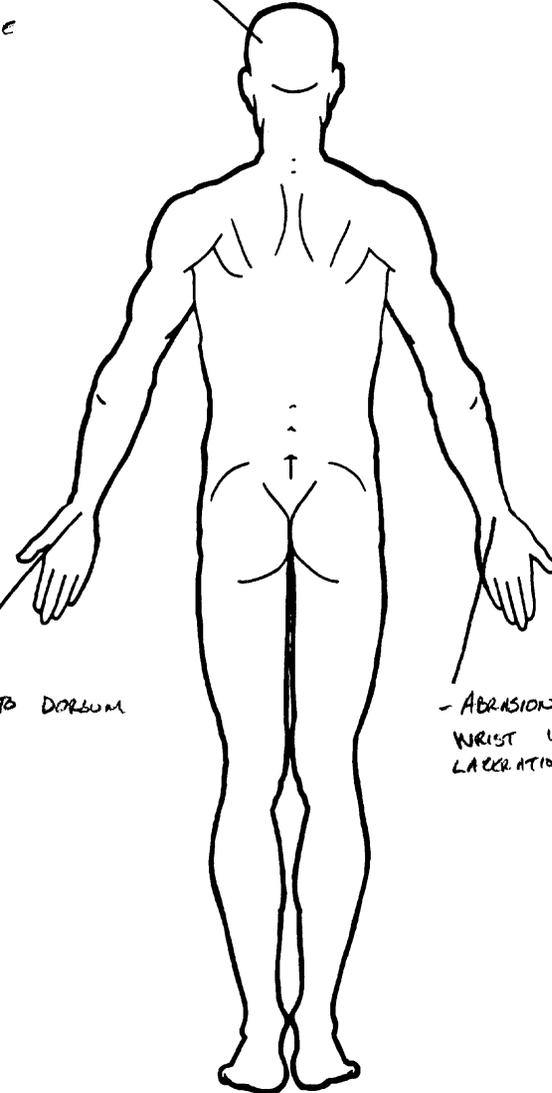
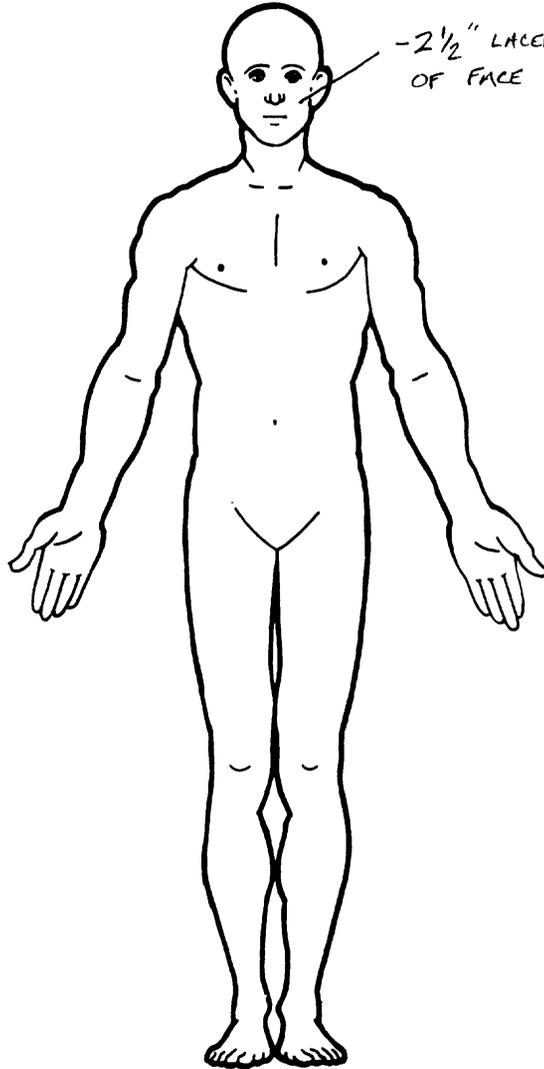
	Source of Injury Data	O.I.C.—A.I.S.					Injury Source	Injury Source Confidence Level	Direct/Indirect Injury	Occupant Area Intrusion No.
		Body Region	Aspect	Lesion	System Organ	A.I.S. Severity				
11th	—	—	—	—	—	—	—	—	—	
12th	—	—	—	—	—	—	—	—	—	
13th	—	—	—	—	—	—	—	—	—	
14th	—	—	—	—	—	—	—	—	—	
15th	—	—	—	—	—	—	—	—	—	
16th	—	—	—	—	—	—	—	—	—	
17th	—	—	—	—	—	—	—	—	—	
18th	—	—	—	—	—	—	—	—	—	
19th	—	—	—	—	—	—	—	—	—	
20th	—	—	—	—	—	—	—	—	—	
21st	—	—	—	—	—	—	—	—	—	
22nd	—	—	—	—	—	—	—	—	—	
23rd	—	—	—	—	—	—	—	—	—	

OFFICIAL INJURY DATA – SOFT TISSUE INJURIES

Indicate the *Location, Lesion, Detail* (size, depth, fracture type, head injury clinical signs and neurological deficits), and *Source* of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)

- ABRASION & HEMATOMA TO ① PARIETAL AREA

- 2 1/2" LACERATION TO ① SIDE OF FACE (ZYGOMA REGION)



- 1" LACERATION TO DORSUM OF ② WRIST

- ABRASION TO ② WRIST WITH SMALL LACERATION

SOURCE OF INJURY DATA

OFFICIAL

- (1) Autopsy records with or without hospital medical records
- (2) Hospital medical records other than emergency room (eg. discharge summary)
- (3) Emergency room records only (including associated X-rays or other lab reports)
- (4) Private physician, walk-in or emergency clinic

UNOFFICIAL

- (5) Lay coroner report
- (6) E.M.S. personnel
- (7) Interviewee
- (8) Other source (specify): _____
- (9) Police

(26) Left side window glass including one or more of the following: frame, window sill, A-pillar, B-pillar, or roof side rail

(27) Other left side object (specify): _____

RIGHT SIDE

(30) Right side interior surface, excluding hardware or armrests

- (31) Right side hardware or armrest
- (32) Right A pillar
- (33) Right B pillar
- (34) Other right pillar (specify): _____

(35) Right side window glass or frame

(36) Right side window glass including one or more of the following: frame, window sill, A-pillar, B-pillar, roof side rail

(37) Other right side object (specify): _____

INTERIOR

- (40) Seat, back support
- (41) Belt restraint webbing/buckle
- (42) Belt restraint B-pillar attachment point
- (43) Other restraint system component (specify): _____

(44) Head restraint system

- (45) Air bag
- (46) Other occupants (specify): _____

(47) Interior loose objects

(48) Child safety seat (specify): _____

(49) Other interior object (specify): _____

ROOF

- (50) Front header
- (51) Rear header
- (52) Roof left side rail
- (53) Roof right side rail
- (54) Roof or convertible top

FLOOR

- (56) Floor including toe pan
- (57) Floor or console mounted transmission lever, including console
- (58) Parking brake handle
- (59) Foot controls including parking brake

REAR

- (60) Backlight (rear window)
- (61) Backlight storage rack, door, etc.
- (62) Other rear object (specify): _____

EXTERIOR OF OCCUPANT'S VEHICLE

- (65) Hood
- (66) Outside hardware (e.g., outside mirror, antenna)
- (67) Other exterior surface or tires (specify): _____

(68) Unknown exterior objects

EXTERIOR OF OTHER MOTOR VEHICLE

- (70) Front bumper
- (71) Hood edge
- (72) Other front of vehicle (specify): _____

(73) Hood

- (74) Hood ornament
- (75) Windshield, roof rail, A-pillar
- (76) Side surface
- (77) Side mirrors
- (78) Other side protrusions (specify): _____

(79) Rear surface

- (80) Undercarriage
- (81) Tires and wheels
- (82) Other exterior of other motor vehicle (specify): _____

(83) Unknown exterior of other motor vehicle

OTHER VEHICLE OR OBJECT IN THE ENVIRONMENT

- (84) Ground
- (85) Other vehicle or object (specify): _____

(86) Unknown vehicle or object

NONCONTACT INJURY

- (90) Fire in vehicle
- (91) Flying glass
- (92) Other noncontact injury source (specify): _____

(97) Injured, unknown source

INJURY SOURCE CONFIDENCE LEVEL

- (1) Certain
- (2) Probable
- (3) Possible
- (9) Unknown

DIRECT/INDIRECT INJURY

- (1) Direct contact injury
- (2) Indirect contact injury
- (3) Noncontact injury
- (7) Injured, unknown source

INJURY SOURCE

FRONT

- (01) Windshield
- (02) Mirror
- (03) Sunvisor
- (04) Steering wheel rim
- (05) Steering wheel hub/spoke
- (06) Steering wheel (combination of codes 04 and 05)
- (07) Steering column, transmission selector lever, other attachment
- (08) Add-on equipment (e.g., CB, tape deck, air conditioner)
- (09) Left instrument panel and below
- (10) Center instrument panel and below
- (11) Right instrument panel and below
- (12) Glove compartment door
- (13) Knee bolster
- (14) Windshield including one or more of the following: front header, A-pillar, instrument panel, mirror, or steering assembly (driver side only)
- (15) Windshield including one or more of the following: front header, A-pillar, instrument panel, or mirror (passenger side only)
- (16) Other front object (specify): _____

LEFT SIDE

- (20) Left side interior surface, excluding hardware or armrests
- (21) Left side hardware or armrest
- (22) Left A pillar
- (23) Left B pillar
- (24) Other left pillar (specify): _____
- (25) Left side window glass or frame

OCCUPANT INJURY CLASSIFICATION

O.I.C. Body Region

- (M) Abdomen
- (Q) Ankle-foot
- (A) Arm (upper)
- (B) Back-thoracolumbar spine
- (C) Chest
- (E) Elbow
- (F) Face
- (R) Forearm
- (H) Head-skull
- (U) Injured, unknown region
- (K) Knee
- (L) Leg (lower)
- (Y) Lower limb(s) (whole or unknown part)
- (N) Neck-cervical spine
- (P) Pelvic-hip
- (S) Shoulder
- (T) Thigh
- (X) Upper limb(s) (whole or unknown part)
- (O) Whole body

(W) Wrist-hand

Aspect of Injury

- (A) Anterior-front
- (B) Bilateral (rib fracture only)
- (C) Central
- (I) Inferior-lower
- (U) Injured, unknown aspect
- (L) Left
- (P) Posterior-back
- (R) Right
- (S) Superior-upper
- (W) Whole region

Lesion

- (A) Abrasion
- (M) Amputation
- (V) Avulsion
- (B) Burn
- (K) Concussion
- (C) Contusion
- (N) Crush

(G) Detachment, separation

(D) Dislocation

(F) Fracture

(Z) Fracture and dislocation

(U) Injured, unknown lesion

(L) Laceration

(O) Other

(P) Perforation, puncture

(R) Rupture

(S) Sprain

(T) Strain

(E) Total severance, transection

System/Organ

(W) All systems in region

(A) Arteries-veins

(B) Brain

(D) Digestive

(E) Ears

(O) Eye

(H) Heart

(U) Injured, unknown system

(I) Integumentary

(J) Joints

(K) Kidneys

(L) Liver

(M) Muscles

(N) Nervous system

(P) Pulmonary-lungs

(R) Respiratory

(S) Skeletal

(C) Spinal cord

(Q) Spleen

(T) Thyroid, other endocrine gland

(G) Urogenital

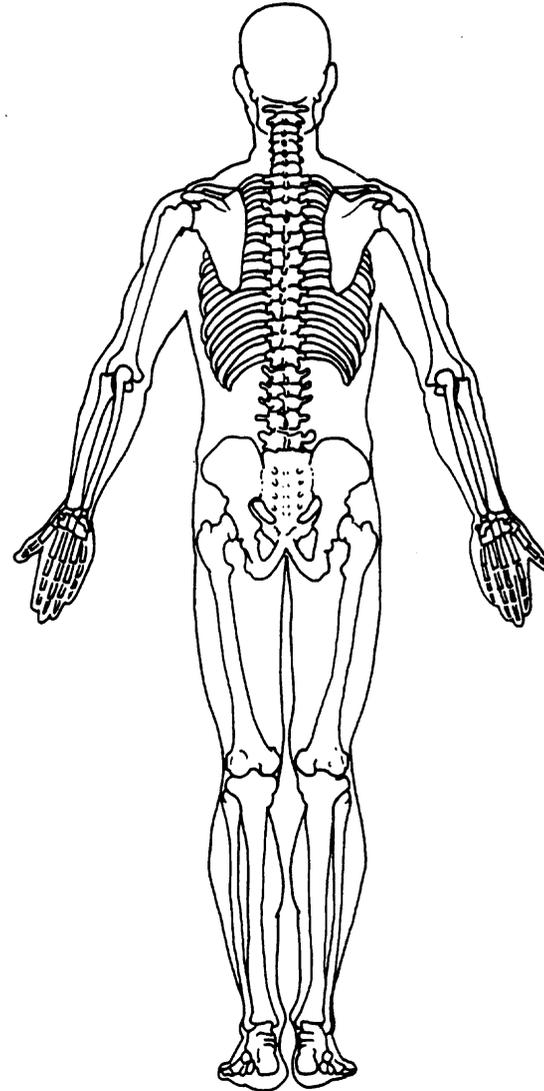
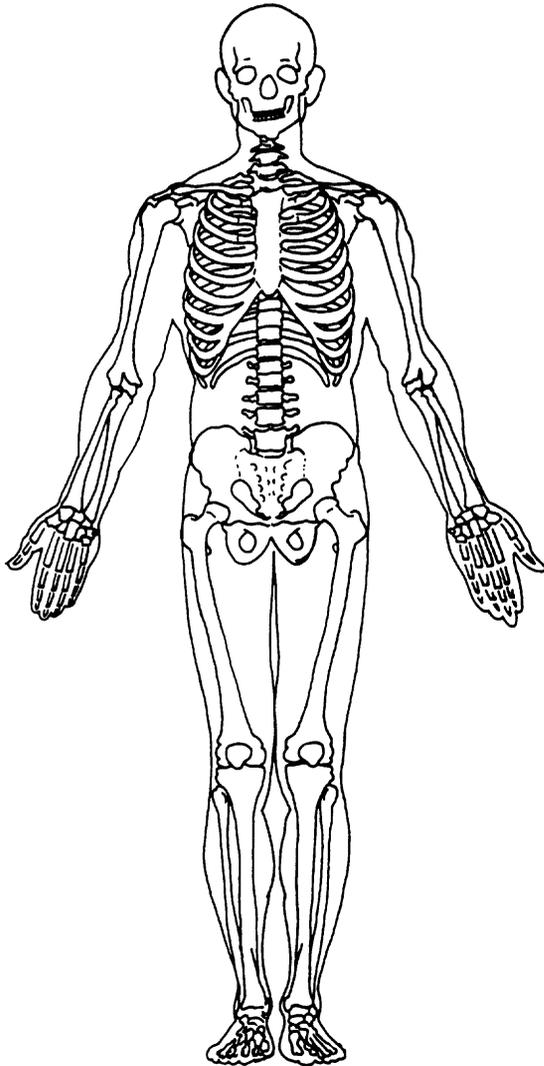
(V) Vertebrae

Abbreviated Injury Scale

- (1) Minor injury
- (2) Moderate injury
- (3) Serious injury
- (4) Severe injury
- (5) Critical injury
- (6) Maximum (untreatable)
- (7) Injured, unknown severity

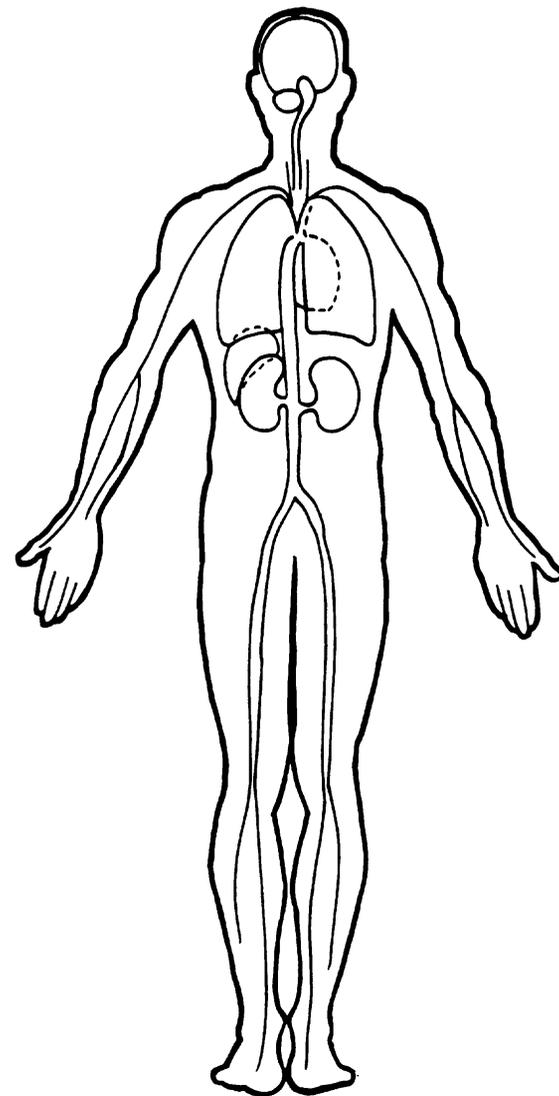
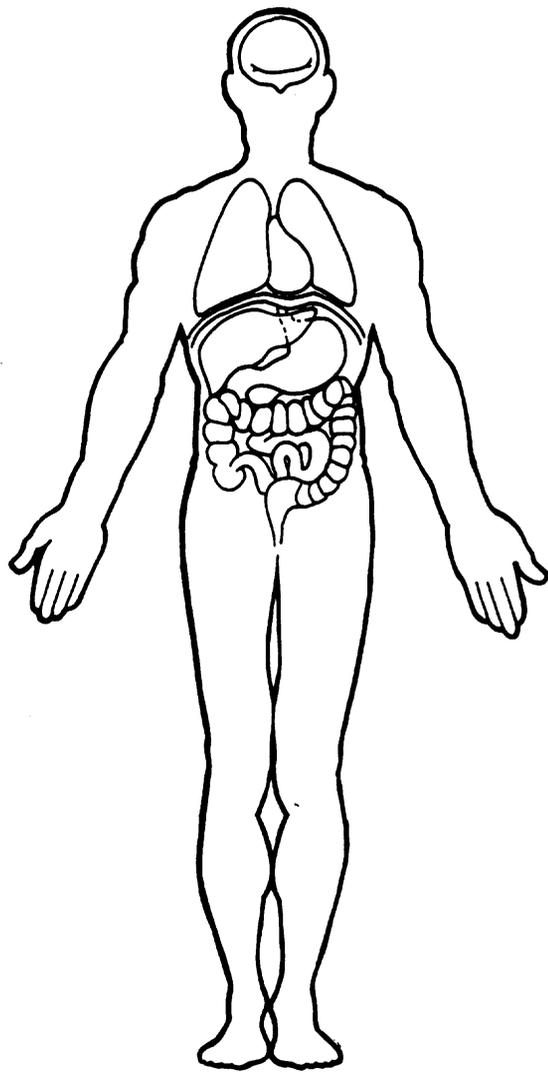
OFFICIAL INJURY DATA – SKELETAL INJURIES

Indicate the *Location, Lesion, Detail* (size, depth, fracture type, head injury clinical signs and neurological deficits), and *Source* of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



OFFICIAL INJURY DATA – INTERNAL INJURIES

Indicate the *Location, Lesion, Detail* (size, depth, fracture type, head injury clinical signs and neurological deficits), and *Source* of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)





OCCUPANT INJURY FORM

1. Primary Sampling Unit Number 73 3. Vehicle Number Φ1
2. Case Number – Stratum 143C 4. Occupant Number Φ3

INJURY DATA

Record below the actual injuries sustained by this occupant that were identified from the official and unofficial data sources. Remember not to double count an injury just because it was identified from two different sources. If greater than ten injuries have been documented, encode the balance on the Occupant Injury Supplement.

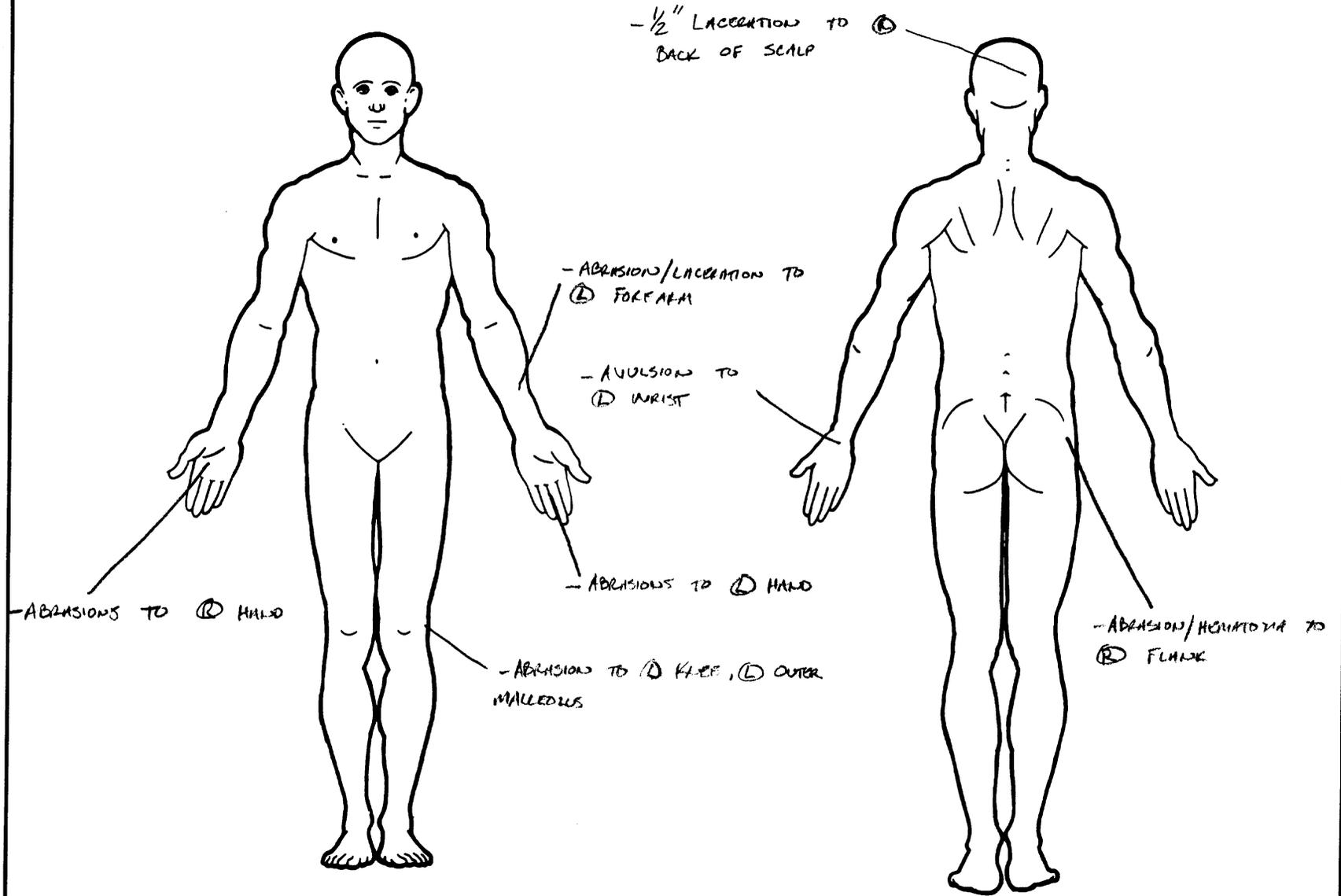
	Source of Injury Data	O.I.C.—A.I.S.					Injury Source	Injury Source Confidence Level	Direct/Indirect Injury	Occupant Area Intrusion No.
		Body Region	Aspect	Lesion	System Organ	A.I.S. Severity				
1st	5. <u>3</u>	6. <u>H</u>	7. <u>W</u>	8. <u>K</u>	9. <u>B</u>	10. <u>2</u>	11. <u>84</u>	12. <u>2</u>	13. <u>1</u>	14. <u>ΦΦ</u>
2nd	15. <u>3</u>	16. <u>C</u>	17. <u>U</u>	18. <u>C</u>	19. <u>P</u>	20. <u>3</u>	21. <u>84</u>	22. <u>2</u>	23. <u>1</u>	24. <u>ΦΦ</u>
3rd	25. <u>3</u>	26. <u>F</u>	27. <u>L</u>	28. <u>D</u>	29. <u>S</u>	30. <u>1</u>	31. <u>84</u>	32. <u>2</u>	33. <u>1</u>	34. <u>ΦΦ</u>
4th	35. <u>3</u>	36. <u>B</u>	37. <u>L</u>	28. <u>F</u>	39. <u>S</u>	40. <u>2</u>	41. <u>84</u>	42. <u>2</u>	43. <u>1</u>	44. <u>ΦΦ</u>
5th	45. <u>3</u>	46. <u>B</u>	47. <u>S</u>	48. <u>F</u>	49. <u>S</u>	50. <u>2</u>	51. <u>84</u>	52. <u>2</u>	53. <u>1</u>	54. <u>ΦΦ</u>
6th	55. <u>3</u>	56. <u>H</u>	57. <u>P</u>	58. <u>L</u>	59. <u>L</u>	60. <u>1</u>	61. <u>84</u>	62. <u>2</u>	63. <u>1</u>	64. <u>ΦΦ</u>
7th	65. <u>3</u>	66. <u>R</u>	67. <u>L</u>	68. <u>L</u>	69. <u>L</u>	70. <u>1</u>	71. <u>97</u>	72. <u>9</u>	73. <u>7</u>	74. <u>99</u>
8th	75. <u>3</u>	76. <u>W</u>	77. <u>L</u>	78. <u>V</u>	79. <u>L</u>	80. <u>2</u>	81. <u>97</u>	82. <u>9</u>	83. <u>7</u>	84. <u>99</u>
9th	85. <u>3</u>	86. <u>W</u>	87. <u>L</u>	88. <u>A</u>	89. <u>L</u>	90. <u>1</u>	91. <u>84</u>	92. <u>2</u>	93. <u>1</u>	94. <u>ΦΦ</u>
10th	95. <u>3</u>	96. <u>W</u>	97. <u>R</u>	98. <u>A</u>	99. <u>L</u>	100. <u>1</u>	101. <u>84</u>	102. <u>2</u>	103. <u>1</u>	104. <u>ΦΦ</u>

OCCUPANT INJURY DATA

	Source of Injury Data	O.I.C.—A.I.S.					Injury Source	Injury Source Confidence Level	Direct/Indirect Injury	Occupant Area Intrusion No.
		Body Region	Aspect	Lesion	System Organ	A.I.S. Severity				
11th	<u>3</u>	<u>K</u>	<u>L</u>	<u>A</u>	<u>L</u>	<u>L</u>	<u>84</u>	<u>2</u>	<u>1</u>	<u>01</u>
12th	<u>3</u>	<u>M</u>	<u>R</u>	<u>A</u>	<u>L</u>	<u>L</u>	<u>84</u>	<u>2</u>	<u>1</u>	<u>01</u>
13th	—	—	—	—	—	—	---	—	—	---
14th	—	—	—	—	—	—	---	—	—	---
15th	—	—	—	—	—	—	---	—	—	---
16th	—	—	—	—	—	—	---	—	—	---
17th	—	—	—	—	—	—	---	—	—	---
18th	—	—	—	—	—	—	---	—	—	---
19th	—	—	—	—	—	—	---	—	—	---
20th	—	—	—	—	—	—	---	—	—	---
21st	—	—	—	—	—	—	---	—	—	---
22nd	—	—	—	—	—	—	---	—	—	---
23rd	—	—	—	—	—	—	---	—	—	---

OFFICIAL INJURY DATA – SOFT TISSUE INJURIES

Indicate the *Location, Lesion, Detail* (size, depth, fracture type, head injury clinical signs and neurological deficits), and *Source* of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



SOURCE OF INJURY DATA

OFFICIAL

- (1) Autopsy records with or without hospital medical records
- (2) Hospital medical records other than emergency room (eg. discharge summary)
- (3) Emergency room records only (including associated X-rays or other lab reports)
- (4) Private physician, walk-in or emergency clinic

UNOFFICIAL

- (5) Lay coroner report
- (6) E.M.S. personnel
- (7) Interviewee
- (8) Other source (specify): _____
- (9) Police

- (26) Left side window glass including one or more of the following: frame, window sill, A-pillar, B-pillar, or roof side rail
- (27) Other left side object (specify): _____

RIGHT SIDE

- (30) Right side interior surface, excluding hardware or armrests
- (31) Right side hardware or armrest
- (32) Right A pillar
- (33) Right B pillar
- (34) Other right pillar (specify): _____
- (35) Right side window glass or frame
- (36) Right side window glass including one or more of the following: frame, window sill, A-pillar, B-pillar, roof side rail
- (37) Other right side object (specify): _____

EXTERIOR OF OCCUPANT'S VEHICLE

- (65) Hood
- (66) Outside hardware (e.g., outside mirror, antenna)
- (67) Other exterior surface or tires (specify): _____
- (68) Unknown exterior objects

EXTERIOR OF OTHER MOTOR VEHICLE

- (70) Front bumper
- (71) Hood edge
- (72) Other front of vehicle (specify): _____
- (73) Hood
- (74) Hood ornament
- (75) Windshield, roof rail, A-pillar
- (76) Side surface
- (77) Side mirrors
- (78) Other side protrusions (specify): _____
- (79) Rear surface
- (80) Undercarriage
- (81) Tires and wheels
- (82) Other exterior of other motor vehicle (specify): _____

- (83) Unknown exterior of other motor vehicle

OTHER VEHICLE OR OBJECT IN THE ENVIRONMENT

- (84) Ground
- (85) Other vehicle or object (specify): _____

- (86) Unknown vehicle or object

NONCONTACT INJURY

- (90) Fire in vehicle
- (91) Flying glass
- (92) Other noncontact injury source (specify): _____

- (97) Injured, unknown source

INJURY SOURCE

FRONT

- (01) Windshield
- (02) Mirror
- (03) Sunvisor
- (04) Steering wheel rim
- (05) Steering wheel hub/spoke
- (06) Steering wheel (combination of codes 04 and 05)
- (07) Steering column, transmission selector lever, other attachment
- (08) Add-on equipment (e.g., CB, tape deck, air conditioner)
- (09) Left instrument panel and below
- (10) Center instrument panel and below
- (11) Right instrument panel and below
- (12) Glove compartment door
- (13) Knee bolster
- (14) Windshield including one or more of the following: front header, A-pillar, instrument panel, mirror, or steering assembly (driver side only)
- (15) Windshield including one or more of the following: front header, A-pillar, instrument panel, or mirror (passenger side only)
- (16) Other front object (specify): _____

LEFT SIDE

- (20) Left side interior surface, excluding hardware or armrests
- (21) Left side hardware or armrest
- (22) Left A pillar
- (23) Left B pillar
- (24) Other left pillar (specify): _____
- (25) Left side window glass or frame

INTERIOR

- (40) Seat, back support
- (41) Belt restraint webbing/buckle
- (42) Belt restraint B-pillar attachment point
- (43) Other restraint system component (specify): _____
- (44) Head restraint system
- (45) Air bag
- (46) Other occupants (specify): _____
- (47) Interior loose objects
- (48) Child safety seat (specify): _____
- (49) Other interior object (specify): _____

ROOF

- (50) Front header
- (51) Rear header
- (52) Roof left side rail
- (53) Roof right side rail
- (54) Roof or convertible top

FLOOR

- (56) Floor including toe pan
- (57) Floor or console mounted transmission lever, including console
- (58) Parking brake handle
- (59) Foot controls including parking brake

REAR

- (60) Backlight (rear window)
- (61) Backlight storage rack, door, etc.
- (62) Other rear object (specify): _____

INJURY SOURCE CONFIDENCE LEVEL

- (1) Certain
- (2) Probable
- (3) Possible
- (9) Unknown

DIRECT/INDIRECT INJURY

- (1) Direct contact injury
- (2) Indirect contact injury
- (3) Noncontact injury
- (7) Injured, unknown source

OCCUPANT INJURY CLASSIFICATION

O.I.C. Body Region

- (M) Abdomen
- (Q) Ankle-foot
- (A) Arm (upper)
- (B) Back-thoracolumbar spine
- (C) Chest
- (E) Elbow
- (F) Face
- (R) Forearm
- (H) Head-skull
- (U) Injured, unknown region
- (K) Knee
- (L) Leg (lower)
- (Y) Lower limb(s) (whole or unknown part)
- (N) Neck-cervical spine
- (P) Pelvic-hip
- (S) Shoulder
- (T) Thigh
- (X) Upper limb(s) (whole or unknown part)
- (O) Whole body

- (W) Wrist-hand

Aspect of Injury

- (A) Anterior-front
- (B) Bilateral (rib fracture only)
- (C) Central
- (I) Inferior-lower
- (U) Injured, unknown aspect
- (L) Left
- (P) Posterior-back
- (R) Right
- (S) Superior-upper
- (W) Whole region

Lesion

- (A) Abrasion
- (M) Amputation
- (V) Avulsion
- (B) Burn
- (K) Concussion
- (C) Contusion
- (N) Crush

- (G) Detachment, separation

- (D) Dislocation

- (F) Fracture

- (Z) Fracture and dislocation

- (U) Injured, unknown lesion

- (L) Laceration

- (O) Other

- (P) Perforation, puncture

- (R) Rupture

- (S) Sprain

- (T) Strain

- (E) Total severance, transection

System/Organ

- (W) All systems in region

- (A) Arteries-veins

- (B) Brain

- (D) Digestive

- (E) Ears

- (O) Eye

- (H) Heart

- (U) Injured, unknown system

- (I) Integumentary

- (J) Joints

- (K) Kidneys

- (L) Liver

- (M) Muscles

- (N) Nervous system

- (P) Pulmonary-lungs

- (R) Respiratory

- (S) Skeletal

- (C) Spinal cord

- (Q) Spleen

- (T) Thyroid, other endocrine gland

- (G) Urogenital

- (V) Vertebrae

Abbreviated Injury Scale

- (1) Minor injury

- (2) Moderate injury

- (3) Serious injury

- (4) Severe injury

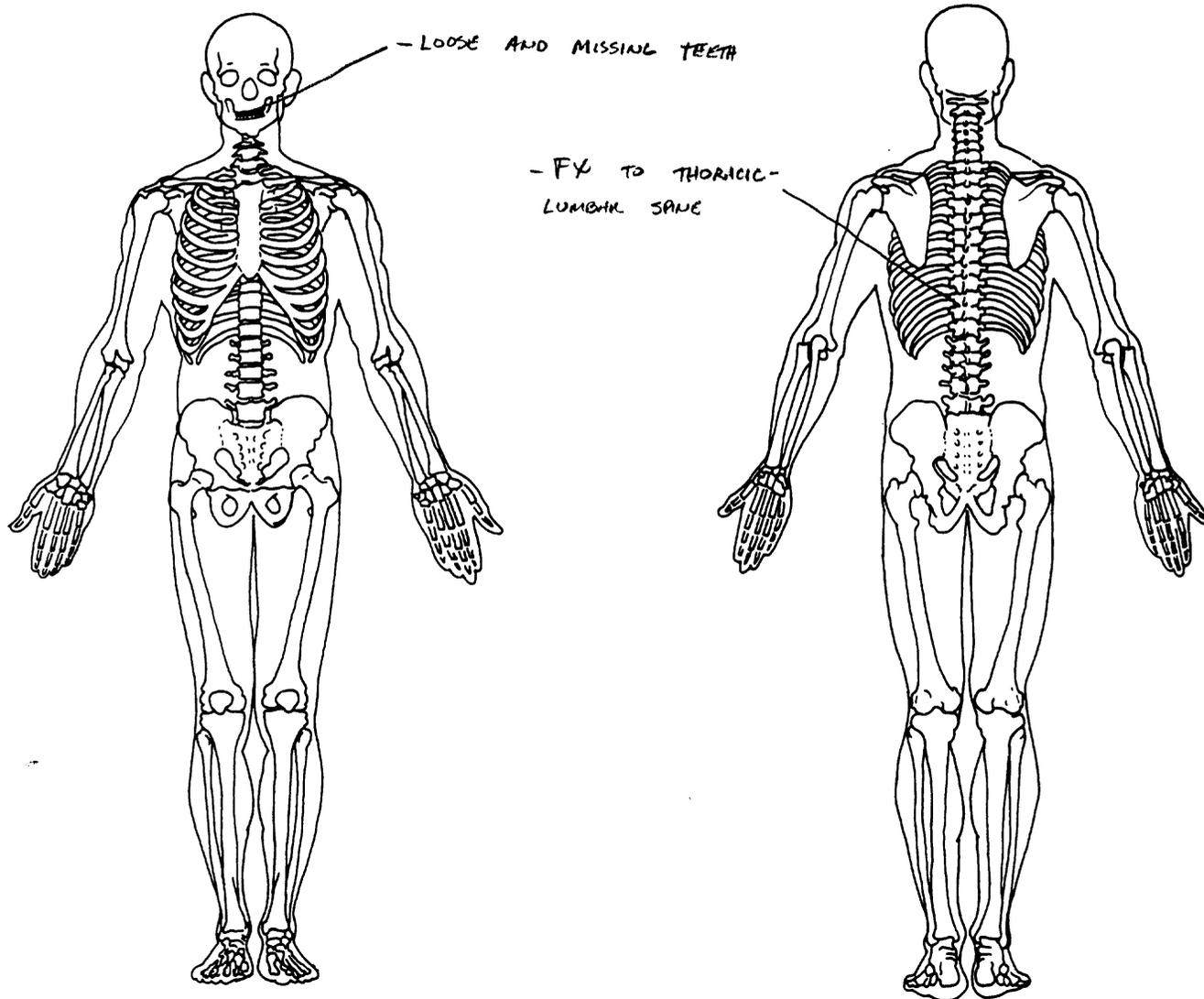
- (5) Critical injury

- (6) Maximum (untreatable)

- (7) Injured, unknown severity

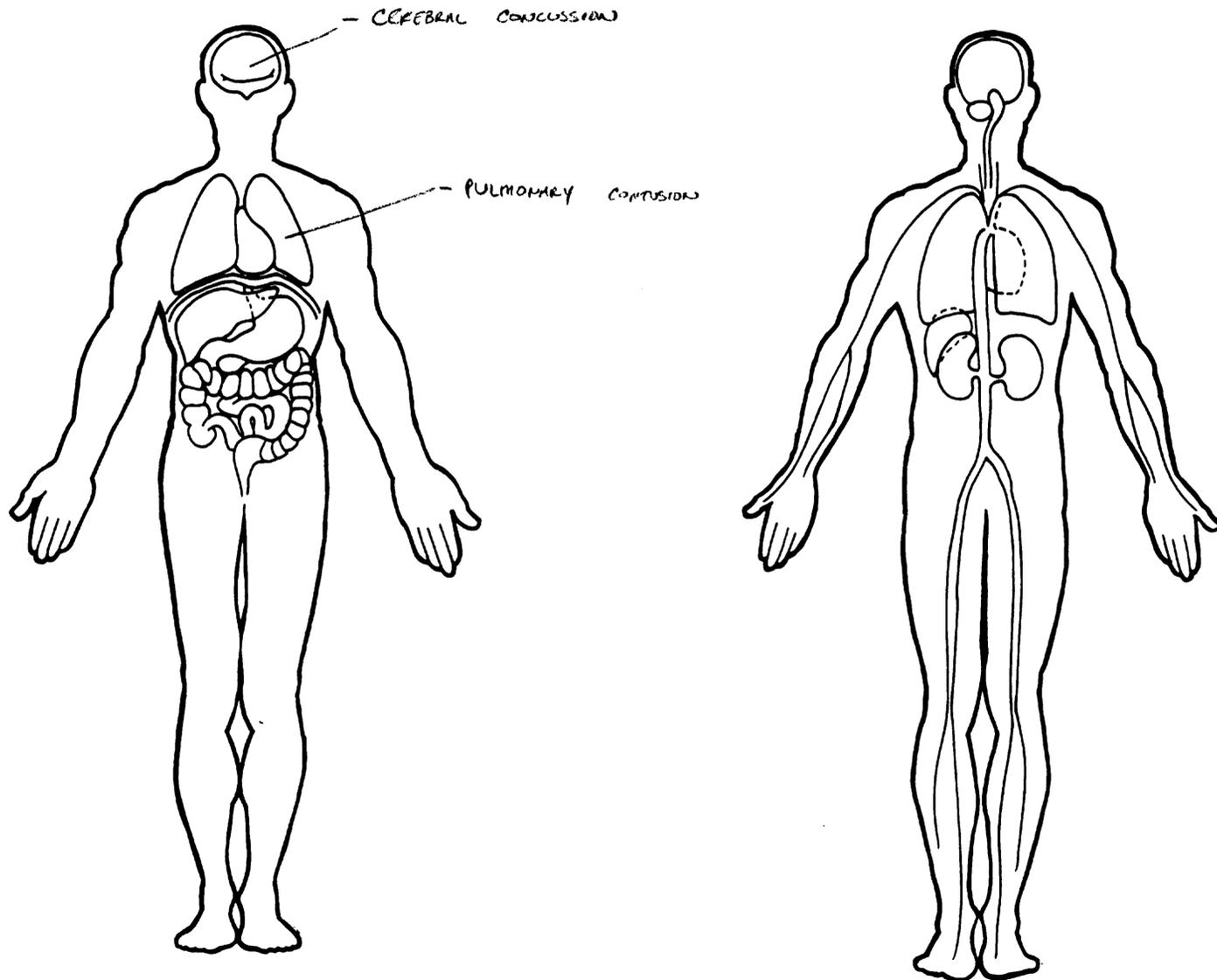
OFFICIAL INJURY DATA – SKELETAL INJURIES

Indicate the *Location, Lesion, Detail* (size, depth, fracture type, head injury clinical signs and neurological deficits), and *Source* of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



OFFICIAL INJURY DATA – INTERNAL INJURIES

Indicate the *Location, Lesion, Detail* (size, depth, fracture type, head injury clinical signs and neurological deficits), and *Source* of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



OCCUPANT INJURY FORM

1. Primary Sampling Unit Number 73 3. Vehicle Number Ø1
 2. Case Number - Stratum 143C 4. Occupant Number Ø4

INJURY DATA

Record below the actual injuries sustained by this occupant that were identified from the official and unofficial data sources. Remember not to double count an injury just because it was identified from two different sources. If greater than ten injuries have been documented, encode the balance on the Occupant Injury Supplement.

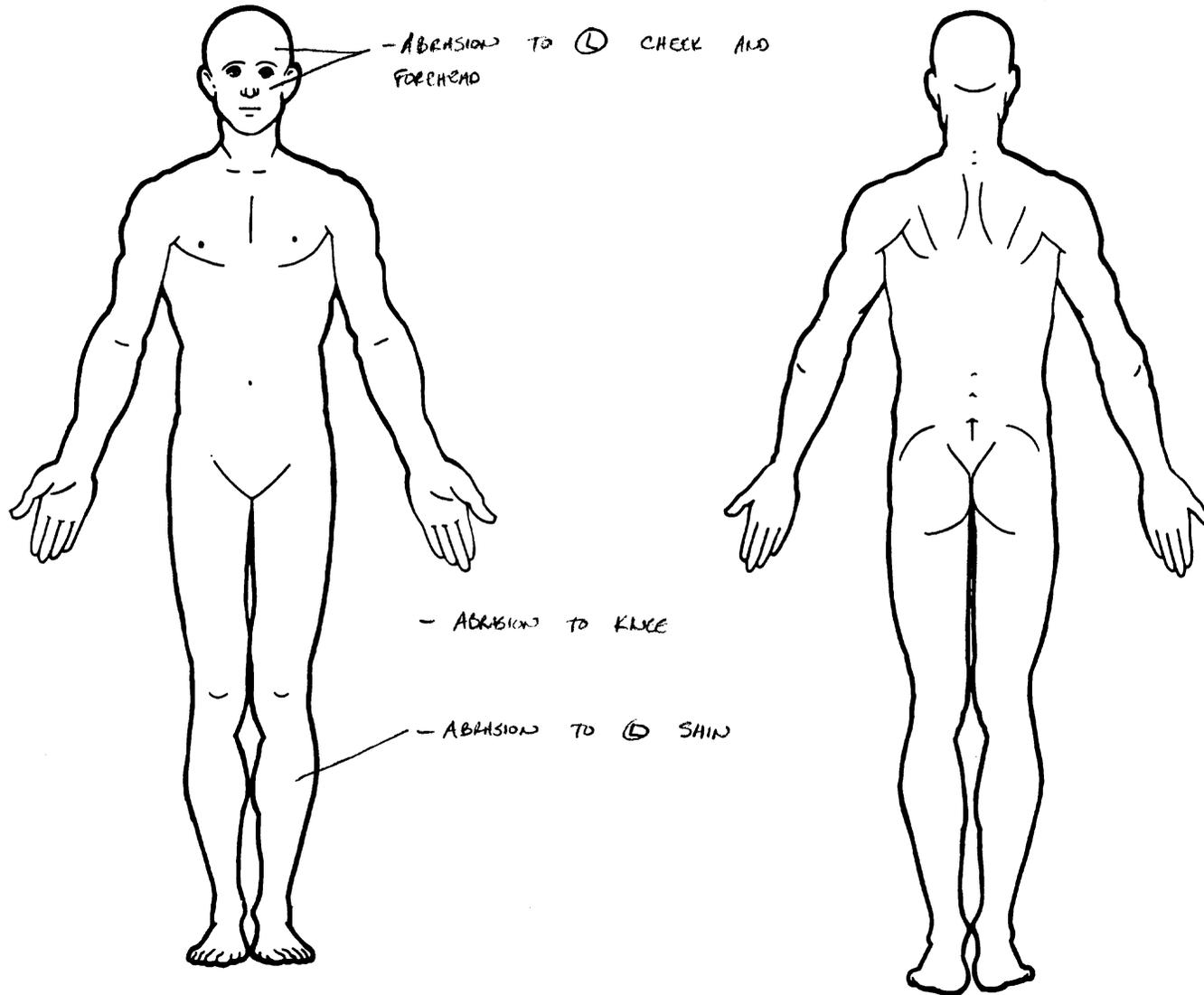
	Source of Injury Data	O.I.C.—A.I.S.					Injury Source	Injury Source Confidence Level	Direct/Indirect Injury	Occupant Area Intrusion No.
		Body Region	Aspect	Lesion	System Organ	A.I.S. Severity				
1st	5. <u>3</u>	6. <u>H</u>	7. <u>U</u>	8. <u>F</u>	9. <u>S</u>	10. <u>2</u>	11. <u>84</u>	12. <u>2</u>	13. <u>L</u>	14. <u>ØØ</u>
2nd	15. <u>3</u>	16. <u>H</u>	17. <u>U</u>	18. <u>U</u>	19. <u>B</u>	20. <u>4</u>	21. <u>84</u>	22. <u>2</u>	23. <u>L</u>	24. <u>ØØ</u>
3rd	25. <u>3</u>	26. <u>K</u>	27. <u>U</u>	28. <u>A</u>	29. <u>I</u>	30. <u>1</u>	31. <u>84</u>	32. <u>2</u>	33. <u>L</u>	34. <u>ØØ</u>
4th	35. <u>3</u>	36. <u>F</u>	37. <u>L</u>	38. <u>A</u>	39. <u>I</u>	40. <u>1</u>	41. <u>84</u>	42. <u>2</u>	43. <u>L</u>	44. <u>ØØ</u>
5th	45. <u>3</u>	46. <u>L</u>	47. <u>L</u>	48. <u>A</u>	49. <u>I</u>	50. <u>1</u>	51. <u>97</u>	52. <u>9</u>	53. <u>7</u>	54. <u>99</u>
6th	55. ___	56. ___	57. ___	58. ___	59. ___	60. ___	61. ___	62. ___	63. ___	64. ___
7th	65. ___	66. ___	67. ___	68. ___	69. ___	70. ___	71. ___	72. ___	73. ___	74. ___
8th	75. ___	76. ___	77. ___	78. ___	79. ___	80. ___	81. ___	82. ___	83. ___	84. ___
9th	85. ___	86. ___	87. ___	88. ___	89. ___	90. ___	91. ___	92. ___	93. ___	94. ___
10th	95. ___	96. ___	97. ___	98. ___	99. ___	100. ___	101. ___	102. ___	103. ___	104. ___

OCCUPANT INJURY DATA

	Source of Injury Data	O.I.C.—A.I.S.					Injury Source	Injury Source Confidence Level	Direct/Indirect Injury	Occupant Area Intrusion No.
		Body Region	Aspect	Lesion	System Organ	A.I.S. Severity				
11th	—	—	—	—	—	—	—	—	—	
12th	—	—	—	—	—	—	—	—	—	
13th	—	—	—	—	—	—	—	—	—	
14th	—	—	—	—	—	—	—	—	—	
15th	—	—	—	—	—	—	—	—	—	
16th	—	—	—	—	—	—	—	—	—	
17th	—	—	—	—	—	—	—	—	—	
18th	—	—	—	—	—	—	—	—	—	
19th	—	—	—	—	—	—	—	—	—	
20th	—	—	—	—	—	—	—	—	—	
21st	—	—	—	—	—	—	—	—	—	
22nd	—	—	—	—	—	—	—	—	—	
23rd	—	—	—	—	—	—	—	—	—	

OFFICIAL INJURY DATA – SOFT TISSUE INJURIES

Indicate the *Location, Lesion, Detail* (size, depth, fracture type, head injury clinical signs and neurological deficits), and *Source* of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



SOURCE OF INJURY DATA

OFFICIAL

- (1) Autopsy records with or without hospital medical records
- (2) Hospital medical records other than emergency room (eg. discharge summary)
- (3) Emergency room records only (including associated X-rays or other lab reports)
- (4) Private physician, walk-in or emergency clinic

UNOFFICIAL

- (5) Lay coroner report
- (6) E.M.S. personnel
- (7) Interviewee
- (8) Other source (specify): _____
- (9) Police

- (26) Left side window glass including one or more of the following: frame, window sill, A-pillar, B-pillar, or roof side rail
- (27) Other left side object (specify): _____

RIGHT SIDE

- (30) Right side interior surface, excluding hardware or armrests
- (31) Right side hardware or armrest
- (32) Right A pillar
- (33) Right B pillar
- (34) Other right pillar (specify): _____
- (35) Right side window glass or frame
- (36) Right side window glass including one or more of the following: frame, window sill, A-pillar, B-pillar, roof side rail
- (37) Other right side object (specify): _____

EXTERIOR OF OCCUPANT'S VEHICLE

- (65) Hood
- (66) Outside hardware (e.g., outside mirror, antenna)
- (67) Other exterior surface or tires (specify): _____
- (68) Unknown exterior objects

EXTERIOR OF OTHER MOTOR VEHICLE

- (70) Front bumper
- (71) Hood edge
- (72) Other front of vehicle (specify): _____
- (73) Hood
- (74) Hood ornament
- (75) Windshield, roof rail, A-pillar
- (76) Side surface
- (77) Side mirrors
- (78) Other side protrusions (specify): _____
- (79) Rear surface
- (80) Undercarriage
- (81) Tires and wheels
- (82) Other exterior of other motor vehicle (specify): _____

OTHER VEHICLE OR OBJECT IN THE ENVIRONMENT

- (83) Unknown exterior of other motor vehicle
- (84) Ground
- (85) Other vehicle or object (specify): _____

NONCONTACT INJURY

- (86) Unknown vehicle or object
- (90) Fire in vehicle
- (91) Flying glass
- (92) Other noncontact injury source (specify): _____
- (97) Injured, unknown source

INJURY SOURCE

FRONT

- (01) Windshield
- (02) Mirror
- (03) Sunvisor
- (04) Steering wheel rim
- (05) Steering wheel hub/spoke
- (06) Steering wheel (combination of codes 04 and 05)
- (07) Steering column, transmission selector lever, other attachment
- (08) Add-on equipment (e.g., CB, tape deck, air conditioner)
- (09) Left instrument panel and below
- (10) Center instrument panel and below
- (11) Right instrument panel and below
- (12) Glove compartment door
- (13) Knee bolster
- (14) Windshield including one or more of the following: front header, A-pillar, instrument panel, mirror, or steering assembly (driver side only)
- (15) Windshield including one or more of the following: front header, A-pillar, instrument panel, or mirror (passenger side only)
- (16) Other front object (specify): _____

LEFT SIDE

- (20) Left side interior surface, excluding hardware or armrests
- (21) Left side hardware or armrest
- (22) Left A pillar
- (23) Left B pillar
- (24) Other left pillar (specify): _____
- (25) Left side window glass or frame

INTERIOR

- (40) Seat, back support
- (41) Belt restraint webbing/buckle
- (42) Belt restraint B-pillar attachment point
- (43) Other restraint system component (specify): _____
- (44) Head restraint system
- (45) Air bag
- (46) Other occupants (specify): _____
- (47) Interior loose objects
- (48) Child safety seat (specify): _____
- (49) Other interior object (specify): _____

ROOF

- (50) Front header
- (51) Rear header
- (52) Roof left side rail
- (53) Roof right side rail
- (54) Roof or convertible top

FLOOR

- (56) Floor including toe pan
- (57) Floor or console mounted transmission lever, including console
- (58) Parking brake handle
- (59) Foot controls including parking brake

REAR

- (60) Backlight (rear window)
- (61) Backlight storage rack, door, etc.
- (62) Other rear object (specify): _____

INJURY SOURCE CONFIDENCE LEVEL

- (1) Certain
- (2) Probable
- (3) Possible
- (9) Unknown

DIRECT/INDIRECT INJURY

- (1) Direct contact injury
- (2) Indirect contact injury
- (3) Noncontact injury
- (7) Injured, unknown source

OCCUPANT INJURY CLASSIFICATION

O.I.C. Body Region

- (M) Abdomen
- (Q) Ankle-foot
- (A) Arm (upper)
- (B) Back-thoracolumbar spine
- (C) Chest
- (E) Elbow
- (F) Face
- (R) Forearm
- (H) Head-skull
- (U) Injured, unknown region
- (K) Knee
- (L) Leg (lower)
- (Y) Lower limb(s) (whole or unknown part)
- (N) Neck-cervical spine
- (P) Pelvic-hip
- (S) Shoulder
- (T) Thigh
- (X) Upper limb(s) (whole or unknown part)
- (O) Whole body

(W) Wrist-hand

Aspect of Injury

- (A) Anterior-front
- (B) Bilateral (rib fracture only)
- (C) Central
- (I) Inferior-lower
- (U) Injured, unknown aspect
- (L) Left
- (P) Posterior-back
- (R) Right
- (S) Superior-upper
- (W) Whole region

Lesion

- (A) Abrasion
- (M) Amputation
- (V) Avulsion
- (B) Burn
- (K) Concussion
- (C) Contusion
- (N) Crush

(G) Detachment, separation

- (D) Dislocation
- (F) Fracture
- (Z) Fracture and dislocation
- (U) Injured, unknown lesion
- (L) Laceration
- (O) Other
- (P) Perforation, puncture
- (R) Rupture
- (S) Sprain
- (T) Strain
- (E) Total severance, transection

System/Organ

- (W) All systems in region
- (A) Arteries-veins
- (B) Brain
- (D) Digestive
- (E) Ears
- (O) Eye
- (H) Heart
- (U) Injured, unknown system

(I) Integumentary

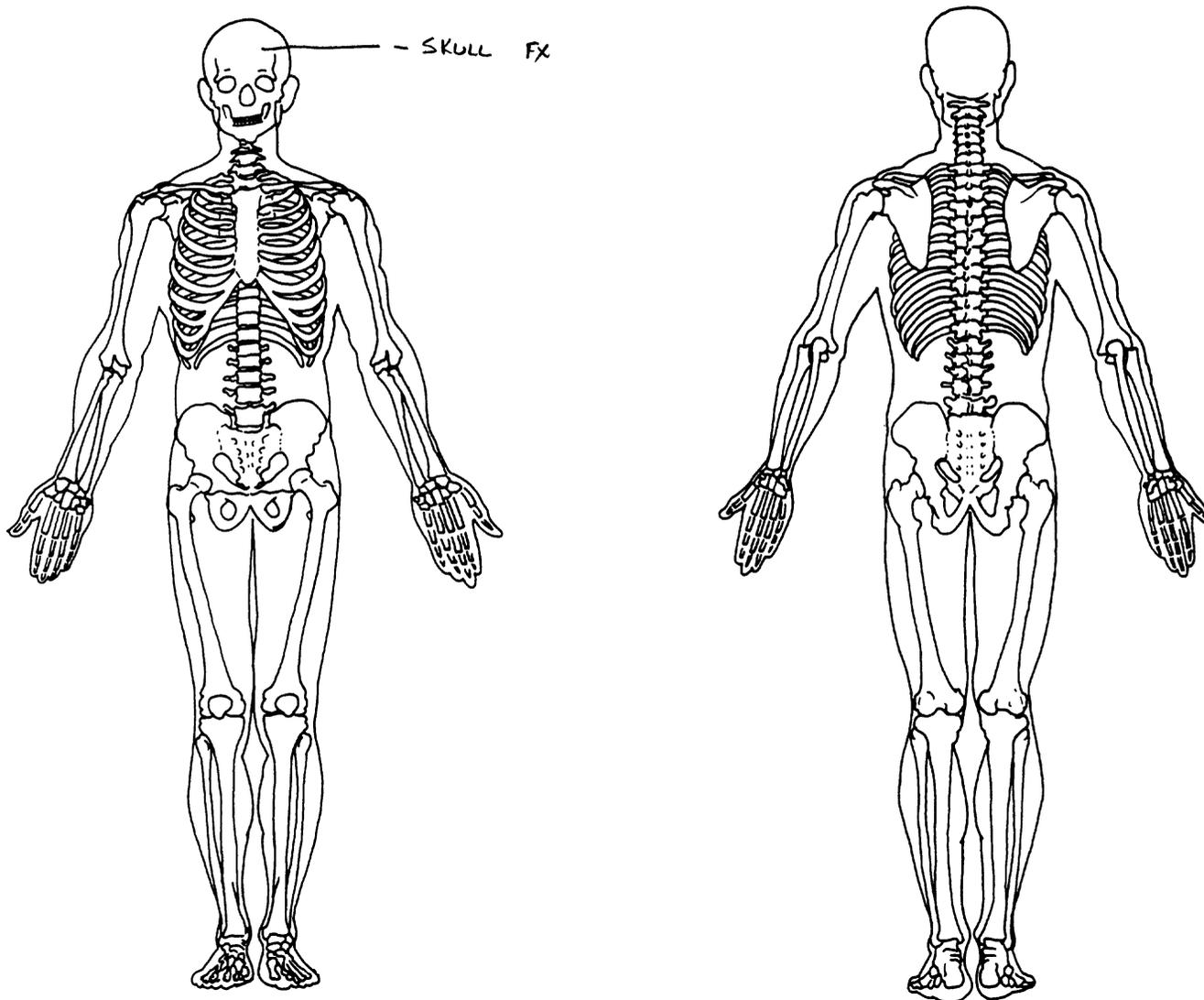
- (J) Joints
- (K) Kidneys
- (L) Liver
- (M) Muscles
- (N) Nervous system
- (P) Pulmonary-lungs
- (R) Respiratory
- (S) Skeletal
- (C) Spinal cord
- (Q) Spleen
- (T) Thyroid, other endocrine gland
- (G) Urogenital
- (V) Vertebrae

Abbreviated Injury Scale

- (1) Minor injury
- (2) Moderate injury
- (3) Serious injury
- (4) Severe injury
- (5) Critical injury
- (6) Maximum (untreatable)
- (7) Injured, unknown severity

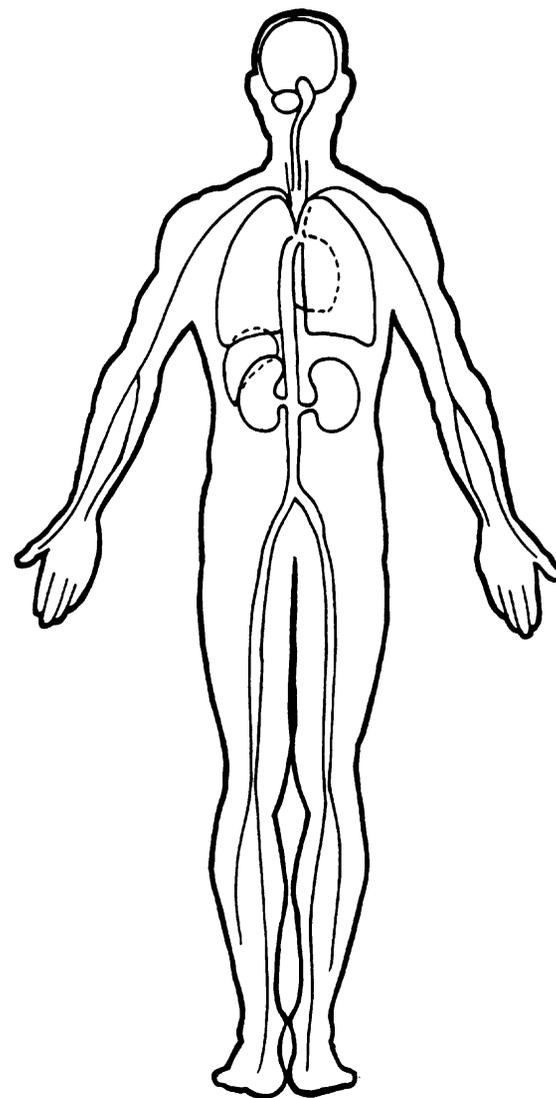
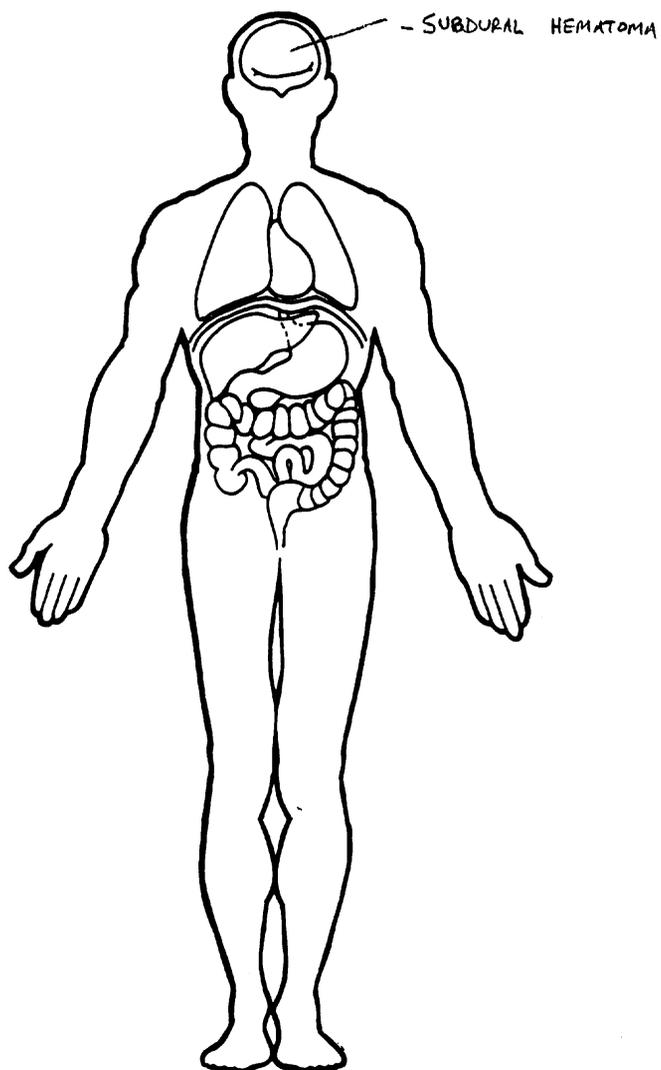
OFFICIAL INJURY DATA – SKELETAL INJURIES

Indicate the *Location, Lesion, Detail* (size, depth, fracture type, head injury clinical signs and neurological deficits), and *Source* of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



OFFICIAL INJURY DATA – INTERNAL INJURIES

Indicate the *Location, Lesion, Detail* (size, depth, fracture type, head injury clinical signs and neurological deficits), and *Source* of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



MDE ✓ [redacted] 91
No Errors

1990 ACCIDENT FORM

1. PSU Number 73 2. Case Number 143C

IDENTIFICATION

3. No. of G.V. Forms Sub. 01 4. Accident Date [redacted]/90 5. Accident Time 0854

SPECIAL STUDIES INDICATORS

6. SS12 0 7. SS13 0 8. SS14 0 9. SS15 0 10. SS16 0

NUMBER OF EVENTS 11. Number of Recorded Events in Accident 01

ACCIDENT EVENTS

Accident Sequence Number	Vehicle Number	Class of Vehicle	General Area of Damage	Veh. Num. or Obj. Cont.	Class of Vehicle	General Area of Damage
012. 01	013. 01	014. 01	015. T	016. 31	017. 00	018. N

1990 GENERAL VEHICLE FORM

1. PSU Number 73
2. Case Number 143C
3. Vehicle Number 01

VEHICLE IDENTIFICATION

4. Model Year 87
5. Make 20
6. Model 032
7. Body Type 04
8. VIN 1Y1SK5147HZ [REDACTED]

OFFICIAL RECORDS

9. Police Reported Disposition 1
10. Police Reported Travel Speed 99
11. Police Rep. Alcohol/Drug Pres. 0
12. Alcohol Test Result for Driver 96

ACCIDENT RELATED

13. Speed Limit 55
14. Attempted Avoid. Manuever 04
15. Accident Type 09

OCCUPANT RELATED

16. Driver Presence in Vehicle 1
17. No. Occupants This Vehicle 04
18. No. Occupant Forms Submitted 04

VEHICLE WEIGHT ITEMS

19. Vehicle Curb Weight 022
20. Vehicle Cargo Weight 00

RECONSTRUCTION DATA

21. Towed Trailing Unit 0
22. Trajectory Data Documented 0
23. Post Col. Cond. of Tree/Pole 0
24. Rollover 4

OVERRIDE/UNDERRIDE (this vehicle)

25. F 0 26. R 0

HEADING ANGLE AT IMPACT FOR HIGHEST DELTA V

27. Heading Angle This Vehicle 997
28. Heading Angle Other Vehicle 997
29. Basis for Total Delta V 5

COMPUTER GENERATED DELTA V

30. Total Delta V 99
31. Longitudinal Component of Delta V 99
32. Lateral Component of Delta V 99
33. Energy Absorption 9999
34. Confidence in Reconstruction Program Results 0
35. Type of Vehicle Inspection 1
36. Is this an AOPS vehicle? 0

1990 VEHICLE EXTERIOR FORM

1. PSU Number 73
 2. Case Number 143C
 3. Vehicle Number 01

COLLISION DEFORMATION CLASSIFICATION
 HIGHEST DELTA "V"

Accident Sequence Number	Object Contacted	Direction of Force	Deform. Location	Specific Longitud. or lat. Location	Specific Vertical or Lateral Location	Type of Damage Distrib.	Deform. Extent
4. 01	5. 31	6. 00	7. T	8. D	9. D	10. 0	11. 03

SECOND HIGHEST DELTA "V"

12. 13. 14. 15. 16. 17. 18. 19.

CRUSH PROFILE
 HIGHEST DELTA "V"

20. L 21. C1 C2 C3 C4 C5 C6 22. +/-D

SECOND HIGHEST DELTA "V"

23. L 24. C1 C2 C3 C4 C5 C6 25. +/-D

26. CDCS Documented but not coded 0 27. Researchers Assess. Veh. Disp. 1

28. Original Wheelbase 095.7

1990 VEHICLE INTERIOR FORM

1. PSU Number 73
2. Case Number 143C
3. Vehicle Number 01

INTEGRITY

4. Passenger Compartment 98

Door, Tailgate or Hatch opening

5. LF 1 6. RF 1 7. LR 1 8. RR 1 9. TG/H 0

Damage/Failure Associated with Door, Tailgate or
Hatch Opening in Collision

10. LF 0 11. RF 0 12. LR 0 13. RR 0 14. TG/H 0

GLAZING

Glazing Damage

15. WS 4 16. LF 6 17. RF 6 18. LR 6 19. RR 6
20. BL 6 21. Roof 8 22. Other 6

Glazing Damage from Occupant Contact

23. WS 9 24. LF 9 25. RF 9 26. LR 9 27. RR 9
28. BL 9 29. Roof 0 30. Other 0

GLAZING (Cont.)

Type of Window/Windshield Glazing

31. WS 1 32. LF 2 33. RF 2 34. LR 2 35. RR 2
36. BL 2 37. Roof 0 38. Other 2

Window Precrash Glazing Status

39. WS 1 40. LF 2 41. RF 2 42. LR 2 43. RR 2
44. BL 1 45. Roof 0 46. Other 1

OCCUPANT AREA INTRUSION

Location of Intrusion	Intruding Component	Magnitude of Intrusion	Dominant Crush Direction
47. 13	48. 12	49. 2	50. 1
51. 13	52. 06	53. 1	54. 3
55. 23	56. 07	57. 1	58. 3
59. 23	60. 13	61. 1	62. 3
63. 11	64. 13	65. 1	66. 1
67. 21	68. 07	69. 1	70. 3
71. 21	72. 13	73. 1	74. 3
75.	76.	77.	78.
79.	80.	81.	82.
83.	84.	85.	86.

STEERING COLUMN

87. Steering Column Type	1	88. Steering Column Collapse	96
89. Vertical Movement(+/-)	96	90. Lateral Movement(+/-)	96
91. Longitudinal Movement(+/-)	96	92. Steering Rim/Spoke Deform	0
93. Location of Rim/Spoke Deform	00		

INSTRUMENT PANEL

94. Odometer Reading	060,000	95. Instrument Panel Damage	0
96. Knee Bolsters Deformed	8	97. Glove Door Open	0

1990 OCCUPANT ASSESSMENT FORM

1. PSU Number 73
 2. Case Number 143C
 3. Vehicle Number 01
 4. Occupant Number 01

OCCUPANT'S CHARACTERISTICS

5. Age 34 6. Sex 1 7. Height 69 8. Weight 140 9. Role 1
 10. Seat Position 11 11. Posture 0

EJECTION/ENTRAPMENT

12. Ejection 0 13. Ejection Area 0 14. Ejection Medium 0
 15. Medium Status 0 16. Entrapment 0

RESTRAINT SYSTEM AND SEAT EVALUATION

17. Belt System Availability 4 18. Belt System Use 04
 19. Proper Use of Belt 1 20. Belt Failure Modes During Impact 1
 21. Restraint System Availability 0 22. Restraint Function 0
 23. Did Restraint Fail 0 24. Police Reported Restraint Use 4
 25. Head Restraint Type/Damage by Occupant at this Position 8
 26. Seat Type 02 27. Seat Performance 5

CHILD SAFETY SEAT

28. Child/Safety Seat Make/Model 000
 29. Type of Child Safety Seat 0
 30. Orientation 00
 31. Harness 00
 32. Shield 00
 33. Tether 00

INJURY CONSEQUENCES

34. Severity (Police Rating) 3 35. Treatment - Mortality 4
 36. Type of Med. Facility (Initial) 1 37. Hospital Stay 00
 38. Working Days Lost 97 39. Time to Death 00

MEDICALLY REPORTED CAUSE OF DEATH

40. Cause #1 00 41. Cause #2 00 42. Cause #3 00
 43. Number of Recorded Injuries 01

1990 OCCUPANT INJURY FORM

- 1. PSU NUMBER 73
- 2. CASE NUMBER 143C
- 3. VEHICLE NUMBER 01
- 4. OCCUPANT NUMBER 01

INJURY DATA

SOURCE OF INJURY DATA	BODY REGION	ASPECT	LESION	ORGAN	SYSTEM A.I.S. SEVERITY	INJURY SOURCE	INJURY CONFID. LEVEL	DIR./ INDIR. INJURY	OCC. AREA INTR. NO.
01.	7	W	L	S	J	1	04	1 2	00

1990 OCCUPANT ASSESSMENT FORM

1. PSU Number 73
 2. Case Number 143C
 3. Vehicle Number 01
 4. Occupant Number 02

OCCUPANT'S CHARACTERISTICS

5. Age 23 6. Sex 1 7. Height 70 8. Weight 140 9. Role 2
 10. Seat Position 13 11. Posture 0

EJECTION/ENTRAPMENT

12. Ejection 0 13. Ejection Area 0 14. Ejection Medium 0
 15. Medium Status 0 16. Entrapment 0

RESTRAINT SYSTEM AND SEAT EVALUATION

17. Belt System Availability 4 18. Belt System Use 04
 19. Proper Use of Belt 1 20. Belt Failure Modes During Impact 1
 21. Restraint System Availability 0 22. Restraint Function 0
 23. Did Restraint Fail 0 24. Police Reported Restraint Use 4
 25. Head Restraint Type/Damage by Occupant at this Position 8
 26. Seat Type 02 27. Seat Performance 1

CHILD SAFETY SEAT

28. Child/Safety Seat Make/Model 000
 29. Type of Child Safety Seat 0
 30. Orientation 00
 31. Harness 00
 32. Shield 00
 33. Tether 00

INJURY CONSEQUENCES

34. Severity (Police Rating) 2 35. Treatment - Mortality 4
 36. Type of Med. Facility (Initial) 1 37. Hospital Stay 00
 38. Working Days Lost 97 39. Time to Death 00

MEDICALLY REPORTED CAUSE OF DEATH

40. Cause #1 00 41. Cause #2 00 42. Cause #3 00
 43. Number of Recorded Injuries 04

1990 OCCUPANT INJURY FORM

1. PSU NUMBER 73
2. CASE NUMBER 143C
3. VEHICLE NUMBER 01
4. OCCUPANT NUMBER 02

INJURY DATA

SOURCE OF INJURY DATA	BODY REGION	ASPECT	LESION	SYSTEM ORGAN	A.I.S. SEVERITY	INJURY SOURCE	INJURY		OCC. AREA INTR. NO.	
							SOURCE CONFID.	DIR./ INDIR. INJURY		
01.	3	F	L	L	I	1	91	2	3	00
02.	3	H	L	A	I	1	54	2	1	00
03.	3	W	L	A	I	1	97	9	7	99
04.	3	W	L	L	I	1	97	9	7	99

1990 OCCUPANT ASSESSMENT FORM

1. PSU Number 73
 2. Case Number 143C
 3. Vehicle Number 01
 4. Occupant Number 03

OCCUPANT'S CHARACTERISTICS

5. Age 24 6. Sex 1 7. Height 68 8. Weight 150 9. Role 2
 10. Seat Position 21 11. Posture 0

EJECTION/ENTRAPMENT

12. Ejection 1 13. Ejection Area 6 14. Ejection Medium 3
 15. Medium Status 2 16. Entrapment 0

RESTRAINT SYSTEM AND SEAT EVALUATION

17. Belt System Availability 3 18. Belt System Use 00
 19. Proper Use of Belt 0 20. Belt Failure Modes During Impact 0
 21. Restraint System Availability 0 22. Restraint Function 0
 23. Did Restraint Fail 0 24. Police Reported Restraint Use 0
 25. Head Restraint Type/Damage by Occupant at this Position 0
 26. Seat Type 03 27. Seat Performance 1

CHILD SAFETY SEAT

28. Child/Safety Seat Make/Model 000
 29. Type of Child Safety Seat 0
 30. Orientation 00
 31. Harness 00
 32. Shield 00
 33. Tether 00

INJURY CONSEQUENCES

34. Severity (Police Rating) 3 35. Treatment - Mortality 3
 36. Type of Med. Facility (Initial) 1 37. Hospital Stay 99
 38. Working Days Lost 97 39. Time to Death 00

MEDICALLY REPORTED CAUSE OF DEATH

40. Cause #1 00 41. Cause #2 00 42. Cause #3 00
 43. Number of Recorded Injuries 12

1990 OCCUPANT INJURY FORM

1. PSU NUMBER 73
2. CASE NUMBER 143C
3. VEHICLE NUMBER 01
4. OCCUPANT NUMBER 03

INJURY DATA

SOURCE OF INJURY DATA		BODY REGION	ASPECT	LESION	SYSTEM ORGAN	A.I.S. SEVERITY	INJURY SOURCE	CONFID. LEVEL	DIR./ INDIR. INJURY	OCC. AREA INTR. NO.
01.	3	H	W	K	B	2	84	2	1	00
02.	3	C	U	C	P	3	84	2	1	00
03.	3	F	I	D	S	1	84	2	1	00
04.	3	B	I	F	S	2	84	2	1	00
05.	3	B	S	F	S	2	84	2	1	00
06.	3	H	P	L	I	1	84	2	1	00
07.	3	R	L	L	I	1	97	9	7	99
08.	3	W	L	V	I	2	97	9	7	99
09.	3	W	L	A	I	1	84	2	1	00
10.	3	W	R	A	I	1	84	2	1	00
11.	3	K	L	A	I	1	84	2	1	00
12.	3	M	R	A	I	1	84	2	1	00

1990 OCCUPANT ASSESSMENT FORM

1. PSU Number 73
 2. Case Number 143C
 3. Vehicle Number 01
 4. Occupant Number 04

OCCUPANT'S CHARACTERISTICS

5. Age 23 6. Sex 1 7. Height 68 8. Weight 165 9. Role 2
 10. Seat Position 23 11. Posture 0

EJECTION/ENTRAPMENT

12. Ejection 1 13. Ejection Area 6 14. Ejection Medium 3
 15. Medium Status 2 16. Entrapment 0

RESTRAINT SYSTEM AND SEAT EVALUATION

17. Belt System Availability 3 18. Belt System Use 00
 19. Proper Use of Belt 0 20. Belt Failure Modes During Impact 0
 21. Restraint System Availability 0 22. Restraint Function 0
 23. Did Restraint Fail 0 24. Police Reported Restraint Use 0
 25. Head Restraint Type/Damage by Occupant at this Position 0
 26. Seat Type 03 27. Seat Performance 1

CHILD SAFETY SEAT

28. Child/Safety Seat Make/Model 000
 29. Type of Child Safety Seat 0
 30. Orientation 00
 31. Harness 00
 32. Shield 00
 33. Tether 00

INJURY CONSEQUENCES

34. Severity (Police Rating) 3 35. Treatment - Mortality 3
 36. Type of Med. Facility (Initial) 1 37. Hospital Stay 99
 38. Working Days Lost 97 39. Time to Death 00

MEDICALLY REPORTED CAUSE OF DEATH

40. Cause #1 00 41. Cause #2 00 42. Cause #3 00
 43. Number of Recorded Injuries 05

1990 OCCUPANT INJURY FORM

1. PSU NUMBER 73
2. CASE NUMBER 143C
3. VEHICLE NUMBER 01
4. OCCUPANT NUMBER 04

INJURY DATA

SOURCE OF INJURY DATA	BODY REGION	ASPECT	LESION	SYSTEM ORGAN	A.I.S. SEVERITY	INJURY SOURCE	INJURY		OCC. AREA INTR. NO.
							CONFID. LEVEL	DIR./ INJURY	
01.	3	H	U	F S	2	84	2	1	00
02.	3	H	U	U B	4	84	2	1	00
03.	3	K	U	A I	1	84	2	1	00
04.	3	F	L	A I	1	84	2	1	00
05.	3	L	L	A I	1	97	9	7	99

1990 NATIONAL ACCIDENT SAMPLING SYSTEM

ERROR SUMMARY SCREEN

1991

CURRENT VERSION: 3.03

FORM NAME	NUMBER OF DOLLAR SIGNS	NUMBER OF LEVEL 1 ERRORS	NUMBER OF LEVEL 2 ERRORS	VERSION NUMBER CONSISTENT
Accident	0	0	0	Y
General Vehicle	0	0	0	Y
Vehicle Exterior	0	0	0	Y
Vehicle Interior	0	0	0	Y
Occupant Assessment	0	0	0	Y
Occupant Injury	0	0	0	Y
Total Inter Errors		0	0	
Total Case Errors	0	0	0	

1990 NATIONAL ACCIDENT SAMPLING SYSTEM

ERROR SUMMARY SCREEN

1991

CURRENT VERSION: 3.03

FORM NAME	NUMBER OF DOLLAR SIGNS	NUMBER OF LEVEL 1 ERRORS	NUMBER OF LEVEL 2 ERRORS	VERSION NUMBER CONSISTENT
Accident	0	0	0	Y
General Vehicle	0	0	0	Y
Vehicle Exterior	0	0	0	Y
Vehicle Interior	0	0	0	Y
Occupant Assessment	0	0	0	Y
Occupant Injury	0	0	0	Y
Total Inter Errors		0	0	
Total Case Errors	0	0	0	



PSU 73-143C (1990) #1



PSU 73-143C (1990) #2



PSU 73-143C (1990) #3



PSU 73-143C (1990) #4



PSU 73-143C (1990) #5



PSU 73-143C (1990) #6



PSU 73-143C (1990) #7



PSU 73-143C (1990) #8



PSU 73-143C (1990) #9



PSU 73-143C (1990) #10



PSU 73-143C (1990) #11



PSU 73-143C (1990) #12



PSU 73-143C (1990) #13



PSU 73-143C (1990) #14



PSU 73-143C (1990) #15



PSU 73-143C (1990) #16



PSU 73-143C (1990) #17



PSU 73-143C (1990) #18



PSU 73-143C (1990) #19



PSU 73-143C (1990) #20



PSU 73-143C (1990) #21



PSU 73-143C (1990) #22



PSU 73-143C (1990) #23



PSU 73-143C (1990) #24



PSU 73-143C (1980) #25



PSU 73-143C (1990) #26



PSU 73-143C (1990) #27



PSU 73-143C (1990) #28



PSU 73-143C (1990) #29



PSU 73-143C (1990) #30



PSU 73-143C (1990) #31



PSU 73-143C (1990) #32



PSU 73-143C (1990) #33



PSU 73-143C (1990) #34



PSU 73-143C (1990) #35



PSU 73-143C (1990) #38



PSU 73-143C (1990) #37



PSU 73-143C (1990) #38



PSU 73-143C (1990) #39



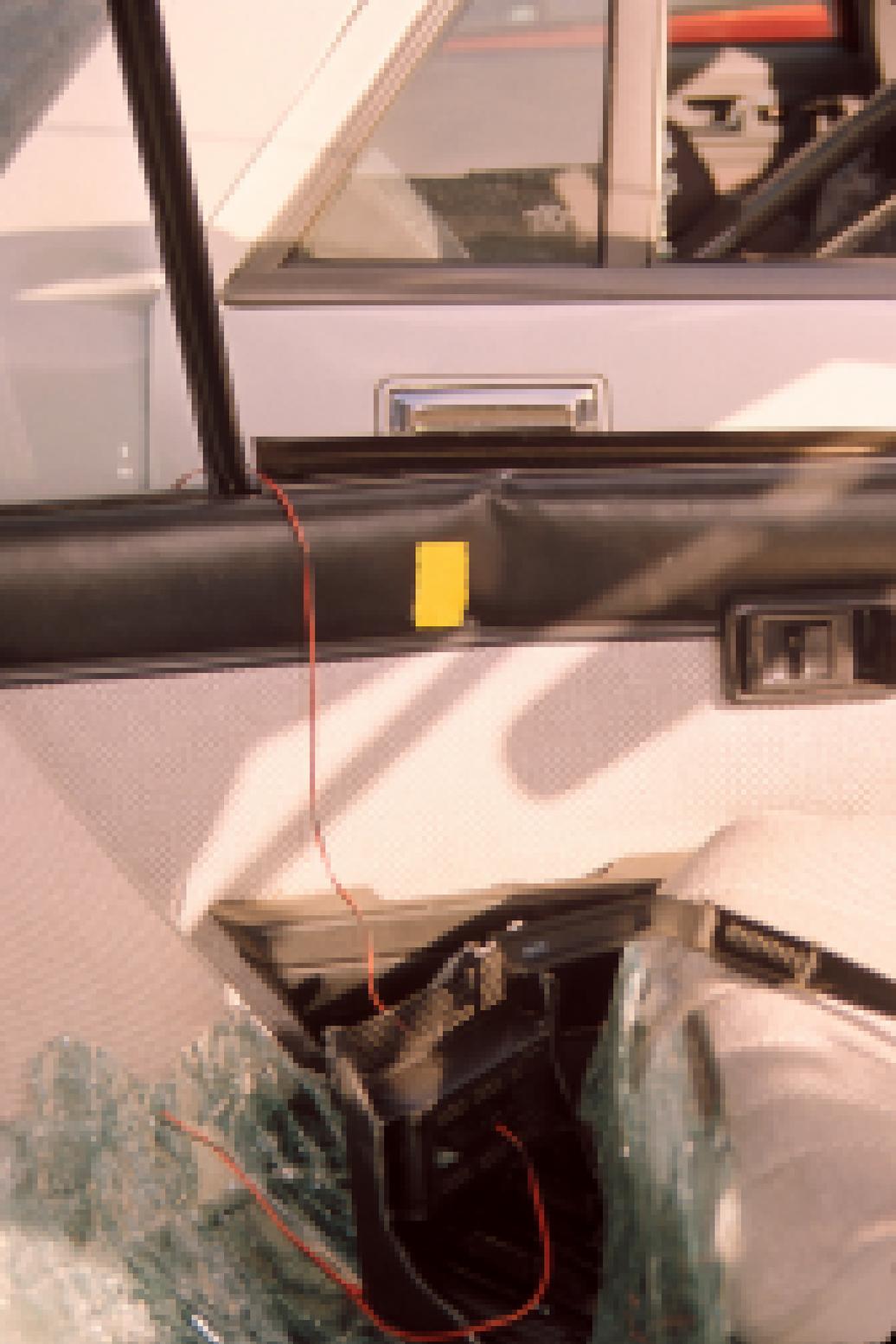
PSU 73-143C (1990) #40



PSU 73-143C (1990) #41



PSU 73-143C (1990) #42



PSU 73-143C (1990) #43



PSU 73-143C (1990) #44



PSU 73-143C (1990) #45



PSU 73-143C (1990) #46



PSU 73-143C (1990) #47



PSU 73-143C (1990) #48



PSU 73-143C (1990) #49



PSU 73-143C (1980) #50



PSU 73-143C (1990) #51