



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 45 CASE NO. 210A TYPE OF ACCIDENT Van/Train - Intersecting Paths

## 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.)

Vehicle 1 was traveling Northbound on a two lane road, crossing two sets of railroad tracks. Vehicle 2 was traveling Westbound and contacted the right side of Vehicle 1 with its front. Vehicle 2 pushed Vehicle 1 approximately .3 miles after impact.

## B. VEHICLE PROFILE(S)

Vehicle No.	Class of Vehicle	Year/Make/Model	Most Severe Damage Based on Vehicle Inspection		Component Failure
			Damage Plane	Severity Description	
1	Passenger Van	1994 Dodge Caravan	Right	Severe	None
2	Other Vehicle	1991 GM S066 Train	Front	Unknown	Unknown

**DO NOT SANITIZE THIS FORM**

### C. PERSON PROFILE(S)

Vehicle No.	Person Role	Seat Position	Restraint Use	Most Severe Injury (TO BE COMPLETED BY ZONE CENTER)			
				Body Region	Injury Type	AIS	Injury Source
1	Driver	Fr Left	Lap & Shoulder Air Bag	HEAD	BRAIN EDEMA	3	POSSIBLE (R) SIDE DOOR INTERIOR SURFACE
2	Driver	-----	Non-CDS Vehicle -----				

**Body Region**

Abdomen  
Ankle-foot  
Arm (upper)  
Back-thoracolumbar spine  
Chest  
Elbow  
Face  
Forearm  
Head-skull  
Knee  
Leg (lower)  
Lower limbs(s) (whole or unknown part)  
Neck-cervical spine  
Pelvic-hip  
Shoulder  
Thigh  
Upper limb(s) (whole or unknown part)  
Whole body  
Wrist-hand

Brain  
Ears  
Eye  
Heart  
Kidneys  
Liver  
Mouth  
Noise  
Pulmonary-lungs  
Spleen  
Thyroid, other endocrine gland  
Vertebrae

**Injury Type**

Abrasion  
Amputation  
Avulsion  
Burn  
Concussion  
Contusion  
Crush  
Detachment, separation

Dislocation  
Fracture  
Fracture and dislocation  
Laceration  
Other  
Perforation, puncture  
Rupture  
Sprain  
Strain  
Total severance, transection  
Unknown

**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

**DO NOT SANITIZE THIS FORM**



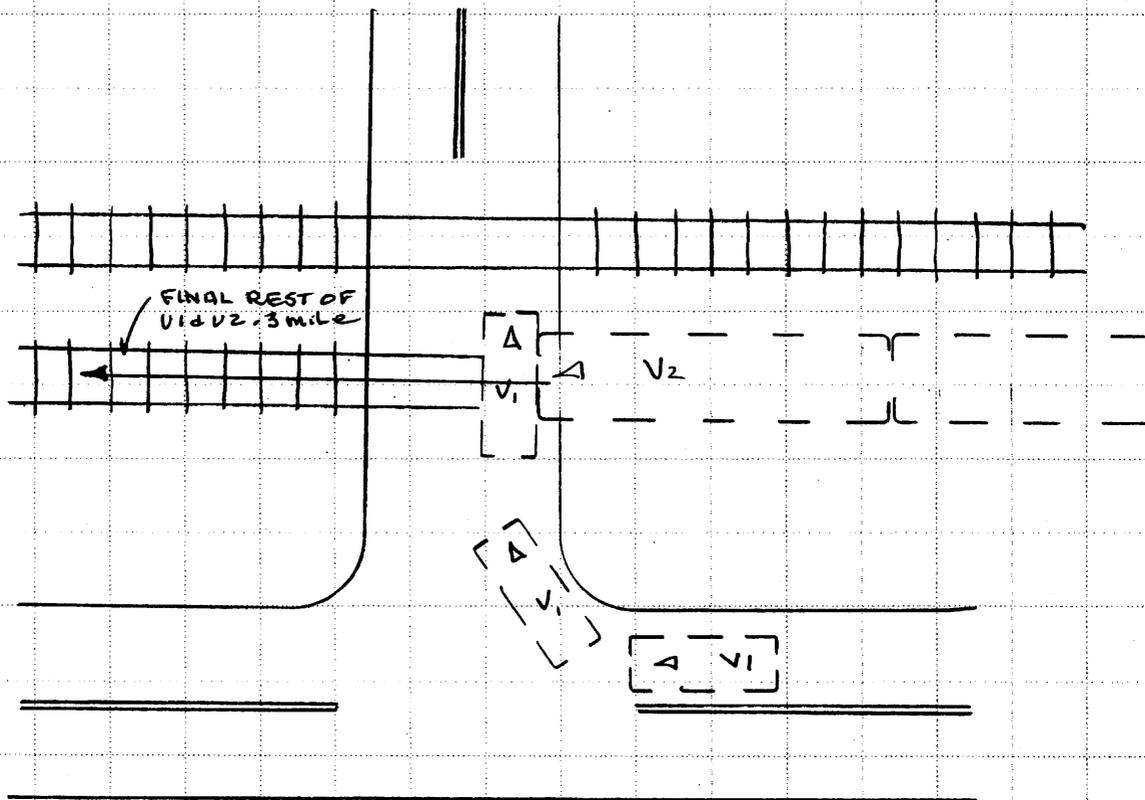
# ACCIDENT COLLISION DIAGRAM

PSU No. 45 Case Number - Stratum 210A

Indicate  
North



NOTES  $V_1$  &  $V_2$  AT FRP ARE AT THE SAME POSITION AS  
THEY ARE AT IMPACT, ONLY .3 MILE FROM POI.



40°

NO PHYSICAL EVIDENCE

← 6.3 →

15

↑  
26  
↓

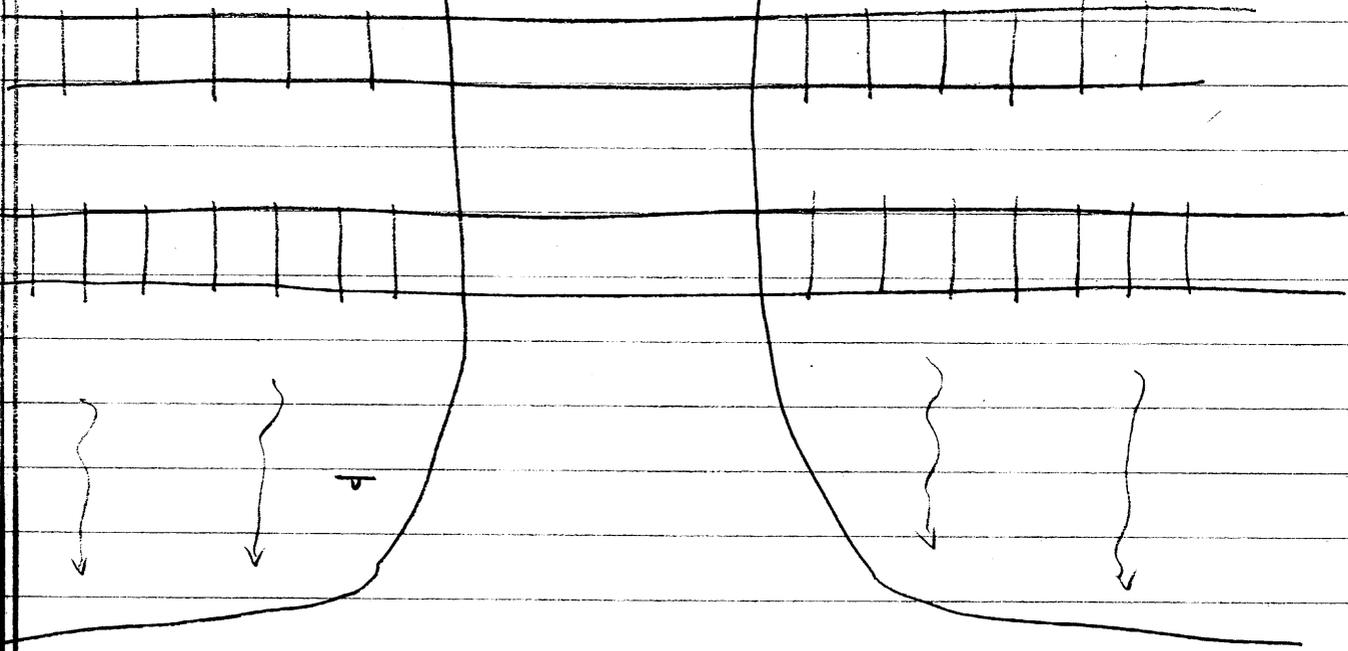
15

↑

6.8

↓

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# ACCIDENT FORM

1. Primary Sampling Unit Number 45  
2. Case Number - Stratum 210A

## IDENTIFICATION

3. Number of General Vehicle Forms Submitted 01  
4. Date of Accident (Month, Day, Year) [REDACTED] 9 3  
5. Time of Accident 11 22

Code reported military time of accident.

NOTE: Midnight = 2400  
Unknown = 9999

## SPECIAL STUDIES - INDICATORS

Check (✓) each special study (SS14-SS18 below) that has been completed; code 1 for the checked special studies and 0 for the special studies not checked.

6. \_\_\_ SS14 Fatal AOPS 0  
7. \_\_\_ SS15 Administrative Use 0  
8. \_\_\_ SS16 \_\_\_\_\_ 0  
9. \_\_\_ SS17 \_\_\_\_\_ 0  
10. \_\_\_ SS18 \_\_\_\_\_ 0

## NUMBER OF EVENTS

11. Number of Recorded Events in This Accident 01  
Code the number of events which occurred in this accident.

## ACCIDENT EVENTS

For each event that occurred in the accident, code the lowest numbered vehicle in the left columns and the other involved vehicle or object on the right.

Accident Event Sequence Number	Vehicle Number	Class Of Vehicle	General Area of Damage	Vehicle Number or Object Contacted	Class Of Vehicle	General Area of Damage
12. <u>0 1</u>	13. <u>01</u>	14. <u>13</u>	15. <u>R</u>	16. <u>77</u>	17. <u>00</u>	18. <u>0</u>
19. <u>0 2</u>	20. _____	21. _____	22. _____	23. _____	24. _____	25. _____
26. <u>0 3</u>	27. _____	28. _____	29. _____	30. _____	31. _____	32. _____
33. <u>0 4</u>	34. _____	35. _____	36. _____	37. _____	38. _____	39. _____
40. <u>0 5</u>	41. _____	42. _____	43. _____	44. _____	45. _____	46. _____

IF GREATER THAN FIVE EVENTS, CONTINUE CODING ON THE ACCIDENT EVENT SUPPLEMENT

### CODES FOR CLASS OF VEHICLE

- (00) Not a motor vehicle
- (01) Subcompact/mini (wheelbase < 254 cm)
- (02) Compact (wheelbase ≥ 254 but < 265 cm)
- (03) Intermediate (wheelbase ≥ 265 but < 278 cm)
- (04) Full size (wheelbase ≥ 278 but < 291 cm)
- (05) Largest (wheelbase ≥ 291 cm)
- (09) Unknown passenger car size
- (11) Compact utility vehicle
- (12) Large utility vehicle (≤ 4,500 kgs GVWR)
- (13) Passenger van (≤ 4,500 kgs GVWR)
- (14) Other van (≤ 4,500 kgs GVWR)
- (15) Pickup truck (≤ 4,500 kgs GVWR)
- (18) Other truck (≤ 4,500 kgs GVWR)
- (19) Unknown light truck type
- (20) School bus
- (21) Other bus
- (22) Truck (> 4,500 kgs GVWR)
- (23) Tractor without trailer
- (24) Tractor-trailer(s)
- (25) Motored cycle
- (28) Other vehicle
- (99) Unknown

### CODES FOR GENERAL AREA OF DAMAGE (GAD)

#### CDS APPLICABLE AND OTHER VEHICLES

- (O) Not a motor vehicle
- (N) Noncollision
- (F) Front
- (R) Right side
- (L) Left side
- (B) Back
- (T) Top
- (U) Undercarriage
- (9) Unknown

#### TDC APPLICABLE VEHICLES

- (O) Not a motor vehicle
- (N) Noncollision
- (F) Front
- (R) Right side
- (L) Left side
- (B) Back of unit with cargo area (rear of trailer or straight truck)
- (D) Back (rear of tractor)
- (C) Rear of cab
- (V) Front of cargo area
- (T) Top
- (U) Undercarriage
- (9) Unknown

### CODES FOR VEHICLE NUMBER OR OBJECT CONTACTED

#### (01-30) — Vehicle Number

#### Noncollision

- (31) Overturn — rollover
- (32) Fire or explosion
- (33) Jackknife
- (34) Other intraunit damage (specify): \_\_\_\_\_

- (35) Noncollision injury
- (38) Other noncollision (specify): \_\_\_\_\_

- (39) Noncollision — details unknown

#### Collision With Fixed Object

- (41) Tree (≤ 10 cm in diameter)
- (42) Tree (> 10 cm in diameter)
- (43) Shrubbery or bush
- (44) Embankment
- (45) Breakaway pole or post (any diameter)

#### Nonbreakaway Pole or Post

- (50) Pole or post (≤ 10 cm in diameter)
- (51) Pole or post (> 10 cm but ≤ 30 cm in diameter)
- (52) Pole or post (> 30 cm in diameter)
- (53) Pole or post (diameter unknown)

- (54) Concrete traffic barrier
- (55) Impact attenuator
- (56) Other traffic barrier (includes guardrail) (specify): \_\_\_\_\_

- (57) Fence
- (58) Wall
- (59) Building
- (60) Ditch or culvert
- (61) Ground
- (62) Fire hydrant
- (63) Curb
- (64) Bridge
- (68) Other fixed object (specify): \_\_\_\_\_
- (69) Unknown fixed object

#### Collision with Nonfixed Object

- (71) Motor vehicle not in-transport
- (72) Pedestrian
- (73) Cyclist or cycle
- (74) Other nonmotorist or conveyance

- (75) Vehicle occupant
- (76) Animal
- (77) Train
- (78) Trailer, disconnected in transport
- (88) Other nonfixed object (specify): \_\_\_\_\_

- (89) Unknown nonfixed object

- (98) Other event (specify): \_\_\_\_\_

- (99) Unknown event or object

National Accident Sampling System-Crashworthiness Data System: General Vehicle Form

**OCCUPANT RELATED**

16. Driver Presence in Vehicle 1  
 (0) Driver not present  
 (1) Driver present  
 (9) Unknown

17. Number of Occupants This Vehicle 01  
 (00-96) Code actual number of occupants for this vehicle  
 (97) 97 or more  
 (99) Unknown

18. Number of Occupant Forms Submitted 01

24. Rollover 0  
 (0) No rollover (no overturning)

*Rollover (primarily about the longitudinal axis)*  
 (1) Rollover, 1 quarter turn only  
 (2) Rollover, 2 quarter turns  
 (3) Rollover, 3 quarter turns  
 (4) Rollover, 4 or more quarter turns (specify):  
 \_\_\_\_\_

(5) Rollover--end-over-end (i.e., primarily about the lateral axis)  
 (9) Rollover (overturn), details unknown

**VEHICLE WEIGHT ITEMS**

19. Vehicle Curb Weight 1,360 0  
 (364) Code weight to nearest 10 kilograms.  
 (045) Less than 450 kilograms  
 (610) 6,100 kilograms or more  
 (999) Unknown

\_\_\_\_\_, \_\_\_\_\_ lbs X .4536 = \_\_\_\_\_ kgs

Source: \_\_\_\_\_

20. Vehicle Cargo Weight 0,000 0  
 (0) Code weight to nearest 10 kilograms.  
 (000) Less than 5 kilograms  
 (450) 4,500 kilograms or more  
 (999) Unknown

\_\_\_\_\_, \_\_\_\_\_ lbs X .4536 = \_\_\_\_\_ kgs

**OVERRIDE/UNDERRIDE (THIS VEHICLE)**

25. Front Override/Underride (this Vehicle) 0

26. Rear Override/Underride (this Vehicle) 0

(0) No override/underride, or not an end-to-end impact

*Override (see specific CDC)*  
 (1) 1st CDC  
 (2) 2nd CDC  
 (3) Other not automated CDC (specify):  
 \_\_\_\_\_

*Underride (see specific CDC)*  
 (4) 1st CDC  
 (5) 2nd CDC  
 (6) Other not automated CDC (specify):  
 \_\_\_\_\_

(7) Medium/heavy truck or bus override  
 (9) Unknown

**RECONSTRUCTION DATA**

21. Towed Trailing Unit 0  
 (0) No towed unit  
 (1) Yes--towed trailing unit  
 (9) Unknown

22. Documentation of Trajectory Data for This Vehicle 0  
 (0) No  
 (1) Yes

23. Post Collision Condition of Tree or Pole (For Highest Delta V) 0  
 (0) Not collision (for highest delta V) with tree or pole  
 (1) Not damaged  
 (2) Cracked/sheared  
 (3) Tilted <45 degrees  
 (4) Tilted ≥45 degrees  
 (5) Uprooted tree  
 (6) Separated pole from base  
 (7) Pole replaced  
 (8) Other (specify):  
 \_\_\_\_\_  
 (9) Unknown

**HEADING ANGLE AT IMPACT FOR HIGHEST DELTA V**

Values: (000)-(359) Code actual value  
 (997) Noncollision  
 (998) Impact with object  
 (999) Unknown

27. Heading Angle For This Vehicle 998

28. Heading Angle For Other Vehicle 998

**OTHER DATA**

56. Driver's Zip Code

- (00000) Driver not present
- (00001) Driver not a resident of U.S. or territories  
Code actual 5-digit zip code
- (99999) Unknown

57. Driver's Race/Ethnic Origin

- (0) Driver not present
- (1) White (non-Hispanic)
- (2) Black (non-Hispanic)
- (3) White (Hispanic)
- (4) Black (Hispanic)
- (5) American Indian, Eskimo or Aleut
- (6) Asian or Pacific Islander
- (8) Other (specify): \_\_\_\_\_
- (9) Unknown

58. Vehicle Special Use (This Trip)

- (0) No special use
- (1) Taxi
- (2) Vehicle used as school bus
- (3) Vehicle used as other bus
- (4) Military
- (5) Police
- (6) Ambulance
- (7) Fire truck or car
- (8) Other (specify): \_\_\_\_\_
- (9) Unknown

**ROLLOVER DATA**

If GV07 (Body Type) ≠ 1-49, leave GV59-GV63 blank.  
If GV24 (Rollover) = 0, then GV59-GV63 must equal 0.  
If GV24 = 9, then GV59-GV63 must equal 9.

59. Rollover Initiation Type

- (0) No rollover
- (1) Trip-over
- (2) Flip-over
- (3) Turn-over
- (4) Climb-over
- (5) Fall-over
- (6) Bounce-over
- (7) Collision with another vehicle
- (8) Other rollover initiation type specify): \_\_\_\_\_
- (9) Unknown rollover initiation type

60. Location of Rollover Initiation

- (0) No rollover
- (1) On roadway
- (2) On shoulder—paved
- (3) On shoulder—unpaved
- (4) On roadside or divided trafficway median
- (9) Unknown

61. Rollover Initiation Object Contacted

00

62. Location on Vehicle Where Initial Principal Tripping Force Is Applied

0

- (0) No rollover
- (1) Wheels/tires
- (2) Side plane
- (3) End plane
- (4) Undercarriage
- (5) Other location on vehicle (specify): \_\_\_\_\_
- (8) Non-contact rollover forces (specify): \_\_\_\_\_
- (9) Unknown

63. Direction of Initial Roll

0

- (0) No rollover
- (1) Roll right - primarily about the longitudinal axis
- (2) Roll left - primarily about the longitudinal axis
- (5) End-over-end (i.e., primarily about the lateral axis)
- (9) Unknown roll direction

**PRECRASH DATA**

64. Pre-Event Movement (Prior to Recognition of Critical Event)

01

- (01) Going straight
- (02) Slowing or stopping in traffic lane
- (03) Starting in traffic lane
- (04) Stopped in traffic lane
- (05) Passing or overtaking another vehicle
- (06) Disabled or parked in travel lane
- (07) Leaving a parking position
- (08) Entering a parking position
- (09) Turning right
- (10) Turning left
- (11) Making a U-turn
- (12) Backing up (other than for parking position)
- (13) Negotiating a curve
- (14) Changing lanes
- (15) Merging
- (16) Successful avoidance maneuver to a previous critical event
- (97) Other (specify): \_\_\_\_\_
- (98) No driver present
- (99) Unknown

## CODES FOR ROLLOVER INITIATION OBJECT CONTACTED

- (00) No rollover
- (01-30) — Vehicle Number

### Noncollision

- (31) Turn-over — fall-over
- (33) Jackknife

### Collision With Fixed Object

- (41) Tree ( $\leq 10$  cm in diameter)
- (42) Tree ( $> 10$  cm in diameter)
- (43) Shrubbery or bush
- (44) Embankment

- (45) Breakaway pole or post (any diameter)

### Nonbreakaway Pole or Post

- (50) Pole or post ( $\leq 10$  cm in diameter)
- (51) Pole or post ( $> 10$  cm but  $\leq 30$  cm in diameter)
- (52) Pole or post ( $> 30$  cm in diameter)
- (53) Pole or post (diameter unknown)

- (54) Concrete traffic barrier
- (55) Impact attenuator
- (56) Other traffic barrier (includes guardrail)  
(specify): \_\_\_\_\_

- (57) Fence
- (58) Wall
- (59) Building
- (60) Ditch or culvert
- (61) Ground
- (62) Fire hydrant
- (63) Curb
- (64) Bridge
- (68) Other fixed object (specify):  
\_\_\_\_\_

- (69) Unknown fixed object

### Collision with Nonfixed Object

- (71) Motor vehicle not in-transport
- (76) Animal
- (77) Train
- (78) Trailer, disconnected in transport
- (88) Other nonfixed object (specify):  
\_\_\_\_\_

- (89) Unknown nonfixed object

- (98) Other event (specify):  
\_\_\_\_\_

- (99) Unknown event or object



# INTERIOR VEHICLE FORM

1. Primary Sampling Unit Number 45  
 2. Case Number - Stratum 210A  
 3. Vehicle Number 01

## INTEGRITY

4. Passenger Compartment Integrity 12  
 (00) No integrity loss

Yes, Integrity Was Lost Through

- (01) Windshield
- (02) Door (side)
- (03) Door/hatch (back door)
- (04) Roof
- (05) Roof glass
- (06) Side window
- (07) Rear window (backlight)
- (08) Roof and roof glass
- (09) Windshield and door (side)
- (10) Windshield and roof
- (11) Side and rear window (side window and backlight)
- (12) Windshield and side window
- (13) Door and side window
- (98) Other combination of above (specify):

(99) Unknown

Door, Tailgate or Hatch Opening

5. LF 3 6. RF 3 7. LR 0 8. RR 3 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 2 16. LF 0 17. RF 6 18. LR 6 19. RR 6  
 20. BL 0 21. Roof 8 22. Other 6

- (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 0 24. LF 0 25. RF 0 26. LR 0 27. RR 0  
 28. BL 0 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 IV31 Through IV46 As 0

Type of Window/Windshield Glazing

31. WS 1 32. LF 0 33. RF 3 34. LR 3 35. RR 3  
 36. BL 0 37. Roof 0 38. Other 3

- (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

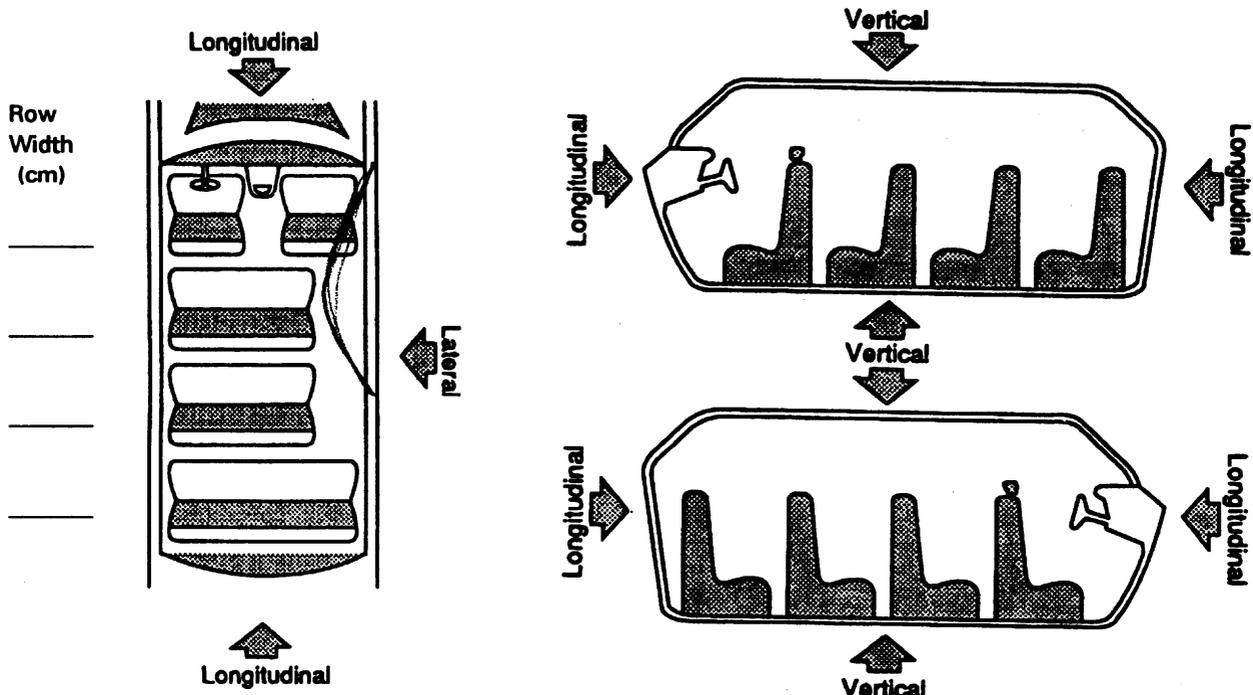
Window Precrash Glazing Status

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

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

# INTRUSION WORKSHEET

Note: Sketch intruded areas



LOCATION OF INTRUSION	INTRUDED COMPONENT	(All Measurements Are In Centimeters)				DOMINANT CRUSH DIRECTION		
		COMPARISON VALUE	-	INTRUDED VALUE	=		INTRUSION	
13	B-PILLAR	70.0	-	12.0	=	58.0	3	2
13	ROOF SIDE RAIL	68.0	-	14.0	=	54.0	3	3
23	DOOR	65.0	-	40.0	=	25.0	3	9
23	ROOF SIDE RAIL	65.0	-	35.0	=	30.0	3	8
13	F. SEAT BACK	90.0	-	31.0	=	59.0	3	1
13	CUSHION	0	-	13.0	=	13.0	1	10
11	WINDSHIELD	0	-	10.0	=	10.0	2	
12	"	0	-	30.0	=	30.0	2	6
13	"	0	-	30.0	=	30.0	2	7
23	SILL	0	-	35.0	=	35.0	3	4
13	"	0	-	31.0	=	31.0	3	5
13	FLOOR PAN	0	-	8.0	=	8.0	1	
13	TRE PAN	60.0	-	50.0	=	10.0	2	
			-		=			
			-		=			

Document no more than the 15 most severe intrusions

UNABLE TO ACCESS INTERIOR

**OCCUPANT AREA INTRUSION**

Note: If no intrusions, leave variables IV47-IV86 blank.

	Location of Intrusion	Intruding Component	Magnitude of Intrusion	Dominant Crush Direction
1st	47. <u>13</u>	48. <u>19</u>	49. <u>5</u>	50. <u>3</u>
2nd	51. <u>13</u>	52. <u>07</u>	53. <u>5</u>	54. <u>3</u>
3rd	55. <u>13</u>	56. <u>13</u>	57. <u>5</u>	58. <u>3</u>
4th	59. <u>23</u>	60. <u>17</u>	61. <u>4</u>	62. <u>3</u>
5th	63. <u>13</u>	64. <u>17</u>	65. <u>4</u>	66. <u>3</u>
6th	67. <u>12</u>	68. <u>14</u>	69. <u>4</u>	70. <u>2</u>
7th	71. <u>13</u>	72. <u>14</u>	73. <u>4</u>	74. <u>2</u>
8th	75. <u>23</u>	76. <u>13</u>	77. <u>4</u>	78. <u>3</u>
9th	79. <u>23</u>	80. <u>10</u>	81. <u>3</u>	82. <u>3</u>
10th	83. <u>13</u>	84. <u>24</u>	85. <u>2</u>	86. <u>1</u>

**INTRUDING COMPONENT**

*Interior Components*

- (01) Steering assembly
- (02) Instrument panel left
- (03) Instrument panel center
- (04) Instrument panel right
- (05) Toe pan
- (06) A (A1/A2)-pillar
- (07) B-pillar ✓
- (08) C-pillar
- (09) D-pillar
- (10) Door panel (side) ✓
- (12) Roof (or convertible top)
- (13) Roof side rail ✓
- (14) Windshield ✓✓
- (15) Windshield header
- (16) Window frame
- (17) Floor pan (includes sill) ✓✓
- (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 door/panel (e.g., tailgate)
- (26) Other interior component (specify): \_\_\_\_\_
- (27) Side panel - forward of the A (A2)-pillar
- (28) Side panel - rear of the A (A2)-pillar

*Exterior Components*

- (30) Hood
- (31) Outside surface of this 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

**LOCATION OF INTRUSION**

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

**MAGNITUDE OF INTRUSION**

- (1) ≥ 3 centimeters but < 8 centimeters
- (2) ≥ 8 centimeters but < 15 centimeters
- (3) ≥ 15 centimeters but < 30 centimeters
- (4) ≥ 30 centimeters but < 46 centimeters
- (5) ≥ 46 centimeters but < 61 centimeters
- (6) ≥ 61 centimeters
- (7) Catastrophic
- (9) Unknown

**DOMINANT CRUSH DIRECTION**

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

# STEERING RIM/SPOKE DEFORMATION

(All Measurements Are in Centimeters)

COMPARISON VALUE	—	DAMAGE VALUE	=	DEFORMATION
------------------	---	--------------	---	-------------

	—		=	
	—		=	
	—		=	
	—		=	
	—		=	

**STEERING COLUMN**

87. Steering Column Type 2  
 (1) Fixed column  
 (2) Tilt column  
 (3) Telescoping column  
 (4) Tilt and telescoping column  
 (8) Other column type (specify):  
 (9) Unknown

88. Blank X X  
 (This variable is left blank so that numbering consistency can be maintained with the 1988-93 CDS.)

89. Blank X X X  
 (This variable is left blank so that numbering consistency can be maintained with the 1988-93 CDS.)

90. Blank X X X  
 (This variable is left blank so that numbering consistency can be maintained with the 1988-93 CDS.)

91. Blank X X X  
 (This variable is left blank so that numbering consistency can be maintained with the 1988-93 CDS.)

92. Steering Rim/Spoke Deformation 00  
 Code actual measured deformation to the nearest centimeter  
 (00) No steering rim deformation  
 (01-14) Actual measured value in centimeters  
 (15) 15 centimeters or more  
 (98) Observed deformation cannot be measured  
 (99) Unknown

93. Location of Steering Rim/Spoke Deformation 00  
 (00) No steering rim deformation

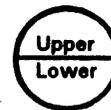
*Quarter Sections*

- (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 003,000

\_\_\_\_\_ kilometers—Code to the nearest 1,000 kilometers  
 (000) No odometer  
 (001) Less than 1,500 kilometers  
 (500) 499,500 kilometers or more  
 (999) Unknown

1,900 miles X 1.6093 = 3,058 kilometers

Source: \_\_\_\_\_

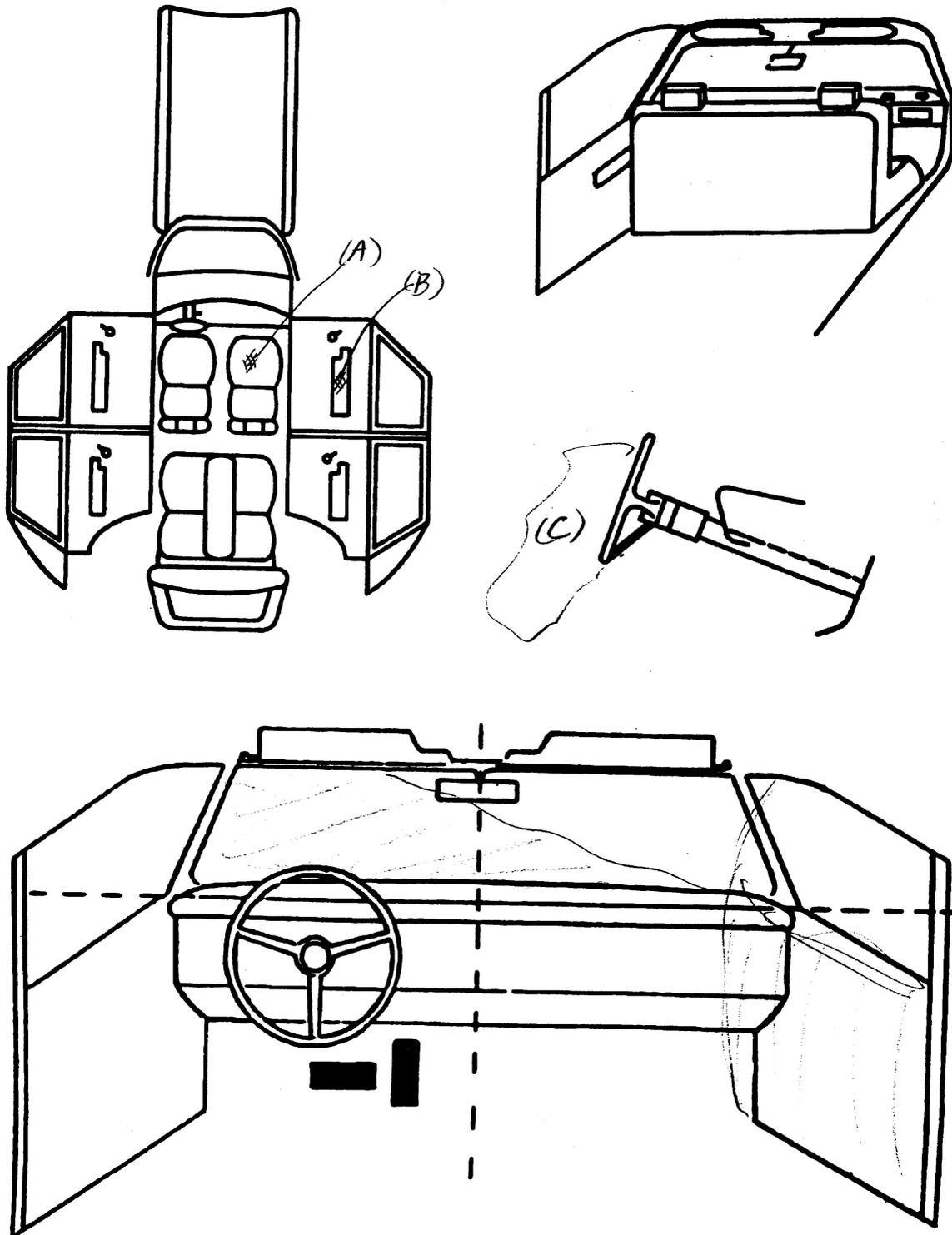
95. Instrument Panel Damage from Occupant Contact? 0  
 (0) No  
 (1) Yes  
 (9) Unknown

96. Knee Bolsters Deformed from Occupant Contact? 0  
 (0) No  
 (1) Yes  
 (8) Not present  
 (9) Unknown

97. Did Glove Compartment Door Open During Collision(s)? 1  
 (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	27	1	HEAD	BLOOD STAINS	1
B	31	1	"	" "	1
C	45	1	"	" "	1
D					
E					
F					
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 (A1/A2)-pillar, instrument panel, mirror, or steering assembly (driver side only)
- (15) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, or mirror (passenger side only)
- (16) Driver side air bag compartment cover
- (17) Passenger side air bag compartment cover
- (18) Windshield reinforced by exterior object (specify): \_\_\_\_\_
- (19) Other front object (specify): \_\_\_\_\_

**LEFT SIDE**

- (20) Left side interior surface, excluding hardware or armrests
- (21) Left side hardware or armrest
- (22) Left A (A1/A2)-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 (A1/A2)-pillar, B-pillar, or roof side rail.
- (27) Other left side object (specify): SEAT CUSHION
- (28) Left side window sill

**RIGHT SIDE**

- (30) Right side interior surface, excluding hardware or armrests
- (31) Right side hardware or armrest
- (32) Right A (A1/A2)-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 (A1/A2)-pillar, B pillar, or roof side rail.
- (37) Other right side object (specify): \_\_\_\_\_
- (38) Right side window sill

**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 (use codes "16" and "17" for injuries sustained from air bag compartment covers)

- (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
- (9) Unknown

## AUTOMATIC RESTRAINTS

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

### AIR BAGS

		Left	Right
<b>F I R S T</b>	Availability/Function		0
	Deployment		0
	Failure		0

**Air Bag System Availability/Function**

- (0) Not equipped/not available
- (1) Air bag
- Non-functional*
- (2) Air bag disconnected (specify): \_\_\_\_\_
- (3) Air bag not reinstalled
- (9) Unknown

**Air Bag System Deployment**

- (0) Not equipped/not available
- (1) Air bag deployed during accident (as a result of impact)
- (2) Air bag deployed inadvertently just prior to accident
- (3) Air bag deployed, accident sequence undetermined
- (4) Nondeployed
- (5) Unknown if deployed
- (6) Air bag deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)
- (9) Unknown

**Did Air Bag System Fail?**

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

### AUTOMATIC BELTS

		Left	Right
<b>F I R S T</b>	Availability/Function		
	Use	/	/
	Type	/	/
	Proper Use	/	/
	Failure Modes	/	/

**Automatic (Passive) Belt System Availability/Function**

- (0) Not equipped/not available
- (1) 2 point automatic belts
- (2) 3 point automatic belts
- (3) Automatic belts - type unknown

*Non-functional*

- (4) Automatic belts destroyed or rendered inoperative
- (9) Unknown

**Automatic (Passive) Belt System Use**

- (0) Not equipped/not available/destroyed or rendered inoperative
- (1) Automatic belt in use
- (2) Automatic belt not in use (manually disconnected, motorized track inoperative)
- (3) Automatic belt use unknown
- (9) Unknown

**Automatic (Passive) Belt System Type**

- (0) Not equipped/not available
- (1) Non-motorized system
- (2) Motorized system
- (9) Unknown

**Proper Use of Automatic (Passive) Belt System**

- (0) Not equipped/not available/not used
- (1) Automatic belt used properly
- (2) Automatic belt used properly with child safety seat

*Automatic Belt Used Improperly*

- (3) Automatic shoulder belt worn under arm
- (4) Automatic shoulder belt worn behind back
- (5) Automatic belt worn around more than one person
- (6) Lap portion of automatic belt worn on abdomen
- (7) Automatic lap and shoulder belt or automatic shoulder belt used improperly with child safety seat (specify): \_\_\_\_\_

- (8) Other improper use of automatic belt system (specify): \_\_\_\_\_
- (9) Unknown

**Automatic (Passive) Belt Failure Modes During Accident**

- (0) Not equipped/not available/not in use
- (1) No automatic 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 automatic belt failure (specify): \_\_\_\_\_
- (9) Unknown

**MANUAL RESTRAINTS**

**NOTES:** Encode the applicable data for each seat position in the vehicle. The attribute for the variable 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	0	4
	Use	04	00	00
	Failure Modes	1	0	0
SECOND	Availability	4	3	4
	Use	00	00	00
	Failure Modes	0	0	0
THIRD	Availability			
	Use			
	Failure Modes			
OTHER	Availability			
	Use			
	Failure Modes			

**Manual (Active) Belt System Availability**

- (0) None available
- (1) Belt removed/destroyed
- (2) Shoulder belt
- (3) Lap belt
- (4) Lap and shoulder belt
- (5) Belt available - type unknown

*Integral Belt Partially Destroyed*

- (6) Shoulder belt (lap belt destroyed/removed)
- (7) Lap belt (shoulder belt destroyed/removed)

(8) Other belt (specify): \_\_\_\_\_

(9) Unknown \_\_\_\_\_

**Manual (Active) Belt System Use**

- (00) None used, not available, or belt removed/destroyed
- (01) Inoperable (specify): \_\_\_\_\_
- (02) Shoulder belt
- (03) Lap belt
- (04) Lap and shoulder belt
- (05) Belt used - type 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 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.

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

- 1. Type of Child Safety Seat**
- (0) No child safety seat
  - (1) Infant seat
  - (2) Toddler seat
  - (3) Convertible seat
  - (4) Booster seat
  - (7) Other type child safety seat (specify):  
\_\_\_\_\_
  - (8) Unknown child safety seat type
  - (9) Unknown if child safety seat used
- 2. Child Safety Seat Orientation**
- (00) No child safety seat
  - Designed for Rear Facing for This Age/Weight
  - (01) Rear facing
  - (02) Forward facing
  - (08) Other orientation (specify):  
\_\_\_\_\_
  - (09) Unknown orientation
  - Designed for Forward Facing for This Age/Weight
  - (11) Rear facing
  - (12) Forward facing
  - (18) Other orientation (specify):  
\_\_\_\_\_
  - (19) Unknown orientation
  - Unknown Design or Orientation For This Age/Weight, or Unknown Age/Weight
  - (21) Rear facing
  - (22) Forward facing
  - (28) Other orientation (specify):  
\_\_\_\_\_
  - (29) Unknown orientation
  - (99) Unknown if child safety seat used

- 3. Child Safety Seat Harness Usage**
- 4. Child Safety Seat Shield Usage**
- 5. Child Safety Seat Tether Usage**  
Note: Options Below Are Used for Variables 3-5.
- (00) No child safety seat
  - 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
  - Designed With Harness/Shield/Tether
  - (11) Harness/shield/tether not used
  - (12) Harness/shield/tether used
  - (19) Unknown if harness/shield/tether used
  - 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
  - (99) Unknown if child safety seat used
- 6. Child Safety Seat Make/Model**  
(Specify make/model and occupant number)
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

**HEAD RESTRAINTS/SEAT EVALUATION**

NOTES: Encode the applicable data for each seat position in the vehicle. The attribute 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	1	0	2
	Seat Type	01	00	01
	Seat Performance	1	0	6
	Seat Orientation	1	0	1
SECOND	Head Restraint Type/Damage	0	0	0
	Seat Type	03	03	03
	Seat Performance	1	1	1
	Seat Orientation	1	1	1
THIRD	Head Restraint Type/Damage			
	Seat Type			
	Seat Performance			
	Seat Orientation			
OTHER	Head Restraint Type/Damage			
	Seat Type			
	Seat Performance			
	Seat Orientation			

**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: \_\_\_\_\_
- (9) Unknown

**Seat Type (this Occupant Position)**

- (00) Occupant not seated or 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., column supported)
- (09) Other seat type (specify): \_\_\_\_\_
- (10) Box mounted seat (i.e., van type)
- (99) Unknown

**Seat Performance (this Occupant Position)**

- (0) Occupant not seated or no seat
- (1) No seat performance failure(s)
- (2) Seat adjusters failed
- (3) Seat back folding locks or "seat back" failed specify: \_\_\_\_\_
- (4) Seat tracks/anchors failed
- (5) Deformed by impact of occupant
- (6) Deformed by passenger compartment intrusion (specify): Door
- (7) Combination of above (specify): \_\_\_\_\_
- (8) Other (specify): \_\_\_\_\_
- (9) Unknown

**Seat Orientation (this Occupant Position)**

- (0) Occupant not seated or no seat
- (1) Forward facing seat
- (2) Rear facing seat
- (3) Side facing seat (inward)
- (4) Side facing seat (outward)
- (8) 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 indication 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):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Occupant Number						
Ejection						
(Note on Vehicle Interior Sketch) Ejection Area						
Ejection Medium						
Medium Status						

**Ejection**

- (1) Complete ejection
- (1) 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 ASSESSMENT FORM

## OCCUPANT'S SEATING

- 1. Primary Sampling Unit Number 45
- 2. Case Number - Stratum 210A
- 3. Vehicle Number 01
- 4. Occupant Number 01

## OCCUPANT'S CHARACTERISTICS

- 5. Occupant's Age 42  
Code actual age at time of accident.  
(00) Less than one year old (specify by month):  
\_\_\_\_\_  
(97) 97 years and older  
(99) Unknown
- 6. Occupant's Sex 2  
(1) Male  
(2) Female  
(9) Unknown
- 7. Occupant's Height 999  
Code actual height to the nearest centimeter.  
(999) Unknown  
  
\_\_\_\_\_ inches X 2.54 = \_\_\_\_\_ centimeters
- 8. Occupant's Weight 999  
Code actual weight to the nearest kilogram.  
(999) Unknown  
  
\_\_\_\_\_ pounds X .4536 = \_\_\_\_\_ kilograms
- 9. Occupant's Role 1  
(1) Driver  
(2) Passenger  
(9) Unknown

- 10. Occupant's Seat Position 11  
*Front Seat*  
(11) Left side  
(12) Middle  
(13) Right side  
(14) Other (specify): \_\_\_\_\_  
(15) On or in the lap of another occupant  
  
*Second Seat*  
(21) Left side  
(22) Middle  
(23) Right side  
(24) Other (specify): \_\_\_\_\_  
(25) On or in the lap of another occupant  
  
*Third Seat*  
(31) Left side  
(32) Middle  
(33) Right side  
(34) Other (specify): \_\_\_\_\_  
(35) On or in the lap of another occupant  
  
*Fourth Seat*  
(41) Left side  
(42) Middle  
(43) Right side  
(44) Other (specify): \_\_\_\_\_  
(45) On or in the lap of another occupant  
  
(97) In or on unenclosed area  
(98) Other seat (specify): \_\_\_\_\_  
(99) Unknown
- 11. Occupant's Posture 9  
(0) Normal posture  
  
*Abnormal posture*  
(1) Kneeling or standing on seat  
(2) Lying on or across seat  
(3) Kneeling, standing or sitting in front of seat  
(4) Sitting sideways or turned to talk with another occupant or to look out a rear window  
(5) Sitting on a console  
(6) Lying back in a reclined seat position  
(7) Bracing with feet or hands on a surface in front of seat  
(8) Other abnormal posture (specify): \_\_\_\_\_  
(9) Unknown

## EJECTION/ENTRAPMENT

12. Ejection 0

- (0) No ejection
- (1) Complete ejection
- (2) Partial ejection
- (3) Ejection, unknown degree
- (9) Unknown

13. Ejection Area 0

- (0) No ejection
- (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

14. Ejection Medium 0

- (0) No ejection
- (1) Door/hatch/tailgate
- (2) Nonfixed roof structure
- (3) Fixed glazing
- (4) Nonfixed glazing (specify): \_\_\_\_\_
- (5) Integral structure
- (8) Other medium (specify): \_\_\_\_\_
- (9) Unknown

15. Medium Status (Immediately Prior To Impact) 0

- (0) No ejection
- (1) Open
- (2) Closed
- (3) Integral structure
- (9) Unknown

16. Entrapment 0

(NOTE: Entrapped means that part of the person was in the vehicle and mechanically restrained; jammed doors and immobilizing injuries by themselves are not sufficient to constitute entrapment.)

- (0) Not entrapped
- (1) Entrapped
- (9) Unknown

## RESTRAINT SYSTEM EVALUATION

17. Manual (Active) Belt System Availability 4

- (0) None available
- (1) Belt removed/destroyed
- (2) Shoulder belt
- (3) Lap belt
- (4) Lap and shoulder belt
- (5) Belt available—type unknown

*Integral Belt Partially Destroyed*

- (6) Shoulder belt (lap belt destroyed/removed)
- (7) Lap belt (shoulder belt destroyed/removed)

(8) Other belt (specify): \_\_\_\_\_

(9) Unknown \_\_\_\_\_

18. Manual (Active) Belt System Use 04

(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 \_\_\_\_\_

(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 \_\_\_\_\_

19. Proper Use of Manual (Active) Belts 1

(0) None used or not available

(1) Belt used properly

(2) Belt used properly with child safety seat

*Belt Used Improperly*

(3) Shoulder belt worn under arm

(4) Shoulder belt worn behind back or seat

(5) Belt worn around more than one person

(6) Lap belt worn on abdomen

(7) Lap belt or lap and shoulder belt used improperly with child safety seat (specify): \_\_\_\_\_

(8) Other improper use of manual belt system (specify): \_\_\_\_\_

(9) Unknown \_\_\_\_\_

20. Manual (Active) Belt Failure Modes During Accident 1

(0) No manual belt used

(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 \_\_\_\_\_

21. Air Bag System Availability/Function 1

(0) Not equipped/not available

(1) Air bag

*Non-functional*

(2) Air bag disconnected (specify): \_\_\_\_\_

(3) Air bag not reinstalled \_\_\_\_\_

(9) Unknown \_\_\_\_\_

22. Air Bag System Deployment 1

(0) Not equipped/not available

(1) Air bag deployed during accident (as a result of impact)

(2) Air bag deployed inadvertently just prior to accident

(3) Air bag deployed, accident sequence undetermined

(4) Nondeployed

(5) Unknown if deployed

(6) Air bag deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)

(9) Unknown \_\_\_\_\_

23. Are There Indications of Air Bag System Failure? 1

(0) Not equipped/not available

(1) No

(2) Yes (specify): \_\_\_\_\_

(9) Unknown \_\_\_\_\_

Note: See Variables 44 through 48 (Page 5) for information on Automatic Belts

24. Police Reported Restraint Use 5

(0) None used

(1) Police did not indicate restraint use

(2) Shoulder belt

(3) Lap belt

(4) Lap and shoulder belt

(5) Belt used, type not specified

(6) Child safety seat

(7) Other or automatic restraint (specify): \_\_\_\_\_

(8) Restrained, type unknown \_\_\_\_\_

(9) Police indicated "unknown" \_\_\_\_\_

## HEAD RESTRAINT AND SEAT EVALUATION

25. Head Restraint Type/Damage by Occupant  
at This Occupant Position 1

- (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):

\_\_\_\_\_

(9) Unknown

26. Seat Type (this Occupant Position) 01

- (00) Occupant not seated or 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., column supported)
- (09) Other seat type (specify):

\_\_\_\_\_

(10) Box mounted seat (i.e., van type)

(99) Unknown

27. Seat Performance (this Occupant Position) 1

- (0) Occupant not seated or no seat
- (1) No seat performance failure(s)
- (2) Seat adjusters failed
- (3) Seat back folding locks or "seat back" failed
- (4) Seat track/anchors failed
- (5) Deformed by impact of occupant
- (6) Deformed by passenger compartment intrusion (specify):

\_\_\_\_\_

(7) Combination of above (specify):

\_\_\_\_\_

(8) Other (specify):

\_\_\_\_\_

(9) Unknown

## CHILD SAFETY SEAT

28. Child Safety Seat Make/Model 000  
 (000) No child safety seat  
 Applicable codes are found in your NASS CDS  
 Data Collection, Coding and Editing  
 (950) Built-in child safety seat  
 (997) Other make/model (specify):

\_\_\_\_\_  
 (998) Unknown make/model  
 (999) Unknown if child safety seat used

29. Type of Child Safety Seat 0  
 (0) No child safety seat  
 (1) Infant seat  
 (2) Toddler seat  
 (3) Convertible seat  
 (4) Booster seat  
 (7) Other type child safety seat (specify):

\_\_\_\_\_  
 (8) Unknown child safety seat type  
 (9) Unknown if child safety seat used

30. Child Safety Seat Orientation 00  
 (00) No child safety seat

*Designed for Rear Facing for This Age/Weight*  
 (01) Rear facing  
 (02) Forward facing  
 (08) Other orientation (specify):

\_\_\_\_\_  
 (09) Unknown orientation

*Designed For Forward Facing for This Age/Weight*  
 (11) Rear facing  
 (12) Forward facing  
 (18) Other orientation (specify):

\_\_\_\_\_  
 (19) Unknown orientation

*Unknown Design or Orientation For This  
 Age/Weight, or Unknown Age/Weight*  
 (21) Rear facing  
 (22) Forward facing  
 (28) Other orientation (specify):

\_\_\_\_\_  
 (29) Unknown orientation

(99) Unknown if child safety seat used

31. Child Safety Seat Harness Usage 00

32. Child Safety Seat Shield Usage 00

33. Child Safety Seat Tether Usage 00

Note: Options below applicable to  
 Variables OA31-OA33.  
 (00) No child safety seat

*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

*Designed With Harness/Shield/Tether*

- (11) Harness/shield/tether not used  
 (12) Harness/shield/tether used  
 (19) Unknown if harness/shield/tether used

*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  
 (99) Unknown if child safety seat used

**INJURY CONSEQUENCES**

34. Injury Severity (Police Rating) 4

- (0) O - No injury
- (1) C - Possible injury
- (2) B - Nonincapacitating injury
- (3) A - Incapacitating injury
- (4) K - Killed
- (5) U - Injury, severity unknown
- (6) Died prior to accident
- (9) Unknown

35. Treatment - Mortality 1

- (0) No treatment
- (1) Fatal
- (2) Fatal - ruled disease (specify):

*Nonfatal*

- (3) Hospitalization
- (4) Transported and released
- (5) Treatment at scene - nontransported
- (6) Treatment later
- (8) Treatment - other (specify):
- (9) Unknown

36. Type Of Medical Facility (for Initial Treatment) 9

- (0) Not treated at a medical facility
- (1) Trauma center
- (2) Hospital
- (3) Medical clinic
- (4) Physician's office
- (5) Treatment later at medical facility
- (8) Other (specify):
- (9) Unknown

37. Hospital Stay 00

- (00) Not Hospitalized
- Code the number of days (up through 60) that the occupant stayed in hospital.
- (61) 61 days or more
- (99) Unknown

38. Working Days Lost 02

- Code the number of days (up through 60) that the occupant lost from work due to the accident
- (00) No working days lost
- (61) 61 days or more
- (62) Fatally injured
- (97) Not working prior to accident
- (99) Unknown

**STOP - GO TO VARIABLE 44 ON PAGE 7**

**VARIABLES 39 THROUGH 43 ARE COMPLETED BY THE ZONE CENTER**

39. Time to Death 03

- Code number of hours from time of accident to time of death up through 24 hours. If time of death is greater than 24 hours, code number of days. (Note: 1 day = 31, 2 days = 32, ... n days = 30 + n up through 30 days = 60)
- (00) Not fatal
- (96) Fatal - ruled disease
- (99) Unknown

40. 1st Medically Reported Cause of Death 09

41. 2nd Medically Reported Cause of Death 10

42. 3rd Medically Reported Cause of Death 11

- Code the Occupant Injury from line number(s) for the medically reported injury(s) which reportedly contributed to this occupant's death
- (00) Not fatal or no additional causes
- (97) Other result (includes fatal ruled disease) (specify):

(99) Unknown

43. Number of Recorded Injuries for This Occupant 14

- Code the actual number of injuries recorded for this occupant.
- (00) No recorded injuries
- (97) Injured, details unknown
- (99) Unknown if injured

**AUTOMATIC BELT SYSTEM**

44. Automatic (Passive) Belt System Availability/ Function 0

- (0) Not equipped/not available
- (1) 2 point automatic belts
- (2) 3 point automatic belts
- (3) Automatic belts - type unknown

*Non-functional*

- (4) Automatic belts destroyed or rendered inoperative
- (9) Unknown

45. Automatic (Passive) Belt System Use 0

- (0) Not equipped/not available/destroyed or rendered inoperative
- (1) Automatic belt in use
- (2) Automatic belt not in use (manually disconnected, motorized track inoperative) (specify):

- (3) Automatic belt use unknown
- (9) Unknown

46. Automatic (Passive) Belt System Type 0

- (0) Not equipped/not available
- (1) Non-motorized system
- (2) Motorized system
- (9) Unknown

47. Proper Use of Automatic (Passive) Belt System 0

- (0) Not equipped/not available/not used
- (1) Automatic belt used properly
- (2) Automatic belt used properly with child safety seat

*Automatic Belt Used Improperly*

- (3) Automatic shoulder belt worn under arm
- (4) Automatic shoulder belt worn behind back
- (5) Automatic belt worn around more than one person
- (6) Lap portion of automatic belt worn on abdomen
- (7) Automatic lap and shoulder belt or automatic shoulder belt used improperly with child safety seat (specify):

- (8) Other improper use of automatic belt system (specify):
- (9) Unknown

48. Automatic (Passive) Belt Failure Modes During Accident 0

- (0) Not equipped/not available/not in use
- (1) No automatic 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 automatic belt failure (specify):

- (9) Unknown

49. Seat Orientation (this Occupant Position) 1

- (0) Occupant not seated or no seat
- (1) Forward facing seat
- (2) Rear facing seat
- (3) Side facing seat (inward)
- (4) Side facing seat (outward)
- (8) Other (specify):

- (9) Unknown

**STOP - VARIABLES 50 THROUGH 52 ARE COMPLETED BY THE ZONE CENTER**

**TRAUMA DATA**

50. Glasgow Coma Scale (GCS) Score (at Medical Facility) 03

- (00) Not injured
- (01) Injured - not treated at medical facility
- (02) No GCS Score at medical facility
- (03-15) Code the actual value of the initial GCS Score recorded at medical facility.
- (97) Injured, details unknown
- (99) Unknown if injured

51. Was the Occupant Given Blood? 2

- (1) No - blood not given
- (2) Yes - blood given (specify units): PRBC - 2 units
- (9) Unknown if blood given

52. Arterial Blood Gases (ABG) - HCO<sub>3</sub> 01

- (00) Not injured
- (01) Injured, ABGs not measured or reported
- (02-50) Code the actual value of the HCO<sub>3</sub>
- (96) ABGs reported, HCO<sub>3</sub> unknown
- (97) Injured, details unknown
- (99) Unknown if injured

ARE ALL APPLICABLE MEDICAL RECORDS INCLUDED WITH INITIAL SUBMISSION? NO [ ] YES [X]

UPDATE CANDIDATE? NO [X] YES [ ]



# OCCUPANT INJURY FORM

1. Primary Sampling Unit Number <u>45</u>	3. Vehicle Number <u>01</u>
2. Case Number - Stratum <u>210A</u>	4. Occupant Number <u>01</u>

## INJURY DATA

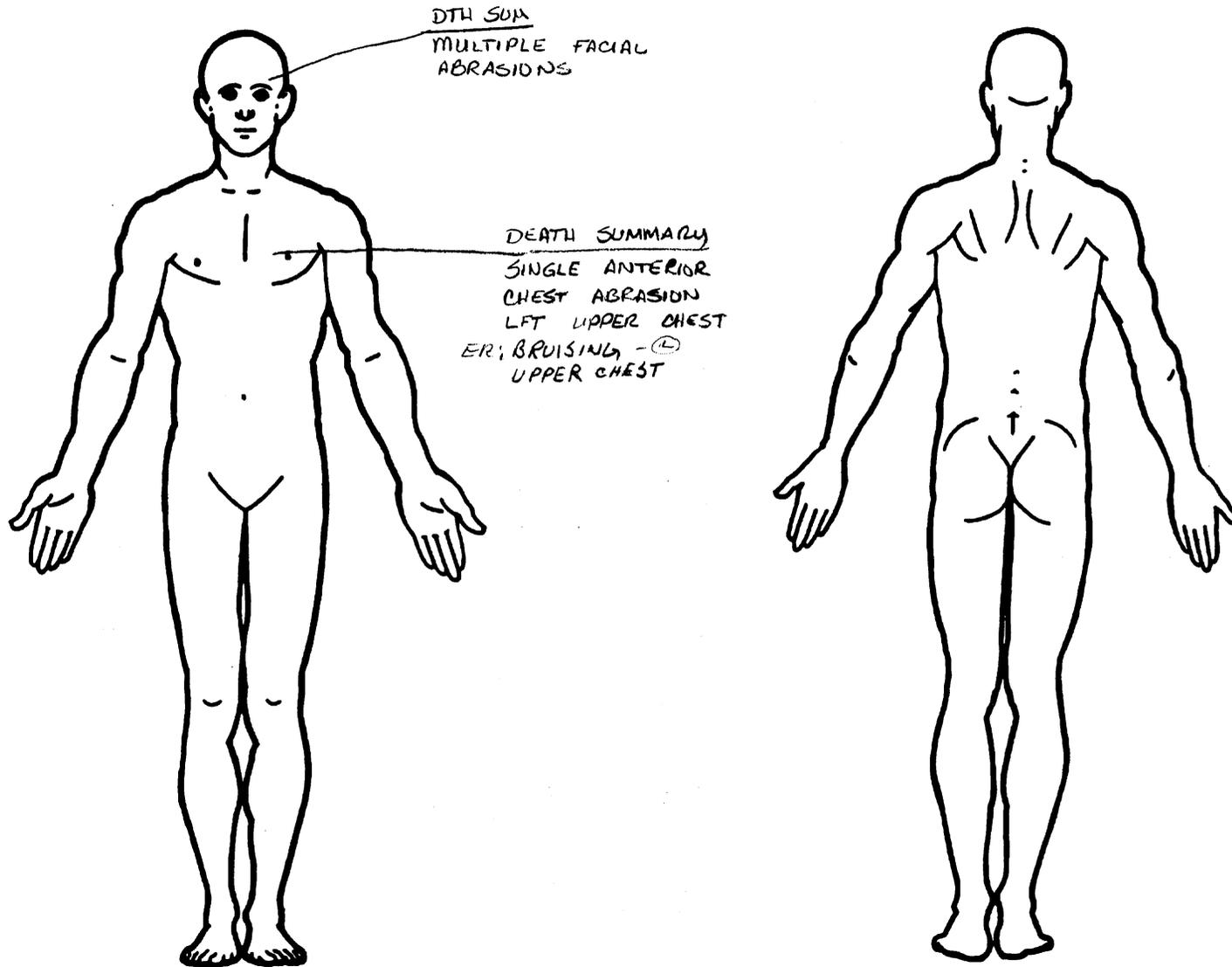
Record below the actual injuries sustained by this occupant that were identified from the official and unofficial data sources. Remember not to double count an injury just because it was identified from two different sources. If greater than ten injuries have been documented, encode the balance on the 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 Number	
	Body Region	Type of Anatomic Structure	Specific Anatomic Structure	Level of Injury	A.I.S. Severity	Aspect					
<i>facial abrasion</i> 1st	5. <u>2</u>	6. <u>2</u>	7. <u>9</u>	8. <u>02</u>	9. <u>02</u>	10. <u>1</u>	11. <u>0</u>	12. <u>91</u>	13. <u>3</u>	14. <u>3</u>	15. <u>00</u>
<i>Upper chest abrasion</i> 2nd	16. <u>2</u>	17. <u>7</u>	18. <u>9</u>	19. <u>02</u>	20. <u>02</u>	21. <u>1</u>	22. <u>2</u>	23. <u>41</u>	24. <u>3</u>	25. <u>1</u>	26. <u>00</u>
<i>facial fractures unimpacted</i> 3rd	27. <u>2</u>	28. <u>2</u>	29. <u>3</u>	30. <u>04</u>	31. <u>00</u>	32. <u>1</u>	33. <u>9</u>	34. <u>30</u>	35. <u>2</u>	36. <u>1</u>	37. <u>09</u>
<i>central base extends to foramen lacrimum &amp; carotid canal</i> 4th	38. <u>2</u>	39. <u>1</u>	40. <u>5</u>	41. <u>02</u>	42. <u>02</u>	43. <u>3</u>	44. <u>8</u>	45. <u>30</u>	46. <u>2</u>	47. <u>1</u>	48. <u>09</u>
<i>temporal fracture</i> 5th	49. <u>2</u>	50. <u>1</u>	51. <u>5</u>	52. <u>04</u>	53. <u>02</u>	54. <u>2</u>	55. <u>2</u>	56. <u>30</u>	57. <u>2</u>	58. <u>1</u>	59. <u>09</u>
<i>temporal fracture</i> 6th	60. <u>2</u>	61. <u>1</u>	62. <u>5</u>	63. <u>04</u>	64. <u>02</u>	65. <u>2</u>	66. <u>1</u>	67. <u>30</u>	68. <u>2</u>	69. <u>1</u>	70. <u>09</u>
<i>sacrum fracture</i> 7th	71. <u>2</u>	72. <u>8</u>	73. <u>5</u>	74. <u>26</u>	75. <u>00</u>	76. <u>2</u>	77. <u>6</u>	78. <u>41</u>	79. <u>2</u>	80. <u>1</u>	81. <u>00</u>
<i>superior interpubic ramus fracture</i> 8th	82. <u>2</u>	83. <u>8</u>	84. <u>5</u>	85. <u>26</u>	86. <u>00</u>	87. <u>2</u>	88. <u>5</u>	89. <u>41</u>	90. <u>2</u>	91. <u>1</u>	92. <u>00</u>
<i>orbital edema</i> 9th	93. <u>2</u>	94. <u>1</u>	95. <u>4</u>	96. <u>00</u>	97. <u>68</u>	98. <u>3</u>	99. <u>9</u>	100. <u>30</u>	101. <u>2</u>	102. <u>1</u>	103. <u>09</u>
<i>intraorbital blood</i> 10th	104. <u>2</u>	105. <u>1</u>	106. <u>4</u>	107. <u>00</u>	108. <u>78</u>	109. <u>4</u>	110. <u>1</u>	111. <u>30</u>	112. <u>2</u>	113. <u>1</u>	114. <u>09</u>



# OFFICIAL INJURY DATA — SOFT TISSUE INJURIES

Indicate the Location, Specific Anatomic Structure, 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 (e.g., 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

**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 (A1/A2)-pillar, instrument panel, mirror, or steering assembly (driver side only)
- (15) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, or mirror (passenger side only)
- (16) Driver side air bag compartment cover
- (17) Passenger side air bag compartment cover
- (18) Windshield reinforced by exterior object (specify): \_\_\_\_\_
- (19) Other front object (specify): \_\_\_\_\_

**LEFT SIDE**

- (20) Left side interior surface, excluding hardware or armrests
- (21) Left side hardware or armrest
- (22) Left A (A1/A2)-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 (A1/A2)-pillar, B-pillar, or roof side rail.
- (27) Other left side object (specify): \_\_\_\_\_

- (28) Left side window sill

**RIGHT SIDE**

- (30) Right side interior surface, excluding hardware or armrests
- (31) Right side hardware or armrest
- (32) Right A (A1/A2)-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 (A1/A2)-pillar, B-pillar, or roof side rail.
- (37) Other right side object (specify): \_\_\_\_\_

- (38) Right side window sill

**INTERIOR**

- (40) Seat, back support
- (41) Belt restraint webbing/buckle
- (42) Belt restraint B-pillar or door frame attachment point
- (43) Other restraint system component (specify): \_\_\_\_\_
- (44) Head restraint system
- (45) Air bag (use codes "16" and "17" for injuries sustained from air bag compartment covers)
- (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): \_\_\_\_\_
- (93) Air bag exhaust gases
- (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

**OCCUPANT INJURY CLASSIFICATION**

**Body Region**

- (1) Head
- (2) Face
- (3) Neck
- (4) Thorax
- (5) Abdomen
- (6) Spine
- (7) Upper Extremity
- (8) Lower Extremity
- (9) Unspecified

**Type of Anatomic Structure**

- (1) Whole Area
- (2) Vessels
- (3) Nerves
- (4) Organs (includes muscles/ligaments)
- (5) Skeletal (includes joints)
- (6) Head - LOC
- (9) Skin

**Specific Anatomic Structure**

- Whole Area**
- (02) Skin - Abrasion
- (04) Skin - Contusion
- (08) Skin - Laceration
- (08) Skin - Avulsion
- (10) Amputation
- (20) Burn
- (30) Crush
- (40) Degloving
- (60) Injury - NFS
- (90) Trauma, other than mechanical

- Head - LOC**
- (02) Length of LOC
- (04, 06, 08) Level of Consciousness
- (10) Concussion

**Spine**

- (02) Cervical
- (04) Thoracic
- (06) Lumbar

**Vessels, Nerves, Organs, Bones, Joints** are assigned consecutive two digit numbers beginning with 02

**Level of Injury**

Specific injuries are assigned consecutive two-digit numbers beginning with 02.

To the extent possible, within the organizational framework of the AIS, 00 is assigned to an injury NFS as to severity or where only one injury is given in the dictionary for that anatomic structure. 99 is assigned to any injury NFS as to lesion or severity.

**Abbreviated Injury Scale**

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

**Aspect**

- (1) Right
- (2) Left
- (3) Bilateral
- (4) Central
- (5) Anterior
- (6) Posterior
- (7) Superior
- (8) Inferior
- (9) Unknown
- (0) Whole region

# OFFICIAL INJURY DATA — SKELETAL INJURIES

Restrained?  
 NOT RECORDED  
 \_\_\_ No  
 \_\_\_ Yes

Blood Alcohol Level (mg/dl)

BAL = ①

Glasgow Coma Scale Score

GCSS = 3

Units of Blood Given

Units = 2

Arterial Blood Gases

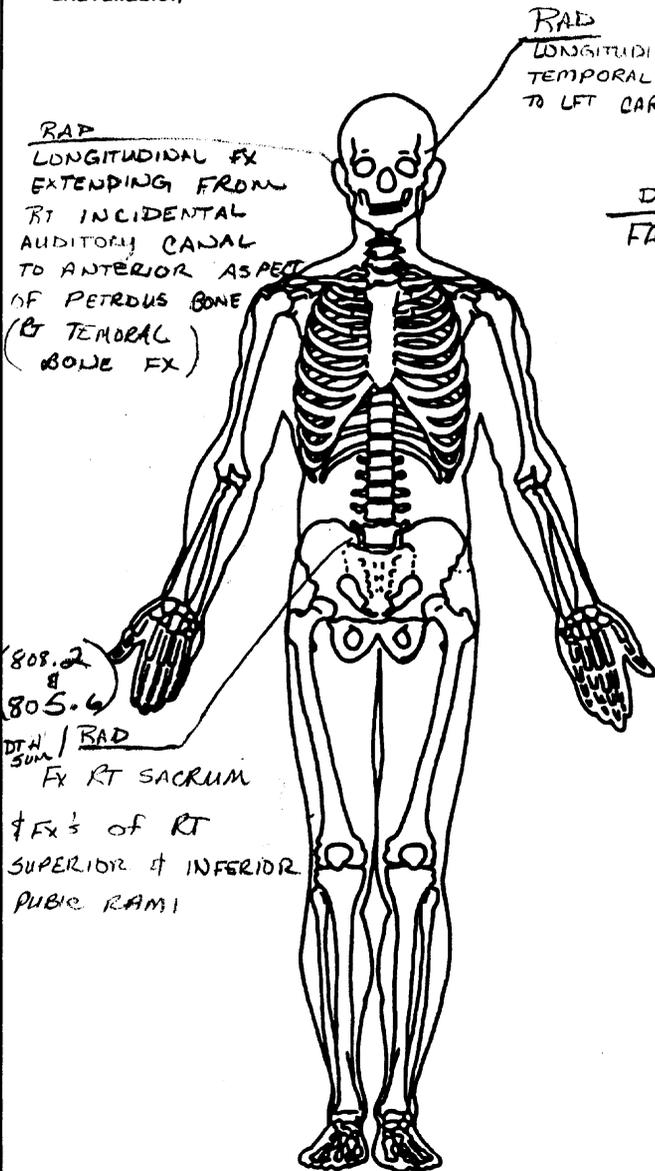
pH = \_\_\_

PO<sub>2</sub> = \_\_\_

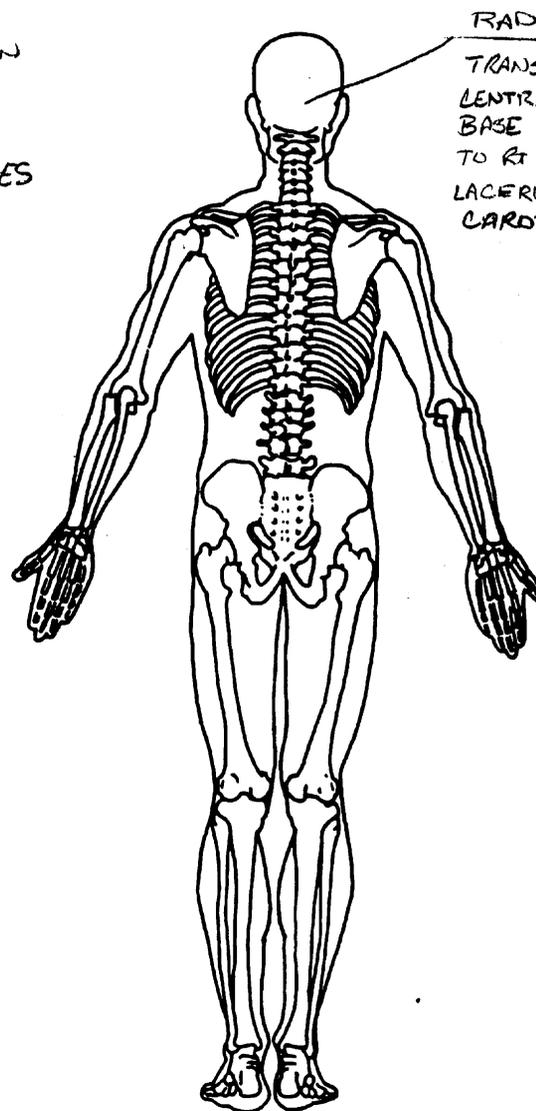
PCO<sub>2</sub> = \_\_\_

HCO<sub>3</sub> = \_\_\_

Indicate the Location, Specific Anatomic Structure, 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.)



DTH SUM  
 FACIAL FRACTURES



# OFFICIAL INJURY DATA — INTERNAL INJURIES

Indicate the Location, Specific Anatomic Structure, 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.)

LOSS OF CONSCIOUSNESS AT SCENE → INTUBATED

ON ARRIVAL → FOUND UNRESPONSIVE W/ AGONAL RESPIRATIONS → DECEREBRATE W/ MINIMAL MOVEMENT OF BILATERAL LOWER EXTREMITIES  
 PUPILS FIXED & SEMI-COMBATIVE → NO RESPONSE TO PAINFUL STIMULI

(852.05)

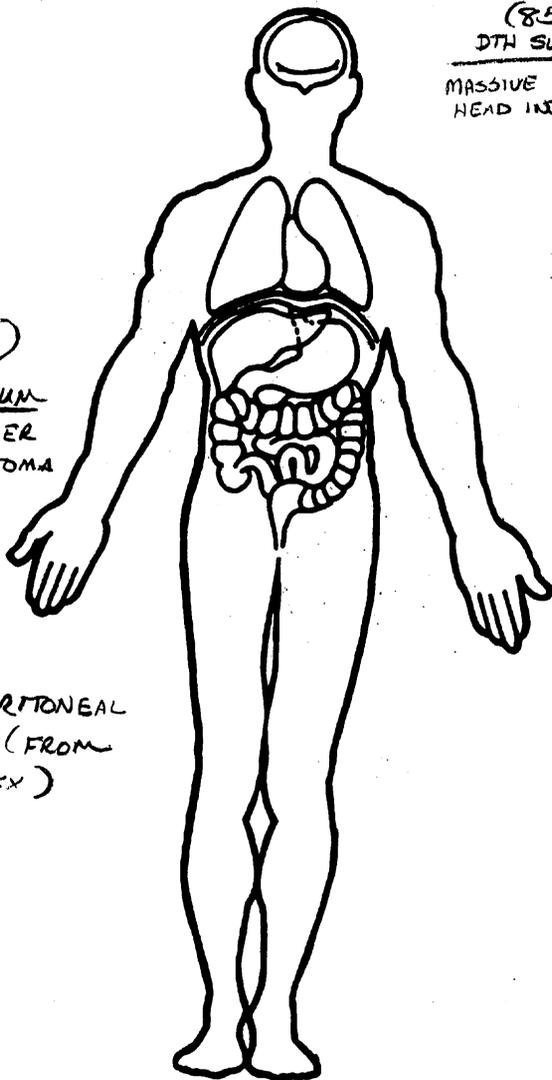
DTH SUM/RAD

MASSIVE  
HEAD INJURY

PNEUMOCEPHALUS  
SUBARACHNOID BLOOD  
ACUTE INTRACRANIAL  
HEMORRHAGE IN BASAL  
CISTERNS, RT LATERAL  
VENTRICLE.

CEREBRAL SUCCI W/  
DIFFUSE CEREBRAL  
EDEMA W/ LOSS OF  
GRAY-WHITE MATTER  
INTERFACE

W/ PROLONGED >24 hr  
LOSS OF CONSCIOUSNESS  
W/OUT RETURN TO  
PRE-EXISTING CONSCIOUS  
LEVEL



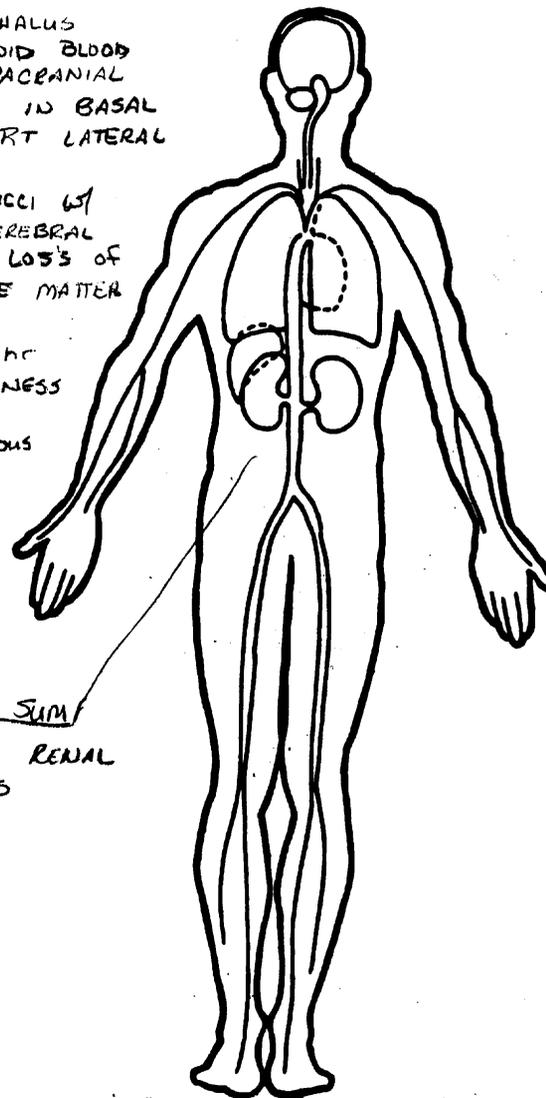
(864.09)

RAD/DTH SUM

POSTERIOR LIVER  
RT LOBE HEMATOMA  
& RT LIVER  
LACERATION

RAD

RT RETROPERITONEAL  
HEMATOMA (FROM  
RT PELVIS FX)



RAD/DTH SUM

MULTIPLE RENAL  
INFARCTS

PSU NUMBER  
CASE NUMBER  
VEHICLE NUMBER

45  
210A  
02

# GENERAL VEHICLE FORM

*THE FOLLOWING DATA IS NOT INCLUDED IN THIS CASE:*

ENTIRE FORM

PAGE NUMBER (S) 2

**OTHER DATA**

56. Driver's Zip Code

- (00000) Driver not present
- (00001) Driver not a resident of U.S. or territories
- Code actual 5-digit zip code
- (99999) Unknown

57. Driver's Race/Ethnic Origin

- (0) Driver not present
- (1) White (non-Hispanic)
- (2) Black (non-Hispanic)
- (3) White (Hispanic)
- (4) Black (Hispanic)
- (5) American Indian, Eskimo or Aleut
- (6) Asian or Pacific Islander
- (8) Other (specify):
- (9) Unknown

58. Vehicle Special Use (This Trip)

- (0) No special use
- (1) Taxi
- (2) Vehicle used as school bus
- (3) Vehicle used as other bus
- (4) Military
- (5) Police
- (6) Ambulance
- (7) Fire truck or car
- (8) Other (specify):
- (9) Unknown

61. Rollover Initiation Object Contacted

62. Location on Vehicle Where Initial Principal Tripping Force Is Applied

- (0) No rollover
- (1) Wheels/tires
- (2) Side plane
- (3) End plane
- (4) Undercarriage
- (5) Other location on vehicle (specify):
- (8) Non-contact rollover forces (specify):
- (9) Unknown

63. Direction of Initial Roll

- (0) No rollover
- (1) Roll right - primarily about the longitudinal axis
- (2) Roll left - primarily about the longitudinal axis
- (5) End-over-end (i.e., primarily about the lateral axis)
- (9) Unknown roll direction

**ROLLOVER DATA**

If GV07 (Body Type) ≠ 1-49, leave GV59-GV63 blank.  
 If GV24 (Rollover) = 0, then GV59-GV63 must equal 0.  
 If GV24 = 9, then GV59-GV63 must equal 9.

59. Rollover Initiation Type

- (0) No rollover
- (1) Trip-over
- (2) Flip-over
- (3) Turn-over
- (4) Climb-over
- (5) Fall-over
- (6) Bounce-over
- (7) Collision with another vehicle
- (8) Other rollover initiation type (specify):
- (9) Unknown rollover initiation type

60. Location of Rollover Initiation

- (0) No rollover
- (1) On roadway
- (2) On shoulder—paved
- (3) On shoulder—unpaved
- (4) On roadside or divided trafficway median
- (9) Unknown

**PRECRASH DATA**

64. Pre-Event Movement (Prior to Recognition of Critical Event)

- (01) Going straight
- (02) Slowing or stopping in traffic lane
- (03) Starting in traffic lane
- (04) Stopped in traffic lane
- (05) Passing or overtaking another vehicle
- (06) Disabled or parked in travel lane
- (07) Leaving a parking position
- (08) Entering a parking position
- (09) Turning right
- (10) Turning left
- (11) Making a U-turn
- (12) Backing up (other than for parking position)
- (13) Negotiating a curve
- (14) Changing lanes
- (15) Merging
- (16) Successful avoidance maneuver to a previous critical event
- (97) Other (specify):
- (98) No driver present
- (99) Unknown

## CODES FOR ROLLOVER INITIATION OBJECT CONTACTED

(00) No rollover  
(01-30) — Vehicle Number

### Noncollision

(31) Turn-over — fall-over  
(33) Jackknife

### Collision With Fixed Object

(41) Tree ( $\leq 10$  cm in diameter)  
(42) Tree ( $> 10$  cm in diameter)  
(43) Shrubbery or bush  
(44) Embankment

(45) Breakaway pole or post (any diameter)

### Nonbreakaway Pole or Post

(50) Pole or post ( $\leq 10$  cm in diameter)  
(51) Pole or post ( $> 10$  cm but  $\leq 30$  cm in diameter)  
(52) Pole or post ( $> 30$  cm in diameter)  
(53) Pole or post (diameter unknown)

(54) Concrete traffic barrier  
(55) Impact attenuator  
(56) Other traffic barrier (includes guardrail)  
(specify): \_\_\_\_\_

(57) Fence  
(58) Wall  
(59) Building  
(60) Ditch or culvert  
(61) Ground  
(62) Fire hydrant  
(63) Curb  
(64) Bridge  
(68) Other fixed object (specify):

(69) \_\_\_\_\_  
Unknown fixed object

### Collision with Nonfixed Object

(71) Motor vehicle not in-transport  
(76) Animal  
(77) Train  
(78) Trailer, disconnected in transport  
(88) Other nonfixed object (specify):

(89) \_\_\_\_\_  
Unknown nonfixed object

(98) Other event (specify):

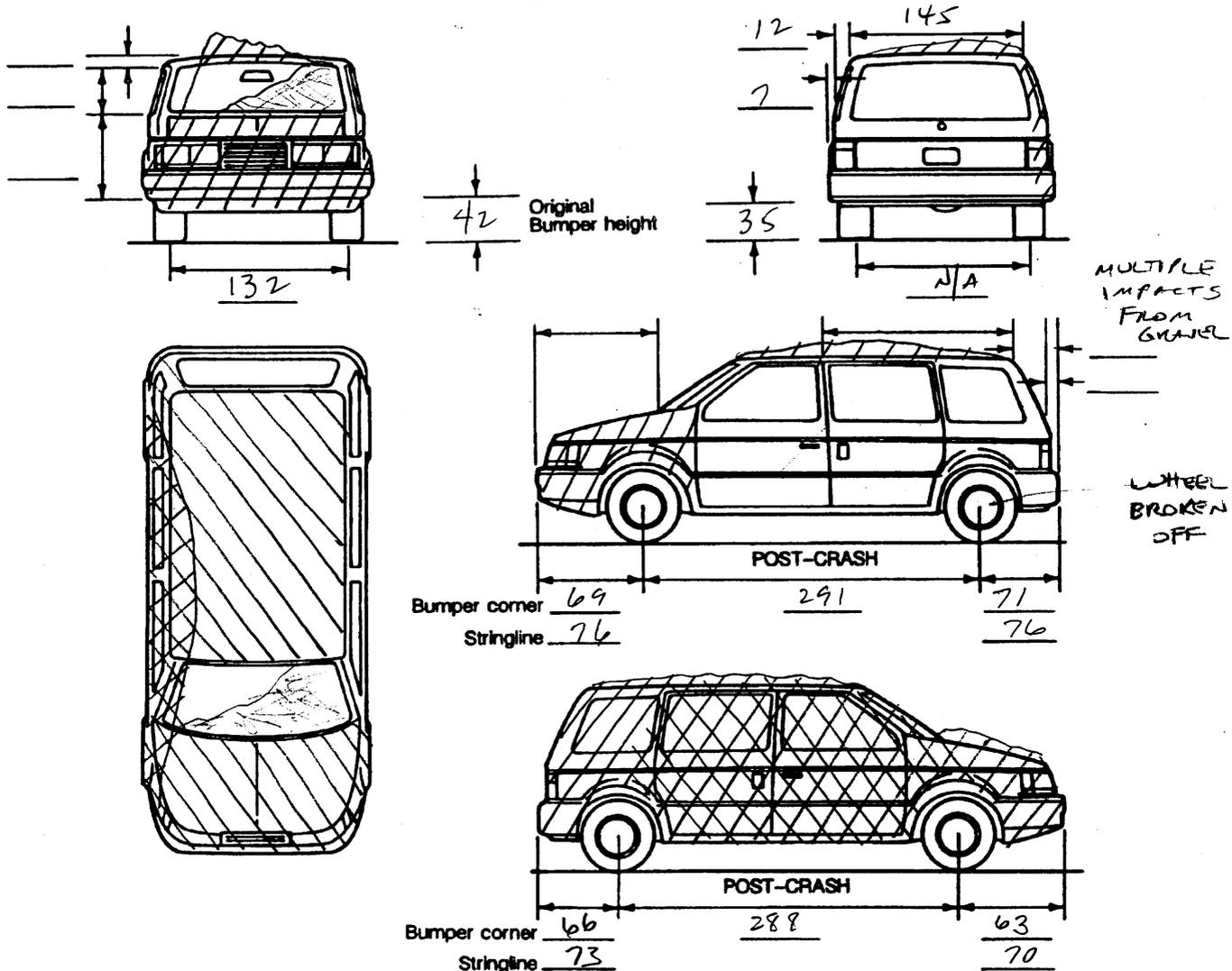
(99) \_\_\_\_\_  
Unknown event or object



**VEHICLE DAMAGE SKETCH**

<p><b>TIRE—WHEEL DAMAGE</b></p> <p>a. Rotation physically restricted      b. Tire deflated</p> <table style="width:100%;"> <tr> <td style="width:50%;">RF <u>1</u></td> <td style="width:50%;">RF <u>2</u></td> </tr> <tr> <td>LF <u>1</u></td> <td>LF <u>1</u></td> </tr> <tr> <td>RR <u>2</u></td> <td>RR <u>1</u></td> </tr> <tr> <td>LR <u>8</u></td> <td>LR <u>8</u></td> </tr> </table> <p>(1) Yes (2) No (8) NA (9) Unk.</p>	RF <u>1</u>	RF <u>2</u>	LF <u>1</u>	LF <u>1</u>	RR <u>2</u>	RR <u>1</u>	LR <u>8</u>	LR <u>8</u>	<p><b>ORIGINAL SPECIFICATIONS</b></p> <p>Wheelbase <u>285</u> cm</p> <p>Overall Length <u>452</u> cm</p> <p>Maximum Width <u>123</u> cm</p> <p>Curb Weight <u>1364</u> kg</p> <p>Average Track <u>N/A</u> cm</p> <p>Front Overhang <u>N/A</u> cm</p> <p>Rear Overhang <u>N/A</u> cm</p> <p>Undeformed End Width <u>N/A</u> cm</p> <p>Engine Size: cyl./displ. <u>3.0</u> L</p>	<p><b>WHEEL STEER ANGLES</b> (For locked front wheels or displaced rear axles only)</p> <p>RF ± <u>00</u> °</p> <p>LF ± <u>00</u> °</p> <p>RR ± <u>30</u> °</p> <p>LR ± <u>00</u> °</p> <p>Within ± 5 degrees</p>
RF <u>1</u>	RF <u>2</u>									
LF <u>1</u>	LF <u>1</u>									
RR <u>2</u>	RR <u>1</u>									
LR <u>8</u>	LR <u>8</u>									
<p><b>TYPE OF TRANSMISSION</b></p> <p><input type="checkbox"/> Manual    <input checked="" type="checkbox"/> Automatic</p>	<p><b>DRIVE WHEELS</b></p> <p><input checked="" type="checkbox"/> FWD    <input type="checkbox"/> RWD    <input type="checkbox"/> 4WD</p>	<p><b>Approximate Cargo Weight</b> <u>0</u> kg</p>								

**MEASUREMENTS IN CENTIMETERS**



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 sidewalls, 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.



PSU NUMBER 45  
CASE NUMBER 210A  
VEHICLE NUMBER 02

# INTERIOR VEHICLE FORM

*THE FOLLOWING DATA IS NOT INCLUDED IN THIS CASE:*

ENTIRE FORM

PAGE NUMBER (S) \_\_\_\_\_

PSU NUMBER	<u>45</u>
CASE NUMBER	<u>210A</u>
VEHICLE NUMBER	<u>02</u>
OCCUPANT NUMBER	<u>01</u>

# OCCUPANT INJURY FORM

*THE FOLLOWING DATA IS NOT INCLUDED IN THIS CASE:*

ENTIRE FORM

PAGE NUMBER (S) \_\_\_\_\_

PSU NUMBER	<u>45</u>
CASE NUMBER	<u>210A</u>
VEHICLE NUMBER	<u>02</u>
OCCUPANT NUMBER	<u>02</u>

# OCCUPANT ASSESSMENT FORM

*THE FOLLOWING DATA IS NOT INCLUDED IN THIS CASE:*

ENTIRE FORM

PAGE NUMBER (S) \_\_\_\_\_



OCCUPANT ASSESSMENT Vehicle: 1 Occupant: 1

11

INTRA ERRORS

S VEHICLE IS INDICATED AS HAVING AN AIRBAG. \*\*\*\*\*  
YOUR DATA AND IF CORRECT, NOTIFY YOUR ZONE \*\*\*\*\*  
LABILITY/FUNCTION OA21 equals 1-5.

OHH1281 2 \*\*\*\*\* THI  
HH1282 \*\*\*\*\* CHECK  
HH1283 AIR BAG AVAI

OCCUPANT INJURY Vehicle: 1 Occupant: 1

11

INTRA ERRORS

SE SHOWS A RESTRAINT AS THE INJURY SOURCE \*\*\*\*\*  
FOR AN AIS-2 (OR GREATER) INJURY. \*\*\*\*\*  
R ACCURATE AND COMPLETED DOCUMENTS & DATA \*\*\*\*\*  
I12(n) equals 41, 42, 43 or 45 and A.I.S.  
) is greater than 1.

OTT0541 2 \*\*\*\*\* THIS CA  
TT0542 \*\*\*\*\*  
TT0543 \*\*\*\*\* CHECK FO  
TT0544 INJURY SOURCE O  
TT0545 SEVERITY OI10(n

TT0541 2 \*\*\*\*\* THIS CASE SHOWS A RESTRAINT AS THE INJURY SOURCE \*\*\*\*\*  
TT0542 \*\*\*\*\* FOR AN AIS-2 (OR GREATER) INJURY. \*\*\*\*\*  
TT0543 \*\*\*\*\* CHECK FOR ACCURATE AND COMPLETED DOCUMENTS & DATA \*\*\*\*\*  
TT0544 INJURY SOURCE OI12(n) equals 41, 42, 43 or 45 and A.I.S.  
TT0545 SEVERITY OI10(n) is greater than 1.

TT0541 2 \*\*\*\*\* THIS CASE SHOWS A RESTRAINT AS THE INJURY SOURCE \*\*\*\*\*  
TT0542 \*\*\*\*\* FOR AN AIS-2 (OR GREATER) INJURY. \*\*\*\*\*  
TT0543 \*\*\*\*\* CHECK FOR ACCURATE AND COMPLETED DOCUMENTS & DATA \*\*\*\*\*  
TT0544 INJURY SOURCE OI12(n) equals 41, 42, 43 or 45 and A.I.S.  
TT0545 SEVERITY OI10(n) is greater than 1.

TT0541 2 \*\*\*\*\* THIS CASE SHOWS A RESTRAINT AS THE INJURY SOURCE \*\*\*\*\*  
TT0542 \*\*\*\*\* FOR AN AIS-2 (OR GREATER) INJURY. \*\*\*\*\*  
TT0543 \*\*\*\*\* CHECK FOR ACCURATE AND COMPLETED DOCUMENTS & DATA \*\*\*\*\*  
TT0544 INJURY SOURCE OI12(n) equals 41, 42, 43 or 45 and A.I.S.  
TT0545 SEVERITY OI10(n) is greater than 1.

O

PSU45  
CASE 210A  
CURRENT VERSION: 6.02

ERROR SUMMARY SCREEN

12/27/94

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 Assesment	0	0	1	Y
Occupant Interior	0	0	4	Y
Total Inter Errors		0	0	
Total Case Errors	0	0	5	



OCCUPANT ASSESSMENT Vehicle: 1 Occupant: 1

INTRA ERRORS

HH1281 2 \*\*\*\*\* THIS VEHICLE IS INDICATED AS HAVING AN AIRBAG. \*\*\*\*\*  
HH1282 \*\*\*\*\* CHECK YOUR DATA AND IF CORRECT, NOTIFY YOUR ZONE \*\*\*\*\*  
HH1283 AIR BAG AVAILABILITY/FUNCTION DA21 equals 1-3.

OCCUPANT INJURY Vehicle: 1 Occupant: 1

INTRA ERRORS

TT0541 2 \*\*\*\*\* THIS CASE SHOWS A RESTRAINT AS THE INJURY SOURCE \*\*\*\*\*  
TT0542 \*\*\*\*\* FOR AN AIS-2 (OR GREATER) INJURY. \*\*\*\*\*  
TT0543 \*\*\*\*\* CHECK FOR ACCURATE AND COMPLETED DOCUMENTS & DATA \*\*\*\*\*  
TT0544 INJURY SOURCE OI12(n) equals 41, 42, 43 or 45 and A.I.S.  
TT0545 SEVERITY OI10(n) is greater than 1.

TT0541 2 \*\*\*\*\* THIS CASE SHOWS A RESTRAINT AS THE INJURY SOURCE \*\*\*\*\*  
TT0542 \*\*\*\*\* FOR AN AIS-2 (OR GREATER) INJURY. \*\*\*\*\*  
TT0543 \*\*\*\*\* CHECK FOR ACCURATE AND COMPLETED DOCUMENTS & DATA \*\*\*\*\*  
TT0544 INJURY SOURCE OI12(n) equals 41, 42, 43 or 45 and A.I.S.  
TT0545 SEVERITY OI10(n) is greater than 1.

TT0541 2 \*\*\*\*\* THIS CASE SHOWS A RESTRAINT AS THE INJURY SOURCE \*\*\*\*\*  
TT0542 \*\*\*\*\* FOR AN AIS-2 (OR GREATER) INJURY. \*\*\*\*\*  
TT0543 \*\*\*\*\* CHECK FOR ACCURATE AND COMPLETED DOCUMENTS & DATA \*\*\*\*\*  
TT0544 INJURY SOURCE OI12(n) equals 41, 42, 43 or 45 and A.I.S.  
TT0545 SEVERITY OI10(n) is greater than 1.

TT0541 2 \*\*\*\*\* THIS CASE SHOWS A RESTRAINT AS THE INJURY SOURCE \*\*\*\*\*  
TT0542 \*\*\*\*\* FOR AN AIS-2 (OR GREATER) INJURY. \*\*\*\*\*  
TT0543 \*\*\*\*\* CHECK FOR ACCURATE AND COMPLETED DOCUMENTS & DATA \*\*\*\*\*  
TT0544 INJURY SOURCE OI12(n) equals 41, 42, 43 or 45 and A.I.S.  
TT0545 SEVERITY OI10(n) is greater than 1.

PSU45  
CASE 210A  
CURRENT VERSION: 6.03

ERROR SUMMARY SCREEN

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 Assesment	0	0	1	Y
Occupant Interior	0	0	4	Y
Total Inter Errors		0	0	
Total Case Errors	0	0	5	







PSU 45-210A (1993) #1



PSU 45-210A (1993) #2



**PSU 45-210A (1993) #3**



**PSU 45-210A (1993) #4**



**PSU 45-210A (1993) #5**



**PSU 45-210A (1993) #6**



**PSU 45-210A (1993) #7**  
**Best Available**



**PSU 45-210A (1993) #8**



**PSU 45-210A (1993) #9**



**PSU 45-210A (1993) #10**



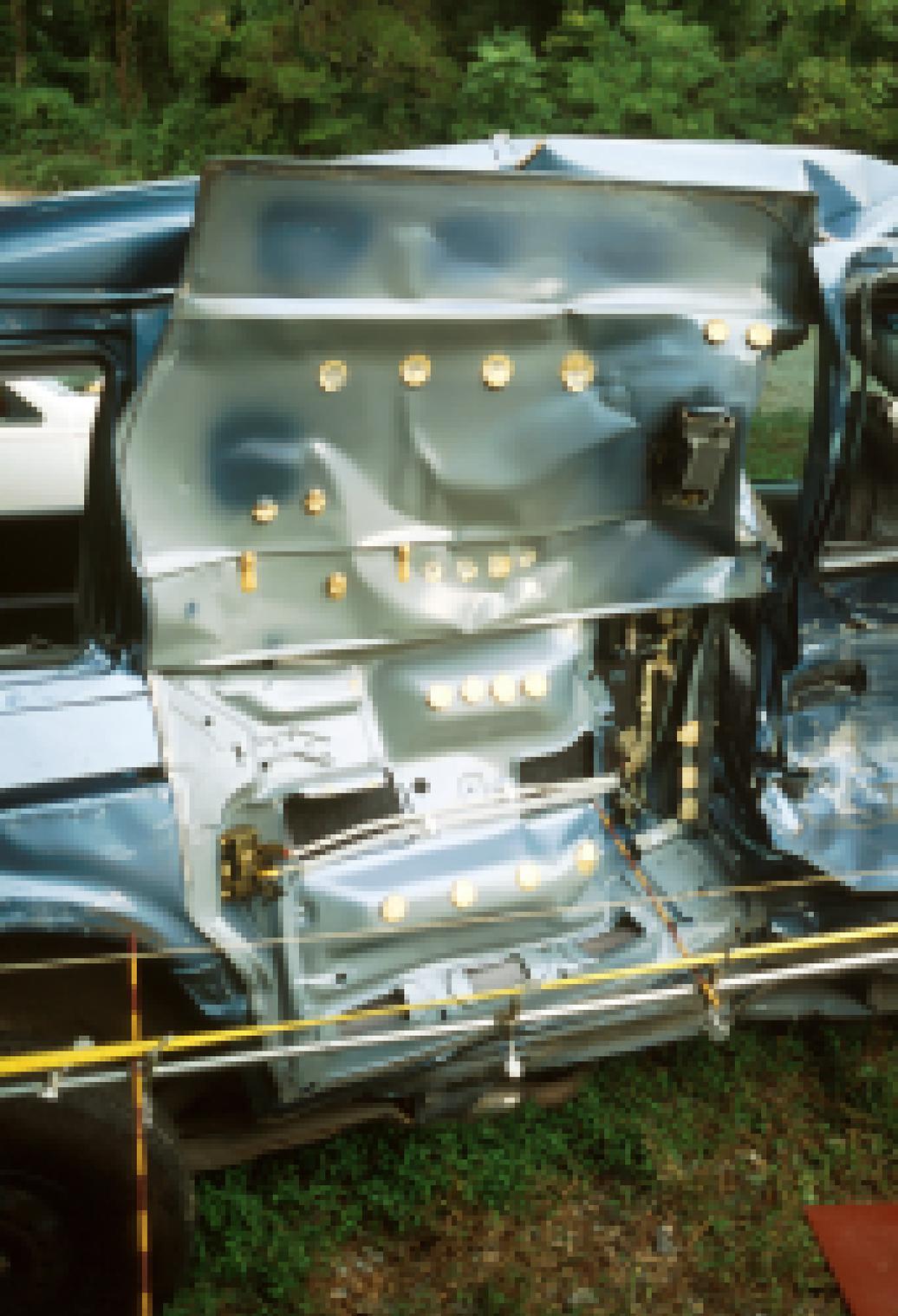
**PSU 45-210A (1993) #11**



**PSU 45-210A (1993) #12**



**PSU 45-210A (1993) #13**  
**Best Available**



**PSU 45-210A (1993) #14**  
**Best Available**



PSU 45-210A (1993) #15



**PSU 45-210A (1993) #16**  
**Best Available**



**PSU 45-210A (1993) #17**  
**Best Available**



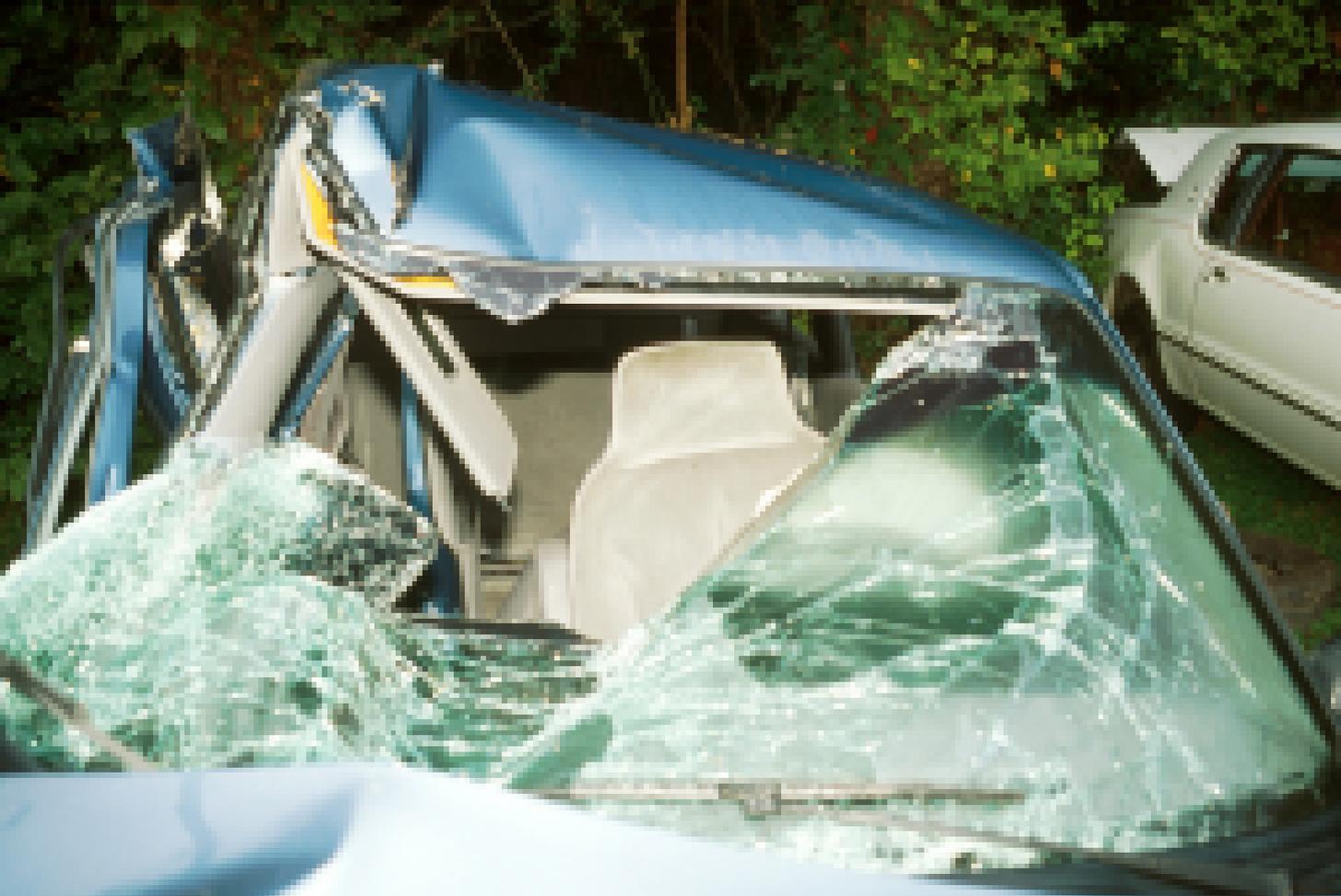
**PSU 45-210A (1993) #18  
Best Available**



**PSU 45-210A (1993) #19**  
**Best Available**



**PSU 45-210A (1993) #20**  
**Best Available**



**PSU 45-210A (1993) #21**



PSU 45-210A (1993) #22



**PSU 45-210A (1993) #23**  
**Best Available**



**PSU 45-210A (1993) #24**  
**Best Available**



PSU 45-210A (1993) #25



**PSU 45-210A (1993) #26**



**PSU 45-210A (1993) #27**



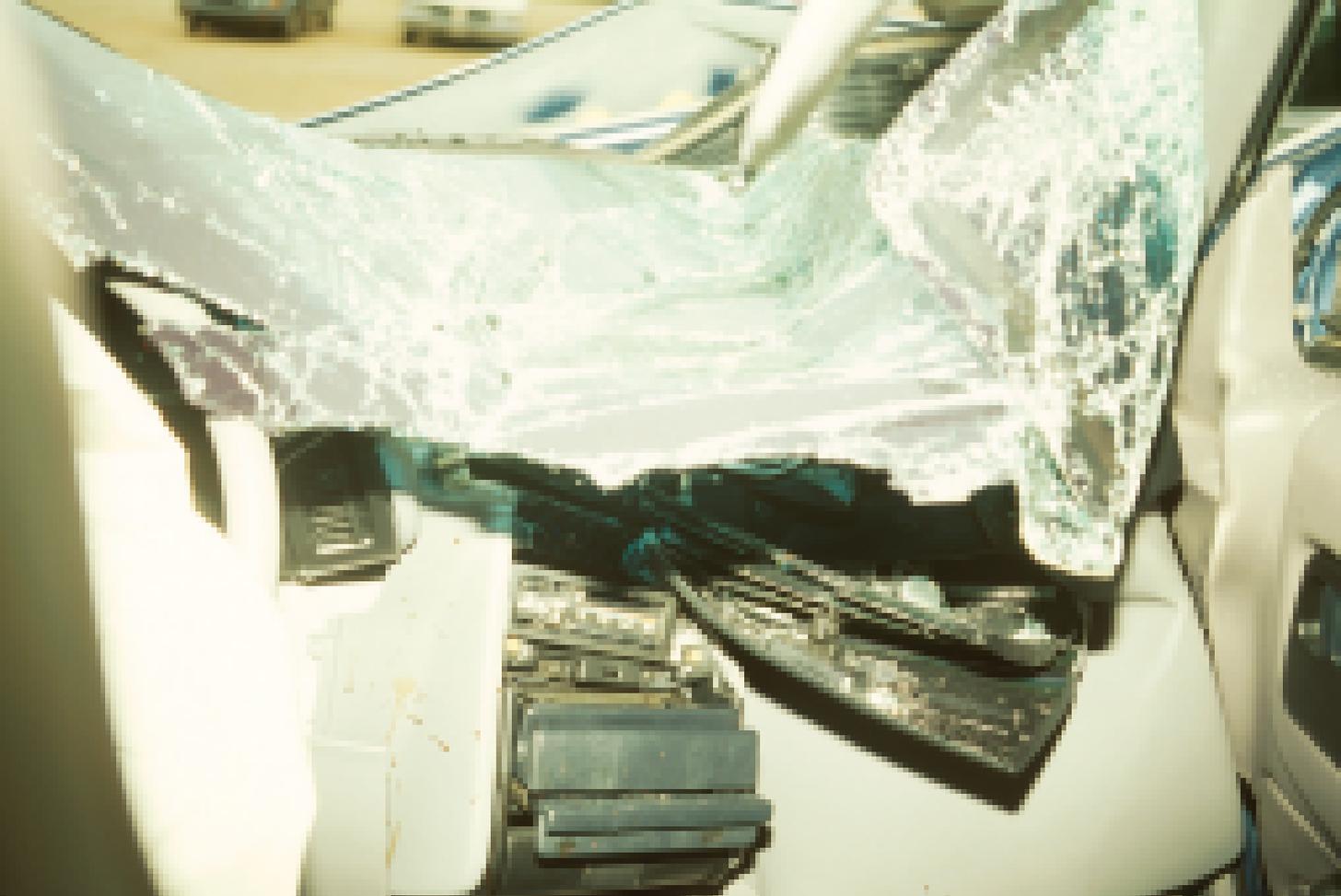
PSU 45-210A (1993) #28



PSU 45-210A (1983) #29



**PSU 45-210A (1993) #30**



PSU 45-210A (1993) #31



**PSU 45-210A (1993) #32**  
**Best Available**



**PSU 45-210A (1993) #33**  
**Best Available**



**PSU 45-210A (1993) #34**



FSU 45-210A (1983) #35



PSU 45-210A (1993) #36



**PSU 45-210A (1993) #37**



**PSU 45-210A (1993) #38**



**PSU 45-210A (1993) #39**  
**Best Available**