



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.

\*\*\* \*\*



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



# CASE SUMMARY

PSU 02 CASE NO. 010F TYPE OF ACCIDENT Truck vs. Truck (rear-end)

## 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 stopped on shoulder of two lane undivided roadway. Vehicle #2 traveling north on same roadway strikes Vehicle #1 in rear causing same to strike guardrail. Vehicle #2 continues up and into truck-bed causing Vehicle #2 to roll over to left, ending up back on its wheels after rolling over completely.

## 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	other light truck	80 Ford F250	rear	severe	none
2	compact utility	90 Toyota 4-Runner	top	moderate	none

**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	l/front	none used	abdomen	contusion	1	Front seatback
1	pass	m/front	none used	neck	strain	1	impact force
1	pass	not seated no seat available (in pickup bed)	n/a	arm	contusion	1	Ground (ejected)
2	driver	l/front	manual non-mot L & S	wrist	abrasion	1	steering wheel rim

**Body Region**

Abdomen  
Ankle-foot  
Arm (upper)  
Back-thoracolumbar spine  
Brain  
Chest  
Ears  
Eye  
Elbow  
Face  
Forearm  
Head-skull  
Heart  
Kidneys  
Knee  
Leg (lower)  
Liver  
Lower limbs(s) (whole or unknown part)  
Mouth  
Neck-cervical spine  
Nose

Pelvic-hip  
Pulmonary-lungs  
Shoulder  
Spleen  
Thigh  
Thyroid, other endocrine gland  
Upper limb(s) (whole or unknown part)  
Vertebrae  
Whole body  
Wrist-hand

**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

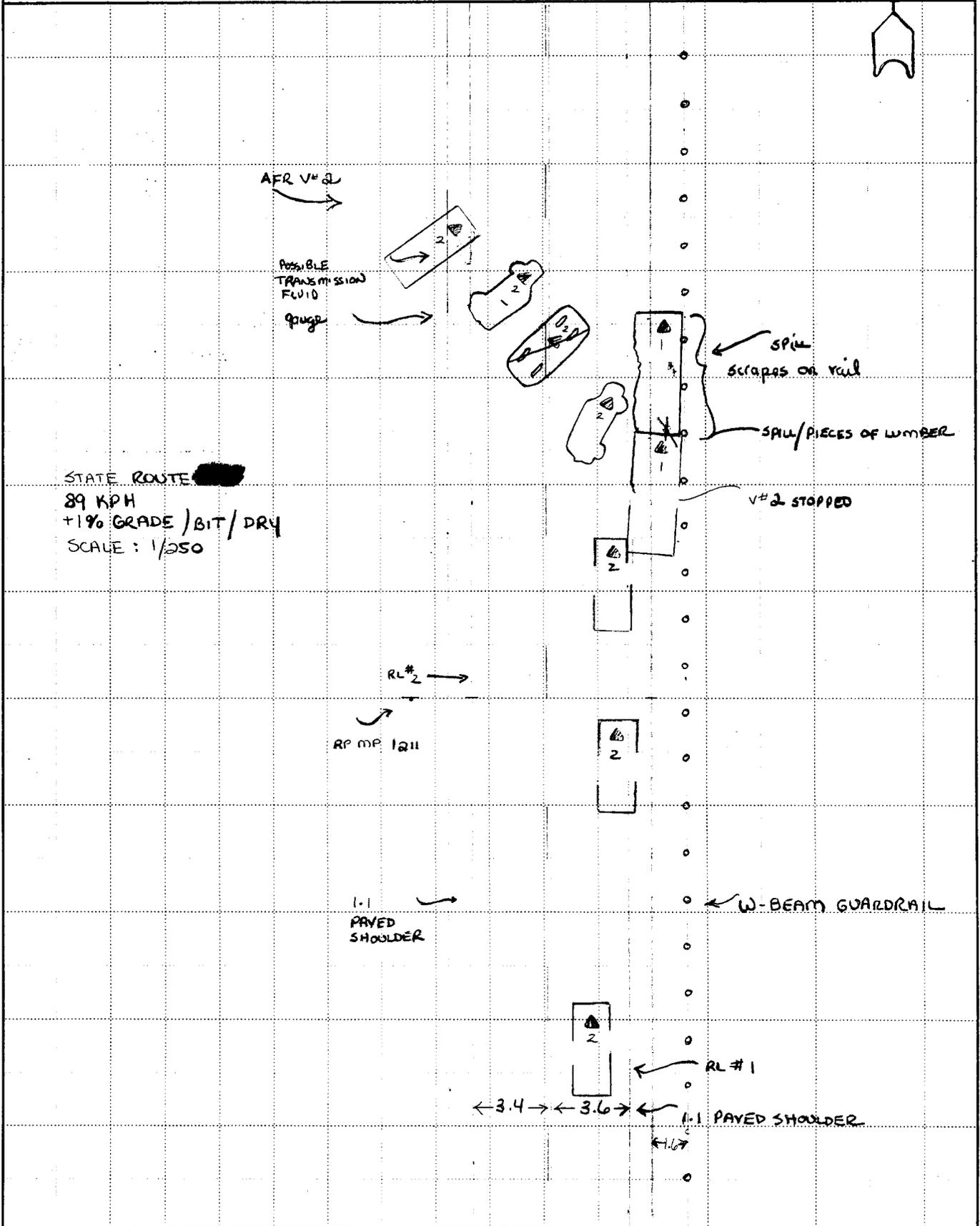


# ACCIDENT COLLISION DIAGRAM

PSU No. 02

Case Number—Stratum 010F

Indicate  
North



STATE ROUTE XXXXXXXXXX  
89 KPH  
+1% GRADE / BIT / DRY  
SCALE : 1/250



# ACCIDENT COLLISION MEASUREMENT TABLE

Primary Sampling Unit Number 02

Case Number - Stratum 010F

### ACCIDENT COLLISION DIAGRAM

Document the physical plant:

- \* all road/roadway delineation (e.g., curbs/edge lines, lane markings, median markings, pavement markings, parked vehicles, poles, signs, etc.)
- \* all traffic controls (e.g., speed limit)
- \* north arrow placed on diagram
- \* roadway surface type and condition of applicable roadways
- \* grade measurements for all applicable roadways and at location of rollover initiation
- \* roadway curvature

Document vehicle dynamics including:

- \* reference point and reference line relative to physical features present at the scene
- \* scaled documentation of all accident induced physical evidence
- \* scaled documentation of all roadside objects contacted
- \* scaled representations of the vehicle(s) at pre-impact, impact, and final rest based upon either:
  - a) physical evidence, or
  - b) reconstructed accident dynamics

CRASH DATA

	VEH. #1	VEH. #2	VEH. #3
Heading Angle	<u>000</u>	<u>000</u>	___
Surface Type	<u>BIT</u>	<u>BIT</u>	___
Surface Condition	<u>DRY</u>	<u>DRY</u>	___
Coefficient of Friction	<u>.71</u>	<u>.71</u>	___
Grade (v/h) Measurement (between impact and final rest)	<u>+5/48</u>	<u>+5/48</u>	___
Grade (v/h) Measurement (at location of rollover initiation)	<u>NA</u>	<u>+5/48</u>	___

Reference Point: MP

Reference line: east Roadedge #1  
west Roadedge #2

Item	Distance and Direction from Reference Point	Distance and Direction from Reference Line
<u>scrapes on rail</u>	<u>12.2 N</u>	<u>2.7 E</u>
<u>debris (wood) + spill</u>	<u>12.2 N</u>	<u>1.7 E</u>
<u>spill</u>	<u>15.7 N</u>	<u>1.9 E</u>
<u>scrapes on rail end</u>	<u>17.9 N</u>	<u>2.7 E</u>
<u>* * *</u>		
<u>gauge V2</u>	<u>18.2 N</u>	<u>1.7 E</u>
<u>" V2 ends</u>	<u>18.3 N</u>	<u>1.3 E</u>
<u>fluid spill</u>	<u>20.4 N</u>	<u>0-1.1 W</u>
<u>" " ends</u>	<u>21.8 N</u>	<u>0-1.1 W</u>
<u>AFR #2</u>	<u>21.9 N</u>	<u>2.2 W</u>





### CODES FOR CLASS OF VEHICLE

- |  |   |
|--|---|
| (00) Not a motor vehicle<br>(01) Subcompact/mini (wheelbase < 254 cm)<br>(02) Compact (wheelbase ≥ 254 but < 265 cm)<br>(03) Intermediate (wheelbase ≥ 265 but < 278 cm)<br>(04) Full size (wheelbase ≥ 278 but < 291 cm)<br>(05) Largest (wheelbase ≥ 291 cm)<br>(09) Unknown passenger car size<br>(14) Compact utility vehicle<br>(15) Large utility vehicle (≤ 4,500 kgs GVWR)<br>(16) Utility station wagon (≤ 4,500 kgs GVWR)<br>(19) Unknown utility type<br>(20) Minivan (≤ 4,500 kgs GVWR)<br>(21) Large van (≤ 4,500 kgs GVWR)<br>(24) Van Based school bus (≤ 4,500 kgs GVWR)<br>(28) Other van type (≤ 4,500 kgs GVWR)<br>(29) Unknown van type (≤ 4,500 kgs GVWR)<br>(30) Compact pickup truck (≤ 4,500 kgs GVWR) | (31) Large pickup truck (≤ 4,500 kgs GVWR)<br>(38) Other pickup truck (≤ 4,500 kgs GVWR)<br>(39) Unknown pickup truck type (≤ 4,500 kgs GVWR)<br>(45) Other light truck (≤ 4,500 kgs GVWR)<br>(48) Unknown light truck type (≤ 4,500 kgs GVWR)<br>(49) Unknown light vehicle type<br>(50) School bus (excludes van based)(> 4,500 kgs GVWR)<br>(58) Other bus (> 4,500 kgs GVWR)<br>(59) Unknown bus type<br>(60) Truck (> 4,500 kgs GVWR)<br>(67) Tractor without trailer<br>(68) Tractor-trailer(s)<br>(78) Unknown medium/heavy truck type<br>(79) Unknown light/medium/heavy truck type<br>(80) Motored cycle<br>(90) Other vehicle<br>(99) Unknown |
|--|---|

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

- |  |  |   |   |
|--|--|---|---|
| <b>CDS APPLICABLE AND OTHER VEHICLES</b> | (O) Not a motor vehicle<br>(N) Noncollision<br>(F) Front                   | (R) Right side<br>(L) Left side<br>(B) Back   | (T) Top<br>(U) Undercarriage<br>(9) Unknown   |
| <b>TDC APPLICABLE VEHICLES</b>           | (O) Not a motor vehicle<br>(N) Noncollision<br>(F) Front<br>(R) Right side | (L) Left side<br>(B) Back of unit with cargo area (rear of trailer or straight truck)<br>(D) Back (rear of tractor) | (C) Rear of cab<br>(V) Front of cargo area<br>(T) Top<br>(U) Undercarriage<br>(9) Unknown |

### CODES FOR VEHICLE NUMBER OR OBJECT CONTACTED

- |   |  |
|---|--|
| (01-30) – Vehicle Number<br><br><b>Noncollision</b><br>(31) Overturn – rollover (excludes end-over-end)<br>(32) Rollover – end-over-end<br>(33) Fire or explosion<br>(34) Jackknife<br>(35) Other intraunit damage (specify): _____<br><br>(36) Noncollision injury<br>(38) Other noncollision (specify): _____<br><br>(39) Noncollision – details unknown<br><br><b>Collision With Fixed Object</b><br>(41) Tree (≤ 10 cm in diameter)<br>(42) Tree (> 10 cm in diameter)<br>(43) Shrubbery or bush<br>(44) Embankment<br>(45) Breakaway pole or post (any diameter)<br><br><b>Nonbreakaway Pole or Post</b><br>(50) Pole or post (≤ 10 cm in diameter)<br>(51) Pole or post (> 10 cm but ≤ 30 cm in diameter)<br>(52) Pole or post (> 30 cm in diameter)<br>(53) Pole or post (diameter unknown)<br><br>(54) Concrete traffic barrier<br>(55) Impact attenuator<br>(56) Other traffic barrier (includes guardrail) (specify): _____ | (57) Fence<br>(58) Wall<br>(59) Building<br>(60) Ditch or culvert<br>(61) Ground<br>(62) Fire hydrant<br>(63) Curb<br>(64) Bridge<br>(68) Other fixed object (specify): _____<br><br>(69) Unknown fixed object<br><br><b>Collision with Nonfixed Object</b><br>(70) Passenger car, light truck, van, or other vehicle not in-transport<br>(71) Medium/heavy truck or bus not in-transport<br>(72) Pedestrian<br>(73) Cyclist or cycle<br>(74) Other nonmotorist or conveyance<br><br>(75) Vehicle occupant<br>(76) Animal<br>(77) Train<br>(78) Trailer, disconnected in transport<br>(79) Object fell from vehicle in-transport<br>(88) Other nonfixed object (specify): _____<br><br>(89) Unknown nonfixed object<br>(98) Other event (specify): _____<br>(99) Unknown event or object |
|---|--|

**PRECRASH ENVIRONMENTAL DATA**

19. Relation To Interchange Or Junction 0  
 (0) Non-interchange area and non-junction  
 (1) Interchange area related

*Non-Interchange junctions*  
 (2) Intersection related  
 (3) Driveway, alley access related  
 (4) Other junction (specify) \_\_\_\_\_  
 (5) Unknown type of junction  
 (9) Unknown

20. Trafficway Flow 0  
 (0) Not physically divided (two way traffic)  
 (1) Divided trafficway-median strip without positive barrier  
 (2) Divided trafficway-median strip with positive barrier  
 (3) One way traffic  
 (9) Unknown

21. Number Of Travel Lanes 2  
 (1) One  
 (2) Two  
 (3) Three  
 (4) Four  
 (5) Five  
 (6) Six  
 (7) Seven or more  
 (9) Unknown

22. Roadway Alignment 1  
 (1) Straight  
 (2) Curve right  
 (3) Curve left  
 (9) Unknown

23. Roadway Profile 1  
 (1) Level  
 (2) Uphill grade (> 2%)  
 (3) Hill crest  
 (4) Downhill grade (> 2%)  
 (5) Sag  
 (9) Unknown

24. Roadway Surface Type 2  
 (1) Concrete  
 (2) Bituminous (asphalt)  
 (3) Brick or block  
 (4) Slag, gravel, or stone  
 (5) Dirt  
 (8) Other (specify): \_\_\_\_\_  
 (9) Unknown

25. Roadway Surface Condition 1  
 (1) Dry  
 (2) Wet  
 (3) Snow or slush  
 (4) Ice  
 (5) Sand, dirt, or oil  
 (8) Other (specify): \_\_\_\_\_  
 (9) Unknown

26. Light Conditions 1  
 (1) Daylight  
 (2) Dark  
 (3) Dark, but lighted  
 (4) Dawn  
 (5) Dusk  
 (9) Unknown

27. Atmospheric Conditions 0  
 (0) No adverse atmospheric-related driving conditions  
 (1) Rain  
 (2) Sleet/hail  
 (3) Snow  
 (4) Fog  
 (5) Rain and fog  
 (6) Sleet and fog  
 (7) Other (e.g., smog, smoke, blowing sand or dust, etc.) (specify): \_\_\_\_\_  
 (9) Unknown

28. Traffic Control Device 0  
 (0) No traffic control(s)  
 (1) Traffic control signal (not RR crossing)

*Regulatory*  
 (2) Stop sign  
 (3) Yield sign  
 (4) School zone sign  
 (5) Other regulatory sign (specify): \_\_\_\_\_  
 (6) Warning sign (not RR crossing)  
 (7) Unknown sign  
 (8) Miscellaneous/other controls including RR controls (specify): \_\_\_\_\_  
 (9) Unknown

29. Traffic Control Device Functioning 0  
 (0) No traffic control device  
 (1) Traffic control device not functioning (specify): \_\_\_\_\_  
 (2) Traffic control device functioning properly  
 (9) Unknown

**OCCUPANT RELATED**

- 37. Driver Presence in Vehicle 1  
 (0) Driver not present  
 (1) Driver present  
 (9) Unknown
- 38. Number of Occupants This Vehicle 03  
 (00-96) Code actual number of occupants for this vehicle  
 (97) 97 or more  
 (99) Unknown
- 39. Number of Occupant Forms Submitted 03

**AIR BAG RELATED**

- 40. Is this an AOPS Vehicle? 0  
 (0) No (includes unknown)  
 (1) Yes - researcher determined  
 (2) VIN determined air bag system  
 (3) VIN determined automatic (passive) belts  
 (4) VIN determined air bag and automatic (passive) belts
- 41. Air Bag(s) Deployment, First Seat Frontal 0  
 (0) Not equipped or not available  
 (1) No air bags deployed  
*Single Air Bag Vehicle*  
 (2) Driver air bag deployed  
 (3) Driver air bag, unknown if deployed  
*Multiple Air Bag Vehicle*  
 (4) Driver side only deployed  
 (5) Passenger side only deployed  
 (6) Driver and passenger side deployed  
 (7) Driver and passenger side unknown if deployed  
 (8) Air bag(s) deployed, details unknown  
 (9) Unknown
- 42. Air Bag(s) Deployment, Other Than First Seat Frontal 0  
 (0) Not equipped with an "other" air bag  
 (1) Deployed during accident (as a result of impact)  
 (2) Deployed inadvertently just prior to accident  
 (3) Deployed, details unknown  
 (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)  
 (5) Unknown if deployed  
 (7) Nondeployed  
 (9) Unknown

Specify type of "other" air bag present: \_\_\_\_\_

**VEHICLE WEIGHT ITEMS**

- 43. Vehicle Curb Weight 1,800  
 Code weight to nearest 10 kilograms.  
 (045) Less than 450 kilograms  
 (610) 6,100 kilograms or more  
 (999) Unknown  
3,961 lbs X .4536 = 1,797 kgs

Source: 80 \_\_\_\_\_

- 44. Vehicle Cargo Weight 9,990  
 Code weight to nearest 10 kilograms.  
 (000) Less than 5 kilograms  
 (450) 4,500 kilograms or more  
 (999) Unknown  
 \_\_\_\_\_ lbs X .4536 = \_\_\_\_\_ kgs  
 Source: \_\_\_\_\_

2 pieces furniture + homemade stall body + plow attachment

**ROLLOVER DATA**

- 45. Rollover 00  
 (00) No rollover (no overturning)  
*Rollover (primarily about the longitudinal axis)*  
 (01-16) Code the number of quarter turns  
 (17) Rollover, 17 or more quarter turns (specify): \_\_\_\_\_  
 (98) Rollover--end-over-end (i.e., primarily about the lateral axis)  
 (99) Rollover (overturn), details unknown
- 46. Rollover Initiation Type 00  
 (00) No rollover  
 (01) Trip-over  
 (02) Flip-over  
 (03) Turn-over  
 (04) Climb-over  
 (05) Fall-over  
 (06) Bounce-over  
 (07) Collision with another vehicle  
 (08) Other rollover initiation type specify): \_\_\_\_\_  
 (98) Rollover--end-over-end  
 (99) Unknown rollover initiation type
- 47. Location of Rollover Initiation 0  
 (0) No rollover  
 (1) On roadway  
 (2) On shoulder--paved  
 (3) On shoulder--unpaved  
 (4) On roadside or divided trafficway median  
 (8) Rollover--end-over-end  
 (9) Unknown
- 48. Rollover Initiation Object Contacted 00  
 (Note: Applicable codes on back of page)
- 49. 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): \_\_\_\_\_  
 (6) Non-contact rollover forces (specify): \_\_\_\_\_  
 (8) Rollover--end-over-end  
 (9) Unknown

- 50. Direction of Initial Roll 0  
 (0) No rollover  
 (1) Roll right - primarily about the longitudinal axis  
 (2) Roll left - primarily about the longitudinal axis  
 (8) Rollover--end-over-end  
 (9) Unknown roll direction

## CODES FOR ROLLOVER INITIATION OBJECT CONTACTED

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

### Noncollision

- (31) Turn-over – fall-over
- (32) No rollover impact initiation (end-over-end)
- (34) 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

- (70) Passenger car, light truck, van, or other vehicle not in-transport
- (71) Medium/heavy truck or bus not in-transport
- (76) Animal
- (77) Train
- (78) Trailer, disconnected in transport
- (79) Object fell from vehicle 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 02  
 2. Case Number - Stratum 010F  
 3. Vehicle Number 01

## INTEGRITY

4. Passenger Compartment Integrity 11  
 (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 1 7. LR 0 8. RR 0 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

### Type of Window/Windshield Glazing

15. WS 1 16. LF 2 17. RF 2 18. LR 0 19. RR 0  
 20. BL 2 21. Roof 0 22. Other 2

- (0) No glazing
- (1) AS-1 - Laminated
- (2) AS-2 - Tempered
- (3) AS-3 - Tempered-tinted (original)
- (4) AS-2 - Tempered-with after market tint
- (5) AS-3 - Tempered-tinted (with additional after market tint)
- (6) AS-14 - Glass/Plastic
- (7) Glazing removed prior to accident
- (8) Other (specify):
- (9) Unknown

### Window Precrash Glazing Status

23. WS 1 24. LF 2 25. RF 9 26. LR 0 27. RR 0  
 28. BL 1 29. Roof 0 30. Other 2

*open at inspection*

- (0) No glazing
- (1) Fixed
- (2) Closed
- (3) Partially opened
- (4) Fully opened
- (7) Glazing removed prior to accident
- (9) Unknown

### Glazing Damage from Impact Forces

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

- (0) No glazing
- (1) 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
- (9) Unknown if damaged

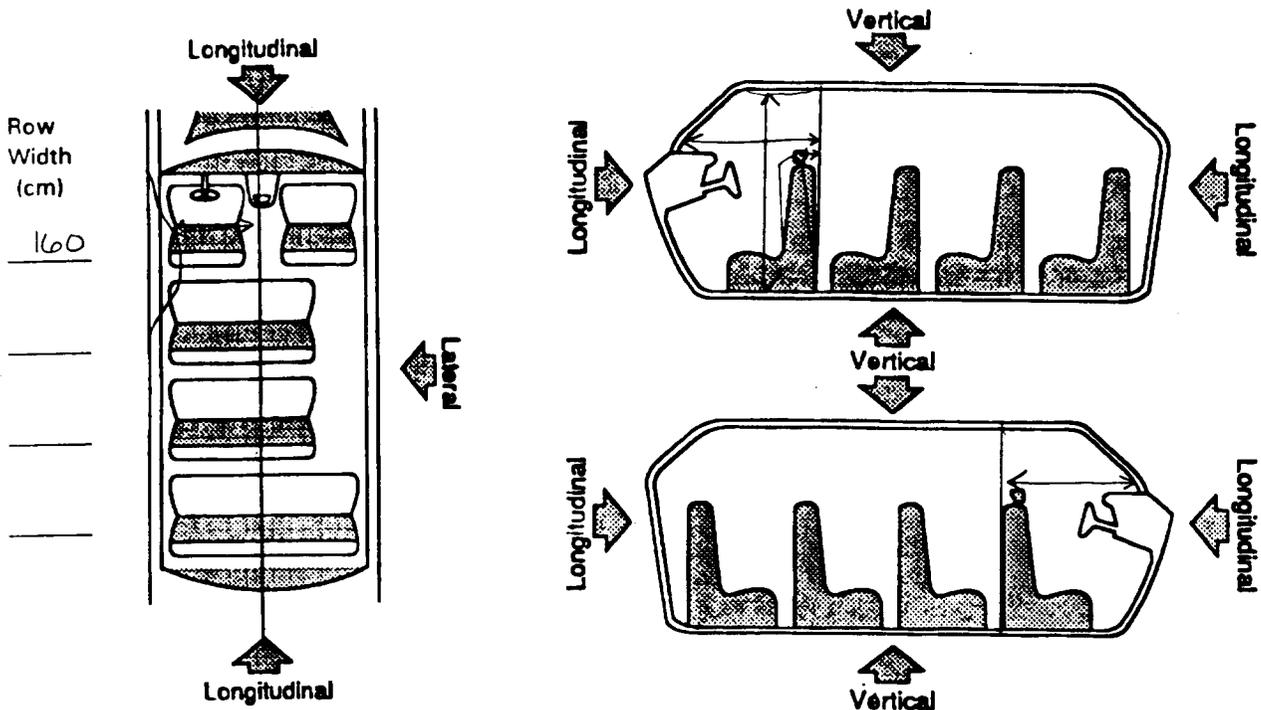
### Glazing Damage from Occupant Contact

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

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

# INTRUSION WORKSHEET

Note: Sketch intruded areas



LOCATION OF INTRUSION	INTRUDED COMPONENT	(All Measurements Are In Centimeters)			DOMINANT CRUSH DIRECTION
		COMPARISON VALUE	INTRUDED VALUE	INTRUSION	
11	Seat back (20)	94	76	18	long (4)
12	Seat back (60)	94	87	7	long (7)
11	backlite frame	100	82	18	NO CODE IN CODED " (5)
12	back lite frame	100	93	7	IN BACK CAB PANEL " (8)
11	(31) panel	130	67	63	" (1)
12	(31) panel	130	110	20	" (3)
11	B Pillar (07)	126	73	53	" (2)
11	panel (11)	82	70	12	lat (6)
11	roof (13)	128	125	3	vert (9)

### 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>11</u>	48. <u>31</u>	49. <u>6</u>	50. <u>2</u>
2nd	51. <u>11</u>	52. <u>07</u>	53. <u>5</u>	54. <u>2</u>
3rd	55. <u>12</u>	56. <u>31</u>	57. <u>4</u>	58. <u>2</u>
4th	59. <u>11</u>	60. <u>20</u>	61. <u>3</u>	62. <u>2</u>
<del>5th</del>	<del>63. <u>11</u></del>	<del>64. <u>11</u></del>	<del>65. <u>2</u></del>	<del>66. <u>3</u></del>
<del>5th</del> 6th	67. <u>12</u>	68. <u>20</u>	69. <u>1</u>	70. <u>2</u>
<del>6th</del> 7th	71. <u>11</u>	72. <u>13</u>	73. <u>1</u>	74. <u>1</u>
8th	75. _____	76. _____	77. _____	78. _____
9th	79. _____	80. _____	81. _____	82. _____
10th	83. _____	84. _____	85. _____	86. _____

#### 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) Side panel - forward of the A1/A2-pillar
- (11) Door panel (side)
- (12) Side panel - rear of the B-pillar
- (13) Roof (or convertible top)
- (14) Roof side rail
- (15) Windshield
- (16) Windshield header
- (17) Window frame
- (18) Floor pan (includes sill)
- (19) Backlight header
- (20) Front seat back
- (21) Second seat back
- (22) Third seat back
- (23) Fourth seat back
- (24) Fifth seat back
- (25) Seat cushion
- (26) Back door/panel (e.g., tailgate)
- (27) Other interior component (specify): \_\_\_\_\_

##### Exterior Components

- (30) Hood
- (31) Outside surface of this vehicle (specify): rear panel of truck cab (includes backlite edge bottom)
- (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>Second Seat</b></p> <ul style="list-style-type: none"> <li>(21) Left</li> <li>(22) Middle</li> <li>(23) Right</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> | <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>(97) Catastrophic</p> <p>(98) Other enclosed area (specify) _____</p> <p>(99) Unknown</p> |
|--|---|

#### 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**

**INSTRUMENT PANEL**

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

88. Tilt Steering Column Adjustment 0  
 (0) No tilt steering column  
 (1) Full up  
 (2) Between full up and center  
 (3) Center  
 (4) Between center and full down  
 (5) Full down  
 (9) Unknown

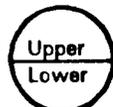
89. Telescoping Steering Column Adjustment 0  
 (0) No telescoping steering column  
 (1) Full back  
 (2) Between full back and midpoint  
 (3) Midpoint  
 (4) Between midpoint and full forward  
 (5) Full forward  
 (9) Unknown

90. 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

91. 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

92. Odometer Reading 256,000  
 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 + 100,000 <sup>3</sup>  
59,189 miles X 1.6093 = 256,183 kilometers

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

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

94. Type of Knee Bolster Covering 0  
 (0) No knee bolster  
 (1) Padded  
 (2) Rigid plastic  
 (8) Other (specify): \_\_\_\_\_  
 (9) Unknown

95. Knee Bolsters Deformed from Occupant Contact? 0  
 (0) No knee bolster  
 (1) No deformation  
 (2) Yes - deformation  
 (9) Unknown

96. Did Glove Compartment Door Open During Collision(s)? 9  
 (0) No glove compartment door  
 (1) No - door did not open  
 (2) Yes - door opened  
 (9) Unknown

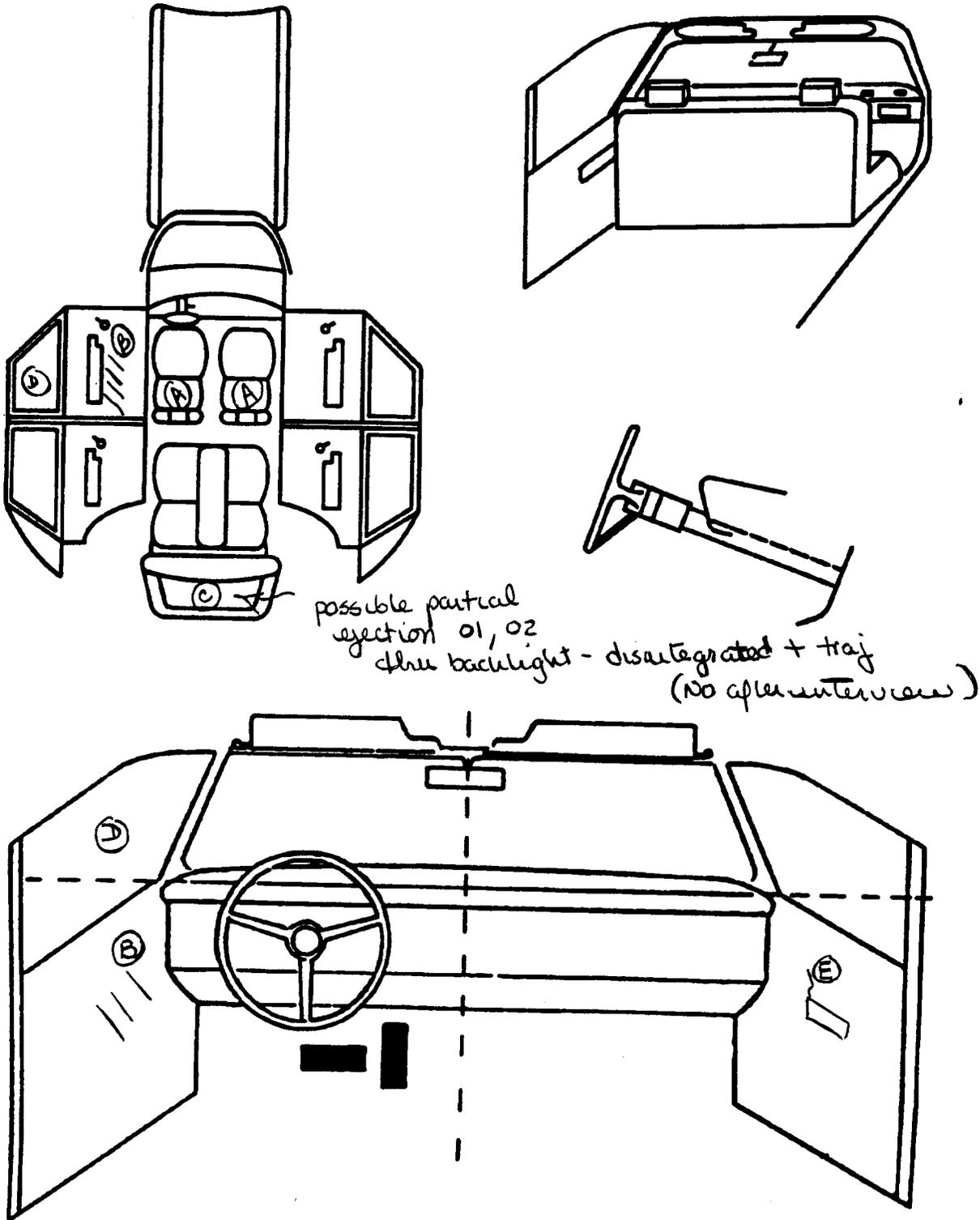
*open at suspect latch broken old?*

97. Adaptive (Assistive) Driving Equipment 0  
 (0) No adaptive driving equipment  
 (1) Adaptive driving equipment installed (Check all that apply.)  
 Hand controls for braking/acceleration  
 Steering control devices (attached to OEM steering wheel)  
 Steering knob attached to steering wheel  
 Low effort power steering (unit or device)  
 Replacement steering wheel (i.e., reduced diameter)  
 Joy-stick steering controls  
 Wheelchair tie-downs  
 Modification to seat belts (specify): \_\_\_\_\_  
 Additional or relocated switches (specify): \_\_\_\_\_  
 Raised roof  
 Wall-mounted head rest (used behind wheelchair)  
 Other adaptive device (specify): \_\_\_\_\_

(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	151	01/02	back/neck	intrusion / (2) bent back / traj	1
B	051	01	arm/torso	intrusion	2
C	301	01/02	head	disintegrated / traj / flying glass	2
D	056	01/02	hands/face	flying glass	2
E	101	02	arm/leg	cracked (appears fresh) dented	3
F					
G					
H					
I					
J					
K					
L					
M					
N					

**CODES FOR INTERIOR COMPONENTS**

**FRONT**

- (001) Windshield
- (002) Mirror
- (003) Sunvisor
- (004) Steering wheel rim
- (005) Steering wheel hub/spoke
- (006) Steering wheel (combination of codes 004 and 005)
- (007) Steering column, transmission selector lever, other attachment
- (008) Cellular telephone or CB radio
- (009) Add on equipment (e.g., tape deck, air conditioner)
- (010) Left instrument panel and below
- (011) Center instrument panel and below
- (012) Right instrument panel and below
- (013) Glove compartment door
- (014) Knee bolster
- (015) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, mirror, or steering assembly (driver side only)
- (016) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, or mirror (passenger side only)
- (017) Windshield reinforced by exterior object, (specify): \_\_\_\_\_
- (019) Other front object (specify): \_\_\_\_\_

**LEFT SIDE**

- (051) Left side interior surface, excluding hardware or armrests
- (052) Left side hardware or armrest
- (053) Left A (A1/A2)-pillar
- (054) Left B-pillar
- (055) Other left pillar (specify): \_\_\_\_\_
- (056) Left side window glass
- (057) Left side window frame
- (058) Left side window sill
- (059) Left side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.
- (060) Other left side object (specify): \_\_\_\_\_

**RIGHT SIDE**

- (101) Right side interior surface, excluding hardware or armrests
- (102) Right side hardware or armrest
- (103) Right A (A1/A2)-pillar
- (104) Right B-pillar
- (105) Other right pillar (specify): \_\_\_\_\_
- (106) Right side window glass
- (107) Right side window frame
- (108) Right side window sill
- (109) Right side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.
- (110) Other right side object (specify): \_\_\_\_\_

**INTERIOR**

- (151) Seat, back support
- (152) Belt restraint webbing/buckle
- (153) Belt restraint B-pillar or door frame attachment point
- (154) Other restraint system component (specify): \_\_\_\_\_
- (155) Head restraint system
- (160) Other occupants (specify): \_\_\_\_\_
- (161) Interior loose objects
- (162) Child safety seat (specify): \_\_\_\_\_
- (163) Other interior object (specify): \_\_\_\_\_

**AIR BAG**

- (170) Air bag-driver side
- (175) Air bag compartment cover-driver side
- (180) Air bag-passenger side
- (185) Air bag compartment cover-passenger side
- (190) Other air bag (specify) \_\_\_\_\_
- (195) Other air bag compartment cover (specify) \_\_\_\_\_

**ROOF**

- (201) Front header
- (202) Rear header
- (203) Roof left side rail
- (204) Roof right side rail
- (205) Roof or convertible top

**FLOOR**

- (251) Floor (including toe pan)
- (252) Floor or console mounted transmission lever, including console
- (253) Parking brake handle
- (254) Foot controls including parking brake

**REAR**

- (301) Backlight (rear window)
- (302) Backlight storage rack, door, etc.
- (303) Other rear object (specify): \_\_\_\_\_

**ADAPTIVE (ASSISTIVE) DRIVING EQUIPMENT**

- (401) Hand controls for braking/acceleration
- (402) Steering control devices (attached to OEM steering wheel)
- (403) Steering knob attached to steering wheel
- (405) Replacement steering wheel (i.e., reduced diameter)
- (406) Joy stick steering controls
- (407) Wheelchair tie-downs
- (408) Modification to seat belts, (specify): \_\_\_\_\_
- (409) Additional or relocated switches, (specify): \_\_\_\_\_
- (410) Raised roof
- (411) Wall mounted head rest (used behind wheel chair)
- (412) Other adaptive device (specify): \_\_\_\_\_

**CONFIDENCE LEVEL OF CONTACT POINT**

- (1) Certain
- (2) Probable
- (3) Possible
- (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
<b>F I R S T</b>	Availability	4	3	4
	Evidence of usage	04	00	04
	Used in this crash?	00	00	00
	Proper Use	6	0	0
	Failure Modes	0	0	0
	Anchorage Adjustment	1	0	1
<b>S E C O N D</b>	Availability	<b>NO SECOND SEAT</b>		
	Evidence of usage			
	Used in this crash?			
	Proper Use			
	Failure Modes			
	Anchorage Adjustment			
<b>O T H E R</b>	Availability	<b>NO SECOND SEAT</b>		
	Evidence of usage			
	Used in this crash?			
	Proper Use			
	Failure Modes			
	Anchorage Adjustment			

**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

**Proper Use of Manual (Active) Belts**

- (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

**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

**Shoulder Belt Upper Anchorage Adjustment**

- (0) No shoulder belt
- (1) No upper anchorage adjustment for shoulder belt

*Adjustable shoulder Belt Upper Anchorage*

- (2) In full up position
- (3) In mid position
- (4) In full down position
- (5) Position unknown
- (9) Unknown if position has adjustable upper anchorage adjustment

### 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 Front	Right Front	Other
F I R S T	Availability/Function	○	○	○
	Deployment	○	○	○
	Failure	○	○	○

<p><b>Air Bag System Availability/Function</b>                  (0) Not equipped/not available                  (1) Air bag</p> <p><i>Non-functional</i>                  (2) Air bag disconnected (specify): _____                  (3) Air bag not reinstalled                  (9) Unknown</p> <p><b>Are There Indications of Air Bag System Failure? (This Occupant Position)</b>                  (0) Not equipped/not available                  (1) No                  (2) Yes (specify): _____                  (9) Unknown</p>	<p><b>Frontal Air Bag System Deployment (This Occupant Position)</b>                  (0) Not equipped/not available                  (1) Deployed during accident (as a result of impact)                  (2) Deployed inadvertently just prior to accident                  (3) Deployed, accident sequence undetermined                  (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)                  (5) Unknown if deployed                  (7) Nondeployed                  (9) Unknown</p>	<p><b>Air Bag(s) Deployment, <u>Other</u> Than First Seat Frontal (This Occupant Position)</b>                  (0) Not equipped with an "<u>other</u>" air bag                  (1) Deployed during accident (as a result of impact)                  (2) Deployed inadvertently just prior to accident                  (3) Deployed, details unknown                  (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)                  (5) Unknown if deployed                  (7) Nondeployed                  (9) Unknown</p>
--	---	---

#### AUTOMATIC BELTS

		Left	Right
F I R S T	Availability/Function	○	○
	Use	○	○
	Type	○	○
	Proper Use	○	○
	Failure Modes	○	○

<p><b>Automatic (Passive) Belt System Availability/Function</b>                  (0) Not equipped/not available                  (1) 2 point automatic belts                  (2) 3 point automatic belts                  (3) Automatic belts - type unknown</p> <p><i>Non-functional</i>                  (4) Automatic belts destroyed or rendered inoperative                  (9) Unknown</p> <p><b>Automatic (Passive) Belt System Use</b>                  (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</p> <p><b>Automatic (Passive) Belt System Type</b>                  (0) Not equipped/not available                  (1) Non-motorized system                  (2) Motorized system                  (9) Unknown</p>	<p><b>Proper Use of Automatic (Passive) Belt System</b>                  (0) Not equipped/not available/not used                  (1) Automatic belt used properly                  (2) Automatic belt used properly with child safety seat</p> <p><i>Automatic Belt Used Improperly</i>                  (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</p>	<p><b>Automatic (Passive) Belt Failure Modes During Accident</b>                  (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</p>
--	---	---

## FIRST SEAT FRONTAL AIR BAGS

**NOTES:** Encode the applicable data *for the driver and first seat passenger* 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.

	Driver	Passenger
Type of air bag?	0	0
Flaps open at tear points?	0	0
Flaps damaged?	0	0
Air bag damaged?	00	00
Source of air bag damage	00	00
Air bag tethered?	0	0
Air bag have vent ports?	0	0
Other occupant contact air bag?	0	0
Occupant wearing eyewear?	0	0

**Type of Air Bag**

- (0) Not equipped/not available
- (1) Original manufacturer installed system
- (2) Retrofitted air bag
- (3) Replacement air bag
- (8) Unknown type of air bag
- (9) Unknown

**Did Air Bag Module Cover Flap(s) Open At Designated Tear Points?**

- (0) Not equipped/not available
- (1) No
- (2) Yes
- (3) Deployed, unknown if flap(s) opened at designated tear points
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

**Were Air Bag Module Cover Flap(s) Damaged?**

- (0) Not equipped/not available
- (1) No
- (2) Yes (specify): \_\_\_\_\_
- (3) Deployed, unknown if air bag module cover flap(s) damaged
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

**Was There Damage To The Air Bag?**

- (00) Not equipped/not available
- (01) Not damaged

**Yes - Air Bag Damage**

- (02) Ruptured
- (03) Cut
- (04) Torn
- (05) Holed
- (06) Burned
- (07) Abraded
- (88) Other damage (specify): \_\_\_\_\_

- (95) Damaged, details unknown
- (96) Deployed, unknown if damaged
- (97) Not deployed
- (98) Unknown if deployed
- (99) Unknown

**Source of Air Bag Damage**

- (00) Not equipped/not available
- (01) Not damaged
- (02) Object worn by occupant, (specify): \_\_\_\_\_
- (03) Object carried by occupant, (specify): \_\_\_\_\_
- (04) Adaptive/assistive controls, (specify): \_\_\_\_\_
- (05) Fire in vehicle
- (06) Thermal burns
- (07) Rescue or emergency efforts
- (88) Other damage source (specify): \_\_\_\_\_
- (95) Damaged, unknown source
- (96) Deployed, unknown if damaged
- (97) Not deployed
- (98) Unknown if deployed
- (99) Unknown

**Was The Air Bag Tethered?**

- (0) Not equipped/not available
- (1) No
- (2) Yes (specify number of tether straps): \_\_\_\_\_
- (3) Deployed, unknown if tethered
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

**Did The Air Bag Have Vent Ports?**

- (0) Not equipped/not available
- (1) No
- (2) Yes (specify number of vent ports): \_\_\_\_\_
- (3) Deployed, unknown if vent ports present
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

**Was the Air Bag in this Occupant's Position Contacted by Another Occupant?**

- (0) Not equipped/not available
- (1) No
- (2) Yes (specify): \_\_\_\_\_
- (3) Deployed, unknown if other occupant contact to air bag
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

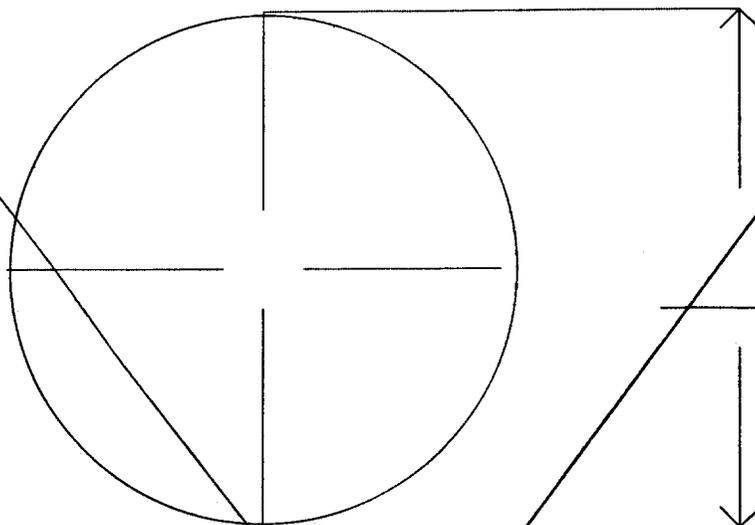
**Was This Occupant Wearing Eye-wear?**

- (0) Not equipped/not available
- (1) No
- (2) Eyeglasses/sunglasses
- (3) Contact lenses
- (4) Deployed, unknown if eyewear worn
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

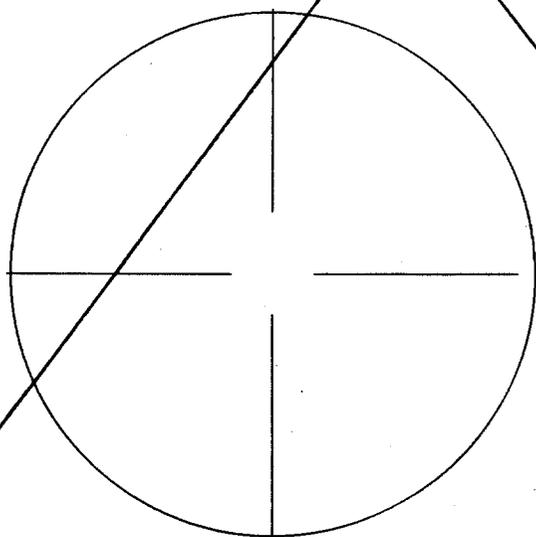
**DRIVER AIR BAG DAMAGE AND CONTACT SKETCHES**

1. SKETCH DAMAGE AND CONTACT EVIDENCE ON DRIVER AIR BAG (Front)

No BAG  
NA



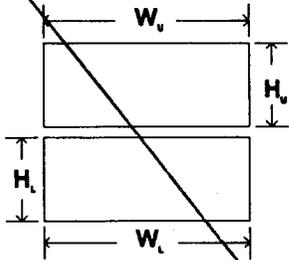
2. SKETCH DAMAGE AND CONTACT EVIDENCE ON DRIVER AIR BAG (Back)



**DRIVER AIR BAG SKETCHES (Cont'd)**

**3. DRIVER AIR BAG MODULE COVER FLAP SIZE (DOUBLE)**

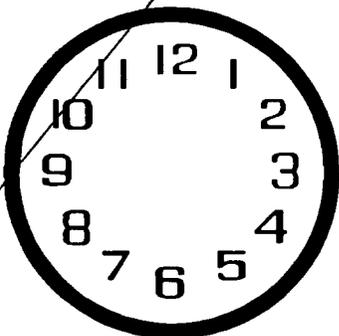
- a. Upper Flap                      b. Lower Flap  
width ( $W_U$ ) \_\_\_\_\_ width ( $W_L$ ) \_\_\_\_\_  
height ( $H_U$ ) \_\_\_\_\_ height ( $H_L$ ) \_\_\_\_\_



**4. SKETCH OF OTHER TYPE OF AIR BAG MODULE FLAP AND SIZE**

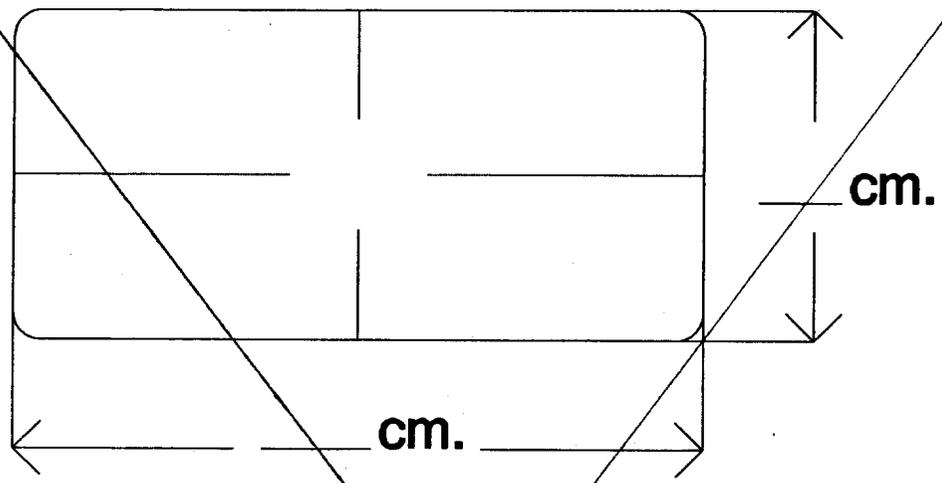
**5. SKETCH OF OTHER TYPE OF AIR BAG VENT PORTS**

**6. SKETCH LOCATION OF CIRCULAR AIR BAG VENT PORTS**

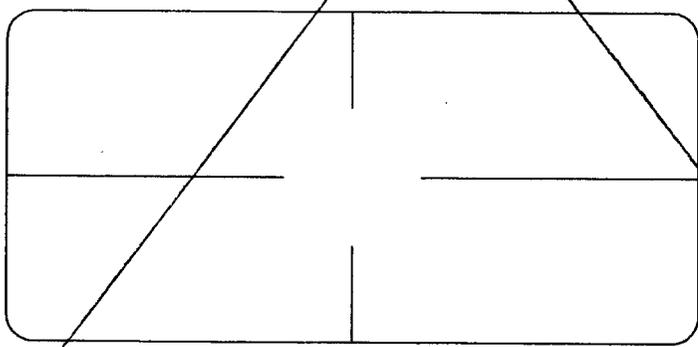


**PASSENGER AIR BAG DAMAGE AND CONTACT SKETCHES**

1. SKETCH DAMAGE AND CONTACT EVIDENCE ON PASSENGER AIR BAG (Front)



2. SKETCH DAMAGE AND CONTACT EVIDENCE ON PASSENGER AIR BAG (Back)



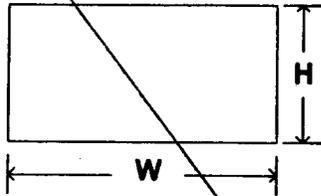
**PASSENGER AIR BAG SKETCHES (Cont'd)**

**3. PASSENGER AIR BAG MODULE COVER FLAP SIZE (SINGLE)**

a. Flap

width (W) \_\_\_\_\_

height (H) \_\_\_\_\_



**4. PASSENGER AIR BAG MODULE COVER FLAP SIZE (DOUBLE)**

a. Upper Flap

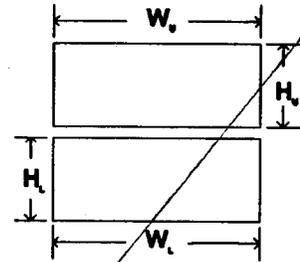
b. Lower Flap

width ( $W_U$ ) \_\_\_\_\_

width ( $W_L$ ) \_\_\_\_\_

height ( $H_U$ ) \_\_\_\_\_

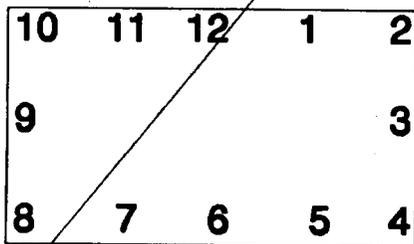
height ( $H_L$ ) \_\_\_\_\_



**5. SKETCH OF OTHER TYPE OF AIR BAG MODULE FLAP AND SIZE**

**6. SKETCH OF OTHER TYPE OF AIR BAG VENT PORTS**

**7. SKETCH LOCATION OF RECTANGULAR AIR BAG VENT PORTS**



**"OTHER" AIR BAG DAMAGE AND CONTACT SKETCHES**

1. SKETCH DAMAGE AND CONTACT EVIDENCE ON "OTHER" AIR BAG (Front)

2. SKETCH DAMAGE AND CONTACT EVIDENCE ON "OTHER" AIR BAG (Back)

*"OTHER"* AIR BAG SKETCHES (Cont'd)

3. SKETCH AIR BAG MODULE FLAP AND SIZE OR OPENING FOR AIRBAG

4. SKETCH AIR BAG VENT PORTS

### 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
<b>F I R S T</b>	Head Restraint Type/Damage	0	0	0
	Seat Type	05	05	05
	Seat Performance	6	6	5
	Seat Orientation	1	1	1
	Seat Track Position	4	4	4
	Seat Back Incline Pre/Post Impact	01	01	01
<b>S E C O N D</b>	Head Restraint Type/Damage	<b>NO SECOND SEAT</b>		
	Seat Type			
	Seat Performance			
	Seat Orientation			
	Seat Track Position			
	Seat Back Incline Pre/Post Impact			
<b>T H I R D</b>	Head Restraint Type/Damage	<b>NO THIRD SEAT</b>		
	Seat Type			
	Seat Performance			
	Seat Orientation			
	Seat Track Position			
	Seat Back Incline Pre/Post Impact			
<b>O T H E R</b>	Head Restraint Type/Damage	<b>NO OTHER SEAT</b>		
	Seat Type			
	Seat Performance			
	Seat Orientation			
	Seat Track Position			
	Seat Back Incline Pre/Post Impact			

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

**HEAD RESTRAINTS/SEAT EVALUATION**

**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): back panel 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

**Seat Track Adjusted Position Prior To Impact**

- (0) Occupant not seated or no seat
  - (1) Non-adjustable seat track
- Adjustable Seat Track*
- (2) Seat at forward most track position
  - (3) Seat between forward most and middle track positions
  - (4) Seat at middle track position
  - (5) Seat between middle and rear most track positions
  - (6) Seat at rear most track position
  - (9) Unknown

**Seat Back Incline Prior and Post Impact**

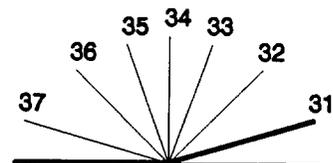
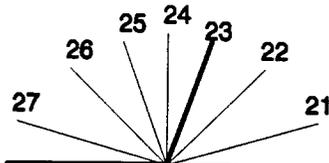
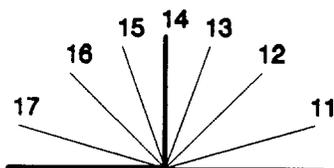
- (00) Occupant not seated or no seat
  - (01) Not adjustable
- Upright prior to impact*
- (11) Moved to completely rearward position
  - (12) Moved to rearward midrange position
  - (13) Moved to slightly rearward position
  - (14) Retained pre-impact position
  - (15) Moved to slightly forward position
  - (16) Moved to forward midrange position
  - (17) Moved to completely forward position

*Slightly reclined prior to impact*

- (21) Moved to completely rearward position
- (22) Moved to rearward midrange position
- (23) Retained pre-impact position
- (24) Moved to upright position
- (25) Moved to slightly forward position
- (26) Moved to forward midrange position
- (27) Moved to completely forward position

*Completely reclined prior to impact*

- (31) Retained pre-impact position
- (32) Moved to rearward midrange position
- (33) Moved to slightly rearward position
- (34) Moved to upright position
- (35) Moved to slightly forward position
- (36) Moved to forward midrange position
- (37) Moved to completely forward position
- (99) Unknown



Coding diagrams for *Seat Back Incline Position Prior and Post Impact*

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

## 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>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <p><b>1. Type of Child Safety Seat</b></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): _____            (8) Unknown child safety seat type            (9) Unknown if child safety seat used</p> <p><b>2. Child Safety Seat Orientation</b></p> <p>(00) No child safety seat</p> <p>Designed for Rear Facing for This Age/Weight            (01) Rear facing            (02) Forward facing            (08) Other orientation (specify): _____            (09) Unknown orientation</p> <p>Designed for Forward Facing for This Age/Weight            (11) Rear facing            (12) Forward facing            (18) Other orientation (specify): _____            (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): _____            (29) Unknown orientation</p> <p>(99) Unknown if child safety seat used</p> <p><b>3. Child Safety Seat Harness Usage</b></p> </div> <div style="width: 48%;"> <p><b>4. Child Safety Seat Shield Usage</b></p> <p><b>5. Child Safety Seat Tether Usage</b>            Note: Options Below Are Used for Variables 3-5.            (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><b>6. Child Safety Seat Make/Model</b>            (Specify make/model and occupant number)</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> </div> </div>						

**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):

*\* NO AFTER INTERVIEW*

*probable ejection (partial) thru backlite (disintegrated)  
trajectory of impact #1.*

*1 occ #3 riding in truck bed*

Occupant Number	01	02				
Ejection	2	2				
(Note on Vehicle Interior Sketch) Ejection Area	6	6				
Ejection Medium	3	3				
Medium Status	2	2				

**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):  
*truck bed*
- (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)



## ORIGINAL SPECIFICATIONS WORK SHEET

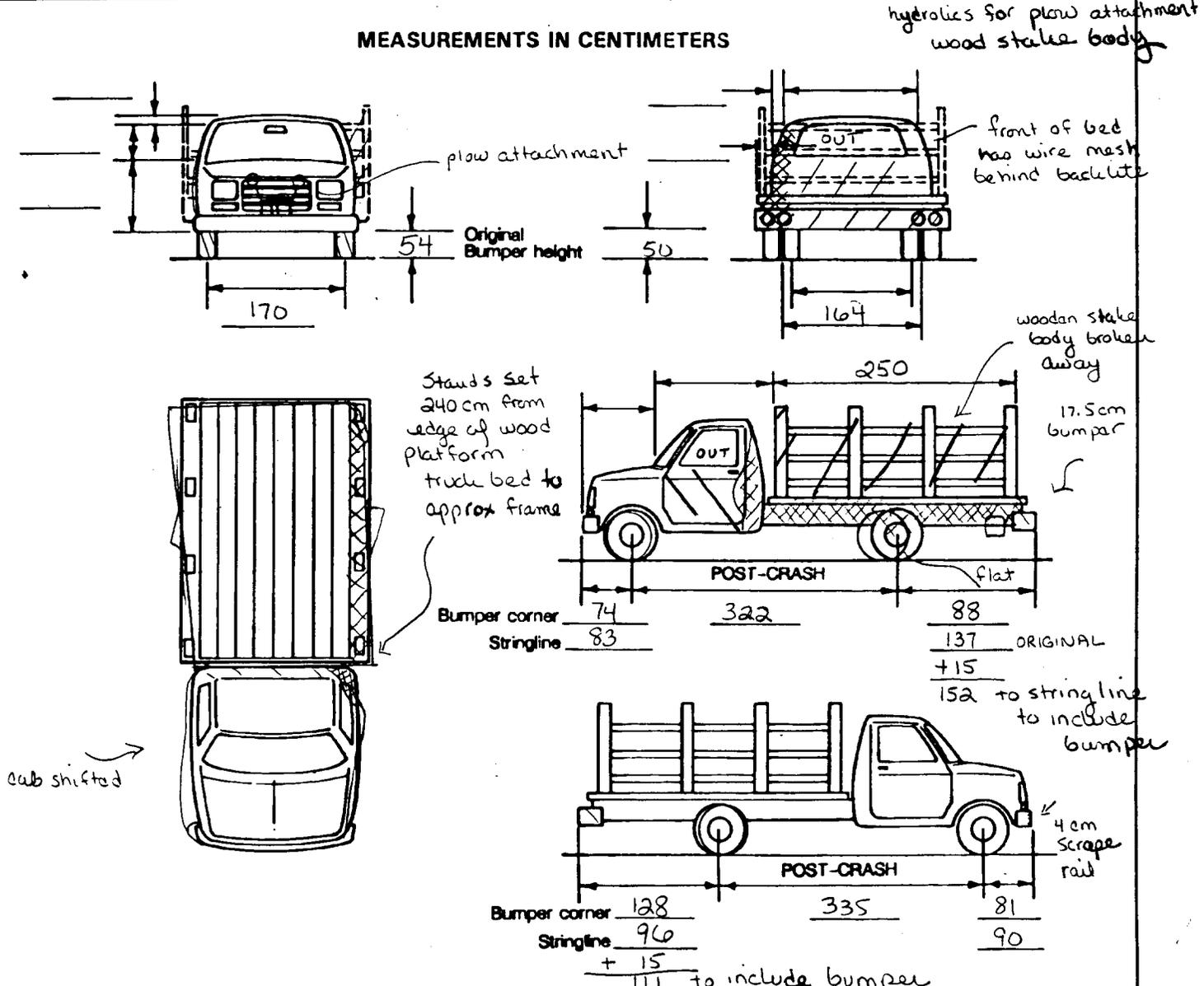
Wheelbase	<u>133.0</u>	inches	x 2.54	=	<u>338</u>	cm
Overall Length	<u>208.3</u>	inches	x 2.54	=	<u>529</u>	cm
Maximum Width	<u>77.2</u>	inches	x 2.54	=	<u>196</u>	cm
Curb Weight	* <u>3,961</u>	pounds	x .4536	=	<u>1,797</u>	kg
Average Track	<u>66.0</u>	inches	x 2.54	=	<u>167</u>	cm
Front Overhang	<u>28.7</u>	inches	x 2.54	=	<u>73</u>	cm
Rear Overhang	<u>46.6</u>	inches	x 2.54	=	<u>118</u>	cm
Undeformed End Width	REAR <u>72.0</u>	inches	x 2.54	=	<u>182</u>	cm
Engine Size: cyl./displ.	_____	cc	x .001	=	_____	L
	_____	CID	x .0164	=	_____	L

*incomplete chassis-cab weight 80 gas truck under  
48 + 100 lbs*

### VEHICLE DAMAGE SKETCH

<p><b>TIRE-WHEEL DAMAGE</b></p> <p>a. Rotation physically restricted      b. Tire deflated</p> <p>RF <u>2</u>      RF <u>2</u>          LF <u>2</u>      LF <u>2</u>          RR <u>2</u>      RR <u>1</u>          LR <u>2</u>      LR <u>2</u></p> <p>(1) Yes (2) No (8) NA (9) Unk.</p>	<p><b>ORIGINAL SPECIFICATIONS</b></p> <p>Wheelbase <u>338</u> cm          Overall Length <u>529</u> cm          Maximum Width <u>196</u> cm          Curb Weight <u>1797</u> kg          Average Track <u>167</u> cm          Front Overhang <u>73</u> cm          Rear Overhang <u>118</u> cm          Undeformed End Width <u>188</u> / <u>182</u> cm          Engine Size: cyl./displ. <u>V8</u> / <u>5.0</u> L</p>	<p><b>WHEEL STEER ANGLES</b> (For locked front wheels or displaced rear axles only)</p> <p>RF ± _____ °          LF ± _____ °          RR ± _____ °          LR ± _____ °</p> <p>Within ± 5 degrees</p>
<p><b>TYPE OF TRANSMISSION</b></p> <p><input type="checkbox"/> Manual    <input checked="" type="checkbox"/> Automatic</p> <p>END SHIFT ≥ 10 CM</p> <p><input type="checkbox"/> Yes    <input type="checkbox"/> No</p>	<p><b>DRIVE WHEELS</b></p> <p><input type="checkbox"/> FWD    <input type="checkbox"/> RWD    <input checked="" type="checkbox"/> 4WD</p> <p>Approximate Cargo Weight <u>?</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.



### COLLISION DEFORMATION CLASSIFICATION

**HIGHEST DELTA "V"**

Accident Event Sequence Number	Object Contacted	(1) (2) Direction of Force	(3) Deformation Location	(4) Longitudinal or Lateral Location	(5) Vertical or Lateral Location	(6) Type of Damage Distribution	(7) Deformation Extent
4. <u>01</u>	5. <u>02</u>	6. <u>06</u>	7. <u>B</u>	8. <u>L</u>	9. <u>A</u>	10. <u><sup>E</sup><del>W</del></u>	11. <u>09</u>

**Second Highest Delta "V"**

12. <u>02</u>	13. <u>56</u>	14. <u>12</u>	15. <u>F</u>	16. <u>R</u>	17. <u>L</u>	18. <u>S</u>	19. <u>01</u>
---------------	---------------	---------------	--------------	--------------	--------------	--------------	---------------

### CRUSH PROFILE IN CENTIMETERS

The crush profile for the damage described in the CDC(s) above should be documented in the appropriate space below. (ALL MEASUREMENTS ARE IN CENTIMETERS.)

**HIGHEST DELTA "V"**

20. L	21. C <sub>1</sub>	C <sub>2</sub>	C <sub>3</sub>	C <sub>4</sub>	C <sub>5</sub>	C <sub>6</sub>	22. ±D
<u>182</u>	<u>058</u>	<u>021</u>	<u>009</u>	<u>000</u>	<u>000</u>	<u>000</u>	<u>+0077</u>

**Second Highest Delta "V"**

23. L	24. C <sub>1</sub>	C <sub>2</sub>	C <sub>3</sub>	C <sub>4</sub>	C <sub>5</sub>	C <sub>6</sub>	25. ±D
---	---	---	---	---	---	---	+
---	---	---	---	---	---	---	-

26. Undeformed End Width  
(Coded when highest severity impact is an end plane impact.) 182  
 \_\_\_\_\_ Code to the nearest centimeter  
 (250) 250 centimeters or more  
 (998) No highest severity end plane impact  
 (999) Unknown

27. Direct Damage Width  
(For highest severity impact) 029  
 \_\_\_\_\_ Code to the nearest centimeter  
 (250) 250 centimeters or more  
 (999) Unknown

28. Original Wheelbase 338  
 \_\_\_\_\_ Code to the nearest centimeter  
 (650) 650 centimeters or more  
 (999) Unknown  
133.0 inches X 2.54 = 338 centimeters

29. Original Average Track Width 170  
 \_\_\_\_\_ Code to the nearest centimeter  
 (185) 185 centimeters or more  
 (999) Unknown  
67.0 inches X 2.54 = 170 centimeters

43. Leakage Location of Fuel System-1 3

44. Leakage Location of Fuel System-2 0

(0) No fuel tank  
(1) No fuel leakage

*Primary Area Of Leakage*

(2) Tank  
(3) Filler neck  
(4) Cap  
(5) Lines/pump/filter  
(6) Vent/emission recovery  
(8) Other (specify): \_\_\_\_\_  
(9) Unknown

45. Fuel Type-1 01

46. Fuel Type-2 0 0

*Single Fuel Type*

(00) No fuel tank  
(01) Gasoline  
(02) Diesel  
(03) CNG (Compressed Natural Gas)  
(04) LPG (Liquid Petroleum Gas) also known as Propane  
(05) LNG (Liquid Natural Gas)  
(06) Methanol (M100 or M85)  
(07) Ethanol (E100 or E85)  
(08) Other (Hydrogen or others) (specify): \_\_\_\_\_

*Electric Powered or Electric/Solar Powered Vehicles*

(10) Lead Acid Battery  
(11) Nickel-Iron Battery  
(12) Nickel-Cadmium Battery  
(13) Sodium Metal Chloride Battery  
(14) Sodium Sulfur Battery  
(18) Other (Specify): \_\_\_\_\_

(98) Other Hybrid (specify): \_\_\_\_\_

(99) Unknown fuel type

47. Is This Vehicle Equipped With More Than Two Fuel Tanks? 0

(0) No (one or two tanks only)

*Yes - More Than Two Tanks*

(1) Yes -- no damage to any tank or filler cap and no fuel system leakage

(2) Yes -- no damage to any tank or filler cap but there is fuel system leakage (specify leakage location): \_\_\_\_\_

(3) Yes -- damage to an additional tank or filler cap and there is fuel system leakage (specify the following):  
 Type of tank \_\_\_\_\_  
 Tank location \_\_\_\_\_  
 Filler cap location \_\_\_\_\_  
 Tank damage \_\_\_\_\_  
 Location of leakage \_\_\_\_\_  
 Type of fuel \_\_\_\_\_

(9) Unknown if more than two tanks

**COMMENTS**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\*\*\* STOP: IF THE CDS APPLICABLE VEHICLE WAS NOT TOWED \*\*\*

(GV10=0)

DO NOT COMPLETE THE INTERIOR VEHICLE FORM.

**FUEL SYSTEM**

30. Are CDCs Documented but Not Coded on The Automated File? 0  
 (0) No  
 (1) Yes
31. Researcher's Assessment of Vehicle Disposition 1  
 (0) Not towed due to vehicle damage  
 (1) Towed due to vehicle damage  
 (9) Unknown
32. Is This A Multi-Stage Manufactured Vehicle And/Or A Certified Altered Vehicle? 9  
 (0) No post manufacturer modifications  
 (1) Yes - post manufacturer modifications (specify): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 (Include photograph of CERTIFICATION PLACARD in case report)  
 (9) Unknown if vehicle is modified

35. Location of Fuel Tank-1 Filler Cap 4
36. Location of Fuel Tank-2 Filler Cap 0  
 (0) No fuel tank  
 (1) On back plane  
 (2) Aft of center of the rear wheels (rear axle) on left side plane  
 (3) Aft of center of the rear wheels (rear axle) on right side plane  
 (4) Forward of center of the rear wheels (rear axle) on left side plane  
 (5) Forward of center of the rear wheels (rear axle) on right side plane  
 (6) Over the center of the rear wheels (rear axle) on left side plane  
 (7) Over the center of the rear wheels (rear axle) on right side plane  
 (8) Other (specify): \_\_\_\_\_  
 (9) Unknown
37. Type of Fuel Tank-1 1
38. Type of Fuel Tank-2 0  
 (0) No fuel tank (electrical vehicle)  
 (1) Metallic  
 (2) Non-metallic  
 (9) Unknown

**FIRE OCCURRENCE**

33. Fire Occurrence 0  
 (0) No fire  
 Yes, fire occurred  
 (1) Minor  
 (2) Major  
 (9) Unknown
34. Origin of Fire 0  
 (0) No fire  
 (1) Vehicle exterior (front, side, back, top)  
 (2) Exhaust system  
 (3) Fuel tank (and other fuel retention system parts)  
 (4) Engine compartment  
 (5) Cargo/trunk compartment  
 (6) Instrument panel  
 (7) Passenger compartment area  
 (8) Other location (specify): \_\_\_\_\_  
 \_\_\_\_\_  
 (9) Unknown

39. Location of Fuel Tank-1 5
40. Location of Fuel Tank-2 0  
 (0) No fuel tank  
 (1) Aft of center of the rear wheels (rear axle) centered  
 (2) Aft of center of the rear wheels (rear axle) left side  
 (3) Aft of center of the rear wheels (rear axle) right side  
 (4) Forward of center of the rear wheels (rear axle) centered  
 (5) Forward of center of the rear wheels (rear axle) left side  
 (6) Forward of center of the rear wheels (rear axle) right side  
 (7) Over center of the rear wheels (rear axle)  
 (8) Other (specify): \_\_\_\_\_  
 (9) Unknown
41. Damage to Fuel Tank-1 7
42. Damage to Fuel Tank-2 0  
 (0) No fuel tank  
 (1) No damage to fuel tank  
 (2) Deformed, no seam failure  
 (3) Deformed, with a seam failure  
 (4) Punctured  
 (5) Lacerated (ripped)  
 (6) Abraded (scraped)  
 (7) Filler neck separation from the fuel tank  
 (8) Other damage (specify): \_\_\_\_\_  
 (9) Unknown



# OCCUPANT ASSESSMENT FORM

1. Primary Sampling Unit Number 02  
 2. Case Number - Stratum 010F  
 3. Vehicle Number 01  
 4. Occupant Number 01

## OCCUPANT'S CHARACTERISTICS

5. Occupant's Age 34  
 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 1  
 (1) Male  
 (2) Female-not reported pregnant  
 (3) Female-pregnant-1st trimester(1st-3rd month)  
 (4) Female-pregnant-2nd trimester(4th-6th month)  
 (5) Female-pregnant-3rd trimester(7th-9th month)  
 (6) Female-pregnant-term unknown  
 (9) Unknown

7. Occupant's Height 180  
 Code actual height to the nearest  
 centimeter.  
 (999) Unknown  
71 inches X 2.54 = 180 centimeters

8. Occupant's Weight 102  
 Code actual weight to the nearest  
 kilogram.  
 (999)Unknown  
225 pounds X .4536 = 102 kilograms

9. Occupant's Role 1  
 (1) Driver  
 (2) Passenger  
 (9) Unknown

## OCCUPANT'S SEATING

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 2  
 (0) Normal posture

*Abnormal posture*  
 (1) Kneeling or standing on seat  
 (2) Lying on or across seat / leaning to (2)  
 (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

- (0) Not entrapped/exit not inhibited
- (1) Entrapped/pinned - mechanically restrained
- (2) Could not exit vehicle due to jammed doors, fire, etc.  
(specify): \_\_\_\_\_
- (9) Unknown

17. Occupant Mobility 4

- (0) Occupant fatal before removed from vehicle
- (1) Removed from vehicle while unconscious or disoriented
- (2) Removed from vehicle due to injuries
- (3) Exited vehicle with some assistance
- (4) Exited vehicle under own power
- (5) Occupant fully ejected
- (9) Unknown

## BELT SYSTEM FUNCTION

18. 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

19. Manual (Active) Belt System Use 00

- (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

20. Proper Use of Manual (Active) Belts 0

- (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

21. Manual (Active) Belt Failure Modes During Accident 0

- (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

22. Shoulder Belt Upper Anchorage Adjustment 1

- (0) No shoulder belt
- (1) No upper anchorage adjustment for shoulder belt

*Adjustable shoulder Belt Upper Anchorage*

- (2) In full up position
- (3) In mid position
- (4) In full down position
- (5) Position unknown
- (9) Unknown if position has adjustable upper anchorage adjustment

23. 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

24. 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

25. Automatic (Passive) Belt System Type 0

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

26. 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

27. 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

**POLICE REPORTED RESTRAINT USE**

**AIR BAG SYSTEM FUNCTION**

28. Police Reported Belt Use 9
- (0) None used
  - (1) Police did not indicate belt use
  - (2) Shoulder belt
  - (3) Lap belt
  - (4) Lap and shoulder belt
  - (5) Belt used, type not specified
  - (6) Child safety seat.
  - (7) Automatic belt
  - (8) Other type belt, (specify): \_\_\_\_\_
  - (9) Police indicated "unknown" \_\_\_\_\_

29. Police Reported Air Bag Availability/Function 0
- (0) No air bag available
  - (1) Police did not indicate air bag availability/function
  - (2) Deployed
  - (3) Not deployed
  - (4) Unknown if deployed
  - (9) Police indicated "unknown"

Check the Primary Source Used In Determining Belt Use.

- Not equipped/not available/destroyed or rendered inoperative
- Vehicle inspection
- Official injury data
- Driver/occupant interview
- Other (specify): \_\_\_\_\_
- Unknown if belt used \_\_\_\_\_

30. Frontal Air Bag System Availability/Function (This Occupant Position) 0
- (0) Not equipped/not available
  - (1) Air bag
- Non-functional*
- (2) Air bag disconnected (specify): \_\_\_\_\_
  - (3) Air bag not reinstalled \_\_\_\_\_
  - (9) Unknown

31. Frontal Air Bag System Deployment (This Occupant Position) 0
- (0) Not equipped/not available
  - (1) Deployed during accident (as a result of impact)
  - (2) Deployed inadvertently just prior to accident
  - (3) Deployed, details unknown
  - (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)
  - (5) Unknown if deployed
  - (7) Nondeployed
  - (9) Unknown

32. Other Than First Seat Frontal Air Bag Availability/Function (This Occupant Position) 0
- (0) Not equipped/not available
  - (1) Air bag
- Non-functional*
- (2) Air bag disconnected (specify): \_\_\_\_\_
  - (3) Air bag not reinstalled \_\_\_\_\_
  - (9) Unknown
- Specify type of "other" air bag present:*
- \_\_\_\_\_

33. Air Bag(s) Deployment, Other Than First Seat Frontal (This Occupant Position) 0
- (0) Not equipped with an "other" air bag
  - (1) Deployed during accident (as a result of impact)
  - (2) Deployed inadvertently just prior to accident
  - (3) Deployed, details unknown
  - (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)
  - (5) Unknown if deployed
  - (7) Nondeployed
  - (9) Unknown

34. Are There Indications of Air Bag System Failure? (This Occupant Position) 0
- (0) Not equipped/not available
  - (1) No
  - (2) Yes (specify): \_\_\_\_\_
  - (9) Unknown

**FIRST SEAT FRONTAL AIR BAG SYSTEM  
EVALUATION** *continued*
**HEAD RESTRAINT AND SEAT EVALUATION**

44. Source of Air Bag Damage 00  
 (00) Not equipped/not available  
 (01) Not damaged  
 (02) Object worn by occupant, (specify):  
 \_\_\_\_\_  
 (03) Object carried by occupant, (specify):  
 \_\_\_\_\_  
 (04) Adaptive/assistive controls, (specify):  
 \_\_\_\_\_  
 (05) Fire in vehicle  
 (06) Thermal burns  
 (07) Rescue or emergency efforts  
 (08) Other damage source (specify):  
 \_\_\_\_\_  
 (95) Damaged, unknown source  
 (96) Deployed, unknown if damaged  
 (97) Not deployed  
 (98) Unknown if deployed  
 (99) Unknown
45. Was The Air Bag Tethered? 0  
 (0) Not equipped/not available  
 (1) No  
 (2) Yes (specify number of tether straps):  
 \_\_\_\_\_  
 (3) Deployed, unknown if tethered  
 (7) Not deployed  
 (8) Unknown if deployed  
 (9) Unknown
46. Did The Air Bag Have Vent Ports? 0  
 (0) Not equipped/not available  
 (1) No  
 (2) Yes (specify number of vent ports):  
 \_\_\_\_\_  
 (3) Deployed, unknown if vent ports present  
 (7) Not deployed  
 (8) Unknown if deployed  
 (9) Unknown
47. Was the Air Bag in this Occupant's Position Contacted by Another Occupant? 0  
 (0) Not equipped/not available  
 (1) No  
 (2) Yes (specify):  
 \_\_\_\_\_  
 (3) Deployed, unknown if other occupant contact to air bag  
 (7) Not deployed  
 (8) Unknown if deployed  
 (9) Unknown
48. Was This Occupant Wearing Eye-wear? 0  
 (0) Not equipped/not available  
 (1) No  
 (2) Eyeglasses/sunglasses  
 (3) Contact lenses  
 (4) Deployed, unknown if eyewear worn  
 (7) Not deployed  
 (8) Unknown if deployed  
 (9) Unknown

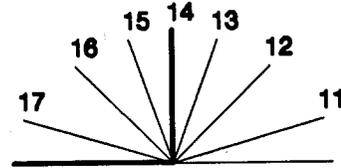
49. Head Restraint Type/Damage by Occupant at This Occupant Position 0  
 (0) No head restraints  
 (1) Integral—no damage  
 (2) Integral—damaged during accident  
 (3) Adjustable—no damage  
 (4) Adjustable—damaged during accident  
 (5) Add-on—no damage  
 (6) Add-on—damaged during accident  
 (8) Other (specify):  
 \_\_\_\_\_  
 (9) Unknown
50. Seat Type (this Occupant Position) 05  
 (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) Box mounted seat (i.e., van type)  
 (10) Other seat type (specify):  
 \_\_\_\_\_  
 (99) Unknown
51. 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
52. Seat Track Adjusted Position Prior To Impact 4  
 (0) Occupant not seated or no seat  
 (1) Non-adjustable seat track  
  
*Adjustable Seat Track*  
 (2) Seat at forward most track position  
 (3) Seat between forward most and middle track positions  
 (4) Seat at middle track position  
 (5) Seat between middle and rear most track positions  
 (6) Seat at rear most track position  
 (9) Unknown

**HEAD RESTRAINT AND SEAT EVALUATION *continued***

53. Seat Back Incline Prior and Post Impact 01  
 (00) Occupant not seated or no seat  
 (01) Not adjustable

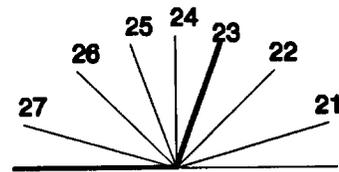
*Upright prior to impact*

- (11) Moved to completely rearward position
- (12) Moved to rearward midrange position
- (13) Moved to slightly rearward position
- (14) Retained pre-impact position
- (15) Moved to slightly forward position
- (16) Moved to forward midrange position
- (17) Moved to completely forward position



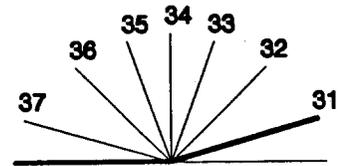
*Slightly reclined prior to impact*

- (21) Moved to completely rearward position
- (22) Moved to rearward midrange position
- (23) Retained pre-impact position
- (24) Moved to upright position
- (25) Moved to slightly forward position
- (26) Moved to forward midrange position
- (27) Moved to completely forward position



*Completely reclined prior to impact*

- (31) Retained pre-impact position
- (32) Moved to rearward midrange position
- (33) Moved to slightly rearward position
- (34) Moved to upright position
- (35) Moved to slightly forward position
- (36) Moved to forward midrange position
- (37) Moved to completely forward position



(99) Unknown

54. Seat Performance (this Occupant Position) 6

- (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 track/anchors failed
- (5) Deformed by impact of occupant
- (6) Deformed by passenger compartment intrusion, (specify): rear panel of truck cab
- (7) Combination of above (specify): \_\_\_\_\_
- (8) Other (specify): \_\_\_\_\_
- (9) Unknown

## CHILD SAFETY SEAT

55. 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

56. Type of Child Safety Seat 0  
 (0) No child safety seat  
 (1) Infant seat  
 (2) Toddler seat  
 (3) Convertible seat  
 (4) Booster seat - with shield  
 (5) Booster seat - without shield  
 (7) Other type child safety seat (specify):  
 \_\_\_\_\_  
 (8) Unknown child safety seat type  
 (9) Unknown if child safety seat used

57. 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

58. Child Safety Seat Harness Usage 00  
 59. Child Safety Seat Shield Usage 00  
 60. Child Safety Seat Tether Usage 00

Note: Options below applicable to  
 Variables OA58-OA60.  
 (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**61. Injury Severity (Police Rating) 1

- (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

62. Treatment - Mortality 4

- (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
- (7) Treatment - other (specify):  
\_\_\_\_\_
- (8) Transported to a medical facility-unknown if treated
- (9) Unknown

63. Type Of Medical Facility (for Initial Treatment) 2

- (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

64. 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

65. Working Days Lost 00

- \_\_\_\_\_ 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 WORK HERE****VARIABLES 66-74****TO BE CODED BY THE ZONE CENTER**

**TO BE CODED BY THE ZONE CENTER****INJURY CONSEQUENCES****TRAUMA DATA**

66. Time to Death 00  
 \_\_\_\_\_ 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

67. 1st Medically Reported Cause of Death 00

68. 2nd Medically Reported Cause of Death 00

69. 3rd Medically Reported Cause of Death 00  
 \_\_\_\_\_ 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  
 (96) Mode of death given but specific injuries are not linked to cause of death. (specify):

(97) Other result (includes fatal ruled disease) (specify): \_\_\_\_\_

(99) Unknown

70. Number of Recorded Injuries for This Occupant 03  
 \_\_\_\_\_ Code the actual number of injuries recorded for this occupant.  
 (00) No recorded injuries  
 (97) Injured, details unknown  
 (99) Unknown if injured

71. Glasgow Coma Scale (GCS) Score 15  
 (at Medical Facility)  
 (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

72. Was the Occupant Given Blood? 1  
 (1) No - blood not given  
 (2) Yes - blood given (specify units): \_\_\_\_\_  
 (9) Unknown if blood given

73. 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

**BELT USE DETERMINATION**

74. Primary Source of Belt Use Determination 1  
 (0) Not equipped/not available/destroyed or rendered inoperative  
 (1) Vehicle inspection  
 (2) Official injury data  
 (3) Driver/occupant interview  
 (8) Other (specify): \_\_\_\_\_  
 (9) Unknown if belt used



# OCCUPANT INJURY FORM

NATIONAL ACCIDENT SAMPLING SYSTEM  
CRASHWORTHINESS DATA SYSTEM

1. Primary Sampling Unit Number <u>02</u>	3. Vehicle Number <u>01</u>
2. Case Number - Stratum <u>010F</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.

*(1) forehead abrasion*  
*(2) lower abdomen contusion*  
*lower back contusion*

Source of Injury Data	A.I.S. - 90						Injury Source	Injury 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					
1st	5. <u>3</u>	6. <u>2</u>	7. <u>9</u>	8. <u>02</u>	9. <u>02</u>	10. <u>1</u>	11. <u>2</u>	12. <u>019</u>	13. <u>3</u>	14. <u>1</u>	15. <u>00</u>
2nd	16. <u>3</u>	17. <u>5</u>	18. <u>9</u>	19. <u>04</u>	20. <u>02</u>	21. <u>1</u>	22. <u>1</u>	23. <u>151</u>	24. <u>2</u>	25. <u>1</u>	26. <u>04</u>
3rd	27. <u>3</u>	28. <u>6</u>	29. <u>9</u>	30. <u>04</u>	31. <u>02</u>	32. <u>1</u>	33. <u>8</u>	34. <u>151</u>	35. <u>2</u>	36. <u>1</u>	37. <u>04</u>
4th	38. ___	39. ___	40. ___	41. ___	42. ___	43. ___	44. ___	45. ___	46. ___	47. ___	48. ___
5th	49. ___	50. ___	51. ___	52. ___	53. ___	54. ___	55. ___	56. ___	57. ___	58. ___	59. ___
6th	60. ___	61. ___	62. ___	63. ___	64. ___	65. ___	66. ___	67. ___	68. ___	69. ___	70. ___
7th	71. ___	72. ___	73. ___	74. ___	75. ___	76. ___	77. ___	78. ___	79. ___	80. ___	81. ___
8th	82. ___	83. ___	84. ___	85. ___	86. ___	87. ___	88. ___	89. ___	90. ___	91. ___	92. ___
9th	93. ___	94. ___	95. ___	96. ___	97. ___	98. ___	99. ___	100. ___	101. ___	102. ___	103. ___
10th	104. ___	105. ___	106. ___	107. ___	108. ___	109. ___	110. ___	111. ___	112. ___	113. ___	114. ___



**OCCUPANT INJURY CLASSIFICATION**

Body Region	Specific Anatomic Structure	Level of Injury	Aspect
(1) Head	<p><u>Vessels, Nerves, Organs.</u>  <u>Bones, Joints</u> are assigned consecutive two digit numbers beginning with 02.</p> <p>The exceptions to this rule apply to:</p> <p><u>Whole Area</u>                      (02) Skin - Abrasion                      (04) Skin - Contusion                      (06) Skin - Laceration                      (08) Skin - Avulsion                      (10) Amputation                      (20) Burn                      (30) Crush                      (40) Degloving                      (50) Injury - NFS                      (90) Trauma, other than mechanical</p> <p><u>Head - LOC</u>                      (02) Length of LOC                      (04) Level                      (06) of                      (08) Consciousness                      (10) Concussion</p> <p><u>Spine</u>                      (02) Cervical                      (04) Thoracic                      (06) Lumbar</p>	<p>Specific injuries are assigned consecutive two-digit numbers beginning with 02.</p> <p>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.</p> <p><b>Abbreviated Injury Scale</b></p> <p>(1) Minor Injury                      (2) Moderate Injury                      (3) Serious Injury                      (4) Severe Injury                      (5) Critical Injury                      (6) Maximum (untreatable)                      (7) Injured, unknown severity</p>	<p>(1) Right                      (2) Left                      (3) Bilateral                      (4) Central                      (5) Anterior                      (6) Posterior                      (7) Superior                      (8) Inferior                      (9) Unknown                      (0) Whole region</p>
(2) Face			
(3) Neck			
(4) Thorax			
(5) Abdomen			
(6) Spine			
(7) Upper Extremity			
(8) Lower Extremity			
(9) Unspecified			
<b>Type of Anatomic Structure</b>			
(1) Whole Area			
(2) Vessels			
(3) Nerves			
(4) Organs (includes Muscles/ligaments)			
(5) Skeletal (includes joints)			
(6) Head - LOC			
(9) Skin			

**SOURCE OF INJURY DATA**

**INJURY SOURCE**

**DIRECT/INDIRECT INJURY**

**CONFIDENCE LEVEL**

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

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

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

## INJURY SOURCES

### FRONT

- (001) Windshield
- (002) Mirror
- (003) Sunvisor
- (004) Steering wheel rim
- (005) Steering wheel hub/spoke
- (006) Steering wheel (combination of codes 004 and 005)
- (007) Steering column, transmission selector lever, other attachment
- (008) Cellular telephone or CB radio
- (009) Add on equipment (e.g., tape deck, air conditioner)
- (010) Left instrument panel and below
- (011) Center instrument panel and below
- (012) Right instrument panel and below
- (013) Glove compartment door
- (014) Knee bolster
- (015) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, mirror, or steering assembly (driver side only)
- (016) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, or mirror (passenger side only)
- (017) Windshield reinforced by exterior object (specify):

- (019) Other front object (specify):  
SNOW PLOW CONTROLS

### LEFT SIDE

- (051) Left side interior surface, excluding hardware or armrests
- (052) Left side hardware or armrest
- (053) Left A (A1/A2)-pillar
- (054) Left B-pillar
- (055) Other left pillar (specify):
- (056) Left side window glass
- (057) Left side window frame
- (058) Left side window sill
- (059) Left side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.
- (060) Other left side object (specify):

### RIGHT SIDE

- (101) Right side interior surface, excluding hardware or armrests

- (102) Right side hardware or armrest
- (103) Right A (A1/A2)-pillar
- (104) Right B-pillar
- (105) Other right pillar (specify):
- (106) Right side window glass
- (107) Right side window frame
- (108) Right side window sill
- (109) Right side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.
- (110) Other right side object (specify):

### INTERIOR

- (151) Seat, back support
- (152) Belt restraint webbing/buckle
- (153) Belt restraint B-pillar or door frame attachment point
- (154) Other restraint system component (specify):
- (155) Head restraint system
- (160) Other occupants (specify):
- (161) Interior loose objects
- (162) Child safety seat (specify):
- (163) Other interior object (specify):

### AIR BAG

- (170) Air bag-driver side
- (171) Air bag-driver side and eyewear
- (172) Air bag-driver side and jewelry
- (173) Air bag-driver side and object held
- (174) Air bag-driver side and object in mouth
- (175) Air bag compartment cover-driver side
- (176) Air bag compartment cover-driver side and eyewear
- (177) Air bag compartment cover-driver side and jewelry
- (178) Air bag compartment cover-driver side and object held
- (179) Air bag compartment cover-driver side and object in mouth
- (180) Air bag-passenger side
- (181) Air bag-passenger side and eyewear
- (182) Air bag-passenger side and jewelry

- (183) Air bag-passenger side and object held
- (184) Air bag-passenger side and object in mouth
- (185) Air bag compartment cover-passenger side
- (186) Air bag compartment cover-passenger side and eyewear
- (187) Air bag compartment cover-passenger side and jewelry
- (188) Air bag compartment cover-passenger side and object held
- (189) Air bag compartment cover-passenger side and object in mouth
- (190) Other air bag (specify):
- (195) Other air bag compartment cover (specify):

### ROOF

- (201) Front header
- (202) Rear header
- (203) Roof left side rail
- (204) Roof right side rail
- (205) Roof or convertible top

### FLOOR

- (251) Floor (including toe pan)
- (252) Floor or console mounted transmission lever, including console
- (253) Parking brake handle
- (254) Foot controls including parking brake

### REAR

- (301) Backlight (rear window)
- (302) Backlight storage rack, door, etc.
- (303) Other rear object (specify):

### ADAPTIVE (ASSISTIVE) DRIVING EQUIPMENT

- (401) Hand controls for braking/acceleration
- (402) Steering control devices (attached to OEM steering wheel)
- (403) Steering knob attached to steering wheel
- (405) Replacement steering wheel (i.e., reduced diameter)
- (406) Joy stick steering controls
- (407) Wheelchair tie-downs
- (408) Modification to seat belts, (specify):
- (409) Additional or relocated switches, (specify):
- (410) Raised roof

- (411) Wall mounted head rest (used behind wheel chair)
- (412) Other adaptive device (specify):

### EXTERIOR OF OCCUPANT'S VEHICLE

- (451) Hood
- (452) Outside hardware (e.g., outside mirror, antenna)
- (453) Other exterior surface or tires (specify):
- (454) Unknown exterior objects

### EXTERIOR OF OTHER MOTOR VEHICLE

- (501) Front bumper
- (502) Hood edge
- (503) Other front of vehicle (specify):
- (504) Hood
- (505) Hood ornament
- (506) Windshield, roof rail, A-pillar
- (507) Side surface
- (508) Side mirrors
- (509) Other side protrusions (specify):
- (510) Rear surface
- (511) Undercarriage
- (512) Tires and wheels
- (513) Other exterior of other motor vehicle (specify):
- (514) Unknown exterior of other motor vehicle

### OTHER VEHICLE OR OBJECT IN THE ENVIRONMENT

- (551) Ground
- (598) Other vehicle or object (specify):
- (599) Unknown vehicle or object

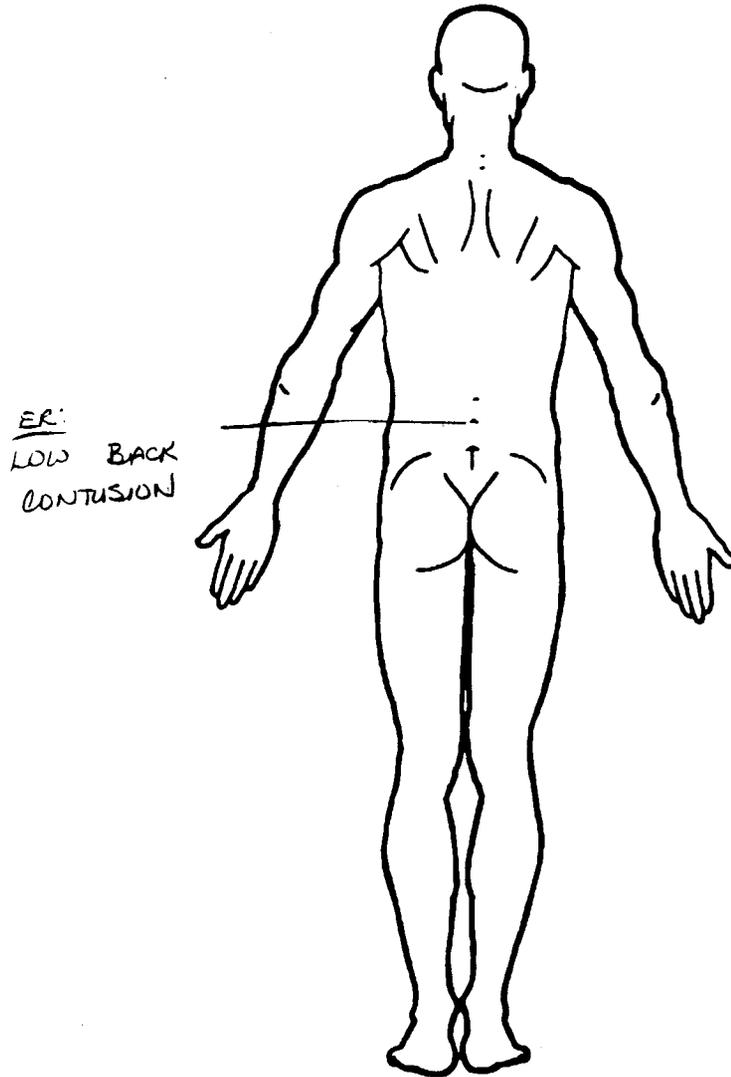
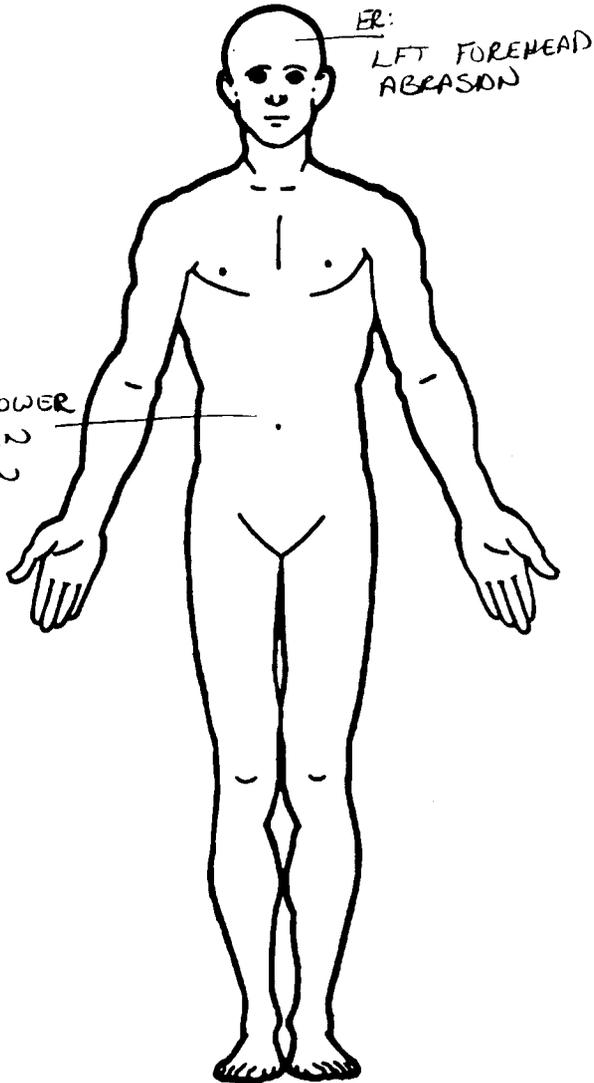
### NONCONTACT INJURY

- (601) Fire in vehicle
- (602) Flying glass
- (603) Other noncontact injury source (specify):
- (604) Air bag exhaust gases
- (697) Injured, unknown source

# 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.)

ER: NO LOSS OF CONSCIOUSNESS



ER:

# OFFICIAL INJURY DATA — SKELETAL INJURIES

Restrained?

No

Yes

Blood Alcohol Level (mg/dl)

BAL = ~~\_\_\_\_\_~~

NOT RECORDED

Glasgow Coma Scale Score

A 4 O 3 V 3  
GCSS = 15

Units of Blood Given

Units = \_\_\_\_\_

Arterial Blood Gases

pH = \_\_\_\_\_

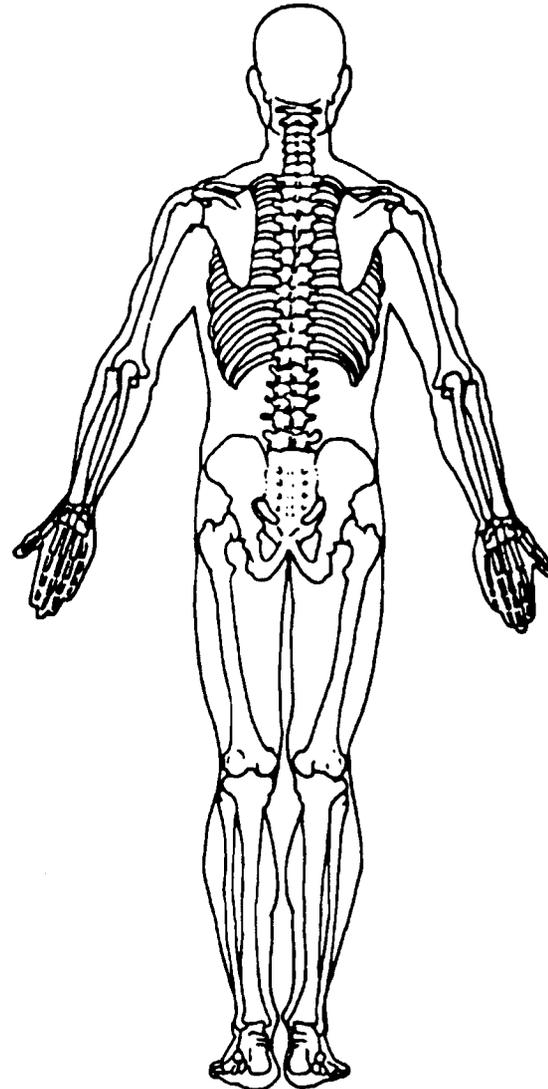
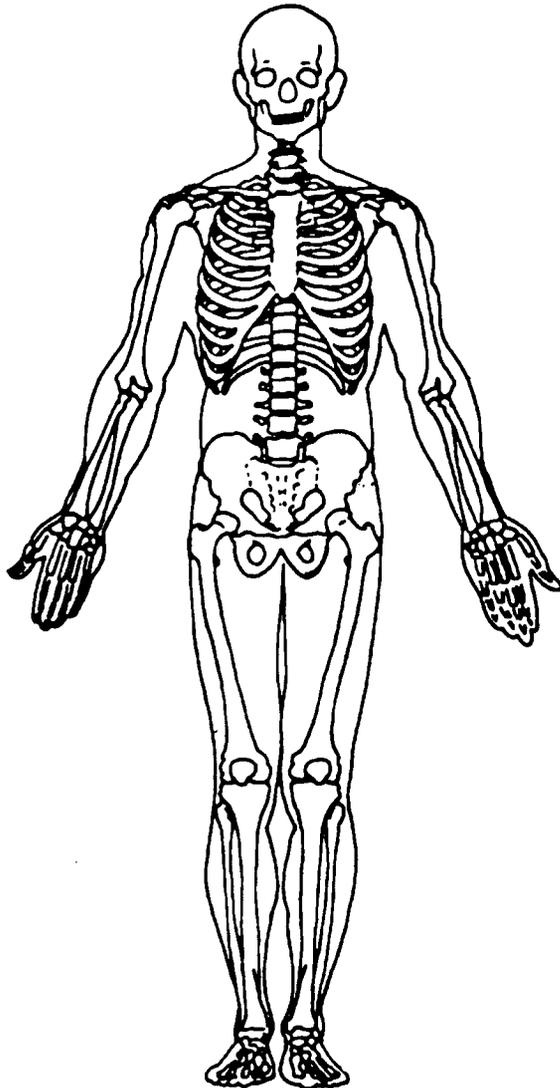
PO<sub>2</sub> = \_\_\_\_\_

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

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

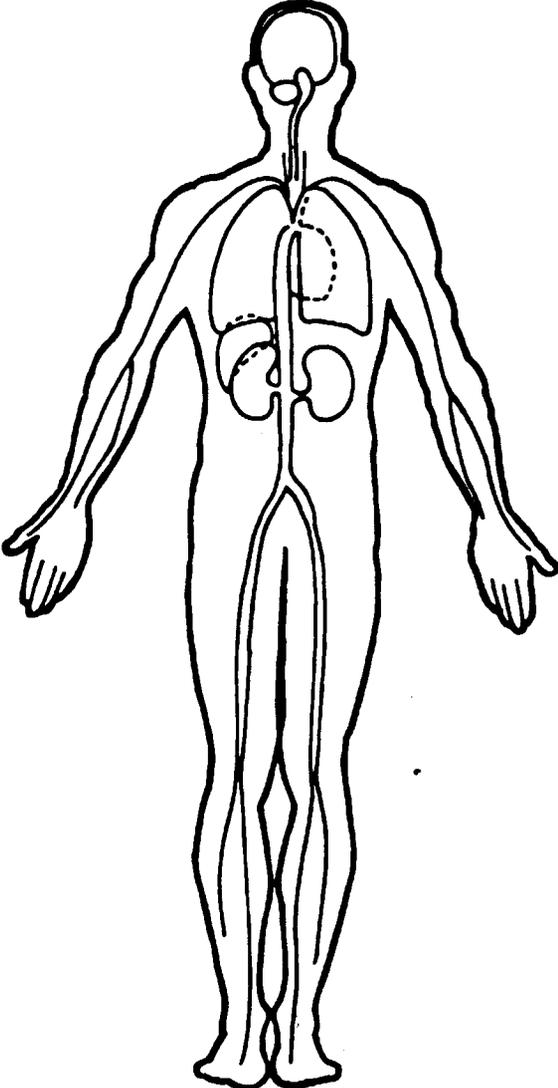
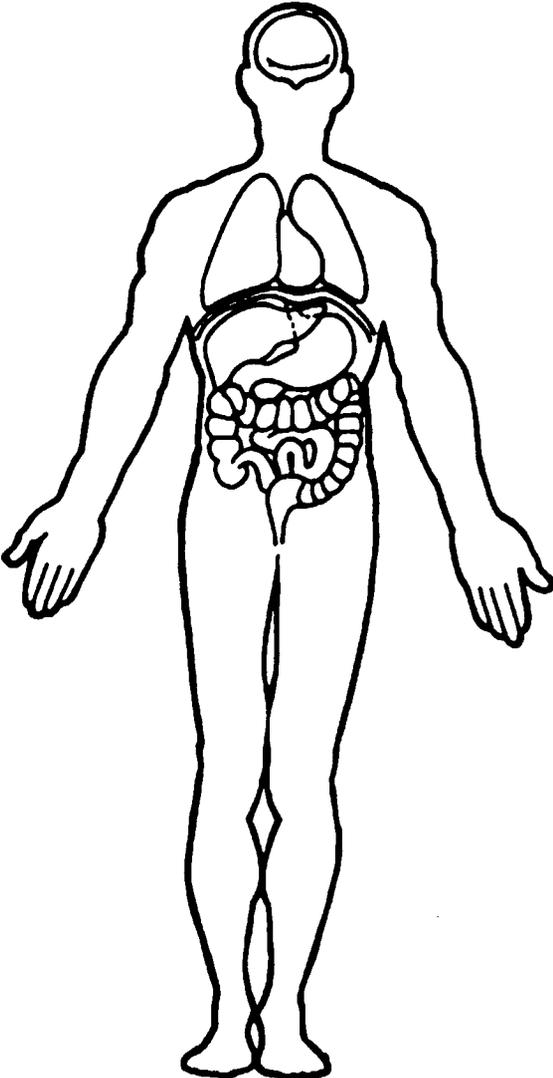
NOT RECORDED

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.)



**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.)





# OCCUPANT ASSESSMENT FORM

1. Primary Sampling Unit Number 02  
 2. Case Number - Stratum 010F  
 3. Vehicle Number 01  
 4. Occupant Number 02

## OCCUPANT'S CHARACTERISTICS

5. Occupant's Age 17  
 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 1  
 (1) Male  
 (2) Female-not reported pregnant  
 (3) Female-pregnant-1st trimester(1st-3rd month)  
 (4) Female-pregnant-2nd trimester(4th-6th month)  
 (5) Female-pregnant-3rd trimester(7th-9th month)  
 (6) Female-pregnant-term unknown  
 (9) Unknown

7. Occupant's Height 180  
 Code actual height to the nearest  
 centimeter.  
 (999) Unknown  
71 inches X 2.54 = 180 centimeters

8. Occupant's Weight 102  
 Code actual weight to the nearest  
 kilogram.  
 (999)Unknown  
225 pounds X .4536 = 102 kilograms

9. Occupant's Role 2  
 (1) Driver  
 (2) Passenger  
 (9) Unknown

## OCCUPANT'S SEATING

10. Occupant's Seat Position 12  
*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 2  
 (0) Normal posture

*Abnormal posture*  
 (1) Kneeling or standing on seat  
 (2) Lying on or across seat / leaning to (2)  
 (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

15. Medium Status (Immediately Prior To Impact)

0

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

16. Entrapment

0

- (0) Not entrapped/exit not inhibited
- (1) Entrapped/pinned - mechanically restrained
- (2) Could not exit vehicle due to jammed doors, fire, 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

17. Occupant Mobility

4

- (0) Occupant fatal before removed from vehicle
- (1) Removed from vehicle while unconscious or disoriented
- (2) Removed from vehicle due to injuries
- (3) Exited vehicle with some assistance
- (4) Exited vehicle under own power
- (5) Occupant fully ejected
- (9) Unknown

## BELT SYSTEM FUNCTION

18. Manual (Active) Belt System Availability 3

- (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

19. Manual (Active) Belt System Use 00

- (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

20. Proper Use of Manual (Active) Belts 0

- (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

21. Manual (Active) Belt Failure Modes During Accident 0

- (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

22. Shoulder Belt Upper Anchorage Adjustment 0

- (0) No shoulder belt
- (1) No upper anchorage adjustment for shoulder belt

*Adjustable shoulder Belt Upper Anchorage*

- (2) In full up position
- (3) In mid position
- (4) In full down position
- (5) Position unknown
- (9) Unknown if position has adjustable upper anchorage adjustment

23. 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

24. 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

25. Automatic (Passive) Belt System Type 0

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

26. 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

27. 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

**POLICE REPORTED RESTRAINT USE** **AIR BAG SYSTEM FUNCTION**

28. Police Reported Belt Use 3  
 (0) None used  
 (1) Police did not indicate belt use  
 (2) Shoulder belt  
 (3) Lap belt  
 (4) Lap and shoulder belt  
 (5) Belt used, type not specified  
 (6) Child safety seat  
 (7) Automatic belt  
 (8) Other type belt, (specify):  
 \_\_\_\_\_  
 (9) Police indicated "unknown"

29. Police Reported Air Bag Availability/Function 0  
 (0) No air bag available  
 (1) Police did not indicate air bag availability/function  
 (2) Deployed  
 (3) Not deployed  
 (4) Unknown if deployed  
 (9) Police indicated "unknown"

Check the Primary Source Used In Determining Belt Use.

Not equipped/not available/destroyed or rendered inoperative  
 Vehicle inspection  
 Official injury data  
 Driver/occupant interview  
 Other (specify):  
 \_\_\_\_\_  
 Unknown if belt used  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

30. Frontal Air Bag System Availability/Function (This Occupant Position) 0  
 (0) Not equipped/not available  
 (1) Air bag  
*Non-functional*  
 (2) Air bag disconnected (specify):  
 \_\_\_\_\_  
 (3) Air bag not reinstalled  
 (9) Unknown

31. Frontal Air Bag System Deployment (This Occupant Position) 0  
 (0) Not equipped/not available  
 (1) Deployed during accident (as a result of impact)  
 (2) Deployed inadvertently just prior to accident  
 (3) Deployed, details unknown  
 (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)  
 (5) Unknown if deployed  
 (7) Nondeployed  
 (9) Unknown

32. Other Than First Seat Frontal Air Bag Availability/Function (This Occupant Position) 0  
 (0) Not equipped/not available  
 (1) Air bag  
*Non-functional*  
 (2) Air bag disconnected (specify):  
 \_\_\_\_\_  
 (3) Air bag not reinstalled  
 (9) Unknown  
*Specify type of "other" air bag present:*  
 \_\_\_\_\_

33. Air Bag(s) Deployment, Other Than First Seat Frontal (This Occupant Position) 0  
 (0) Not equipped with an "other" air bag  
 (1) Deployed during accident (as a result of impact)  
 (2) Deployed inadvertently just prior to accident  
 (3) Deployed, details unknown  
 (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)  
 (5) Unknown if deployed  
 (7) Nondeployed  
 (9) Unknown

34. Are There Indications of Air Bag System Failure? (This Occupant Position) 0  
 (0) Not equipped/not available  
 (1) No  
 (2) Yes (specify):  
 \_\_\_\_\_  
 (9) Unknown

**FIRST SEAT FRONTAL AIR BAG SYSTEM EVALUATION**

35. Had Vehicle Been in Previous Accident(s)? 0  
 (0) Not equipped/not available  
 (1) No previous accidents  
  
 Yes  
 (2) Previous accident(s) without deployment(s)  
 (3) One previous accident with deployment  
 (4) More than one previous accident with at least one deployment  
 (8) Previous accidents, unknown deployment status  
 (9) Unknown
36. Type of Air Bag 0  
 (0) Not equipped/not available  
 (1) Original manufacturer installed system  
 (2) Retrofitted air bag  
 (3) Replacement air bag  
 (8) Unknown type of air bag  
 (9) Unknown
37. Had Any Prior Maintenance/Service Been Performed On This Air Bag System? 0  
 (0) Not equipped/not available  
 (1) No prior maintenance  
 (2) Yes, prior maintenance (specify): \_\_\_\_\_  
 (9) Unknown
38. Air Bag Deployment Accident Event Sequence Number 00  
 (00) Not equipped/not available  
 \_\_\_\_\_ Code the accident event sequence number that initiated the air bag deployment  
 (96) Deployed, unknown event  
 (97) Not deployed  
 (98) Unknown if deployed  
 (99) Unknown
39. CDC For Air Bag Deployment Impact 0  
 (0) Not equipped/not available  
 (1) Highest delta V  
 (2) Second highest delta V  
 (3) Other non-coded delta V (specify): \_\_\_\_\_  
 (6) Deployed, unknown event  
 (7) Not deployed  
 (8) Unknown if deployed  
 (9) Unknown

40. Longitudinal Component of Delta V For Air Bag Deployment Impact + 000  
 (000) Not equipped/not available  
*Code the value of the delta V for the impact that initiated the air bag deployment*  
 (\_996) Deployment, unknown longitudinal Delta V  
 (\_997) Not deployed  
 (\_998) Unknown if deployed  
 (\_999) Unknown
41. Did Air Bag Module Cover Flap(s) Open At Designated Tear Points? 0  
 (0) Not equipped/not available  
 (1) No  
 (2) Yes  
 (3) Deployed, unknown if flap(s) opened at designated tear points  
 (7) Not deployed  
 (8) Unknown if deployed  
 (9) Unknown
42. Were Air Bag Module Cover Flap(s) Damaged? 0  
 (0) Not equipped/not available  
 (1) No  
 (2) Yes (specify): \_\_\_\_\_  
 (3) Deployed, unknown if air bag module cover flap(s) damaged  
 (7) Not deployed  
 (8) Unknown if deployed  
 (9) Unknown
43. Was There Damage To The Air Bag? 00  
 (00) Not equipped/not available  
 (01) Not damaged  
  
*Yes - Air Bag Damage*  
 (02) Ruptured  
 (03) Cut  
 (04) Torn  
 (05) Holed  
 (06) Burned  
 (07) Abraded  
 (88) Other damage (specify): \_\_\_\_\_  
 (95) Damaged, details unknown  
 (96) Deployed, unknown if damaged  
 (97) Not deployed  
 (98) Unknown if deployed  
 (99) Unknown

**FIRST SEAT FRONTAL AIR BAG SYSTEM  
EVALUATION** *continued*
**HEAD RESTRAINT AND SEAT EVALUATION**

44. Source of Air Bag Damage 00  
 (00) Not equipped/not available  
 (01) Not damaged  
 (02) Object worn by occupant, (specify):  
 \_\_\_\_\_  
 (03) Object carried by occupant, (specify):  
 \_\_\_\_\_  
 (04) Adaptive/assistive controls, (specify):  
 \_\_\_\_\_  
 (05) Fire in vehicle  
 (06) Thermal burns  
 (07) Rescue or emergency efforts  
 (88) Other damage source (specify):  
 \_\_\_\_\_  
 (95) Damaged, unknown source  
 (96) Deployed, unknown if damaged  
 (97) Not deployed  
 (98) Unknown if deployed  
 (99) Unknown
45. Was The Air Bag Tethered? 0  
 (0) Not equipped/not available  
 (1) No  
 (2) Yes (specify number of tether straps):  
 \_\_\_\_\_  
 (3) Deployed, unknown if tethered  
 (7) Not deployed  
 (8) Unknown if deployed  
 (9) Unknown
46. Did The Air Bag Have Vent Ports? 0  
 (0) Not equipped/not available  
 (1) No  
 (2) Yes (specify number of vent ports):  
 \_\_\_\_\_  
 (3) Deployed, unknown if vent ports present  
 (7) Not deployed  
 (8) Unknown if deployed  
 (9) Unknown
47. Was the Air Bag in this Occupant's Position Contacted by Another Occupant? 0  
 (0) Not equipped/not available  
 (1) No  
 (2) Yes (specify):  
 \_\_\_\_\_  
 (3) Deployed, unknown if other occupant contact to air bag  
 (7) Not deployed  
 (8) Unknown if deployed  
 (9) Unknown
48. Was This Occupant Wearing Eye-wear? 0  
 (0) Not equipped/not available  
 (1) No  
 (2) Eyeglasses/sunglasses  
 (3) Contact lenses  
 (4) Deployed, unknown if eyewear worn  
 (7) Not deployed  
 (8) Unknown if deployed  
 (9) Unknown

49. Head Restraint Type/Damage by Occupant at This Occupant Position 0  
 (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
50. Seat Type (this Occupant Position) 05  
 (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) Box mounted seat (i.e., van type)  
 (10) Other seat type (specify):  
 \_\_\_\_\_  
 (99) Unknown
51. 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
52. Seat Track Adjusted Position Prior To Impact 4  
 (0) Occupant not seated or no seat  
 (1) Non-adjustable seat track
- Adjustable Seat Track*  
 (2) Seat at forward most track position  
 (3) Seat between forward most and middle track positions  
 (4) Seat at middle track position  
 (5) Seat between middle and rear most track positions  
 (6) Seat at rear most track position  
 (9) Unknown

**CHILD SAFETY SEAT**

55. Child Safety Seat Make/Model   0  0  0    
 (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

56. Type of Child Safety Seat   0    
 (0) No child safety seat  
 (1) Infant seat  
 (2) Toddler seat  
 (3) Convertible seat  
 (4) Booster seat - with shield  
 (5) Booster seat - without shield  
 (7) Other type child safety seat (specify):  
 \_\_\_\_\_  
 (8) Unknown child safety seat type  
 (9) Unknown if child safety seat used

57. Child Safety Seat Orientation   0  0    
 (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

58. Child Safety Seat Harness Usage   0  0  

59. Child Safety Seat Shield Usage   0  0  

60. Child Safety Seat Tether Usage   0  0  

Note: Options below applicable to  
 Variables OA58-OA60.  
 (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**61. Injury Severity (Police Rating) 1

- (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

62. Treatment - Mortality 4

- (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
- (7) Treatment - other (specify):  
\_\_\_\_\_
- (8) Transported to a medical facility-unknown if treated
- (9) Unknown

63. Type Of Medical Facility (for Initial Treatment) 2

- (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

64. 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

65. Working Days Lost 00

- \_\_\_\_\_ 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 WORK HERE****VARIABLES 66-74****TO BE CODED BY THE ZONE CENTER**

**TO BE CODED BY THE ZONE CENTER****INJURY CONSEQUENCES**66. Time to Death 00

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

67. 1st Medically Reported Cause of Death 0068. 2nd Medically Reported Cause of Death 0069. 3rd Medically Reported Cause of Death 00

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  
(96) Mode of death given but specific injuries are not linked to cause of death. (specify):

(97) Other result (includes fatal ruled disease) (specify):

(99) Unknown

70. Number of Recorded Injuries for This Occupant 01

Code the actual number of injuries recorded for this occupant.

- (00) No recorded injuries  
(97) Injured, details unknown  
(99) Unknown if injured

**TRAUMA DATA**71. Glasgow Coma Scale (GCS) Score 15

(at Medical Facility)

- (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

72. Was the Occupant Given Blood? 1

(1) No - blood not given

(2) Yes - blood given

(specify units): \_\_\_\_\_

(9) Unknown if blood given

73. 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

**BELT USE DETERMINATION**74. Primary Source of Belt Use Determination 1

(0) Not equipped/not available/destroyed or rendered inoperative

(1) Vehicle inspection

(2) Official injury data

(3) Driver/occupant interview

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

(9) Unknown if belt used



# OCCUPANT INJURY FORM

1. Primary Sampling Unit Number <u>02</u>	3. Vehicle Number <u>01</u>
2. Case Number - Stratum <u>010F</u>	4. Occupant Number <u>02</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.

*cervical  
thrust*

	Source of Injury Data	A.I.S. - 90					Injury Aspect	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					
1st	5. <u>3</u>	6. <u>6</u>	7. <u>4</u>	8. <u>02</u>	9. <u>78</u>	10. <u>1</u>	11. <u>6</u>	12. <u>603</u>	13. <u>1</u>	14. <u>3</u>	15. <u>00</u>
2nd	16. ___	17. ___	18. ___	19. ___	20. ___	21. ___	22. ___	23. ___	24. ___	25. ___	26. ___
3rd	27. ___	28. ___	29. ___	30. ___	31. ___	32. ___	33. ___	34. ___	35. ___	36. ___	37. ___
4th	38. ___	39. ___	40. ___	41. ___	42. ___	43. ___	44. ___	45. ___	46. ___	47. ___	48. ___
5th	49. ___	50. ___	51. ___	52. ___	53. ___	54. ___	55. ___	56. ___	57. ___	58. ___	59. ___
6th	60. ___	61. ___	62. ___	63. ___	64. ___	65. ___	66. ___	67. ___	68. ___	69. ___	70. ___
7th	71. ___	72. ___	73. ___	74. ___	75. ___	76. ___	77. ___	78. ___	79. ___	80. ___	81. ___
8th	82. ___	83. ___	84. ___	85. ___	86. ___	87. ___	88. ___	89. ___	90. ___	91. ___	92. ___
9th	93. ___	94. ___	95. ___	96. ___	97. ___	98. ___	99. ___	100. ___	101. ___	102. ___	103. ___
10th	104. ___	105. ___	106. ___	107. ___	108. ___	109. ___	110. ___	111. ___	112. ___	113. ___	114. ___



**OCCUPANT INJURY CLASSIFICATION**

Body Region	Specific Anatomic Structure	Level of Injury	Aspect
(1) Head	<u>Vessels, Nerves, Organs.</u> <u>Bones, Joints</u> are assigned consecutive two digit numbers beginning with 02.  The exceptions to this rule apply to:	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.	(1) Right
(2) Face			(2) Left
(3) Neck			(3) Bilateral
(4) Thorax			(4) Central
(5) Abdomen			(5) Anterior
(6) Spine			(6) Posterior
(7) Upper Extremity			(7) Superior
(8) Lower Extremity			(8) Inferior
(9) Unspecified			(9) Unknown
			(0) Whole region
Type of Anatomic Structure	<u>Whole Area</u> (02) Skin - Abrasion (04) Skin - Contusion (06) Skin - Laceration (08) Skin - Avulsion (10) Amputation (20) Burn (30) Crush (40) Degloving (50) Injury - NFS (90) Trauma, other than mechanical	<b>Abbreviated Injury Scale</b>  (1) Minor Injury (2) Moderate Injury (3) Serious Injury (4) Severe Injury (5) Critical Injury (6) Maximum (untreatable) (7) Injured, unknown severity	
(1) Whole Area	<u>Head - LOC</u> (02) Length of LOC  (04) Level of (06) of (08) Consciousness  (10) Concussion		
(2) Vessels	<u>Spine</u> (02) Cervical (04) Thoracic (06) Lumbar		
(3) Nerves			
(4) Organs (includes Muscles/ligaments)			
(5) Skeletal (includes joints)			
(6) Head - LOC			
(9) Skin			

SOURCE OF INJURY DATA	INJURY SOURCE CONFIDENCE LEVEL	DIRECT/INDIRECT INJURY
<u>OFFICIAL RECORDS</u> (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  <u>UNOFFICIAL RECORDS</u> (5) Lay coroner report (6) E.M.S. personnel (7) Interviewee (8) Other source (specify): _____  (9) Police	(1) Certain (2) Probable (3) Possible (9) Unknown	(1) Direct contact injury (2) Indirect contact injury (3) Noncontact injury (7) Injured, unknown source

## INJURY SOURCES

### FRONT

- (001) Windshield
- (002) Mirror
- (003) Sunvisor
- (004) Steering wheel rim
- (005) Steering wheel hub/spoke
- (006) Steering wheel (combination of codes 004 and 005)
- (007) Steering column, transmission selector lever, other attachment
- (008) Cellular telephone or CB radio
- (009) Add on equipment (e.g., tape deck, air conditioner)
- (010) Left instrument panel and below
- (011) Center instrument panel and below
- (012) Right instrument panel and below
- (013) Glove compartment door
- (014) Knee bolster
- (015) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, mirror, or steering assembly (driver side only)
- (016) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, or mirror (passenger side only)
- (017) Windshield reinforced by exterior object (specify):  
\_\_\_\_\_
- (019) Other front object (specify):  
\_\_\_\_\_

### LEFT SIDE

- (051) Left side interior surface, excluding hardware or armrests
- (052) Left side hardware or armrest
- (053) Left A (A1/A2)-pillar
- (054) Left B-pillar
- (055) Other left pillar (specify):  
\_\_\_\_\_
- (056) Left side window glass
- (057) Left side window frame
- (058) Left side window sill
- (059) Left side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.
- (060) Other left side object (specify):  
\_\_\_\_\_

### RIGHT SIDE

- (101) Right side interior surface, excluding hardware or armrests

- (102) Right side hardware or armrest
- (103) Right A (A1/A2)-pillar
- (104) Right B-pillar
- (105) Other right pillar (specify):  
\_\_\_\_\_
- (106) Right side window glass
- (107) Right side window frame
- (108) Right side window sill
- (109) Right side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.
- (110) Other right side object (specify):  
\_\_\_\_\_

### INTERIOR

- (151) Seat, back support
- (152) Belt restraint webbing/buckle
- (153) Belt restraint B-pillar or door frame attachment point
- (154) Other restraint system component (specify):  
\_\_\_\_\_
- (155) Head restraint system
- (160) Other occupants (specify):  
\_\_\_\_\_
- (161) Interior loose objects
- (162) Child safety seat (specify):  
\_\_\_\_\_
- (163) Other interior object (specify):  
\_\_\_\_\_

### AIR BAG

- (170) Air bag-driver side
- (171) Air bag-driver side and eyewear
- (172) Air bag-driver side and jewelry
- (173) Air bag-driver side and object held
- (174) Air bag-driver side and object in mouth
- (175) Air bag compartment cover-driver side
- (176) Air bag compartment cover-driver side and eyewear
- (177) Air bag compartment cover-driver side and jewelry
- (178) Air bag compartment cover-driver side and object held
- (179) Air bag compartment cover-driver side and object in mouth
- (180) Air bag-passenger side
- (181) Air bag-passenger side and eyewear
- (182) Air bag-passenger side and jewelry

- (183) Air bag-passenger side and object held
- (184) Air bag-passenger side and object in mouth
- (185) Air bag compartment cover-passenger side
- (186) Air bag compartment cover-passenger side and eyewear
- (187) Air bag compartment cover-passenger side and jewelry
- (188) Air bag compartment cover-passenger side and object held
- (189) Air bag compartment cover-passenger side and object in mouth
- (190) Other air bag (specify):  
\_\_\_\_\_
- (195) Other air bag compartment cover (specify):  
\_\_\_\_\_

### ROOF

- (201) Front header
- (202) Rear header
- (203) Roof left side rail
- (204) Roof right side rail
- (205) Roof or convertible top

### FLOOR

- (251) Floor (including toe pan)
- (252) Floor or console mounted transmission lever, including console
- (253) Parking brake handle
- (254) Foot controls including parking brake

### REAR

- (301) Backlight (rear window)
- (302) Backlight storage rack, door, etc.
- (303) Other rear object (specify):  
\_\_\_\_\_

### ADAPTIVE (ASSISTIVE) DRIVING EQUIPMENT

- (401) Hand controls for braking/acceleration
- (402) Steering control devices (attached to OEM steering wheel)
- (403) Steering knob attached to steering wheel
- (405) Replacement steering wheel (i.e., reduced diameter)
- (406) Joy stick steering controls
- (407) Wheelchair tie-downs
- (408) Modification to seat belts, (specify):  
\_\_\_\_\_
- (409) Additional or relocated switches, (specify):  
\_\_\_\_\_
- (410) Raised roof

- (411) Wall mounted head rest (used behind wheel chair)
- (412) Other adaptive device (specify):  
\_\_\_\_\_

### EXTERIOR of OCCUPANT'S VEHICLE

- (451) Hood
- (452) Outside hardware (e.g., outside mirror, antenna)
- (453) Other exterior surface or tires (specify):  
\_\_\_\_\_
- (454) Unknown exterior objects

### EXTERIOR OF OTHER MOTOR VEHICLE

- (501) Front bumper
- (502) Hood edge
- (503) Other front of vehicle (specify):  
\_\_\_\_\_
- (504) Hood
- (505) Hood ornament
- (506) Windshield, roof rail, A-pillar
- (507) Side surface
- (508) Side mirrors
- (509) Other side protrusions (specify):  
\_\_\_\_\_
- (510) Rear surface
- (511) Undercarriage
- (512) Tires and wheels
- (513) Other exterior of other motor vehicle (specify):  
\_\_\_\_\_
- (514) Unknown exterior of other motor vehicle

### OTHER VEHICLE OR OBJECT IN THE ENVIRONMENT

- (551) Ground
- (598) Other vehicle or object (specify):  
\_\_\_\_\_
- (599) Unknown vehicle or object

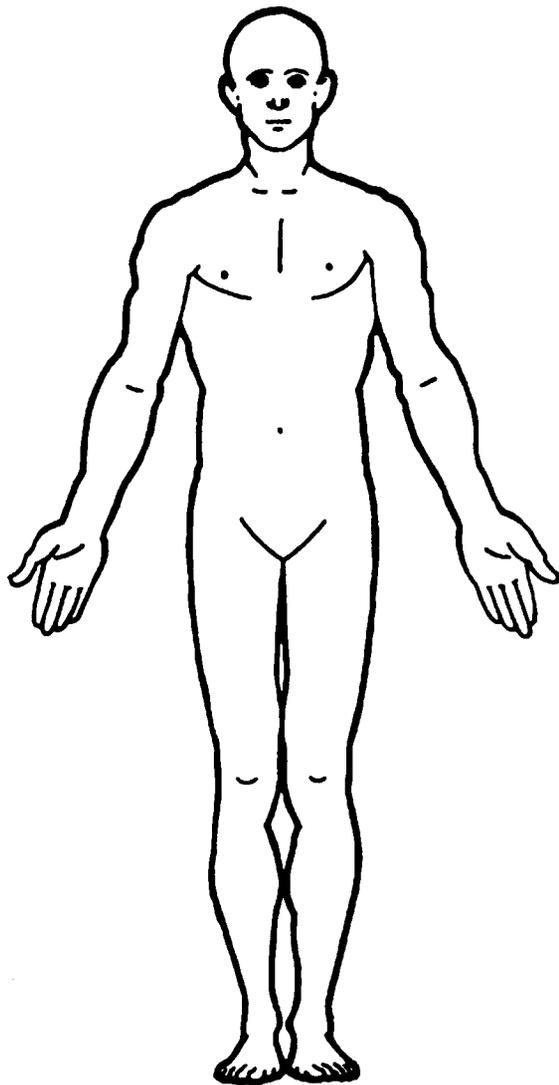
### NONCONTACT INJURY

- (601) Fire in vehicle
- (602) Flying glass
- (603) Other noncontact injury source (specify): *impact force*
- (604) Air bag exhaust gases
- (697) Injured, unknown source

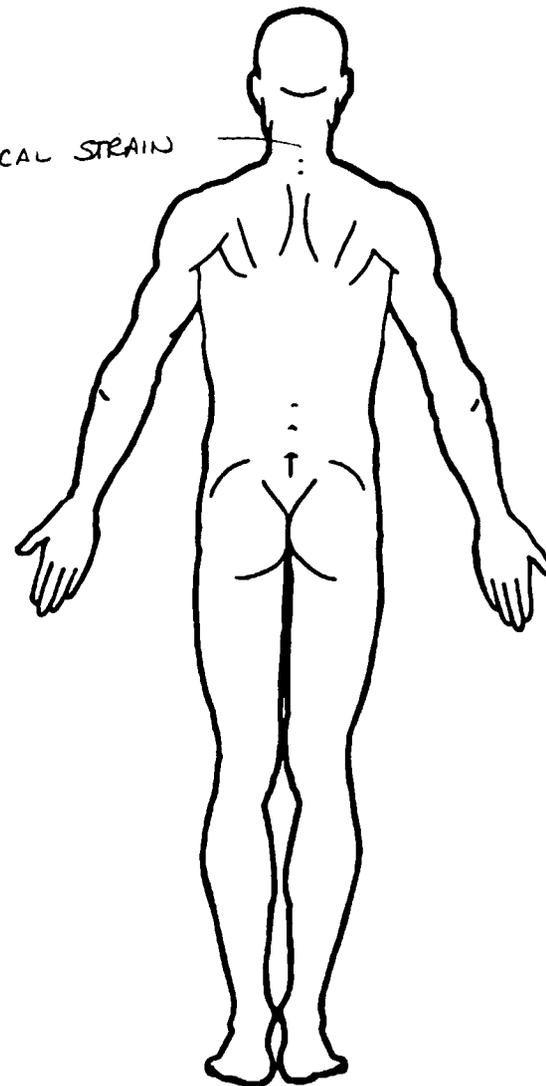
# OFFICIAL INJURY DATA — SOFT TISSUE INJURIES

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.)

ER: NO LOSS OF CONSCIOUSNESS



ER:  
CERVICAL STRAIN



# OFFICIAL INJURY DATA — SKELETAL INJURIES

Restrained?

No

Yes

Blood Alcohol Level (mg/dl)

BAL = \_\_\_\_\_

NOT RECORDED

Glasgow Coma Scale Score

A 4 O 3

GCSS = 15

Units of Blood Given

Units = \_\_\_\_\_

Arterial Blood Gases

pH = \_\_\_\_\_

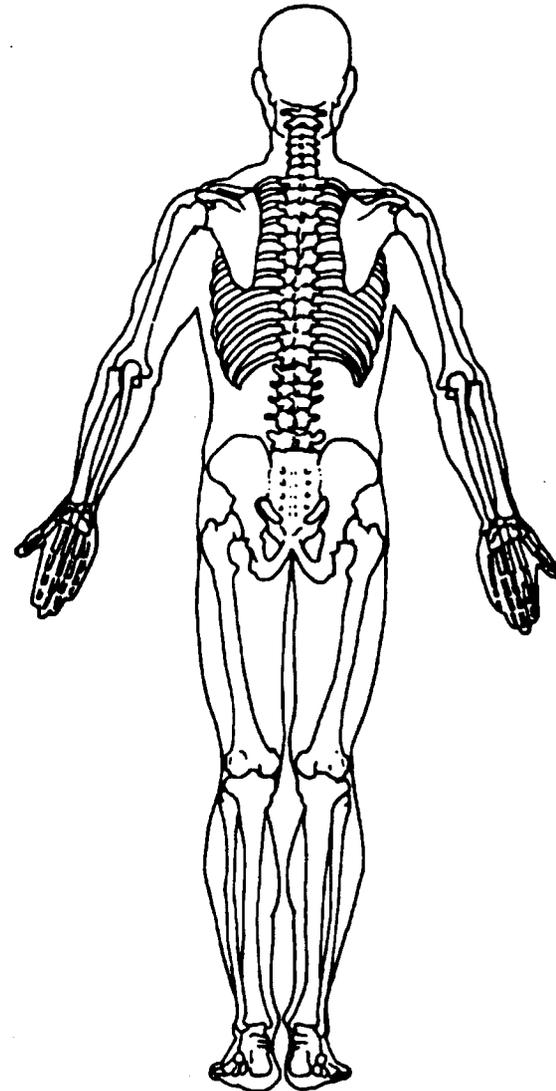
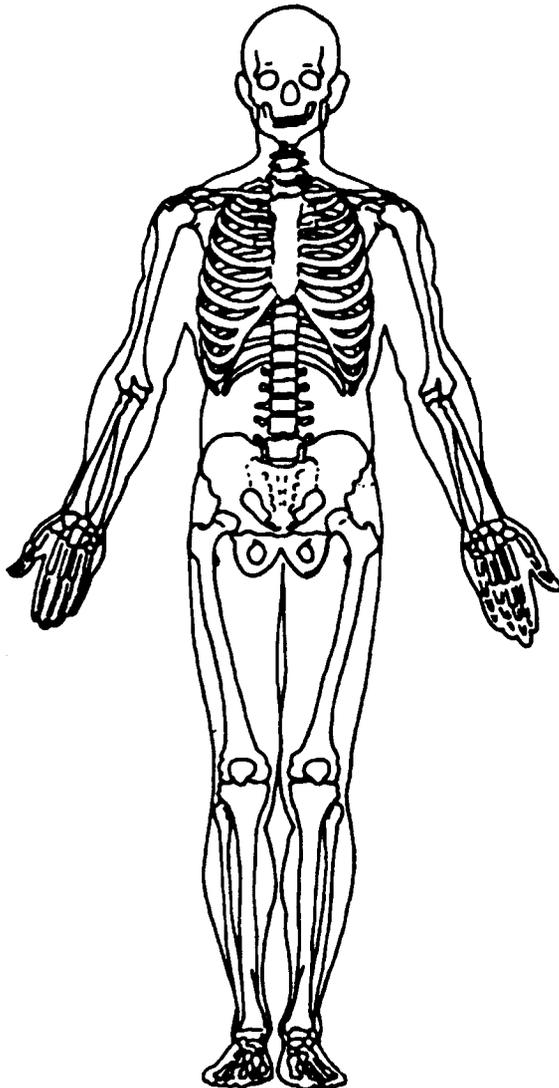
PO<sub>2</sub> = \_\_\_\_\_

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

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

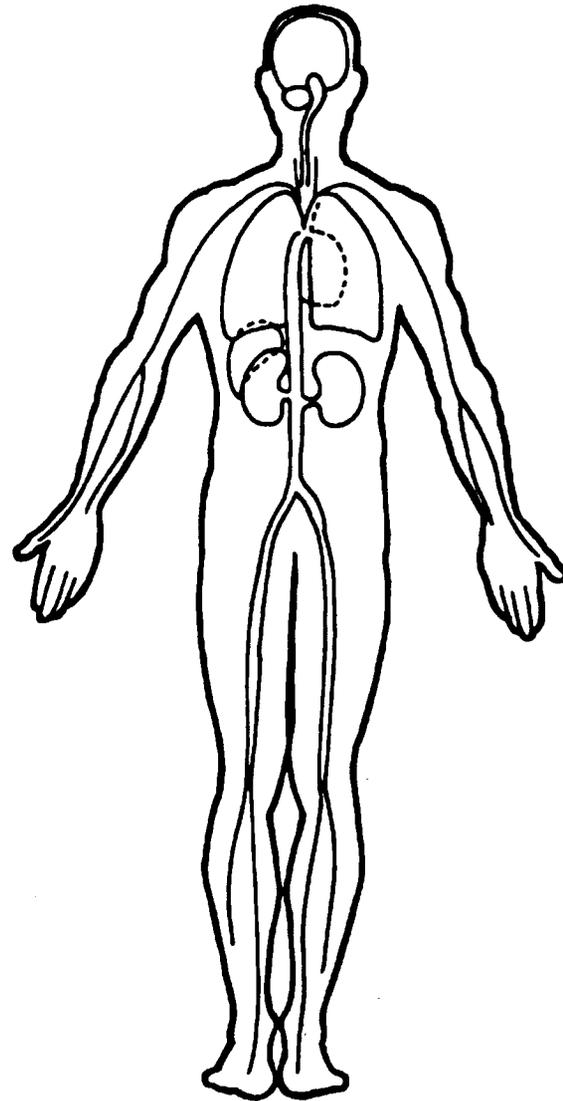
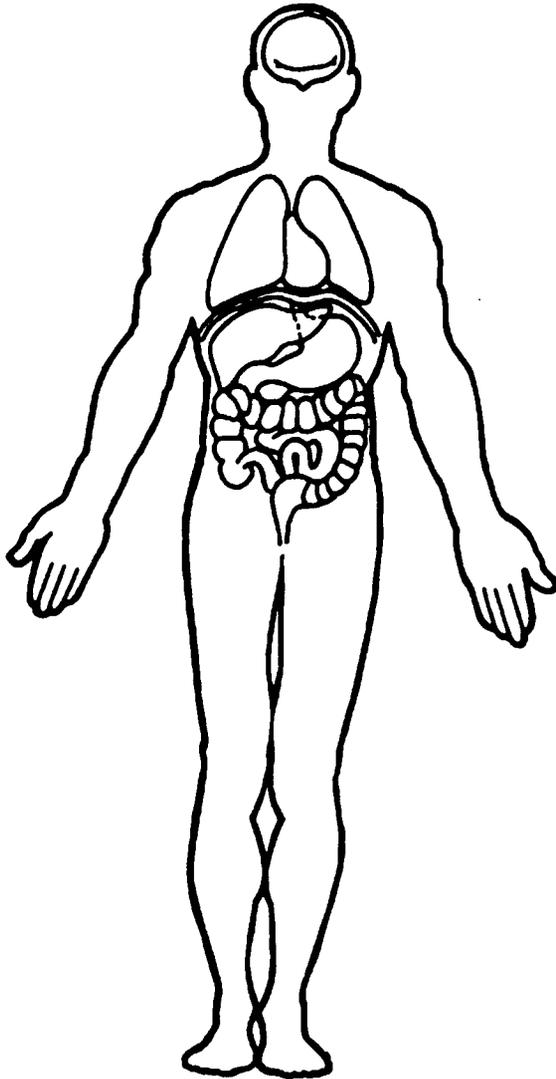
NOT RECORDED

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.)



## 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.)





# OCCUPANT ASSESSMENT FORM

1. Primary Sampling Unit Number 02  
 2. Case Number - Stratum 010F  
 3. Vehicle Number 01  
 4. Occupant Number 03

## OCCUPANT'S CHARACTERISTICS

5. Occupant's Age 24  
 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 1  
 (1) Male  
 (2) Female-not reported pregnant  
 (3) Female-pregnant-1st trimester(1st-3rd month)  
 (4) Female-pregnant-2nd trimester(4th-6th month)  
 (5) Female-pregnant-3rd trimester(7th-9th month)  
 (6) Female-pregnant-term unknown  
 (9) Unknown

7. Occupant's Height 168  
 Code actual height to the nearest centimeter.  
 (999) Unknown  
66 inches X 2.54 = 168 centimeters

8. Occupant's Weight 061  
 Code actual weight to the nearest kilogram.  
 (999)Unknown  
135 pounds X .4536 = 61 kilograms

9. Occupant's Role 2  
 (1) Driver  
 (2) Passenger  
 (9) Unknown

## OCCUPANT'S SEATING

10. Occupant's Seat Position 97  
*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  truck bed  
 (98) Other seat (specify): \_\_\_\_\_  
 (99) Unknown

11. Occupant's Posture 8  
 (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): unenclosed area  
 (9) Unknown truck bed

**EJECTION/ENTRAPMENT**

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

13. Ejection Area 8 ~~0~~  
8
- (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): back of pickup
  - (9) Unknown

14. Ejection Medium 8 ~~0~~  
8
- (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):  
back of pickup
  - (9) Unknown

15. Medium Status (Immediately Prior To Impact) 1 ~~0~~  
0
- (0) No ejection
  - (1) Open
  - (2) Closed
  - (3) Integral structure
  - (9) Unknown

16. Entrapment 0
- (0) Not entrapped/exit not inhibited
  - (1) Entrapped/pinned - mechanically restrained
  - (2) Could not exit vehicle due to jammed doors, fire, etc.  
(specify): \_\_\_\_\_
  - (9) Unknown

17. Occupant Mobility 5 ~~0~~  
5
- (0) Occupant fatal before removed from vehicle
  - (1) Removed from vehicle while unconscious or disoriented
  - (2) Removed from vehicle due to injuries
  - (3) Exited vehicle with some assistance
  - (4) Exited vehicle under own power
  - (5) Occupant fully ejected
  - (9) Unknown

per [redacted] 1/95

if original coding doesn't work try other (#5)

## BELT SYSTEM FUNCTION

18. 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 19. 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
- (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

20. Proper Use of Manual (Active) Belts 

- (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 21. 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 22. Shoulder Belt Upper Anchorage Adjustment 

- (0) No shoulder belt
- (1) No upper anchorage adjustment for shoulder belt

*Adjustable shoulder Belt Upper Anchorage*

- (2) In full up position
- (3) In mid position
- (4) In full down position
- (5) Position unknown
- (9) Unknown if position has adjustable upper anchorage adjustment

23. 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

24. 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) (specify): \_\_\_\_\_
- (3) Automatic belt use unknown
- (9) Unknown

25. Automatic (Passive) Belt System Type 

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

26. 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 27. 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

**POLICE REPORTED RESTRAINT USE**

**AIR BAG SYSTEM FUNCTION**

28. Police Reported Belt Use 0
- (0) None used
  - (1) Police did not indicate belt use
  - (2) Shoulder belt
  - (3) Lap belt
  - (4) Lap and shoulder belt
  - (5) Belt used, type not specified
  - (6) Child safety seat
  - (7) Automatic belt
  - (8) Other type belt, (specify):
  - (9) Police indicated "unknown"

29. Police Reported Air Bag Availability/Function 0
- (0) No air bag available
  - (1) Police did not indicate air bag availability/function
  - (2) Deployed
  - (3) Not deployed
  - (4) Unknown if deployed
  - (9) Police indicated "unknown"

Check the Primary Source Used In Determining Belt Use.

- [ ] Not equipped/not available/destroyed or rendered inoperative
- [✓] Vehicle inspection
- [ ] Official injury data
- [ ] Driver/occupant interview
- [ ] Other (specify):
- [ ] Unknown if belt used

30. Frontal Air Bag System Availability/Function (This Occupant Position) 0
- (0) Not equipped/not available
  - (1) Air bag
- Non-functional*
- (2) Air bag disconnected (specify):
  - (3) Air bag not reinstalled
  - (9) Unknown

31. Frontal Air Bag System Deployment (This Occupant Position) 0
- (0) Not equipped/not available
  - (1) Deployed during accident (as a result of impact)
  - (2) Deployed inadvertently just prior to accident
  - (3) Deployed, details unknown
  - (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)
  - (5) Unknown if deployed
  - (7) Nondeployed
  - (9) Unknown

32. Other Than First Seat Frontal Air Bag Availability/Function (This Occupant Position) 0
- (0) Not equipped/not available
  - (1) Air bag
- Non-functional*
- (2) Air bag disconnected (specify):
  - (3) Air bag not reinstalled
  - (9) Unknown
- Specify type of "other" air bag present:*

33. Air Bag(s) Deployment, Other Than First Seat Frontal (This Occupant Position) 0
- (0) Not equipped with an "other" air bag
  - (1) Deployed during accident (as a result of impact)
  - (2) Deployed inadvertently just prior to accident
  - (3) Deployed, details unknown
  - (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)
  - (5) Unknown if deployed
  - (7) Nondeployed
  - (9) Unknown

34. Are There Indications of Air Bag System Failure? (This Occupant Position) 0
- (0) Not equipped/not available
  - (1) No
  - (2) Yes (specify):
  - (9) Unknown

## FIRST SEAT FRONTAL AIR BAG SYSTEM EVALUATION

35. Had Vehicle Been in Previous Accident(s)? 0  
 (0) Not equipped/not available  
 (1) No previous accidents  
 Yes  
 (2) Previous accident(s) without deployment(s)  
 (3) One previous accident with deployment  
 (4) More than one previous accident with at least one deployment  
 (8) Previous accidents, unknown deployment status  
 (9) Unknown
36. Type of Air Bag 0  
 (0) Not equipped/not available  
 (1) Original manufacturer installed system  
 (2) Retrofitted air bag  
 (3) Replacement air bag  
 (8) Unknown type of air bag  
 (9) Unknown
37. Had Any Prior Maintenance/Service Been Performed On This Air Bag System? 0  
 (0) Not equipped/not available  
 (1) No prior maintenance  
 (2) Yes, prior maintenance (specify): \_\_\_\_\_  
 (9) Unknown
38. Air Bag Deployment Accident Event Sequence Number 00  
 (00) Not equipped/not available  
 \_\_\_\_\_ Code the accident event sequence number that initiated the air bag deployment  
 (96) Deployed, unknown event  
 (97) Not deployed  
 (98) Unknown if deployed  
 (99) Unknown
39. CDC For Air Bag Deployment Impact 0  
 (0) Not equipped/not available  
 (1) Highest delta V  
 (2) Second highest delta V  
 (3) Other non-coded delta V (specify): \_\_\_\_\_  
 (6) Deployed, unknown event  
 (7) Not deployed  
 (8) Unknown if deployed  
 (9) Unknown
40. Longitudinal Component of Delta V For Air Bag Deployment Impact + 0 0 0  
 - \_\_\_\_\_  
 (000) Not equipped/not available  
*Code the value of the delta V for the impact that initiated the air bag deployment*  
 (996) Deployment, unknown longitudinal Delta V  
 (997) Not deployed  
 (998) Unknown if deployed  
 (999) Unknown
41. Did Air Bag Module Cover Flap(s) Open At Designated Tear Points? 0  
 (0) Not equipped/not available  
 (1) No  
 (2) Yes  
 (3) Deployed, unknown if flap(s) opened at designated tear points  
 (7) Not deployed  
 (8) Unknown if deployed  
 (9) Unknown
42. Were Air Bag Module Cover Flap(s) Damaged? 0  
 (0) Not equipped/not available  
 (1) No  
 (2) Yes (specify): \_\_\_\_\_  
 (3) Deployed, unknown if air bag module cover flap(s) damaged  
 (7) Not deployed  
 (8) Unknown if deployed  
 (9) Unknown
43. Was There Damage To The Air Bag? 00  
 (00) Not equipped/not available  
 (01) Not damaged  
 Yes - Air Bag Damage  
 (02) Ruptured  
 (03) Cut  
 (04) Torn  
 (05) Holed  
 (06) Burned  
 (07) Abraded  
 (88) Other damage (specify): \_\_\_\_\_  
 (95) Damaged, details unknown  
 (96) Deployed, unknown if damaged  
 (97) Not deployed  
 (98) Unknown if deployed  
 (99) Unknown

**FIRST SEAT FRONTAL AIR BAG SYSTEM  
EVALUATION** *continued***HEAD RESTRAINT AND SEAT EVALUATION**

44. Source of Air Bag Damage 0 0  
 (00) Not equipped/not available  
 (01) Not damaged  
 (02) Object worn by occupant, (specify):  
 \_\_\_\_\_  
 (03) Object carried by occupant, (specify):  
 \_\_\_\_\_  
 (04) Adaptive/assistive controls, (specify):  
 \_\_\_\_\_  
 (05) Fire in vehicle  
 (06) Thermal burns  
 (07) Rescue or emergency efforts  
 (88) Other damage source (specify):  
 \_\_\_\_\_  
 (95) Damaged, unknown source  
 (96) Deployed, unknown if damaged  
 (97) Not deployed  
 (98) Unknown if deployed  
 (99) Unknown
45. Was The Air Bag Tethered? 0  
 (0) Not equipped/not available  
 (1) No  
 (2) Yes (specify number of tether straps):  
 \_\_\_\_\_  
 (3) Deployed, unknown if tethered  
 (7) Not deployed  
 (8) Unknown if deployed  
 (9) Unknown
46. Did The Air Bag Have Vent Ports? 0  
 (0) Not equipped/not available  
 (1) No  
 (2) Yes (specify number of vent ports):  
 \_\_\_\_\_  
 (3) Deployed, unknown if vent ports present  
 (7) Not deployed  
 (8) Unknown if deployed  
 (9) Unknown
47. Was the Air Bag in this Occupant's Position Contacted by Another Occupant? 0  
 (0) Not equipped/not available  
 (1) No  
 (2) Yes (specify):  
 \_\_\_\_\_  
 (3) Deployed, unknown if other occupant contact to air bag  
 (7) Not deployed  
 (8) Unknown if deployed  
 (9) Unknown
48. Was This Occupant Wearing Eye-wear? 0  
 (0) Not equipped/not available  
 (1) No  
 (2) Eyeglasses/sunglasses  
 (3) Contact lenses  
 (4) Deployed, unknown if eyewear worn  
 (7) Not deployed  
 (8) Unknown if deployed  
 (9) Unknown

49. Head Restraint Type/Damage by Occupant at This Occupant Position 0  
 (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
50. Seat Type (this Occupant Position) 0 0  
 (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) Box mounted seat (i.e., van type)  
 (10) Other seat type (specify):  
 \_\_\_\_\_  
 (99) Unknown
51. Seat Orientation (this Occupant Position) 0  
 (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
52. Seat Track Adjusted Position Prior To Impact 0  
 (0) Occupant not seated or no seat  
 (1) Non-adjustable seat track
- Adjustable Seat Track*  
 (2) Seat at forward most track position  
 (3) Seat between forward most and middle track positions  
 (4) Seat at middle track position  
 (5) Seat between middle and rear most track positions  
 (6) Seat at rear most track position  
 (9) Unknown

**HEAD RESTRAINT AND SEAT EVALUATION *continued***

53. Seat Back Incline Prior and Post Impact   0     0    
 (00) Occupant not seated or no seat  
 (01) Not adjustable

*Upright prior to impact*

- (11) Moved to completely rearward position
- (12) Moved to rearward midrange position
- (13) Moved to slightly rearward position
- (14) Retained pre-impact position
- (15) Moved to slightly forward position
- (16) Moved to forward midrange position
- (17) Moved to completely forward position

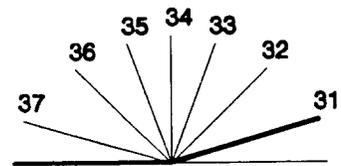
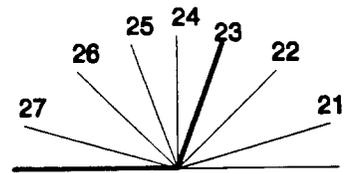
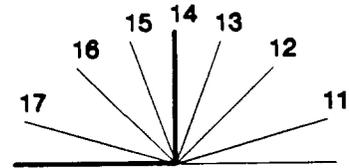
*Slightly reclined prior to impact*

- (21) Moved to completely rearward position
- (22) Moved to rearward midrange position
- (23) Retained pre-impact position
- (24) Moved to upright position
- (25) Moved to slightly forward position
- (26) Moved to forward midrange position
- (27) Moved to completely forward position

*Completely reclined prior to impact*

- (31) Retained pre-impact position
- (32) Moved to rearward midrange position
- (33) Moved to slightly rearward position
- (34) Moved to upright position
- (35) Moved to slightly forward position
- (36) Moved to forward midrange position
- (37) Moved to completely forward position

(99) Unknown



54. Seat Performance (this Occupant Position)   0    
 (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 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

55. Child Safety Seat Make/Model   0  0  0    
 (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

56. Type of Child Safety Seat   0    
 (0) No child safety seat  
 (1) Infant seat  
 (2) Toddler seat  
 (3) Convertible seat  
 (4) Booster seat - with shield  
 (5) Booster seat - without shield  
 (7) Other type child safety seat (specify):  
 \_\_\_\_\_  
 (8) Unknown child safety seat type  
 (9) Unknown if child safety seat used

57. Child Safety Seat Orientation   0  0    
 (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

58. Child Safety Seat Harness Usage   0  0    
  
 59. Child Safety Seat Shield Usage   0  0    
  
 60. Child Safety Seat Tether Usage   0  0  

Note: Options below applicable to  
 Variables OA58-OA60.  
 (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**61. Injury Severity (Police Rating) 1

- (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

62. Treatment - Mortality 4

- (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
- (7) Treatment - other (specify):  
\_\_\_\_\_
- (8) Transported to a medical facility-unknown if treated
- (9) Unknown

63. Type Of Medical Facility (for Initial Treatment) 2

- (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

64. 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

65. Working Days Lost 99

- \_\_\_\_\_ 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 WORK HERE****VARIABLES 66-74****TO BE CODED BY THE ZONE CENTER**

**TO BE CODED BY THE ZONE CENTER****INJURY CONSEQUENCES**

66. Time to Death 00  
 \_\_\_\_\_ 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

67. 1st Medically Reported Cause of Death 00

68. 2nd Medically Reported Cause of Death 00

69. 3rd Medically Reported Cause of Death 00  
 \_\_\_\_\_ 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  
 (96) Mode of death given but specific injuries are not linked to cause of death. (specify):

(97) \_\_\_\_\_ Other result (includes fatal ruled disease) (specify):

(99) \_\_\_\_\_ Unknown

70. Number of Recorded Injuries for This Occupant 02  
 \_\_\_\_\_ Code the actual number of injuries recorded for this occupant.  
 (00) No recorded injuries  
 (97) Injured, details unknown  
 (99) Unknown if injured

**TRAUMA DATA**

71. Glasgow Coma Scale (GCS) Score 02  
 (at Medical Facility)  
 (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

72. Was the Occupant Given Blood? 1  
 (1) No - blood not given  
 (2) Yes - blood given  
 (specify units): \_\_\_\_\_  
 (9) Unknown if blood given

73. 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

**BELT USE DETERMINATION**

74. Primary Source of Belt Use Determination 1  
 (0) Not equipped/not available/destroyed or rendered inoperative  
 (1) Vehicle inspection  
 (2) Official injury data  
 (3) Driver/occupant interview  
 (8) Other (specify): \_\_\_\_\_  
 (9) Unknown if belt used



# OCCUPANT INJURY FORM

1. Primary Sampling Unit Number <u>02</u>	3. Vehicle Number <u>01</u>
2. Case Number - Stratum <u>01 OF</u>	4. Occupant Number <u>03</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	A.I.S. - 90						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					
(A) arm contusion 1st	5. <u>3</u>	6. <u>7</u>	7. <u>9</u>	8. <u>04</u>	9. <u>02</u>	10. <u>1</u>	11. <u>1</u>	12. <u>SS1</u>	13. <u>2</u>	14. <u>1</u>	15. <u>00</u>
(B) hip contusion 2nd	16. <u>3</u>	17. <u>8</u>	18. <u>9</u>	19. <u>04</u>	20. <u>02</u>	21. <u>1</u>	22. <u>1</u>	23. <u>SS1</u>	24. <u>2</u>	25. <u>1</u>	26. <u>00</u>
3rd	27. ___	28. ___	29. ___	30. ___	31. ___	32. ___	33. ___	34. ___	35. ___	36. ___	37. ___
4th	38. ___	39. ___	40. ___	41. ___	42. ___	43. ___	44. ___	45. ___	46. ___	47. ___	48. ___
5th	49. ___	50. ___	51. ___	52. ___	53. ___	54. ___	55. ___	56. ___	57. ___	58. ___	59. ___
6th	60. ___	61. ___	62. ___	63. ___	64. ___	65. ___	66. ___	67. ___	68. ___	69. ___	70. ___
7th	71. ___	72. ___	73. ___	74. ___	75. ___	76. ___	77. ___	78. ___	79. ___	80. ___	81. ___
8th	82. ___	83. ___	84. ___	85. ___	86. ___	87. ___	88. ___	89. ___	90. ___	91. ___	92. ___
9th	93. ___	94. ___	95. ___	96. ___	97. ___	98. ___	99. ___	100. ___	101. ___	102. ___	103. ___
10th	104. ___	105. ___	106. ___	107. ___	108. ___	109. ___	110. ___	111. ___	112. ___	113. ___	114. ___



**OCCUPANT INJURY CLASSIFICATION**

Body Region	Specific Anatomic Structure	Level of Injury	Aspect
(1) Head		Specific injuries are assigned consecutive two-digit numbers beginning with 02.	(1) Right
(2) Face			(2) Left
(3) Neck	<u>Vessels, Nerves, Organs.</u> <u>Bones, Joints</u> 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.	(3) Bilateral
(4) Thorax			(4) Central
(5) Abdomen			(5) Anterior
(6) Spine			(6) Posterior
(7) Upper Extremity			(7) Superior
(8) Lower Extremity			(8) Inferior
(9) Unspecified	The exceptions to this rule apply to:		(9) Unknown
			(0) Whole region
<b>Type of Anatomic Structure</b>	<u>Whole Area</u>		
(1) Whole Area	(02) Skin - Abrasion	<b>Abbreviated Injury Scale</b>	(1) Minor Injury
(2) Vessels	(04) Skin - Contusion		(2) Moderate Injury
(3) Nerves	(06) Skin - Laceration		(3) Serious Injury
(4) Organs (includes Muscles/ligaments)	(08) Skin - Avulsion		(4) Severe Injury
(5) Skeletal (includes joints)	(10) Amputation		(5) Critical Injury
(6) Head - LOC	(20) Burn		(6) Maximum (untreatable)
(9) Skin	(30) Crush		(7) Injured, unknown severity
	(40) Degloving		
	(50) Injury - NFS		
	(90) Trauma, other than mechanical		
	<u>Head - LOC</u>		
	(02) Length of LOC		
	(04) Level		
	(06) of		
	(08) Consciousness		
	(10) Concussion		
	<u>Spine</u>		
	(02) Cervical		
	(04) Thoracic		
	(06) Lumbar		

**SOURCE OF INJURY DATA****INJURY SOURCE****DIRECT/INDIRECT INJURY**OFFICIAL RECORDS

- (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 RECORDS

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

**CONFIDENCE LEVEL**

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

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

## INJURY SOURCES

### FRONT

- (001) Windshield
- (002) Mirror
- (003) Sunvisor
- (004) Steering wheel rim
- (005) Steering wheel hub/spoke
- (006) Steering wheel (combination of codes 004 and 005)
- (007) Steering column, transmission selector lever, other attachment
- (008) Cellular telephone or CB radio
- (009) Add on equipment (e.g., tape deck, air conditioner)
- (010) Left instrument panel and below
- (011) Center instrument panel and below
- (012) Right instrument panel and below
- (013) Glove compartment door
- (014) Knee bolster
- (015) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, mirror, or steering assembly (driver side only)
- (016) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, or mirror (passenger side only)
- (017) Windshield reinforced by exterior object (specify): \_\_\_\_\_
- (019) Other front object (specify): \_\_\_\_\_

### LEFT SIDE

- (051) Left side interior surface, excluding hardware or armrests
- (052) Left side hardware or armrest
- (053) Left A (A1/A2)-pillar
- (054) Left B-pillar
- (055) Other left pillar (specify): \_\_\_\_\_
- (056) Left side window glass
- (057) Left side window frame
- (058) Left side window sill
- (059) Left side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.
- (060) Other left side object (specify): \_\_\_\_\_

### RIGHT SIDE

- (101) Right side interior surface, excluding hardware or armrests

- (102) Right side hardware or armrest
- (103) Right A (A1/A2)-pillar
- (104) Right B-pillar
- (105) Other right pillar (specify): \_\_\_\_\_
- (106) Right side window glass
- (107) Right side window frame
- (108) Right side window sill
- (109) Right side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.
- (110) Other right side object (specify): \_\_\_\_\_

### INTERIOR

- (151) Seat, back support
- (152) Belt restraint webbing/buckle
- (153) Belt restraint B-pillar or door frame attachment point
- (154) Other restraint system component (specify): \_\_\_\_\_
- (155) Head restraint system
- (160) Other occupants (specify): \_\_\_\_\_
- (161) Interior loose objects
- (162) Child safety seat (specify): \_\_\_\_\_
- (163) Other interior object (specify): \_\_\_\_\_

### AIR BAG

- (170) Air bag-driver side
- (171) Air bag-driver side and eyewear
- (172) Air bag-driver side and jewelry
- (173) Air bag-driver side and object held
- (174) Air bag-driver side and object in mouth
- (175) Air bag compartment cover-driver side
- (176) Air bag compartment cover-driver side and eyewear
- (177) Air bag compartment cover-driver side and jewelry
- (178) Air bag compartment cover-driver side and object held
- (179) Air bag compartment cover-driver side and object in mouth
- (180) Air bag-passenger side
- (181) Air bag-passenger side and eyewear
- (182) Air bag-passenger side and jewelry

- (183) Air bag-passenger side and object held
- (184) Air bag-passenger side and object in mouth
- (185) Air bag compartment cover-passenger side
- (186) Air bag compartment cover-passenger side and eyewear
- (187) Air bag compartment cover-passenger side and jewelry
- (188) Air bag compartment cover-passenger side and object held
- (189) Air bag compartment cover-passenger side and object in mouth
- (190) Other air bag (specify): \_\_\_\_\_
- (195) Other air bag compartment cover (specify): \_\_\_\_\_

### ROOF

- (201) Front header
- (202) Rear header
- (203) Roof left side rail
- (204) Roof right side rail
- (205) Roof or convertible top

### FLOOR

- (251) Floor (including toe pan)
- (252) Floor or console mounted transmission lever, including console
- (253) Parking brake handle
- (254) Foot controls including parking brake

### REAR

- (301) Backlight (rear window)
- (302) Backlight storage rack, door, etc.
- (303) Other rear object (specify): \_\_\_\_\_

### ADAPTIVE (ASSISTIVE) DRIVING EQUIPMENT

- (401) Hand controls for braking/acceleration
- (402) Steering control devices (attached to OEM steering wheel)
- (403) Steering knob attached to steering wheel
- (405) Replacement steering wheel (i.e., reduced diameter)
- (406) Joy stick steering controls
- (407) Wheelchair tie-downs
- (408) Modification to seat belts, (specify): \_\_\_\_\_
- (409) Additional or relocated switches, (specify): \_\_\_\_\_
- (410) Raised roof

- (411) Wall mounted head rest (used behind wheel chair)
- (412) Other adaptive device (specify): \_\_\_\_\_

### EXTERIOR OF OCCUPANT'S VEHICLE

- (451) Hood
- (452) Outside hardware (e.g., outside mirror, antenna)
- (453) Other exterior surface or tires (specify): \_\_\_\_\_
- (454) Unknown exterior objects

### EXTERIOR OF OTHER MOTOR VEHICLE

- (501) Front bumper
- (502) Hood edge
- (503) Other front of vehicle (specify): \_\_\_\_\_
- (504) Hood
- (505) Hood ornament
- (506) Windshield, roof rail, A-pillar
- (507) Side surface
- (508) Side mirrors
- (509) Other side protrusions (specify): \_\_\_\_\_
- (510) Rear surface
- (511) Undercarriage
- (512) Tires and wheels
- (513) Other exterior of other motor vehicle (specify): \_\_\_\_\_
- (514) Unknown exterior of other motor vehicle

### OTHER VEHICLE OR OBJECT IN THE ENVIRONMENT

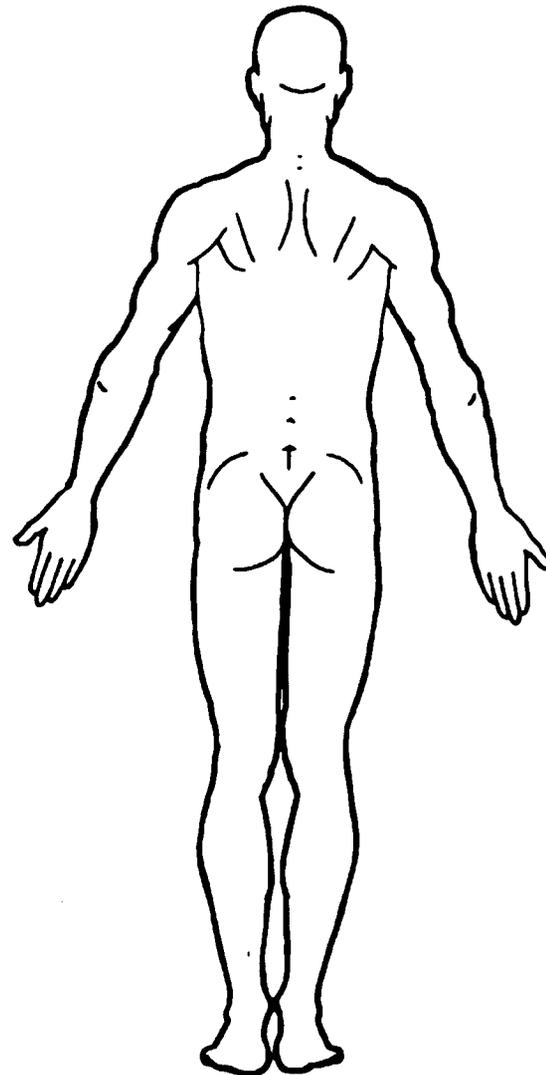
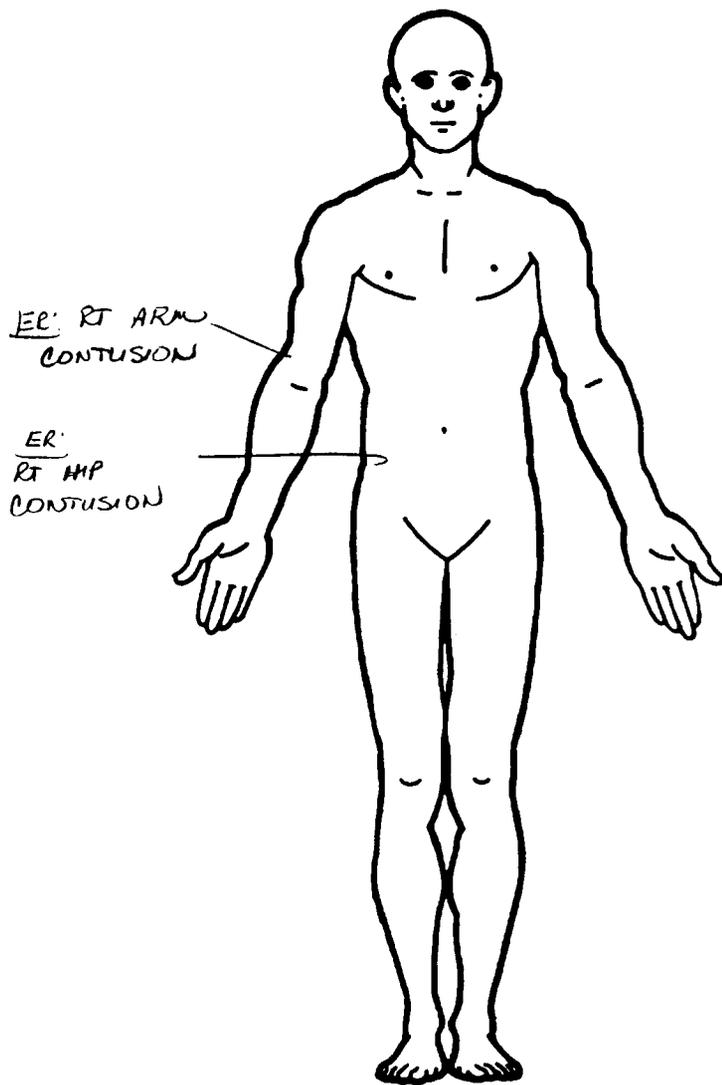
- (551) Ground
- (598) Other vehicle or object (specify): \_\_\_\_\_
- (599) Unknown vehicle or object

### NONCONTACT INJURY

- (601) Fire in vehicle
- (602) Flying glass
- (603) Other noncontact injury source (specify): \_\_\_\_\_
- (604) Air bag exhaust gases
- (697) Injured, unknown source

# 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.)



# OFFICIAL INJURY DATA — SKELETAL INJURIES

Restrained?

No

Yes

Blood Alcohol  
Level (mg/dl)

BAL = \_\_\_\_\_

Glasgow Coma  
Scale Score

GCSS = \_\_\_\_\_

Units of Blood  
Given

Units = \_\_\_\_\_

Arterial Blood  
Gases

pH = \_\_\_\_\_

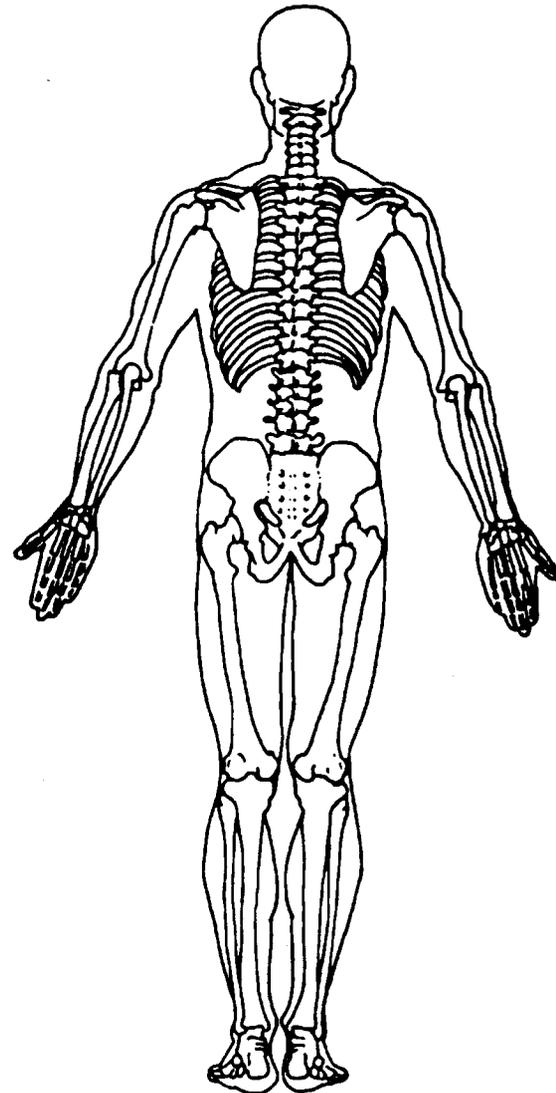
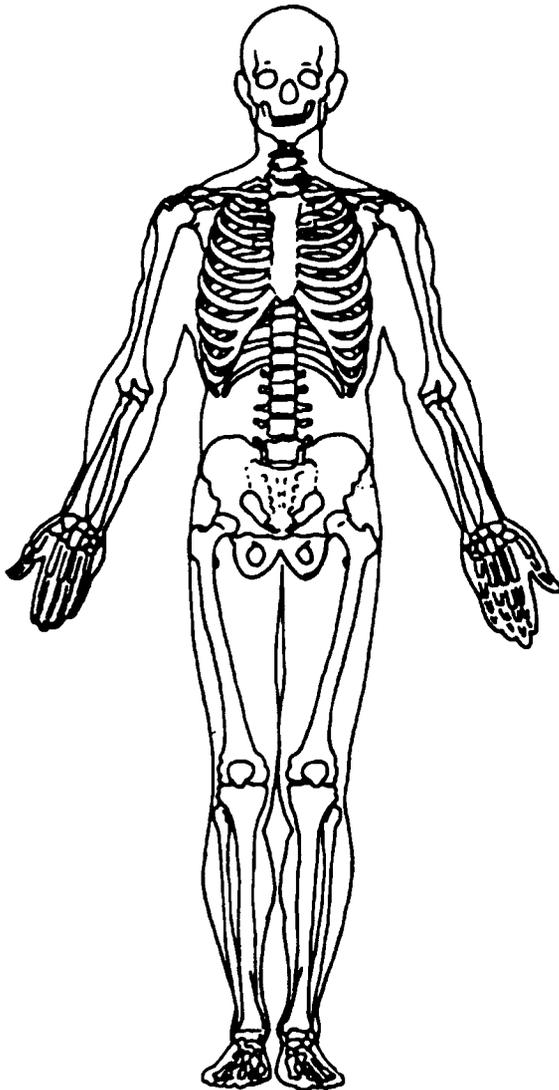
PO<sub>2</sub> = \_\_\_\_\_

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

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

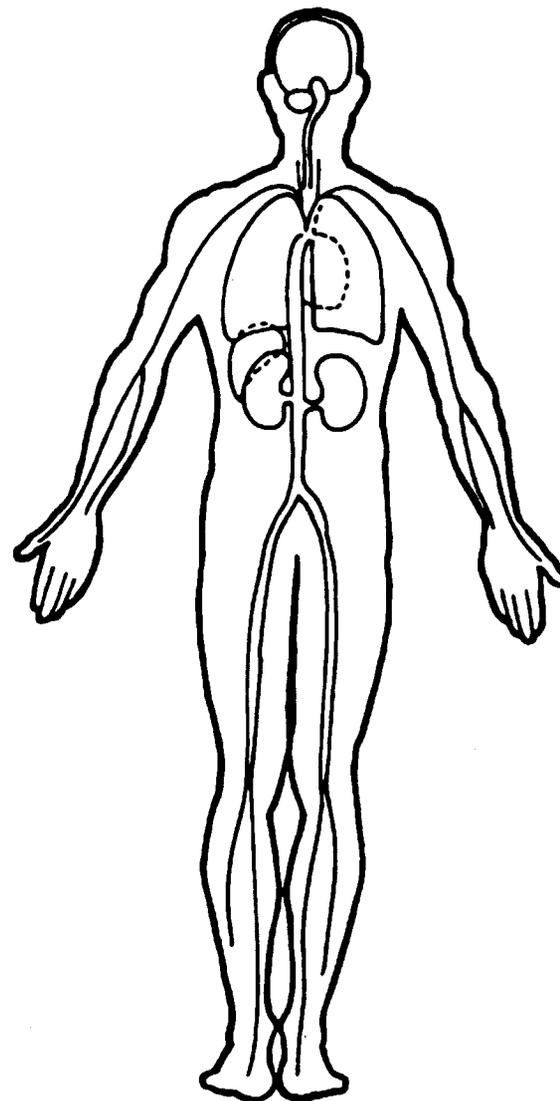
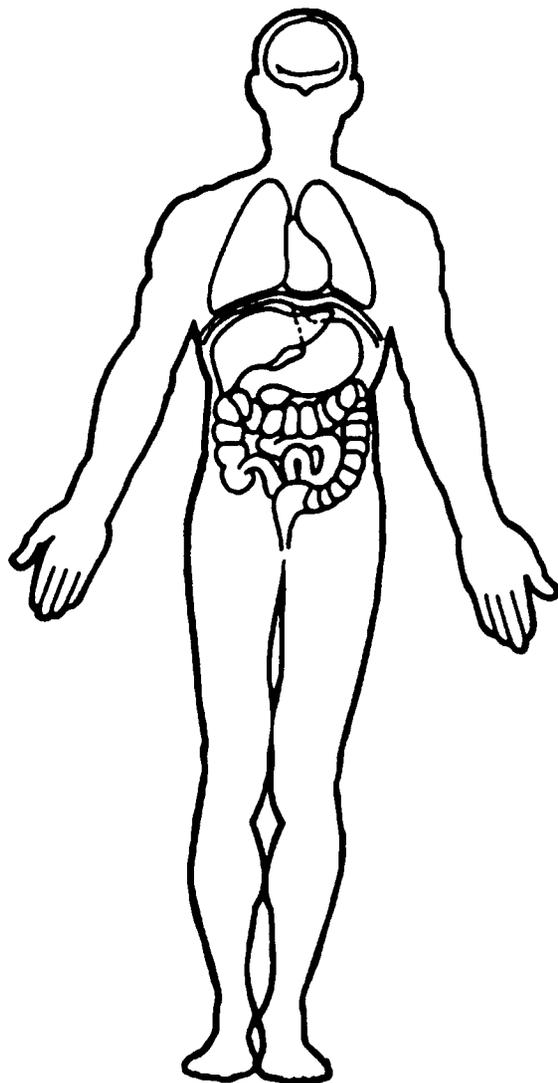
*NOT RECORDED*

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.)



## 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.)





**OCCUPANT RELATED**

37. Driver Presence in Vehicle 1  
 (0) Driver not present  
 (1) Driver present  
 (9) Unknown
38. Number of Occupants This Vehicle 01  
 (00-96) Code actual number of occupants for this vehicle  
 (97) 97 or more  
 (99) Unknown
39. Number of Occupant Forms Submitted 01

**AIR BAG RELATED**

40. Is this an AOPS Vehicle? 0  
 (0) No (includes unknown)  
 (1) Yes - researcher determined  
 (2) VIN determined air bag system  
 (3) VIN determined automatic (passive) belts  
 (4) VIN determined air bag and automatic (passive) belts
41. Air Bag(s) Deployment, First Seat Frontal 0  
 (0) Not equipped or not available  
 (1) No air bags deployed  
*Single Air Bag Vehicle*  
 (2) Driver air bag deployed  
 (3) Driver air bag, unknown if deployed  
*Multiple Air Bag Vehicle*  
 (4) Driver side only deployed  
 (5) Passenger side only deployed  
 (6) Driver and passenger side deployed  
 (7) Driver and passenger side unknown if deployed  
 (8) Air bag(s) deployed, details unknown  
 (9) Unknown
42. Air Bag(s) Deployment, Other Than First Seat Frontal 0  
 (0) Not equipped with an "other" air bag  
 (1) Deployed during accident (as a result of impact)  
 (2) Deployed inadvertently just prior to accident  
 (3) Deployed, details unknown  
 (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)  
 (5) Unknown if deployed  
 (7) Nondeployed  
 (9) Unknown

Specify type of "other" air bag present: \_\_\_\_\_

**VEHICLE WEIGHT ITEMS**

43. Vehicle Curb Weight 1,160  
 Code weight to nearest 10 kilograms.  
 (045) Less than 450 kilograms  
 (610) 6,100 kilograms or more  
 (999) Unknown  
2,566 lbs X .4536 = 1,164 kgs

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

44. Vehicle Cargo Weight 0,010  
 Code weight to nearest 10 kilograms.  
 (000) Less than 5 kilograms  
 (450) 4,500 kilograms or more  
 (999) Unknown  
25 lbs X .4536 = 11 kgs  
 Source: \_\_\_\_\_

**ROLLOVER DATA**

45. Rollover 04  
 (00) No rollover (no overturning)  
*Rollover (primarily about the longitudinal axis)*  
 (01-16) Code the number of quarter turns  
 (17) Rollover, 17 or more quarter turns (specify): \_\_\_\_\_  
 (98) Rollover--end-over-end (i.e., primarily about the lateral axis)  
 (99) Rollover (overturn), details unknown
46. Rollover Initiation Type 07  
 (00) No rollover  
 (01) Trip-over  
 (02) Flip-over  
 (03) Turn-over  
 (04) Climb-over  
 (05) Fall-over  
 (06) Bounce-over  
 (07) Collision with another vehicle  
 (08) Other rollover initiation type specify): \_\_\_\_\_  
 (98) Rollover--end-over-end  
 (99) Unknown rollover initiation type
47. Location of Rollover Initiation 2  
 (0) No rollover  
 (1) On roadway  
 (2) On shoulder—paved  
 (3) On shoulder—unpaved  
 (4) On roadside or divided trafficway median  
 (8) Rollover--end-over-end  
 (9) Unknown
48. Rollover Initiation Object Contacted 01  
 (Note: Applicable codes on back of page)
49. Location on Vehicle Where Initial Principal Tripping Force Is Applied 3  
 (0) No rollover  
 (1) Wheels/tires  
 (2) Side plane  
 (3) End plane  
 (4) Undercarriage  
 (5) Other location on vehicle (specify): \_\_\_\_\_  
 (6) Non-contact rollover forces (specify): \_\_\_\_\_  
 (8) Rollover--end-over-end  
 (9) Unknown
50. Direction of Initial Roll 2  
 (0) No rollover  
 (1) Roll right - primarily about the longitudinal axis  
 (2) Roll left - primarily about the longitudinal axis  
 (8) Rollover--end-over-end  
 (9) Unknown roll direction

## CODES FOR ROLLOVER INITIATION OBJECT CONTACTED

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

### Noncollision

(31) Turn-over — fall-over  
(32) No rollover impact initiation (end-over-end)  
(34) 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

(70) Passenger car, light truck, van, or other vehicle not in-transport  
(71) Medium/heavy truck or bus not in-transport  
(76) Animal  
(77) Train  
(78) Trailer, disconnected in transport  
(79) Object fell from vehicle in-transport  
(88) Other nonfixed object (specify): \_\_\_\_\_

(89) Unknown nonfixed object

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

(99) Unknown event or object



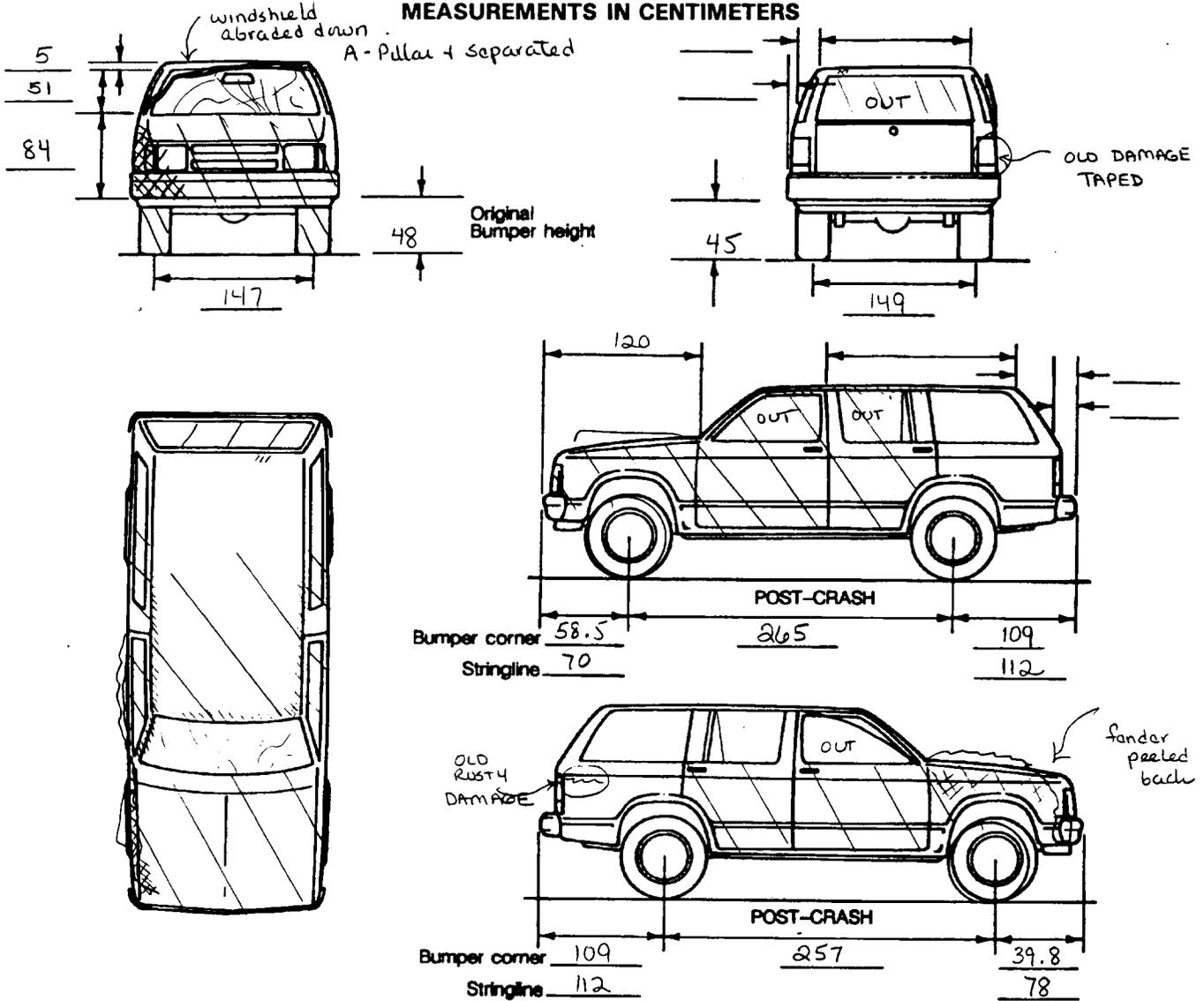
## ORIGINAL SPECIFICATIONS WORK SHEET

Wheelbase	<u>103.0</u>	inches	x 2.54	=	<u>262</u> cm
Overall Length	<u>176.0</u>	inches	x 2.54	=	<u>447</u> cm
Maximum Width	<u>66.5</u>	inches	x 2.54	=	<u>169</u> cm
Curb Weight	<u>2,566</u>	pounds	x .4536	=	<u>1,164</u> kg
Average Track	<u>58.0</u>	inches	x 2.54	=	<u>148</u> cm
Front Overhang	<u>28.9</u>	inches	x 2.54	=	<u>73</u> cm
Rear Overhang	<u>44.1</u>	inches	x 2.54	=	<u>112</u> cm
Undeformed End Width	<u>61.0</u>	inches	x 2.54	=	<u>155</u> cm
Engine Size: cyl./displ.	<u>2366</u>	cc	x .001	=	<u>2.4</u> L
	_____	CID	x .0164	=	_____ L
		4 cyl			

### 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>RF <u>2</u></td> <td>RF <u>2</u></td> </tr> <tr> <td>LF <u>2</u></td> <td>LF <u>2</u></td> </tr> <tr> <td>RR <u>2</u></td> <td>RR <u>2</u></td> </tr> <tr> <td>LR <u>2</u></td> <td>LR <u>2</u></td> </tr> </table> <p>(1) Yes (2) No (8) NA (9) Unk.</p>	RF <u>2</u>	RF <u>2</u>	LF <u>2</u>	LF <u>2</u>	RR <u>2</u>	RR <u>2</u>	LR <u>2</u>	LR <u>2</u>	<p><b>ORIGINAL SPECIFICATIONS</b></p> <table style="width:100%;"> <tr> <td>Wheelbase</td> <td><u>262</u></td> <td>cm</td> </tr> <tr> <td>Overall Length</td> <td><u>447</u></td> <td>cm</td> </tr> <tr> <td>Maximum Width</td> <td><u>169</u></td> <td>cm</td> </tr> <tr> <td>Curb Weight</td> <td><u>1164</u></td> <td>kg</td> </tr> <tr> <td>Average Track</td> <td><u>148</u></td> <td>cm</td> </tr> <tr> <td>Front Overhang</td> <td><u>73</u></td> <td>cm</td> </tr> <tr> <td>Rear Overhang</td> <td><u>112</u></td> <td>cm</td> </tr> <tr> <td>Undeformed End Width</td> <td><u>155</u></td> <td>cm</td> </tr> <tr> <td>Engine Size: cyl./displ.</td> <td><u>4cyl / 2.4</u></td> <td>L</td> </tr> </table>	Wheelbase	<u>262</u>	cm	Overall Length	<u>447</u>	cm	Maximum Width	<u>169</u>	cm	Curb Weight	<u>1164</u>	kg	Average Track	<u>148</u>	cm	Front Overhang	<u>73</u>	cm	Rear Overhang	<u>112</u>	cm	Undeformed End Width	<u>155</u>	cm	Engine Size: cyl./displ.	<u>4cyl / 2.4</u>	L	<p><b>WHEEL STEER ANGLES</b> (For locked front wheels or displaced rear axles only)</p> <table style="width:100%;"> <tr> <td>RF ±</td> <td><u>    </u></td> <td>°</td> </tr> <tr> <td>LF ±</td> <td><u>    </u></td> <td>°</td> </tr> <tr> <td>RR ±</td> <td><u>    </u></td> <td>°</td> </tr> <tr> <td>LR ±</td> <td><u>    </u></td> <td>°</td> </tr> </table> <p>Within ± 5 degrees</p> <hr/> <p><b>DRIVE WHEELS</b></p> <p><input type="checkbox"/> FWD    <input type="checkbox"/> RWD    <input checked="" type="checkbox"/> 4WD</p> <hr/> <p>Approximate Cargo Weight <u>    </u> kg</p>	RF ±	<u>    </u>	°	LF ±	<u>    </u>	°	RR ±	<u>    </u>	°	LR ±	<u>    </u>	°
RF <u>2</u>	RF <u>2</u>																																																
LF <u>2</u>	LF <u>2</u>																																																
RR <u>2</u>	RR <u>2</u>																																																
LR <u>2</u>	LR <u>2</u>																																																
Wheelbase	<u>262</u>	cm																																															
Overall Length	<u>447</u>	cm																																															
Maximum Width	<u>169</u>	cm																																															
Curb Weight	<u>1164</u>	kg																																															
Average Track	<u>148</u>	cm																																															
Front Overhang	<u>73</u>	cm																																															
Rear Overhang	<u>112</u>	cm																																															
Undeformed End Width	<u>155</u>	cm																																															
Engine Size: cyl./displ.	<u>4cyl / 2.4</u>	L																																															
RF ±	<u>    </u>	°																																															
LF ±	<u>    </u>	°																																															
RR ±	<u>    </u>	°																																															
LR ±	<u>    </u>	°																																															
<p><b>TYPE OF TRANSMISSION</b></p> <p><input type="checkbox"/> Manual    <input checked="" type="checkbox"/> Automatic</p> <p>END SHIFT ≥ 10 CM</p> <p><input type="checkbox"/> Yes    <input checked="" type="checkbox"/> No</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.



**COLLISION DEFORMATION CLASSIFICATION**

HIGHEST DELTA "V"

Accident Event Sequence Number	Object Contacted	(1) (2) Direction of Force	(3) Deformation Location	(4) Longitudinal or Lateral Location	(5) Vertical or Lateral Location	(6) Type of Damage Distribution	(7) Deformation Extent
Secondary DV 4. <u>03</u>	5. <u>31</u>	6. <u>00</u>	7. <u>T</u>	8. <u>Y</u>	9. <u>D</u>	10. <u>0</u>	11. <u>03</u>

Second Highest Delta "V"

12. <u>01</u>	13. <u>01</u>	14. <u>12</u>	15. <u>F</u>	16. <u>R</u>	17. <u>E</u>	18. <u>E</u>	19. <u>05</u>
---------------	---------------	---------------	--------------	--------------	--------------	--------------	---------------

**CRUSH PROFILE IN CENTIMETERS**

The crush profile for the damage described in the CDC(s) above should be documented in the appropriate space below. (ALL MEASUREMENTS ARE IN CENTIMETERS.)

HIGHEST DELTA "V"

<del>20.</del> 23 L	<del>21.</del> 24 C <sub>1</sub>	C <sub>2</sub>	C <sub>3</sub>	C <sub>4</sub>	C <sub>5</sub>	C <sub>6</sub>	<del>22.</del> 25 ± D
							+ - -----

Second Highest Delta "V"

<del>23.</del> 20 L	<del>24.</del> 21 C <sub>1</sub>	C <sub>2</sub>	C <sub>3</sub>	C <sub>4</sub>	C <sub>5</sub>	C <sub>6</sub>	<del>25.</del> 22 ± D
<u>155</u>	<u>002</u>	<u>003</u>	<u>002</u>	<u>003</u>	<u>004</u>	<u>028</u>	<u>059</u>

26. Undeformed End Width  
(Coded when highest severity impact is an end plane impact.)  
998  
Code to the nearest centimeter 155  
(250) 250 centimeters or more  
(998) No highest severity end plane impact  
(999) Unknown

27. Direct Damage Width  
(For highest severity impact)  
037  
999  
Code to the nearest centimeter  
(250) 250 centimeters or more  
(999) Unknown

28. Original Wheelbase  
Code to the nearest centimeter 262  
(650) 650 centimeters or more  
(999) Unknown  
103.0 inches X 2.54 = 262 centimeters

29. Original Average Track Width  
Code to the nearest centimeter 148  
(185) 185 centimeters or more  
(999) Unknown  
58.0 inches X 2.54 = 148 centimeters

**FUEL SYSTEM**

30. Are CDCs Documented but Not Coded on The Automated File? 0  
 (0) No  
 (1) Yes
31. Researcher's Assessment of Vehicle Disposition 1  
 (0) Not towed due to vehicle damage  
 (1) Towed due to vehicle damage  
 (9) Unknown
32. Is This A Multi-Stage Manufactured Vehicle And/Or A Certified Altered Vehicle? 0  
 (0) No post manufacturer modifications  
 (1) Yes - post manufacturer modifications (specify): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 (Include photograph of CERTIFICATION PLACARD in case report)  
 (9) Unknown if vehicle is modified

35. Location of Fuel Tank-1 Filler Cap 5
36. Location of Fuel Tank-2 Filler Cap 0  
 (0) No fuel tank  
 (1) On back plane  
 (2) Aft of center of the rear wheels (rear axle) on left side plane  
 (3) Aft of center of the rear wheels (rear axle) on right side plane  
 (4) Forward of center of the rear wheels (rear axle) on left side plane  
 (5) Forward of center of the rear wheels (rear axle) on right side plane  
 (6) Over the center of the rear wheels (rear axle) on left side plane  
 (7) Over the center of the rear wheels (rear axle) on right side plane  
 (8) Other (specify): \_\_\_\_\_  
 (9) Unknown

37. Type of Fuel Tank-1 1
38. Type of Fuel Tank-2 0  
 (0) No fuel tank (electrical vehicle)  
 (1) Metallic  
 (2) Non-metallic  
 (9) Unknown

**FIRE OCCURRENCE**

33. Fire Occurrence 0  
 (0) No fire  
  
 Yes, fire occurred  
 (1) Minor  
 (2) Major  
 (9) Unknown
34. Origin of Fire 0  
 (0) No fire  
 (1) Vehicle exterior (front, side, back, top)  
 (2) Exhaust system  
 (3) Fuel tank (and other fuel retention system parts)  
 (4) Engine compartment  
 (5) Cargo/trunk compartment  
 (6) Instrument panel  
 (7) Passenger compartment area  
 (8) Other location (specify): \_\_\_\_\_  
 (9) Unknown

39. Location of Fuel Tank-1 6
40. Location of Fuel Tank-2 0  
 (0) No fuel tank  
 (1) Aft of center of the rear wheels (rear axle) centered  
 (2) Aft of center of the rear wheels (rear axle) left side  
 (3) Aft of center of the rear wheels (rear axle) right side  
 (4) Forward of center of the rear wheels (rear axle) centered  
 (5) Forward of center of the rear wheels (rear axle) left side  
 (6) Forward of center of the rear wheels (rear axle) right side  
 (7) Over center of the rear wheels (rear axle)  
 (8) Other (specify): \_\_\_\_\_  
 (9) Unknown

41. Damage to Fuel Tank-1 1
42. Damage to Fuel Tank-2 0  
 (0) No fuel tank  
 (1) No damage to fuel tank  
 (2) Deformed, no seam failure  
 (3) Deformed, with a seam failure  
 (4) Punctured  
 (5) Lacerated (ripped)  
 (6) Abraded (scraped)  
 (7) Filler neck separation from the fuel tank  
 (8) Other damage (specify): \_\_\_\_\_  
 (9) Unknown

<p>43. Leakage Location of Fuel System-1 <span style="float:right"><u>1</u></span></p> <p>44. Leakage Location of Fuel System-2 <span style="float:right"><u>0</u></span></p> <p>(0) No fuel tank (1) No fuel leakage</p> <p><i>Primary Area Of Leakage</i></p> <p>(2) Tank (3) Filler neck (4) Cap (5) Lines/pump/filter (6) Vent/emission recovery (8) Other (specify): _____ (9) Unknown</p> <p>45. Fuel Type-1 <span style="float:right"><u>01</u></span></p> <p>46. Fuel Type-2 <span style="float:right"><u>00</u></span></p> <p><i>Single Fuel Type</i></p> <p>(00) No fuel tank (01) Gasoline (02) Diesel (03) CNG (Compressed Natural Gas) (04) LPG (Liquid Petroleum Gas) also known as Propane (05) LNG (Liquid Natural Gas) (06) Methanol (M100 or M85) (07) Ethanol (E100 or E85) (08) Other (Hydrogen or others) (specify): _____</p> <p>_____</p> <p><i>Electric Powered or Electric/Solar Powered Vehicles</i></p> <p>(10) Lead Acid Battery (11) Nickel-Iron Battery (12) Nickel-Cadmium Battery (13) Sodium Metal Chloride Battery (14) Sodium Sulfur Battery (18) Other (Specify): _____</p> <p>(98) Other Hybrid (specify): _____</p> <p>_____</p> <p>(99) Unknown fuel type</p>	<p>47. Is This Vehicle Equipped With More Than Two Fuel Tanks? <span style="float:right"><u>0</u></span></p> <p>(0) No (one or two tanks only)</p> <p><i>Yes - More Than Two Tanks</i></p> <p>(1) Yes -- <u>no damage</u> to any tank or filler cap and <u>no fuel system leakage</u></p> <p>(2) Yes -- <u>no damage</u> to any tank or filler cap but <u>there is fuel system leakage</u> (specify leakage location): _____</p> <p>(3) Yes -- <u>damage</u> to an additional tank or filler cap and <u>there is fuel system leakage</u> (specify the following):                  Type of tank _____                  Tank location _____                  Filler cap location _____                  Tank damage _____                  Location of leakage _____                  Type of fuel _____</p> <p>(9) Unknown if more than two tanks</p>
<p><b>COMMENTS</b></p> <p>_____</p>	

\*\*\* STOP: IF THE CDS APPLICABLE VEHICLE WAS NOT TOWED \*\*\*

(GV10 = 0)

DO NOT COMPLETE THE INTERIOR VEHICLE FORM.



# INTERIOR VEHICLE FORM

1. Primary Sampling Unit Number 02  
 2. Case Number - Stratum 01 OF  
 3. Vehicle Number 02

## INTEGRITY

4. Passenger Compartment Integrity 98  
 (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):  
windshield / side window / backlight
- (99) Unknown

### Door, Tailgate or Hatch Opening

5. LF 1 6. RF 3 7. LR 1 8. RR 1 9. TG/H 1

- (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

Type of Window/Windshield Glazing

15. WS 1 16. LF 2 17. RF 2 18. LR 2 19. RR 2  
 20. BL 2 21. Roof 0 22. Other 2

- (0) No glazing
- (1) AS-1 - Laminated
- (2) AS-2 - Tempered
- (3) AS-3 - Tempered-tinted (original)
- (4) AS-2 - Tempered-with after market tint
- (5) AS-3 - Tempered-tinted (with additional after market tint)
- (6) AS-14 - Glass/Plastic
- (7) Glazing removed prior to accident
- (8) Other (specify):
- (9) Unknown

### Window Precrash Glazing Status

23. WS 1 24. LF 2 25. RF 2 26. LR 2 27. RR 2  
 28. BL 1 29. Roof 0 30. Other 1

- (0) No glazing
- (1) Fixed
- (2) Closed
- (3) Partially opened
- (4) Fully opened
- (7) Glazing removed prior to accident
- (9) Unknown

### Glazing Damage from Impact Forces

31. WS 2 32. LF 6 33. RF 6 34. LR 6 35. RR 1  
 36. BL 6 37. Roof 0 38. Other 1

- (0) No glazing
- (1) 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
- (9) Unknown if damaged

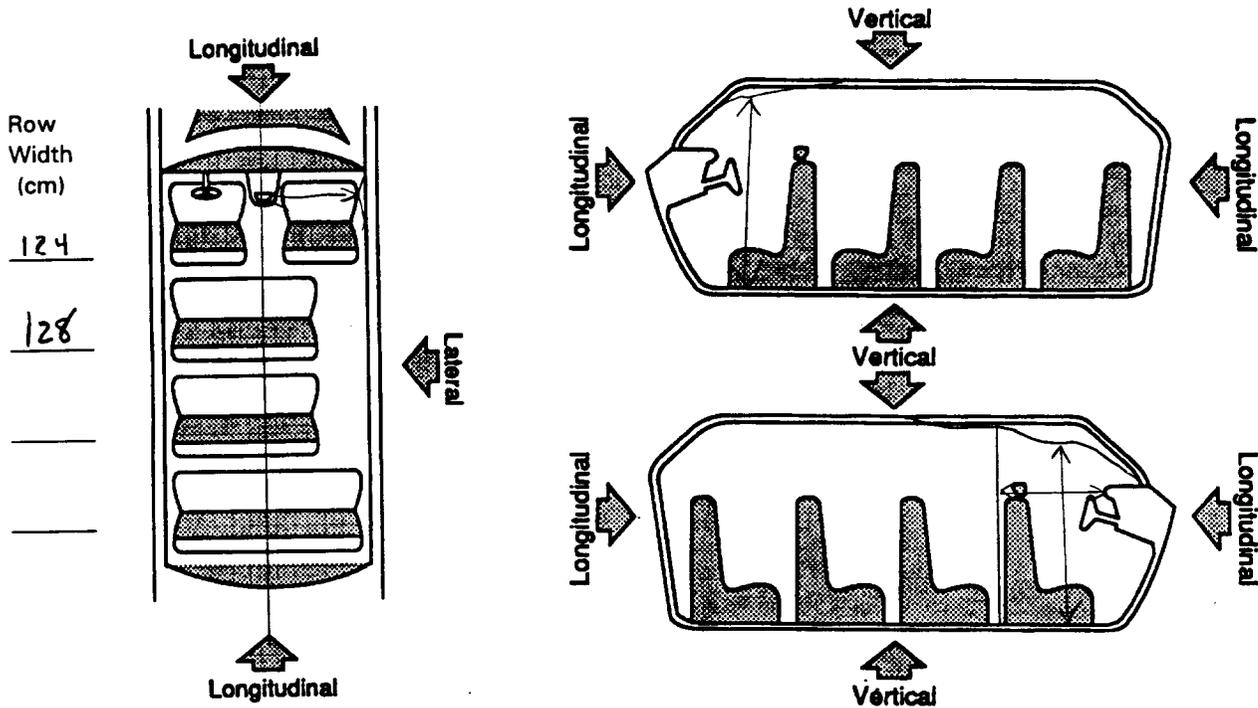
### Glazing Damage from Occupant Contact

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

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

# 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	04 panel (B)	76	67	9	long (7)	
13	05 toe pan	127	124	3	long	
13	A-Pillar	100	90	10	vert (6)	
13	door panel	68	65	3	lat	
11	Roof	106	104	2	vert	
12	Roof	106	95	11	" (5)	
13	Roof	106	89	17	" (1)	
13	Roof Rail	102	85	17	" (2)	
13	window frame	97	91	6	" (6)	
23	Roof	106	103	3	"	
22	Roof	106	102	4	"	
11	windshield	89	86	3	"	
12	windshield	90	85	5	" (10)	
13	wind shield	89	81	8	" (8)	
13	header	102	86	16	" (3)	
12	header	102	90	12	" (4)	

Document no more than the 15 most severe intrusions

### OCCUPANT AREA INTRUSION

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

#### 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) Side panel - forward of the A1/A2-pillar
- (11) Door panel (side)
- (12) Side panel - rear of the B-pillar
- (13) Roof (or convertible top)
- (14) Roof side rail
- (15) Windshield
- (16) Windshield header
- (17) Window frame
- (18) Floor pan (includes sill)
- (19) Backlight header
- (20) Front seat back
- (21) Second seat back
- (22) Third seat back
- (23) Fourth seat back
- (24) Fifth seat back
- (25) Seat cushion
- (26) Back door/panel (e.g., tailgate)
- (27) Other interior component (specify): \_\_\_\_\_

##### *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

#### 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

	Location of Intrusion	Intruding Component	Magnitude of Intrusion	Dominant Crush Direction
1st	47. <u>13</u>	48. <u>13</u>	49. <u>3</u>	50. <u>1</u>
2nd	51. <u>13</u>	52. <u>14</u>	53. <u>3</u>	54. <u>1</u>
3rd	55. <u>13</u>	56. <u>16</u>	57. <u>3</u>	58. <u>1</u>
4th	59. <u>12</u>	60. <u>16</u>	61. <u>2</u>	62. <u>1</u>
5th	63. <u>12</u>	64. <u>13</u>	65. <u>2</u>	66. <u>1</u>
6th	67. <u>13</u>	68. <u>06</u>	69. <u>2</u>	70. <u>1</u>
7th	71. <u>13</u>	72. <u>04</u>	73. <u>2</u>	74. <u>2</u>
8th	75. <u>13</u>	76. <u>15</u>	77. <u>2</u>	78. <u>1</u>
9th	79. <u>13</u>	80. <u>17</u>	81. <u>1</u>	82. <u>1</u>
10th	83. <u>12</u>	84. <u>15</u>	85. <u>1</u>	86. <u>1</u>

#### 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>Second Seat</b></p> <ul style="list-style-type: none"> <li>(21) Left</li> <li>(22) Middle</li> <li>(23) Right</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> | <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>(97) Catastrophic</p> <p>(98) Other enclosed area (specify) _____</p> <p>(99) Unknown</p> |
|--|---|

# STEERING RIM/SPOKE DEFORMATION

(All Measurements Are in Centimeters)

COMPARISON VALUE — DAMAGE VALUE = DEFORMATION

—

=

—

=

—

=

—

=

**STEERING COLUMN**

**INSTRUMENT PANEL**

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

88. Tilt Steering Column Adjustment 0  
 (0) No tilt steering column  
 (1) Full up  
 (2) Between full up and center  
 (3) Center  
 (4) Between center and full down  
 (5) Full down  
 (9) Unknown

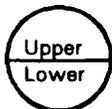
89. Telescoping Steering Column Adjustment 0  
 (0) No telescoping steering column  
 (1) Full back  
 (2) Between full back and midpoint  
 (3) Midpoint  
 (4) Between midpoint and full forward  
 (5) Full forward  
 (9) Unknown

90. 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

91. 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

92. Odometer Reading 123,000  
 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  
76,313 miles X 1.6093 = 122,811 kilometers

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

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

94. Type of Knee Bolster Covering 0  
 (0) No knee bolster  
 (1) Padded  
 (2) Rigid plastic  
 (8) Other (specify): \_\_\_\_\_  
 (9) Unknown

95. Knee Bolsters Deformed from Occupant Contact? 0  
 (0) No knee bolster  
 (1) No deformation  
 (2) Yes - deformation  
 (9) Unknown

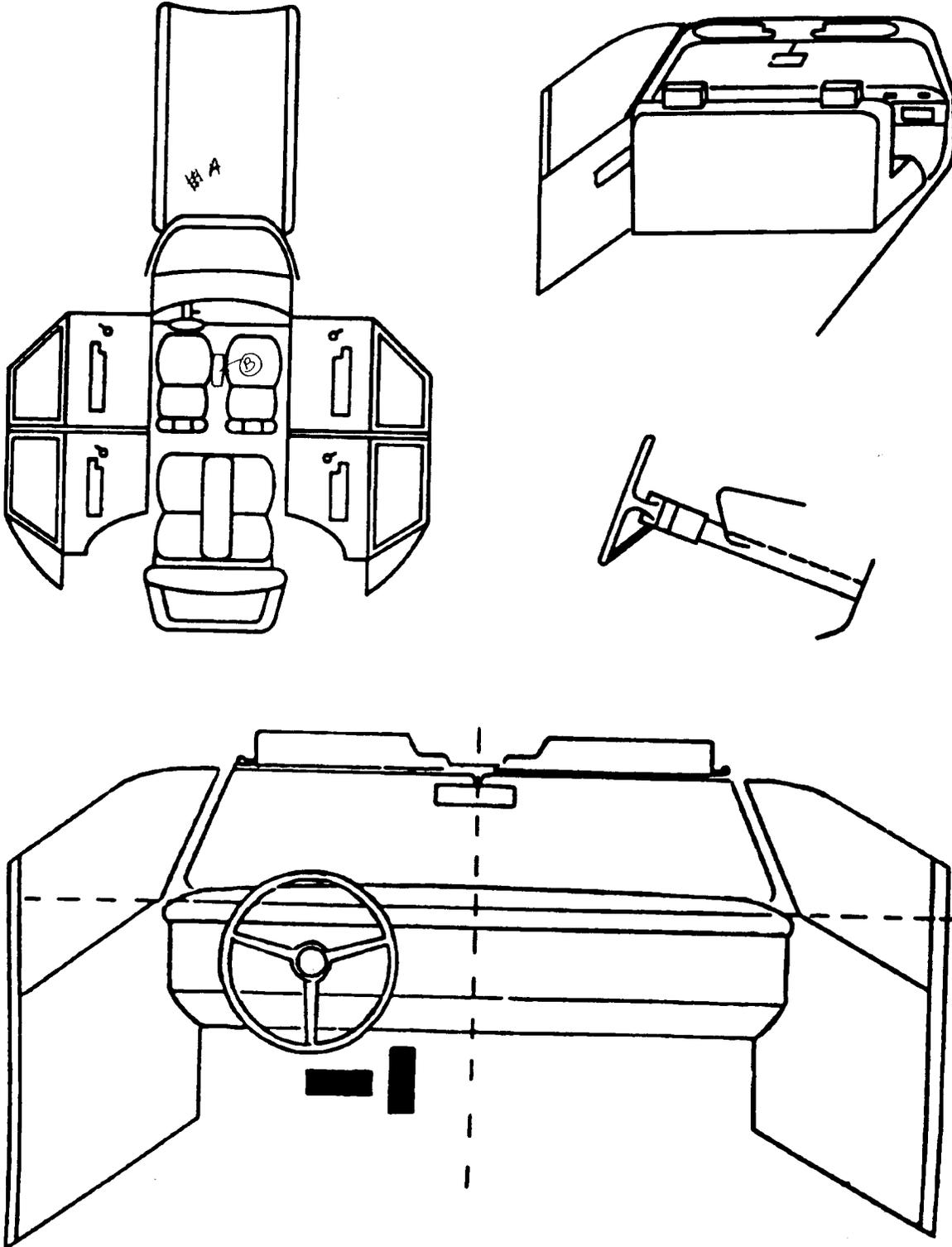
96. Did Glove Compartment Door Open During Collision(s)? 1  
 (0) No glove compartment door  
 (1) No - door did not open  
 (2) Yes - door opened  
 (9) Unknown

97. Adaptive (Assistive) Driving Equipment 0  
 (0) No adaptive driving equipment  
 (1) Adaptive driving equipment installed (Check all that apply.)  
 Hand controls for braking/acceleration  
 Steering control devices (attached to OEM steering wheel)  
 Steering knob attached to steering wheel  
 Low effort power steering (unit or device)  
 Replacement steering wheel (i.e., reduced diameter)  
 Joy-stick steering controls  
 Wheelchair tie-downs  
 Modification to seat belts (specify): \_\_\_\_\_  
 Additional or relocated switches (specify): \_\_\_\_\_  
 Raised roof  
 Wall-mounted head rest (used behind wheelchair)  
 Other adaptive device (specify): \_\_\_\_\_

(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	205	01	head	smudge / traj	1
B	163	01	cum/leg	scrapes / reddish cloth?	3
C					
D					
E					
F					
G					
H					
I					
J					
K					
L					
M					
N					

**FRONT**

- (001) Windshield
- (002) Mirror
- (003) Sunvisor
- (004) Steering wheel rim
- (005) Steering wheel hub/spoke
- (006) Steering wheel (combination of codes 004 and 005)
- (007) Steering column, transmission selector lever, other attachment
- (008) Cellular telephone or CB radio
- (009) Add on equipment (e.g., tape deck, air conditioner)
- (010) Left instrument panel and below
- (011) Center instrument panel and below
- (012) Right instrument panel and below
- (013) Glove compartment door
- (014) Knee bolster
- (015) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, mirror, or steering assembly (driver side only)
- (016) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, or mirror (passenger side only)
- (017) Windshield reinforced by exterior object, (specify): \_\_\_\_\_
- (019) Other front object (specify): \_\_\_\_\_

**CODES FOR INTERIOR COMPONENTS**

**LEFT SIDE**

- (051) Left side interior surface, excluding hardware or armrests
  - (052) Left side hardware or armrest
  - (053) Left A (A1/A2)-pillar
  - (054) Left B-pillar
  - (055) Other left pillar (specify): \_\_\_\_\_
  - (056) Left side window glass
  - (057) Left side window frame
  - (058) Left side window sill
  - (059) Left side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.
  - (060) Other left side object (specify): \_\_\_\_\_
- RIGHT SIDE**
- (101) Right side interior surface, excluding hardware or armrests
  - (102) Right side hardware or armrest
  - (103) Right A (A1/A2)-pillar
  - (104) Right B-pillar
  - (105) Other right pillar (specify): \_\_\_\_\_
  - (106) Right side window glass
  - (107) Right side window frame
  - (108) Right side window sill
  - (109) Right side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.
  - (110) Other right side object (specify): \_\_\_\_\_

**INTERIOR**

- (151) Seat, back support
- (152) Belt restraint webbing/buckle
- (153) Belt restraint B-pillar or door frame attachment point
- (154) Other restraint system component (specify): \_\_\_\_\_
- (155) Head restraint system
- (160) Other occupants (specify): \_\_\_\_\_
- (161) Interior loose objects
- (162) Child safety seat (specify): \_\_\_\_\_
- (163) Other interior object (specify): console / arm rest

**AIR BAG**

- (170) Air bag-driver side
- (175) Air bag compartment cover-driver side
- (180) Air bag-passenger side
- (185) Air bag compartment cover-passenger side
- (190) Other air bag (specify): \_\_\_\_\_
- (195) Other air bag compartment cover (specify): \_\_\_\_\_

**ROOF**

- (201) Front header
- (202) Rear header
- (203) Roof left side rail
- (204) Roof right side rail
- (205) Roof or convertible top

**FLOOR**

- (251) Floor (including toe pan)
- (252) Floor or console mounted transmission lever, including console
- (253) Parking brake handle
- (254) Foot controls including parking brake

**REAR**

- (301) Backlight (rear window)
- (302) Backlight storage rack, door, etc.
- (303) Other rear object (specify): \_\_\_\_\_

**ADAPTIVE (ASSISTIVE) DRIVING EQUIPMENT**

- (401) Hand controls for braking/acceleration
- (402) Steering control devices (attached to OEM steering wheel)
- (403) Steering knob attached to steering wheel
- (405) Replacement steering wheel (i.e., reduced diameter)
- (406) Joy stick steering controls
- (407) Wheelchair tie-downs
- (408) Modification to seat belts, (specify): \_\_\_\_\_
- (409) Additional or relocated switches, (specify): \_\_\_\_\_
- (410) Raised roof
- (411) Wall mounted head rest (used behind wheel chair)
- (412) Other adaptive device (specify): \_\_\_\_\_

**CONFIDENCE LEVEL OF CONTACT POINT**

- (1) Certain
- (2) Probable
- (3) Possible
- (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
<b>FIRST</b>	Availability	4	0	4
	Evidence of usage	04	00	04
	Used in this crash?	04	00	00
	Proper Use	1	0	0
	Failure Modes	1	0	0
	Anchorage Adjustment	1	0	1
<b>SECOND</b>	Availability	4	3	4
	Evidence of usage	04	03	04
	Used in this crash?	00	00	00
	Proper Use	0	0	0
	Failure Modes	0	0	0
	Anchorage Adjustment	1	0	1
<b>OTHER</b>	Availability	<del> </del>	<del> </del>	<del> </del>
	Evidence of usage	<del> </del>	<del> </del>	<del> </del>
	Used in this crash?	<del> </del>	<del> </del>	<del> </del>
	Proper Use	<del> </del>	<del> </del>	<del> </del>
	Failure Modes	<del> </del>	<del> </del>	<del> </del>
	- Anchorage Adjustment	<del> </del>	<del> </del>	<del> </del>

**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

**Proper Use of Manual (Active) Belts**

- (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

**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

**Shoulder Belt Upper Anchorage Adjustment**

- (0) No shoulder belt
- (1) No upper anchorage adjustment for shoulder belt

*Adjustable shoulder Belt Upper Anchorage*

- (2) In full up position
- (3) In mid position
- (4) In full down position
- (5) Position unknown
- (9) Unknown if position has adjustable upper anchorage adjustment

## 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 Front	Right Front	Other
F I R S T	Availability/Function	○	○	○
	Deployment	○	○	○
	Failure	○	○	○

<p><b>Air Bag System Availability/Function</b></p> <p>(0) Not equipped/not available (1) Air bag</p> <p><i>Non-functional</i></p> <p>(2) Air bag disconnected (specify): _____</p> <p>(3) Air bag not reinstalled (9) Unknown</p> <p><b>Are There Indications of Air Bag System Failure? (This Occupant Position)</b></p> <p>(0) Not equipped/not available (1) No (2) Yes (specify): _____</p> <p>(9) Unknown</p>	<p><b>Frontal Air Bag System Deployment (This Occupant Position)</b></p> <p>(0) Not equipped/not available (1) Deployed during accident (as a result of impact) (2) Deployed inadvertently just prior to accident (3) Deployed, accident sequence undetermined (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (5) Unknown if deployed (7) Nondeployed (9) Unknown</p>	<p><b>Air Bag(s) Deployment, <u>Other</u> Than First Seat Frontal (This Occupant Position)</b></p> <p>(0) Not equipped with an "<u>other</u>" air bag (1) Deployed during accident (as a result of impact) (2) Deployed inadvertently just prior to accident (3) Deployed, details unknown (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (5) Unknown if deployed (7) Nondeployed (9) Unknown</p>
--	--	--

### AUTOMATIC BELTS

		Left	Right
F I R S T	Availability/Function	○	○
	Use	○	○
	Type	○	○
	Proper Use	○	○
	Failure Modes	○	○

<p><b>Automatic (Passive) Belt System Availability/Function</b></p> <p>(0) Not equipped/not available (1) 2 point automatic belts (2) 3 point automatic belts (3) Automatic belts - type unknown</p> <p><i>Non-functional</i></p> <p>(4) Automatic belts destroyed or rendered inoperative (9) Unknown</p> <p><b>Automatic (Passive) Belt System Use</b></p> <p>(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</p> <p><b>Automatic (Passive) Belt System Type</b></p> <p>(0) Not equipped/not available (1) Non-motorized system (2) Motorized system (9) Unknown</p>	<p><b>Proper Use of Automatic (Passive) Belt System</b></p> <p>(0) Not equipped/not available/not used (1) Automatic belt used properly (2) Automatic belt used properly with child safety seat</p> <p><i>Automatic Belt Used Improperly</i></p> <p>(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): _____</p> <p>(8) Other improper use of automatic belt system (specify): _____</p> <p>(9) Unknown</p>	<p><b>Automatic (Passive) Belt Failure Modes During Accident</b></p> <p>(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): _____</p> <p>(6) Broken retractor (7) Combination of above (specify): _____ (8) Other automatic belt failure (specify): _____</p> <p>(9) Unknown</p>
---	---	--

## FIRST SEAT FRONTAL AIR BAGS

**NOTES:** Encode the applicable data *for the driver and first seat passenger* 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.

	Driver	Passenger
Type of air bag?	0	0
Flaps open at tear points?	0	0
Flaps damaged?	0	0
Air bag damaged?	00	00
Source of air bag damage	06	00
Air bag tethered?	0	0
Air bag have vent ports?	0	0
Other occupant contact air bag?	0	0
Occupant wearing eyewear?	0	0

**Type of Air Bag**

- (0) Not equipped/not available
- (1) Original manufacturer installed system
- (2) Retrofitted air bag
- (3) Replacement air bag
- (8) Unknown type of air bag
- (9) Unknown

**Did Air Bag Module Cover Flap(s) Open At Designated Tear Points?**

- (0) Not equipped/not available
- (1) No
- (2) Yes
- (3) Deployed, unknown if flap(s) opened at designated tear points
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

**Were Air Bag Module Cover Flap(s) Damaged?**

- (0) Not equipped/not available
- (1) No
- (2) Yes (specify):
- (3) Deployed, unknown if air bag module cover flap(s) damaged
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

**Was There Damage To The Air Bag?**

- (00) Not equipped/not available
- (01) Not damaged

**Yes - Air Bag Damage**

- (02) Ruptured
- (03) Cut
- (04) Torn
- (05) Holed
- (06) Burned
- (07) Abraded
- (88) Other damage (specify):

- (95) Damaged, details unknown
- (96) Deployed, unknown if damaged
- (97) Not deployed
- (98) Unknown if deployed
- (99) Unknown

**Source of Air Bag Damage**

- (00) Not equipped/not available
- (01) Not damaged
- (02) Object worn by occupant, (specify):
- (03) Object carried by occupant, (specify):
- (04) Adaptive/assistive controls, (specify):
- (05) Fire in vehicle
- (06) Thermal burns
- (07) Rescue or emergency efforts
- (88) Other damage source (specify):

- (95) Damaged, unknown source
- (96) Deployed, unknown if damaged
- (97) Not deployed
- (98) Unknown if deployed
- (99) Unknown

**Was The Air Bag Tethered?**

- (0) Not equipped/not available
- (1) No
- (2) Yes (specify number of tether straps):
- (3) Deployed, unknown if tethered
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

**Did The Air Bag Have Vent Ports?**

- (0) Not equipped/not available
- (1) No
- (2) Yes (specify number of vent ports):
- (3) Deployed, unknown if vent ports present
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

**Was the Air Bag in this Occupant's Position Contacted by Another Occupant?**

- (0) Not equipped/not available
- (1) No
- (2) Yes (specify):
- (3) Deployed, unknown if other occupant contact to air bag
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

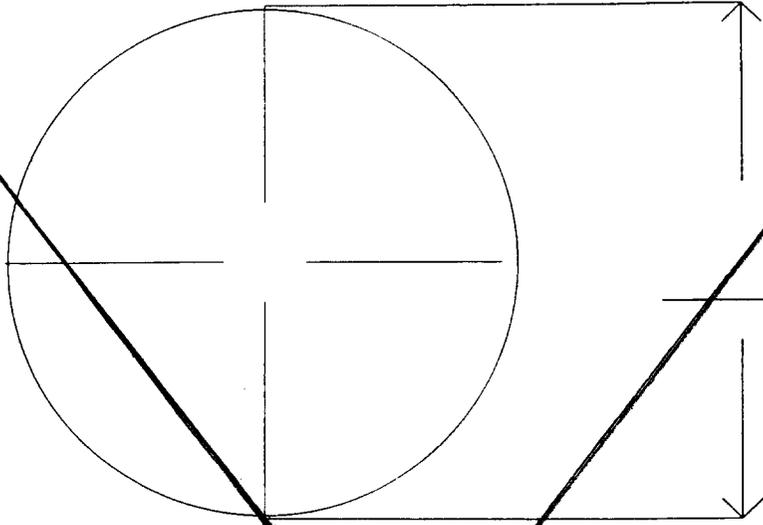
**Was This Occupant Wearing Eye-wear?**

- (0) Not equipped/not available
- (1) No
- (2) Eyeglasses/sunglasses
- (3) Contact lenses
- (4) Deployed, unknown if eyewear worn
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

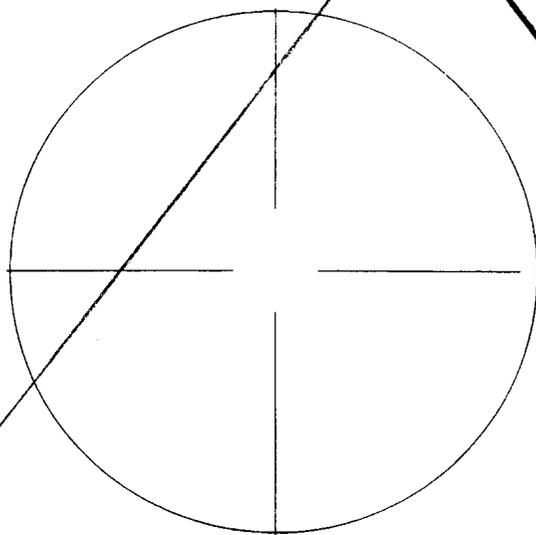
**DRIVER AIR BAG DAMAGE AND CONTACT SKETCHES**

1. SKETCH DAMAGE AND CONTACT EVIDENCE ON DRIVER AIR BAG (Front)

No BAG  
NA



2. SKETCH DAMAGE AND CONTACT EVIDENCE ON DRIVER AIR BAG (Back)



### DRIVER AIR BAG SKETCHES (Cont'd)

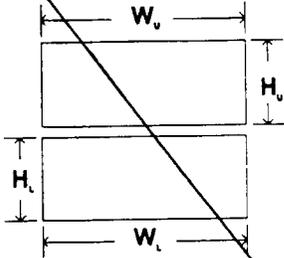
#### 3. DRIVER AIR BAG MODULE COVER FLAP SIZE (DOUBLE)

a. Upper Flap

b. Lower Flap

width ( $W_U$ ) \_\_\_\_\_ width ( $W_L$ ) \_\_\_\_\_

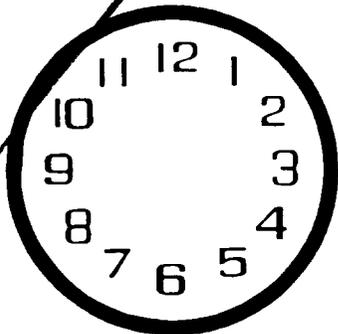
height ( $H_U$ ) \_\_\_\_\_ height ( $H_L$ ) \_\_\_\_\_



#### 4. SKETCH OF OTHER TYPE OF AIR BAG MODULE FLAP AND SIZE

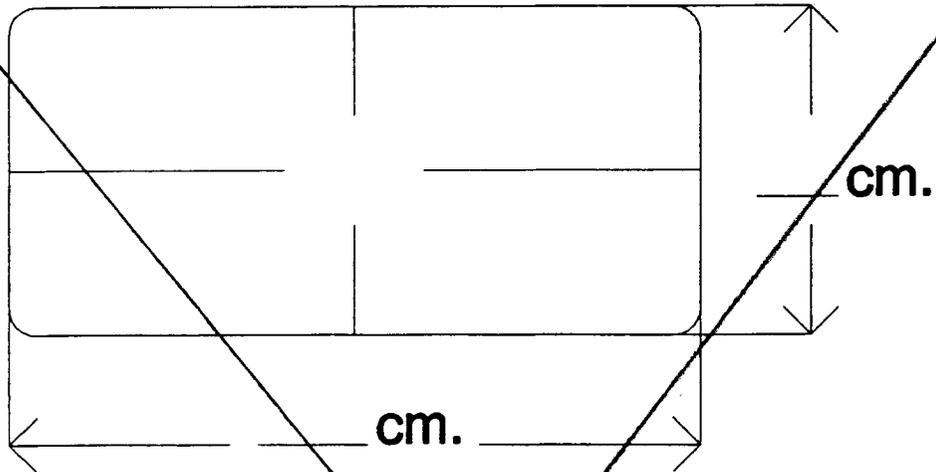
#### 5. SKETCH OF OTHER TYPE OF AIR BAG VENT PORTS

#### 6. SKETCH LOCATION OF CIRCULAR AIR BAG VENT PORTS

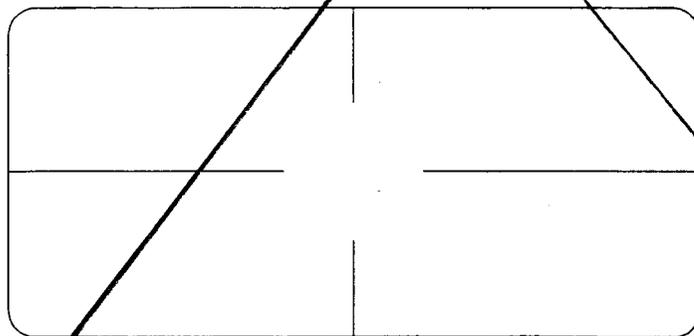


**PASSENGER AIR BAG DAMAGE AND CONTACT SKETCHES**

1. SKETCH DAMAGE AND CONTACT EVIDENCE ON PASSENGER AIR BAG (Front)



2. SKETCH DAMAGE AND CONTACT EVIDENCE ON PASSENGER AIR BAG (Back)



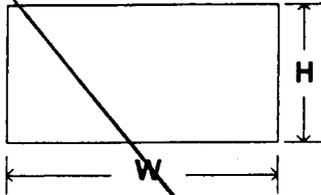
**PASSENGER AIR BAG SKETCHES (Cont'd)**

**3. PASSENGER AIR BAG MODULE COVER FLAP SIZE (SINGLE)**

a. Flap

width (W) \_\_\_\_\_

height (H) \_\_\_\_\_



**4. PASSENGER AIR BAG MODULE COVER FLAP SIZE (DOUBLE)**

a. Upper Flap

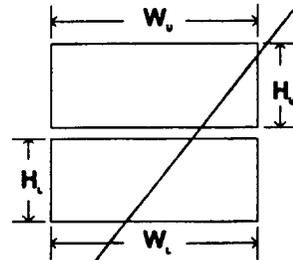
b. Lower Flap

width ( $W_u$ ) \_\_\_\_\_

width ( $W_l$ ) \_\_\_\_\_

height ( $H_u$ ) \_\_\_\_\_

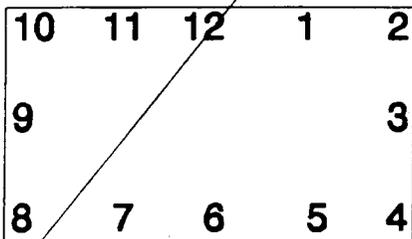
height ( $H_l$ ) \_\_\_\_\_



**5. SKETCH OF OTHER TYPE OF AIR BAG MODULE FLAP AND SIZE**

**6. SKETCH OF OTHER TYPE OF AIR BAG VENT PORTS**

**7. SKETCH LOCATION OF RECTANGULAR AIR BAG VENT PORTS**



**"OTHER" AIR BAG DAMAGE AND CONTACT SKETCHES**

1. SKETCH DAMAGE AND CONTACT EVIDENCE ON "OTHER" AIR BAG (Front)

2. SKETCH DAMAGE AND CONTACT EVIDENCE ON "OTHER" AIR BAG (Back)

**"OTHER" AIR BAG SKETCHES (Cont'd)**

**3. SKETCH AIR BAG MODULE FLAP AND SIZE OR OPENING FOR AIRBAG**

**4. SKETCH AIR BAG VENT PORTS**

## 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
<b>F I R S T</b>	Head Restraint Type/Damage	3	0	3
	Seat Type	02	00	02
	Seat Performance	1	0	1
	Seat Orientation	1	0	1
	Seat Track Position	3	0	3
	Seat Back Incline Pre/Post Impact	23	00	23
<b>S E C O N D</b>	Head Restraint Type/Damage	3 ? *	0	3 ? *
	Seat Type	07	07	07
	Seat Performance	9 *	1	1
	Seat Orientation	1	1	1
	Seat Track Position	1	1	1
	Seat Back Incline Pre/Post Impact	01	01	01
<b>T H I R D</b>	Head Restraint Type/Damage	X		
	Seat Type			
	Seat Performance			
	Seat Orientation			
	Seat Track Position			
	Seat Back Incline Pre/Post Impact			
<b>O T H E R</b>	Head Restraint Type/Damage	X		
	Seat Type			
	Seat Performance			
	Seat Orientation			
	Seat Track Position			
	Seat Back Incline Pre/Post Impact			

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

\* (L) Rear seat bent backwards slightly ?

\* rear seat headrests removed  
adjustables

## HEAD RESTRAINTS/SEAT EVALUATION

**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): \_\_\_\_\_
- (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

**Seat Track Adjusted Position Prior To Impact**

- (0) Occupant not seated or no seat
- (1) Non-adjustable seat track
- Adjustable Seat Track*
- (2) Seat at forward most track position
- (3) Seat between forward most and middle track positions
- (4) Seat at middle track position
- (5) Seat between middle and rear most track positions
- (6) Seat at rear most track position
- (9) Unknown

**Seat Back Incline Prior and Post Impact**

- (00) Occupant not seated or no seat
- (01) Not adjustable

*Upright prior to impact*

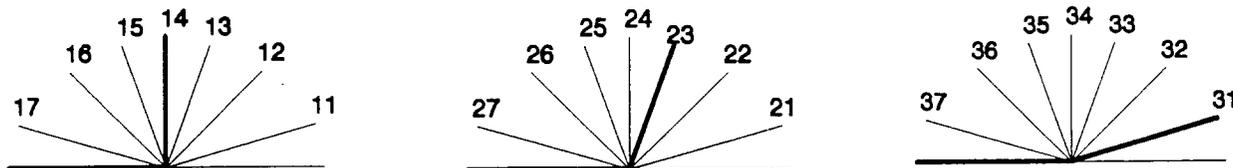
- (11) Moved to completely rearward position
- (12) Moved to rearward midrange position
- (13) Moved to slightly rearward position
- (14) Retained pre-impact position
- (15) Moved to slightly forward position
- (16) Moved to forward midrange position
- (17) Moved to completely forward position

*Slightly reclined prior to impact*

- (21) Moved to completely rearward position
- (22) Moved to rearward midrange position
- (23) Retained pre-impact position
- (24) Moved to upright position
- (25) Moved to slightly forward position
- (26) Moved to forward midrange position
- (27) Moved to completely forward position

*Completely reclined prior to impact*

- (31) Retained pre-impact position
- (32) Moved to rearward midrange position
- (33) Moved to slightly rearward position
- (34) Moved to upright position
- (35) Moved to slightly forward position
- (36) Moved to forward midrange position
- (37) Moved to completely forward position
- (99) Unknown



Coding diagrams for *Seat Back Incline Position Prior and Post Impact*

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

## 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
---------------------------------	--

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)
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_

**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
- (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 ASSESSMENT FORM

## OCCUPANT'S SEATING

1. Primary Sampling Unit Number 02
2. Case Number - Stratum 010F
3. Vehicle Number 02
4. Occupant Number 01

## OCCUPANT'S CHARACTERISTICS

5. Occupant's Age 21  
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 1  
(1) Male  
(2) Female-not reported pregnant  
(3) Female-pregnant-1st trimester(1st-3rd month)  
(4) Female-pregnant-2nd trimester(4th-6th month)  
(5) Female-pregnant-3rd trimester(7th-9th month)  
(6) Female-pregnant-term unknown  
(9) Unknown

7. Occupant's Height 168  
Code actual height to the nearest  
centimeter.  
(999) Unknown  
  
66 inches X 2.54 = 167.6 centimeters

8. Occupant's Weight 091  
Code actual weight to the nearest  
kilogram.  
(999)Unknown  
  
200 pounds X .4536 = 90.7 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 0  
(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  
 (0) Not entrapped/exit not inhibited  
 (1) Entrapped/pinned - mechanically restrained  
 (2) Could not exit vehicle due to jammed doors,  
 fire, etc.  
 (specify): \_\_\_\_\_  
 (9) Unknown

17. Occupant Mobility 4  
 (0) Occupant fatal before removed from  
 vehicle  
 (1) Removed from vehicle while unconscious or  
 disoriented  
 (2) Removed from vehicle due to injuries  
 (3) Exited vehicle with some assistance  
 (4) Exited vehicle under own power  
 (5) Occupant fully ejected  
 (9) Unknown

## BELT SYSTEM FUNCTION

18. 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

19. 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

20. 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

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

- (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

22. Shoulder Belt Upper Anchorage Adjustment 1

- (0) No shoulder belt
- (1) No upper anchorage adjustment for shoulder belt

*Adjustable shoulder Belt Upper Anchorage*

- (2) In full up position
- (3) In mid position
- (4) In full down position
- (5) Position unknown
- (9) Unknown if position has adjustable upper anchorage adjustment

23. 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

24. 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

25. Automatic (Passive) Belt System Type 0

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

26. 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

27. 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

**POLICE REPORTED RESTRAINT USE**

**AIR BAG SYSTEM FUNCTION**

28. Police Reported Belt Use 4
- (0) None used
  - (1) Police did not indicate belt use
  - (2) Shoulder belt
  - (3) Lap belt
  - (4) Lap and shoulder belt
  - (5) Belt used, type not specified
  - (6) Child safety seat
  - (7) Automatic belt
  - (8) Other type belt, (specify):
  - (9) Police indicated "unknown"

29. Police Reported Air Bag Availability/Function 0
- (0) No air bag available
  - (1) Police did not indicate air bag availability/function
  - (2) Deployed
  - (3) Not deployed
  - (4) Unknown if deployed
  - (9) Police indicated "unknown"

Check the Primary Source Used In Determining Belt Use.

- Not equipped/not available/destroyed or rendered inoperative
- Vehicle inspection
- Official injury data
- Driver/occupant interview
- Other (specify):
- Unknown if belt used

---



---



---



---

30. Frontal Air Bag System Availability/Function (This Occupant Position) 0
- (0) Not equipped/not available
  - (1) Air bag
- Non-functional*
- (2) Air bag disconnected (specify):
  - (3) Air bag not reinstalled
  - (9) Unknown

31. Frontal Air Bag System Deployment (This Occupant Position) 0
- (0) Not equipped/not available
  - (1) Deployed during accident (as a result of impact)
  - (2) Deployed inadvertently just prior to accident
  - (3) Deployed, details unknown
  - (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)
  - (5) Unknown if deployed
  - (7) Nondeployed
  - (9) Unknown

32. Other Than First Seat Frontal Air Bag Availability/Function (This Occupant Position) 0
- (0) Not equipped/not available
  - (1) Air bag
- Non-functional*
- (2) Air bag disconnected (specify):
  - (3) Air bag not reinstalled
  - (9) Unknown
- Specify type of "other" air bag present:*

33. Air Bag(s) Deployment, Other Than First Seat Frontal (This Occupant Position) 0
- (0) Not equipped with an "other" air bag
  - (1) Deployed during accident (as a result of impact)
  - (2) Deployed inadvertently just prior to accident
  - (3) Deployed, details unknown
  - (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)
  - (5) Unknown if deployed
  - (7) Nondeployed
  - (9) Unknown

34. Are There Indications of Air Bag System Failure? (This Occupant Position) 0
- (0) Not equipped/not available
  - (1) No
  - (2) Yes (specify):
  - (9) Unknown

## FIRST SEAT FRONTAL AIR BAG SYSTEM EVALUATION

35. Had Vehicle Been in Previous Accident(s)? 0

- (0) Not equipped/not available  
 (1) No previous accidents

Yes

- (2) Previous accident(s) without deployment(s)  
 (3) One previous accident with deployment  
 (4) More than one previous accident with at least one deployment  
 (8) Previous accidents, unknown deployment status  
 (9) Unknown

36. Type of Air Bag 0

- (0) Not equipped/not available  
 (1) Original manufacturer installed system  
 (2) Retrofitted air bag  
 (3) Replacement air bag  
 (8) Unknown type of air bag  
 (9) Unknown

37. Had Any Prior Maintenance/Service Been Performed On This Air Bag System? 0

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

38. Air Bag Deployment Accident Event Sequence Number 00

- (00) Not equipped/not available  
 \_\_\_\_\_ Code the accident event sequence number that initiated the air bag deployment  
 (96) Deployed, unknown event  
 (97) Not deployed  
 (98) Unknown if deployed  
 (99) Unknown

39. CDC For Air Bag Deployment Impact 0

- (0) Not equipped/not available  
 (1) Highest delta V  
 (2) Second highest delta V  
 (3) Other non-coded delta V (specify): \_\_\_\_\_  
 (6) Deployed, unknown event  
 (7) Not deployed  
 (8) Unknown if deployed  
 (9) Unknown

40. Longitudinal Component of Delta V For Air Bag + 0 0 0

Deployment Impact

(\_000) Not equipped/not available

Code the value of the delta V for the impact that initiated the air bag deployment

(\_996) Deployment, unknown longitudinal Delta V

(\_997) Not deployed

(\_998) Unknown if deployed

(\_999) Unknown

41. Did Air Bag Module Cover Flap(s) Open At Designated Tear Points? 0

- (0) Not equipped/not available  
 (1) No  
 (2) Yes  
 (3) Deployed, unknown if flap(s) opened at designated tear points  
 (7) Not deployed  
 (8) Unknown if deployed  
 (9) Unknown

42. Were Air Bag Module Cover Flap(s) Damaged? 0

- (0) Not equipped/not available  
 (1) No  
 (2) Yes (specify): \_\_\_\_\_  
 (3) Deployed, unknown if air bag module cover flap(s) damaged  
 (7) Not deployed  
 (8) Unknown if deployed  
 (9) Unknown

43. Was There Damage To The Air Bag? 00

- (00) Not equipped/not available  
 (01) Not damaged

Yes - Air Bag Damage

- (02) Ruptured  
 (03) Cut  
 (04) Torn  
 (05) Holed  
 (06) Burned  
 (07) Abraded  
 (88) Other damage (specify): \_\_\_\_\_

- (95) Damaged, details unknown  
 (96) Deployed, unknown if damaged  
 (97) Not deployed  
 (98) Unknown if deployed  
 (99) Unknown

**FIRST SEAT FRONTAL AIR BAG SYSTEM  
EVALUATION** *continued***HEAD RESTRAINT AND SEAT EVALUATION**

44. Source of Air Bag Damage 00 00  
 (00) Not equipped/not available  
 (01) Not damaged  
 (02) Object worn by occupant, (specify):  
 \_\_\_\_\_  
 (03) Object carried by occupant, (specify):  
 \_\_\_\_\_  
 (04) Adaptive/assistive controls, (specify):  
 \_\_\_\_\_  
 (05) Fire in vehicle  
 (06) Thermal burns  
 (07) Rescue or emergency efforts  
 (88) Other damage source (specify):  
 \_\_\_\_\_  
 (95) Damaged, unknown source  
 (96) Deployed, unknown if damaged  
 (97) Not deployed  
 (98) Unknown if deployed  
 (99) Unknown
45. Was The Air Bag Tethered? 0  
 (0) Not equipped/not available  
 (1) No  
 (2) Yes (specify number of tether straps):  
 \_\_\_\_\_  
 (3) Deployed, unknown if tethered  
 (7) Not deployed  
 (8) Unknown if deployed  
 (9) Unknown
46. Did The Air Bag Have Vent Ports? 0  
 (0) Not equipped/not available  
 (1) No  
 (2) Yes (specify number of vent ports):  
 \_\_\_\_\_  
 (3) Deployed, unknown if vent ports present  
 (7) Not deployed  
 (8) Unknown if deployed  
 (9) Unknown
47. Was the Air Bag in this Occupant's Position Contacted by Another Occupant? 0  
 (0) Not equipped/not available  
 (1) No  
 (2) Yes (specify):  
 \_\_\_\_\_  
 (3) Deployed, unknown if other occupant contact to air bag  
 (7) Not deployed  
 (8) Unknown if deployed  
 (9) Unknown
48. Was This Occupant Wearing Eye-wear? 0  
 (0) Not equipped/not available  
 (1) No  
 (2) Eyeglasses/sunglasses  
 (3) Contact lenses  
 (4) Deployed, unknown if eyewear worn  
 (7) Not deployed  
 (8) Unknown if deployed  
 (9) Unknown

49. Head Restraint Type/Damage by Occupant at This Occupant Position 3  
 (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
50. Seat Type (this Occupant Position) 02  
 (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) Box mounted seat (i.e., van type)  
 (10) Other seat type (specify):  
 \_\_\_\_\_  
 (99) Unknown
51. 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
52. Seat Track Adjusted Position Prior To Impact 3  
 (0) Occupant not seated or no seat  
 (1) Non-adjustable seat track
- Adjustable Seat Track*  
 (2) Seat at forward most track position  
 (3) Seat between forward most and middle track positions  
 (4) Seat at middle track position  
 (5) Seat between middle and rear most track positions  
 (6) Seat at rear most track position  
 (9) Unknown

**HEAD RESTRAINT AND SEAT EVALUATION** *continued*53. Seat Back Incline Prior and Post Impact 23

- (00) Occupant not seated or no seat  
 (01) Not adjustable

*Upright prior to impact*

- (11) Moved to completely rearward position  
 (12) Moved to rearward midrange position  
 (13) Moved to slightly rearward position  
 (14) Retained pre-impact position  
 (15) Moved to slightly forward position  
 (16) Moved to forward midrange position  
 (17) Moved to completely forward position

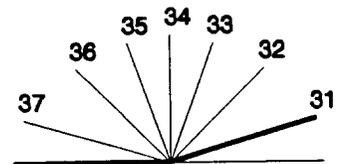
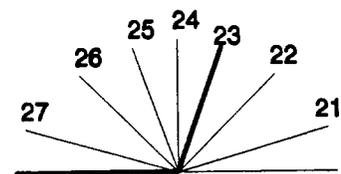
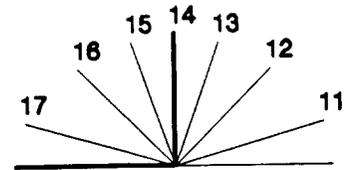
*Slightly reclined prior to impact*

- (21) Moved to completely rearward position  
 (22) Moved to rearward midrange position  
 (23) Retained pre-impact position  
 (24) Moved to upright position  
 (25) Moved to slightly forward position  
 (26) Moved to forward midrange position  
 (27) Moved to completely forward position

*Completely reclined prior to impact*

- (31) Retained pre-impact position  
 (32) Moved to rearward midrange position  
 (33) Moved to slightly rearward position  
 (34) Moved to upright position  
 (35) Moved to slightly forward position  
 (36) Moved to forward midrange position  
 (37) Moved to completely forward position

(99) Unknown

54. 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  
 (specify): \_\_\_\_\_  
 (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**

55. Child Safety Seat Make/Model 0 0 0  
 (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

56. Type of Child Safety Seat 0  
 (0) No child safety seat  
 (1) Infant seat  
 (2) Toddler seat  
 (3) Convertible seat  
 (4) Booster seat - with shield  
 (5) Booster seat - without shield  
 (7) Other type child safety seat (specify):  
 \_\_\_\_\_  
 (8) Unknown child safety seat type  
 (9) Unknown if child safety seat used

57. 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

58. Child Safety Seat Harness Usage 00  
  
 59. Child Safety Seat Shield Usage 00  
  
 60. Child Safety Seat Tether Usage 00

Note: Options below applicable to Variables OA58-OA60.  
 (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's safety seat used

**INJURY CONSEQUENCES**

61. Injury Severity (Police Rating) 2

- (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

62. Treatment - Mortality 4

- (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
- (7) Treatment - other (specify):  
\_\_\_\_\_
- (8) Transported to a medical facility-unknown if treated
- (9) Unknown

63. Type Of Medical Facility (for Initial Treatment) 2

- (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

64. 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

65. Working Days Lost 99

- 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

had to change jobs

**STOP WORK HERE**

**VARIABLES 66-74**

**TO BE CODED BY THE ZONE CENTER**

**TO BE CODED BY THE ZONE CENTER****INJURY CONSEQUENCES****TRAUMA DATA**

66. Time to Death 00  
 \_\_\_\_\_ 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

67. 1st Medically Reported Cause of Death 00

68. 2nd Medically Reported Cause of Death 00

69. 3rd Medically Reported Cause of Death 00

\_\_\_\_\_ 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  
 (96) Mode of death given but specific injuries are not linked to cause of death. (specify):

(97) \_\_\_\_\_ Other result (includes fatal ruled disease) (specify):

(99) \_\_\_\_\_ Unknown

70. Number of Recorded Injuries for This Occupant 02

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

71. Glasgow Coma Scale (GCS) Score 02  
 (at Medical Facility)  
 (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

72. Was the Occupant Given Blood? 1  
 (1) No - blood not given  
 (2) Yes - blood given  
 (specify units): \_\_\_\_\_  
 (9) Unknown if blood given

73. 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

**BELT USE DETERMINATION**

74. Primary Source of Belt Use Determination 1  
 (0) Not equipped/not available/destroyed or rendered inoperative  
 (1) Vehicle inspection  
 (2) Official injury data  
 (3) Driver/occupant interview  
 (8) Other (specify): \_\_\_\_\_  
 (9) Unknown if belt used



# OCCUPANT INJURY FORM

1. Primary Sampling Unit Number <u>02</u>	3. Vehicle Number <u>02</u>
2. Case Number - Stratum <u>010F</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.

*Wrist abrasion*  
*Wrist contusion*

Source of Injury Data	A.I.S. - 90						Injury Source	Injury 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					
1st	5. <u>3</u>	6. <u>7</u>	7. <u>9</u>	8. <u>02</u>	9. <u>02</u>	10. <u>1</u>	11. <u>1</u>	12. <u>004</u>	13. <u>3</u>	14. <u>1</u>	15. <u>10</u>
2nd	18. <u>3</u>	17. <u>7</u>	18. <u>9</u>	19. <u>04</u>	20. <u>02</u>	21. <u>1</u>	22. <u>1</u>	23. <u>004</u>	24. <u>3</u>	25. <u>1</u>	26. <u>00</u>
3rd	27. ___	28. ___	29. ___	30. ___	31. ___	32. ___	33. ___	34. ___	35. ___	36. ___	37. ___
4th	38. ___	39. ___	40. ___	41. ___	42. ___	43. ___	44. ___	45. ___	46. ___	47. ___	48. ___
5th	49. ___	50. ___	51. ___	52. ___	53. ___	54. ___	55. ___	56. ___	57. ___	58. ___	59. ___
6th	60. ___	61. ___	62. ___	63. ___	64. ___	65. ___	66. ___	67. ___	68. ___	69. ___	70. ___
7th	71. ___	72. ___	73. ___	74. ___	75. ___	76. ___	77. ___	78. ___	79. ___	80. ___	81. ___
8th	82. ___	83. ___	84. ___	85. ___	86. ___	87. ___	88. ___	89. ___	90. ___	91. ___	92. ___
9th	93. ___	94. ___	95. ___	96. ___	97. ___	98. ___	99. ___	100. ___	101. ___	102. ___	103. ___
10th	104. ___	105. ___	106. ___	107. ___	108. ___	109. ___	110. ___	111. ___	112. ___	113. ___	114. ___





## INJURY SOURCES

### FRONT

- (001) Windshield
- (002) Mirror
- (003) Sunvisor
- (004) Steering wheel rim
- (005) Steering wheel hub/spoke
- (006) Steering wheel (combination of codes 004 and 005)
- (007) Steering column, transmission selector lever, other attachment
- (008) Cellular telephone or CB radio
- (009) Add on equipment (e.g., tape deck, air conditioner)
- (010) Left instrument panel and below
- (011) Center instrument panel and below
- (012) Right instrument panel and below
- (013) Glove compartment door
- (014) Knee bolster
- (015) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, mirror, or steering assembly (driver side only)
- (016) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, or mirror (passenger side only)
- (017) Windshield reinforced by exterior object (specify): \_\_\_\_\_
- (019) Other front object (specify): \_\_\_\_\_

### LEFT SIDE

- (051) Left side interior surface, excluding hardware or armrests
- (052) Left side hardware or armrest
- (053) Left A (A1/A2)-pillar
- (054) Left B-pillar
- (055) Other left pillar (specify): \_\_\_\_\_
- (056) Left side window glass
- (057) Left side window frame
- (058) Left side window sill
- (059) Left side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.
- (060) Other left side object (specify): \_\_\_\_\_

### RIGHT SIDE

- (101) Right side interior surface, excluding hardware or armrests

- (102) Right side hardware or armrest
- (103) Right A (A1/A2)-pillar
- (104) Right B-pillar
- (105) Other right pillar (specify): \_\_\_\_\_
- (106) Right side window glass
- (107) Right side window frame
- (108) Right side window sill
- (109) Right side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.
- (110) Other right side object (specify): \_\_\_\_\_

### INTERIOR

- (151) Seat, back support
- (152) Belt restraint webbing/buckle
- (153) Belt restraint B-pillar or door frame attachment point
- (154) Other restraint system component (specify): \_\_\_\_\_
- (155) Head restraint system
- (160) Other occupants (specify): \_\_\_\_\_
- (161) Interior loose objects
- (162) Child safety seat (specify): \_\_\_\_\_
- (163) Other interior object (specify): \_\_\_\_\_

### AIR BAG

- (170) Air bag-driver side
- (171) Air bag-driver side and eyewear
- (172) Air bag-driver side and jewelry
- (173) Air bag-driver side and object held
- (174) Air bag-driver side and object in mouth
- (175) Air bag compartment cover-driver side
- (176) Air bag compartment cover-driver side and eyewear
- (177) Air bag compartment cover-driver side and jewelry
- (178) Air bag compartment cover-driver side and object held
- (179) Air bag compartment cover-driver side and object in mouth
- (180) Air bag-passenger side
- (181) Air bag-passenger side and eyewear
- (182) Air bag-passenger side and jewelry

- (183) Air bag-passenger side and object held
- (184) Air bag-passenger side and object in mouth
- (185) Air bag compartment cover-passenger side
- (186) Air bag compartment cover-passenger side and eyewear
- (187) Air bag compartment cover-passenger side and jewelry
- (188) Air bag compartment cover-passenger side and object held
- (189) Air bag compartment cover-passenger side and object in mouth
- (190) Other air bag (specify): \_\_\_\_\_
- (195) Other air bag compartment cover (specify): \_\_\_\_\_

### ROOF

- (201) Front header
- (202) Rear header
- (203) Roof left side rail
- (204) Roof right side rail
- (205) Roof or convertible top

### FLOOR

- (251) Floor (including toe pan)
- (252) Floor or console mounted transmission lever, including console
- (253) Parking brake handle
- (254) Foot controls including parking brake

### REAR

- (301) Backlight (rear window)
- (302) Backlight storage rack, door, etc.
- (303) Other rear object (specify): \_\_\_\_\_

### ADAPTIVE (ASSISTIVE) DRIVING EQUIPMENT

- (401) Hand controls for braking/acceleration
- (402) Steering control devices (attached to OEM steering wheel)
- (403) Steering knob attached to steering wheel
- (405) Replacement steering wheel (i.e., reduced diameter)
- (406) Joy stick steering controls
- (407) Wheelchair tie-downs
- (408) Modification to seat belts, (specify): \_\_\_\_\_
- (409) Additional or relocated switches, (specify): \_\_\_\_\_
- (410) Raised roof

- (411) Wall mounted head rest (used behind wheel chair)
- (412) Other adaptive device (specify): \_\_\_\_\_

### EXTERIOR of OCCUPANT'S VEHICLE

- (451) Hood
- (452) Outside hardware (e.g., outside mirror, antenna)
- (453) Other exterior surface or tires (specify): \_\_\_\_\_
- (454) Unknown exterior objects

### EXTERIOR OF OTHER MOTOR VEHICLE

- (501) Front bumper
- (502) Hood edge
- (503) Other front of vehicle (specify): \_\_\_\_\_
- (504) Hood
- (505) Hood ornament
- (506) Windshield, roof rail, A-pillar
- (507) Side surface
- (508) Side mirrors
- (509) Other side protrusions (specify): \_\_\_\_\_
- (510) Rear surface
- (511) Undercarriage
- (512) Tires and wheels
- (513) Other exterior of other motor vehicle (specify): \_\_\_\_\_
- (514) Unknown exterior of other motor vehicle

### OTHER VEHICLE OR OBJECT IN THE ENVIRONMENT

- (551) Ground
- (598) Other vehicle or object (specify): \_\_\_\_\_
- (599) Unknown vehicle or object

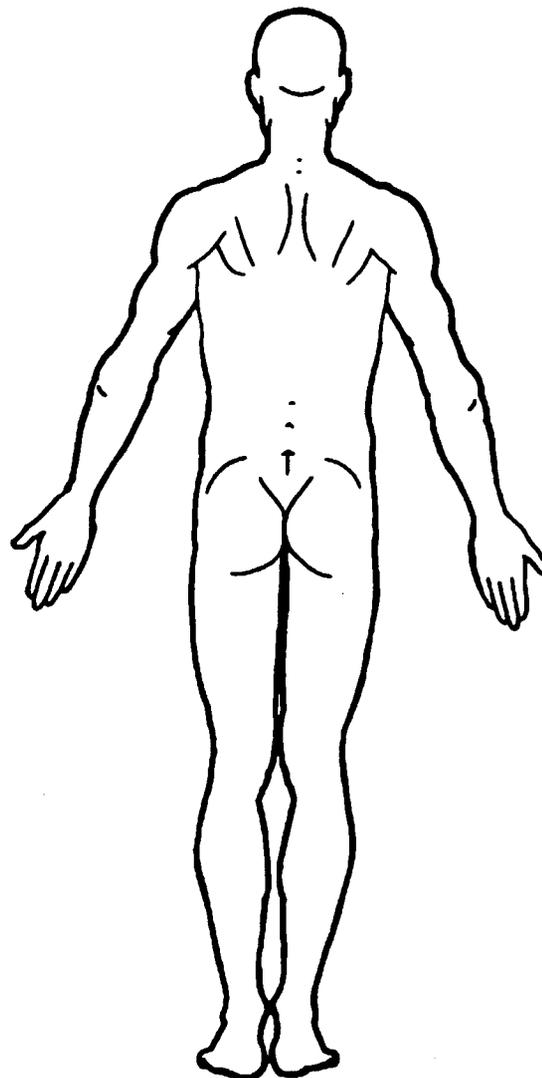
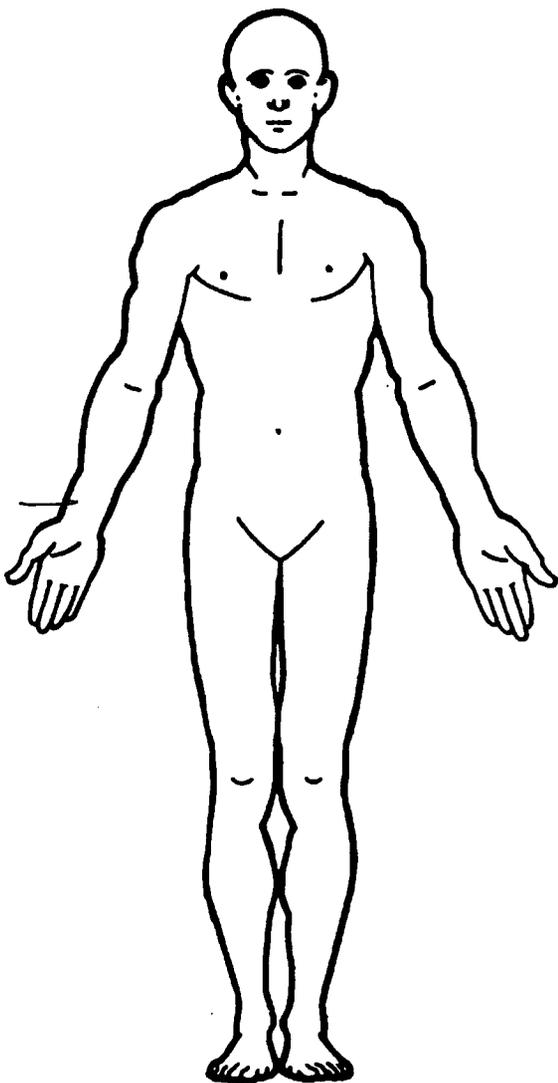
### NONCONTACT INJURY

- (601) Fire in vehicle
- (602) Flying glass
- (603) Other noncontact injury source (specify): \_\_\_\_\_
- (604) Air bag exhaust gases
- (697) Injured, unknown source

# 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.)

ER:  
RT WRIST  
ABRASION  
& CONTUSION



ER:

# OFFICIAL INJURY DATA — SKELETAL INJURIES

Restrained?

No  
 Yes

Blood Alcohol Level (mg/dl)

BAL = \_\_\_\_\_

Glasgow Coma Scale Score

GCSS = \_\_\_\_\_

Units of Blood Given

Units = \_\_\_\_\_

Arterial Blood Gases

pH = \_\_\_\_\_

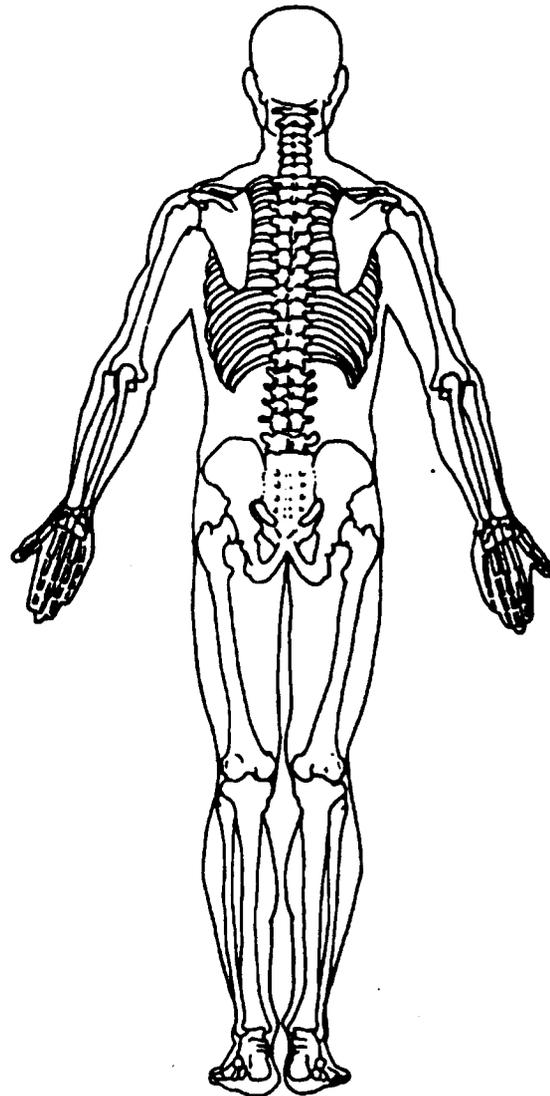
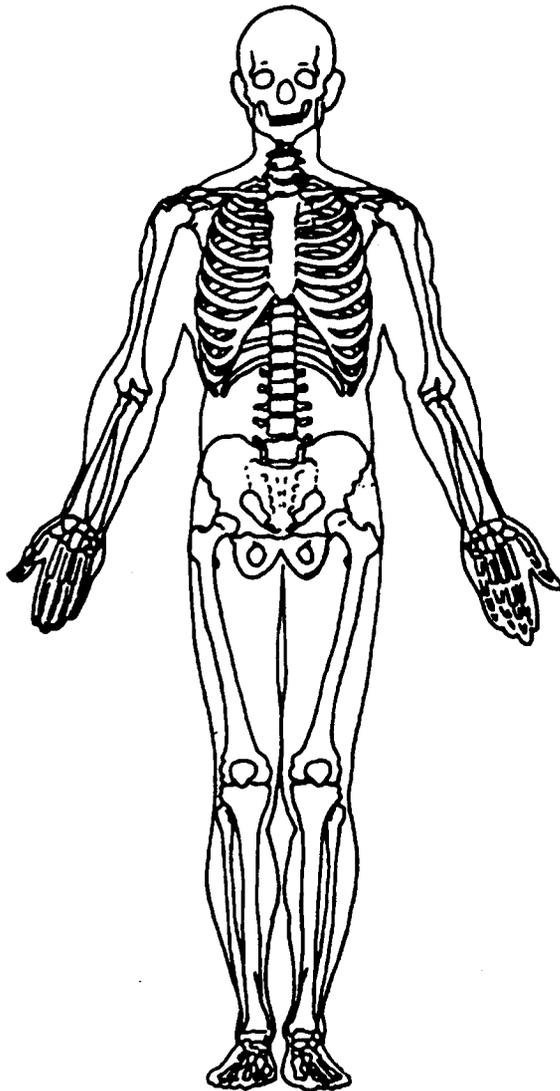
PO<sub>2</sub> = \_\_\_\_\_

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

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

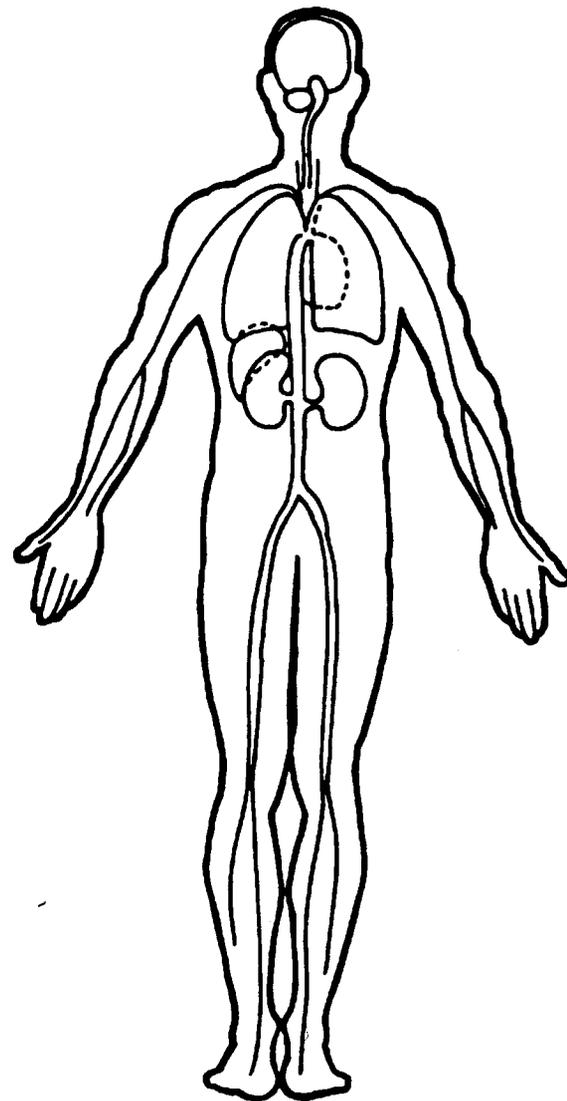
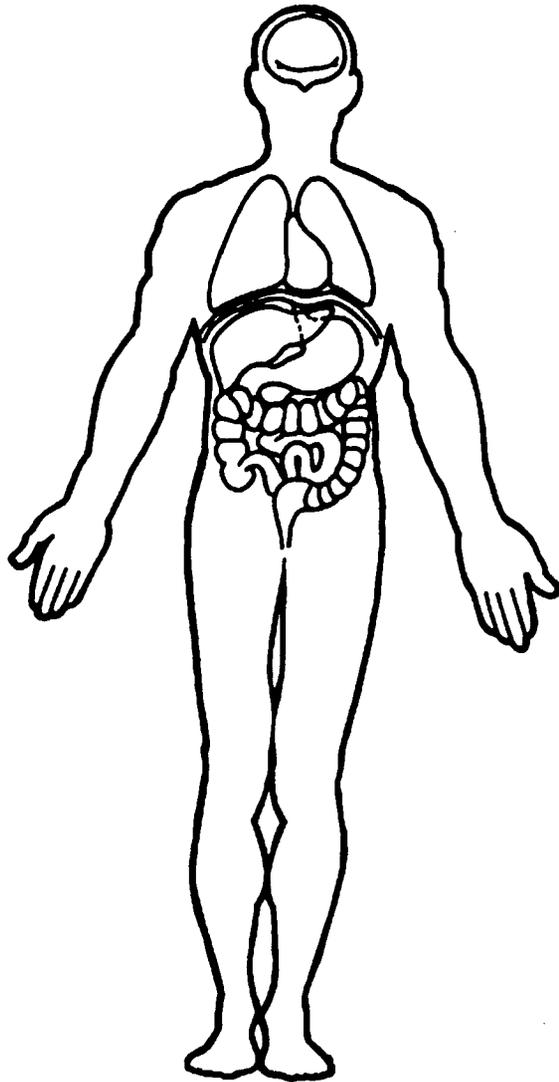
NOT RECORDED

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.)



# 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.)





# CRASHPC PROGRAM SUMMARY

(All Measurements In Metric)

NATIONAL ACCIDENT SAMPLING SYSTEM  
CRASHWORTHINESS DATA SYSTEM

Identifying Title

02 Primary Sampling Unit

010F Case No.-Stratum

01 Accident Event Sequence No.

                      95 Date (Month, day, year) of Run

CRASHPC Vehicle Identification

Vehicle 1 1990 TOYOTA 4-RUNNER 1

Vehicle 2                       BARRIER (11)

Year Make Model NASS Veh. No.

## GENERAL INFORMATION

VEHICLE 1		VEHICLE 2	
Size	<u>3</u>	Size	_____
Weight	<u>1164</u> + <u>91</u> + <u>11</u> = <u>1266</u> kg	Weight	_____ + _____ + _____ = _____ kg
CDC	<u>12FREES</u>	CDC	_____
PDOF (-180 to +180)	<u>+ 000</u> °	PDOF (-180 to +180)	<u>          </u> °
Stiffness	<u>8</u>	Stiffness	_____

## SCENE INFORMATION

Rest and Impact Positions  No, Go To Damage Information  Yes

VEHICLE 1		VEHICLE 2	
Rest Position	X _____ m	Rest Position	X _____ m
	Y _____ m		Y _____ m
	PSI _____ °		PSI _____ °
Impact Position	X _____ m	Impact Position	X _____ m
	Y _____ m		Y _____ m
	PSI _____ °		PSI _____ °
Slip Angle(-180 to +180)	_____ °	Slip Angle (-180 to +180)	_____ °

## VEHICLE MOTION

Sustained Contact  No  Yes

VEHICLE 1		VEHICLE 2	
Vehicle Rotation	<input type="checkbox"/> No <input type="checkbox"/> Yes	Vehicle Rotation	<input type="checkbox"/> No <input type="checkbox"/> Yes
Rotation Stop Before Rest	<input type="checkbox"/> No <input type="checkbox"/> Yes	Rotation Stop Before Rest	<input type="checkbox"/> No <input type="checkbox"/> Yes
End of Rotation Position	X _____ m	End of Rotation Position	X _____ m
	Y _____ m		Y _____ m
	PSI _____ °		PSI _____ °
Curved Path	<input type="checkbox"/> No <input type="checkbox"/> Yes	Curved Path	<input type="checkbox"/> No <input type="checkbox"/> Yes
Point on Path	X _____ m Y _____ m	Point on Path	X _____ m Y _____ m
Rotation Direction	<input type="checkbox"/> None <input type="checkbox"/> CW <input type="checkbox"/> CCW	Rotation Direction	<input type="checkbox"/> None <input type="checkbox"/> CW <input type="checkbox"/> CCW
Rotation >360°	<input type="checkbox"/> No <input type="checkbox"/> Yes	Rotation >360°	<input type="checkbox"/> No <input type="checkbox"/> Yes

**FRICITION INFORMATION** **TRAJECTORY INFORMATION**

Coefficient of Friction \_\_\_\_\_  
 Rolling Resistance Option \_\_\_\_\_

Vehicle 1 Rolling Resistance  
 LF \_\_\_\_\_ RF \_\_\_\_\_  
 LR \_\_\_\_\_ RR \_\_\_\_\_

Vehicle 2 Rolling Resistance  
 LF \_\_\_\_\_ RF \_\_\_\_\_  
 LR \_\_\_\_\_ RR \_\_\_\_\_

Trajectory Data [ ] No [ ] Yes  
 If No, Go To Damage Information

Vehicle 1 Steer Angles  
 LF \_\_\_\_\_ ° RF \_\_\_\_\_ °  
 LR \_\_\_\_\_ ° RR \_\_\_\_\_ °

Vehicle 2 Steer Angles  
 LF \_\_\_\_\_ ° RF \_\_\_\_\_ °  
 LR \_\_\_\_\_ ° RR \_\_\_\_\_ °

Terrain Boundary [ ] No [ ] Yes

\_\_\_\_\_

First Point  
 X \_\_\_\_\_ m Y \_\_\_\_\_ m

Second Point  
 X \_\_\_\_\_ m Y \_\_\_\_\_ m

Secondary Coefficient of Friction \_\_\_\_\_

**DAMAGE INFORMATION**

	VEHICLE 1		VEHICLE 2
Damage Length	L <u>155</u> cm		L _____ cm
Crush Depths	C <sub>1</sub> <u>1.5</u> cm		C <sub>1</sub> _____ cm
	C <sub>2</sub> <u>2.5</u> cm		C <sub>2</sub> _____ cm
	C <sub>3</sub> <u>2.4</u> cm		C <sub>3</sub> _____ cm
	C <sub>4</sub> <u>2.8</u> cm		C <sub>4</sub> _____ cm
	C <sub>5</sub> <u>3.5</u> cm		C <sub>5</sub> _____ cm
	C <sub>6</sub> <u>28.2</u> cm		C <sub>6</sub> _____ cm
Damage Offset	D <sup>⊕</sup> <u>59</u> cm		D <sup>±</sup> _____ cm

IF THIS COMMON IMPACT WAS WITH A MOTOR VEHICLE *NOT IN TRANSPORT*, FILL IN THE INFORMATION BELOW.

Model Year: \_\_\_\_\_  
 Make: \_\_\_\_\_  
 Model: \_\_\_\_\_  
 VIN: \_\_\_\_\_

The Weight, CDC, Scene Data and Damage Information for this vehicle should be recorded above.

Complete and ATTACH the appropriate vehicle damage sketch and dimensions to the Form.

SUMMARY OF CRASHPC RESULTS USING DAMAGE

---

PSU 02 CASE 010F - BARRIER/SECONDARY DELTA V - VEHICLE #2 - BUCHNER

SPEED CHANGE  
(DAMAGE)

VEHICLE #1

TOTAL 19 KPH ( 12 MPH)  
LONGITUDINAL -19 KPH ( -12 MPH)  
LATITUDINAL 0 KPH ( 0 MPH)  
PDOF ANGLE 0 DEGREES  
ENERGY DISSIPATED = 24510 JOULES ( 18075 FT-LB)

VEHICLE #2

TOTAL 0 KPH ( 0 MPH)  
LONGITUDINAL 0 KPH ( 0 MPH)  
LATITUDINAL 0 KPH ( 0 MPH)  
PDOF ANGLE 0 DEGREES  
ENERGY DISSIPATED = 0 JOULES ( 0 FT-LB)

DAMAGE DATA

---

	VEHICLE #1	VEHICLE #2
SIZE CATEGORY	3	11
STIFFNESS CATEGORY	8	0
VEHICLE WEIGHT	1266 KGS ( 2791 LBS)	***** KGS (2204586 LBS) *
CDC	12FREES	BARRIER
PDOF ANGLE	0 DEGREES	0 DEGREES *
CRUSH LENGTH	155 CM. ( 61 IN.)	0 CM. ( 0 IN.) *
C1	2 CM. ( 1 IN.)	0 CM. ( 0 IN.) *
C2	2 CM. ( 1 IN.)	0 CM. ( 0 IN.) *
C3	2 CM. ( 1 IN.)	0 CM. ( 0 IN.) *
C4	3 CM. ( 1 IN.)	0 CM. ( 0 IN.) *
C5	4 CM. ( 1 IN.)	0 CM. ( 0 IN.) *
C6	28 CM. ( 11 IN.)	0 CM. ( 0 IN.) *
D	59 CM. ( 23 IN.)	0 CM. ( 0 IN.) *
D'	95 CM. ( 38 IN.)	0 CM. ( 0 IN.) *

(\* INDICATES DEFAULT VALUE)

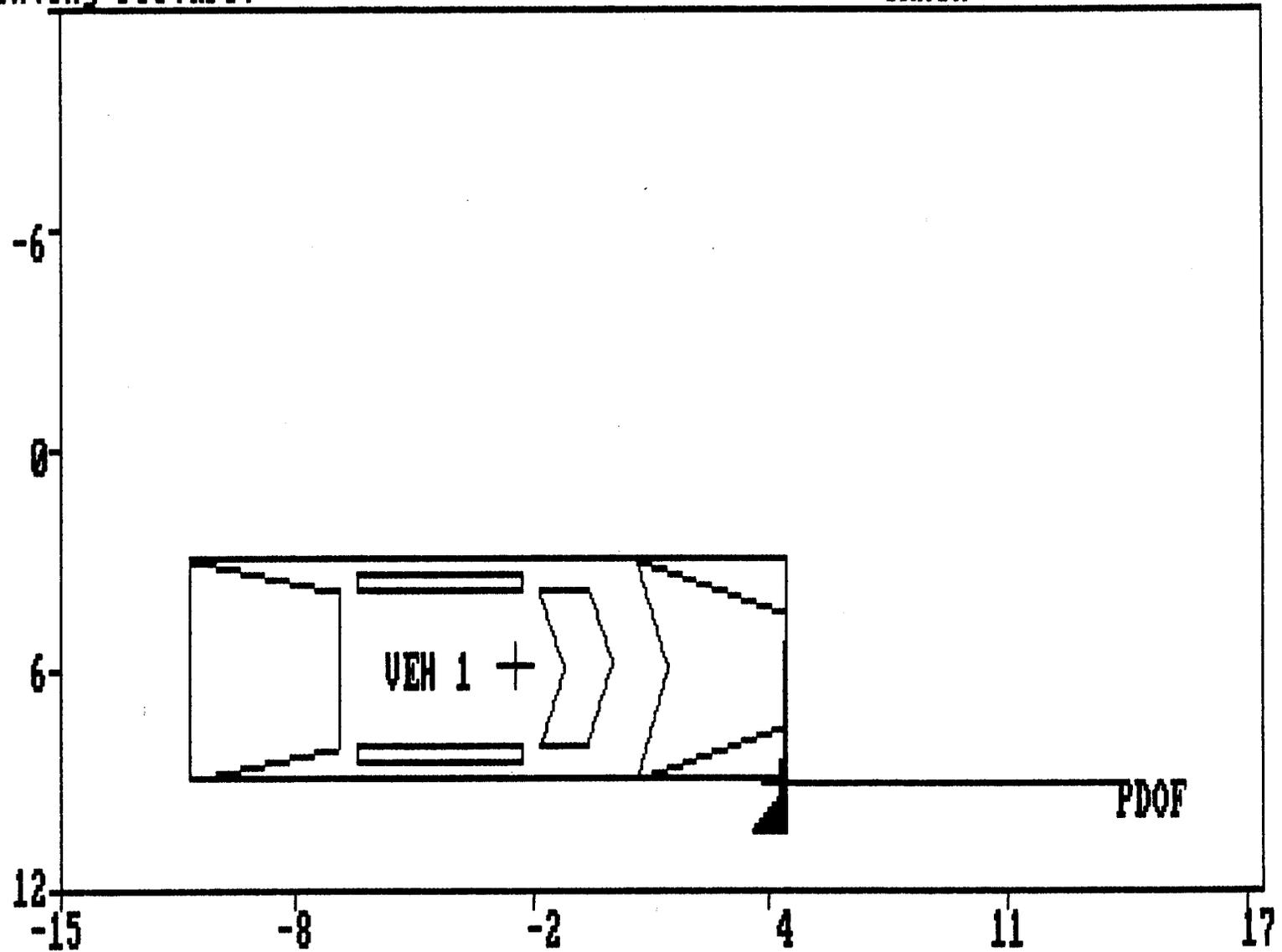
DIMENSIONS AND INERTIAL PROPERTIES

---

	VEHICLE #1	VEHICLE #2
CG TO FRONT AXLE	130 CM. ( 51 IN.)	127 CM. ( 50 IN.)
CG TO REAR AXLE	141 CM. ( 56 IN.)	127 CM. ( 50 IN.)
TRACK	150 CM. ( 59 IN.)	127 CM. ( 50 IN.)
CG TO FRONT OF VEH	228 CM. ( 90 IN.)	127 CM. ( 50 IN.)
CG TO REAR OF VEH	-270 CM. (-106 IN.)	-127 CM. ( -50 IN.)
CG TO SIDE OF VEH	92 CM. ( 36 IN.)	127 CM. ( 50 IN.)
MOMENT OF INERTIA	10942 KGS ( 24122 LBS)	***** KGS (***** LBS)
VEHICLE MASS	3 KGS ( 7 LBS)	2600 KGS ( 5732 LBS)

Printing Picture:

CRASH



DAMAGE DESCRIPTION

PDOF

02010F00000011 958.0200000000000211150000003 95 95024520000  
00432800010612305 0206  
02010F00010012 958.0210000000000145B0214F  
02010F00020013 958.0210000000000145F56000  
02010F00030012 958.0210000000000214T3100N  
02010F01000021 B.02 000000000801248140F26FNHK0557 0100008909600 90  
0211211000019753011121  
02010F01000022 B.02 000000000103030001809990000000000400000000008999 999 99  
99999999099973  
02010F01000031 B.02 000000000010206BLAE09025612FRLS011820580210090000000000-  
077 18202933817001900401050703001000  
02010F01000041 B.02 00000000011310000000012200202129001021610060111100101  
02010F01000042 B.02 000000000113162110752123142112032122012111311  
100000025600090  
02010F01010051 B.02 00000000034118010211120000044000010000090000000000000 00  
0000000000000514016000000000000142000000000000003151011  
02010F01010161 B.02 0000000003290202120193100  
02010F01010261 B.02 0000000003590402111512104  
02010F01010361 B.02 0000000003690402181512104  
02010F01020051 B.02 0000000001711801022122000004300000000003000000000000 00  
00000000000005140160000000000001420000000000001151011  
02010F01020161 B.02 0000000003640278166031300  
02010F01030051 B.02 00000000024116806129781881050000000000000000000000000 00  
0000000000000000000000000000014200990000000002021011  
02010F01030161 B.02 0000000003790402115512100  
02010F01030261 B.02 0000000003890402115512100  
02010F02000021 B.02 000000000904940114JT3RN37W6L0 199908909600 10  
0211211000090150011220  
02010F02000022 B.02 000000000101010001160010407201321000000000004999 999 99  
99999999001903  
02010F02000031 B.02 000000000010112FREE05033100TYDD03155002003002003004028+  
059 15503726214801000501060101001000  
02010F02000041 B.02 00000000098131110000012222202122221012666160111111101  
02010F02000042 B.02 0000000001313311314311316311216211213211306211304221315  
21131711121511100000012300010  
02010F02010051 B.02 00000000021116809111100000044041110000040000000000000 00  
000000000003021323100000000000024200990000000002021011  
02010F02010161 B.02 0000000003790202110043100  
02010F02010261 B.02 0000000003790402110043100  
02010F00000066 B.02 000000000TRUCK VS TRUCK/REAR END  
02010F00000171 B.02 000000000 Vehicle #1 stopped on shoulder of two lan  
e undivided roadway.  
02010F00000271 B.02 000000000 Vehicle #2 traveling north on same roadway st  
rikes Vehicle #1 in rear  
02010F00000371 B.02 000000000 causing same to strike guardrail. Vehicle #2  
continues up and into  
02010F00000471 B.02 000000000 truck-bed causing Vehicle #2 to roll over to  
left, ending up back on  
02010F00000571 B.02 000000000 its wheels after rolling over completely.  
  
02010F00000181 B.02 00000000001 Other light truck 1980 Ford F250 Rear  
Severe None  
02010F00000281 B.02 00000000002 Compact Utility 1990 Toyota 4 Runner To  
p Moderate None  
02010F00000191 B.02 00000000001 Driver L-Front None used Abdomen C  
ontusion 1 Front seatback  
02010F00000291 B.02 00000000001 Pass. M-Front None used Neck S  
train 1 Impact force  
02010F00000391 B.02 00000000001 Pass. No seat avail. N/A Arm C  
ontusion 1 Ground



GENERAL VEHICLE Vehicle: 1

INTRA ERRORS

GG2271 2 If ACCIDENT TYPE GV36 equals 21-23, then PRE-EVENT MOVEMENT GV31  
GG2272 should equal 05 or 99

EXTERIOR VEHICLE Vehicle: 1

INTRA ERRORS

EE1221 2 \*\*\*\*\* THIS IS A SPECIAL INTEREST CASE FOR NHTSA \*\*\*\*\*  
EE1222 \*\*\*\*\* THIS CASE SHOWS FUEL LEAKAGE. \*\*\*\*\*  
EE1223 LEAKAGE SYSTEM-1 EV43 equals 2-8 or LEAKAGE SYSTEM-2 EV44 equals  
EE1224 2-8.

OCCUPANT ASSESSMENT Vehicle: 1 Occupant: 2

INTRA ERRORS

HH0071 2 Given OCCUPANT AGE OA05 and OCCUPANT SEX OA06, OCCUPANT WEIGHT  
HH0072 OA08 is questionable. See Table A2.

INTER ERRORS

EC0021 2 If INTRUDING COMPONENT IV48 equals 07, 11, 12 or 14, then at  
EC0022 least one ((DEFORMATION LOCATION EV07(n) should equal 9 or  
EC0023 blank) or ((EV07(n) should equal R, L or T) and (LONGITUDINAL  
EC0024 LOCATION EV08(n) should equal D, F, Y, or Z))). GV=01

	NUMBER OF	NUMBER OF	VERSION	
FORM NAME	NUMBER OF DOLLAR SIGNS	LEVEL 1 ERRORS	LEVEL 2 ERRORS	NUMBER CONSISTENT
Accident	0	0	0	Y
General Vehicle	0	0	1	Y
Vehicle Exterior	0	0	1	Y
Vehicle Interior	0	0	0	Y
Occupant Assessment	0	0	1	Y
Occupant Injury	0	0	0	Y
Total Inter Errors		0	1	
Total Case Errors	0	0	4	

02010F0000001 ██████████ 958.0200000000000211150000003 ██████████ 95 ██████████ 95 ██████████ 95 ██████████ 95024520000  
00432800010612305 0207  
02010F00010013 ██████████ 958.02100000000000145B0214F  
02010F00020012 ██████████ 958.02100000000000145F56000  
02010F00030012 ██████████ 958.02100000000000214T3100N  
02010F01000021 8.02 000000000801248140F26FNHK0557 0100008909600 ██████████ 90  
0211211000019753011121  
02010F01000022 8.02 0000000001030300018099900000000000400000000008999 999 99  
99999999099973  
02010F01000031 8.02 000000000010206BLAE09025612FRLS011820580210090000000000-  
077 18202933817001900401050703001000  
02010F01000041 8.02 00000000011310000000012200202129001021610060111100101  
02010F01000042 8.02 000000000113162110752123142112032122012111311  
100000025600090  
02010F01010051 8.02 00000000034118010211120000044000010000090000000000000 00  
00000000000005140160000000000000142000000000000003151011  
02010F01010161 8.02 0000000003290202120193100  
02010F01010261 8.02 0000000003590402111512104  
02010F01010361 8.02 0000000003690402181512104  
02010F01020051 8.02 0000000001711801022122000004300000000003000000000000 00  
00000000000005140160000000000000142000000000000001151011  
02010F01020161 8.02 0000000003640278166031300  
02010F01030051 8.02 00000000024116806129781881050000000000000000000000000 00  
000000000000000000000000000000000000142009900000000002021011  
02010F01030161 8.02 0000000003790402115512100  
02010F01030261 8.02 0000000003890402115512100  
02010F02000021 8.02 000000000904940114JT3RN37W6L ██████████ 0199908909600 ██████████ 10  
0211211000980150011220  
02010F02000022 8.02 0000000001010100011600104072013210000000000004999 999 99  
99999999001903  
02010F02000031 8.02 000000000010112FREE05033100TYD003155002003002003004028+  
059 15503726214801000501060101001000  
02010F02000041 8.02 00000000098131110000012222202122221012666160111111101  
02010F02000042 8.02 0000000001313311314311316311216211213211306211304221315  
21131711121511100000012300010  
02010F02010051 8.02 00000000021116809111100000044041110000040000000000000 00  
00000000000302132310000000000000242009900000000002021011  
02010F02010161 8.02 0000000003790202110043100  
02010F02010261 8.02 0000000003790402110043100  
02010F00000066 8.02 000000000  
02010F000000171 8.02 000000000 Vehicle #1 stopped on shoulder of two lan  
e undivided roadway.  
02010F000000271 8.02 000000000 Vehicle #2 traveling north on same roadway st  
rikes Vehicle #1 in rear  
02010F000000371 8.02 000000000 causing same to strike guardrail. Vehicle #2  
continues up and into  
02010F000000471 8.02 000000000 truck-bed causing Vehicle #2 to roll over to  
left, ending up back on  
02010F000000571 8.02 000000000 its wheels after rolling over completely.  
02010F000000181 8.02 00000000001 Other light truck 1980 Ford F250 Rear  
Severe None  
02010F000000281 8.02 00000000002 Compact Utility 1990 Toyota 4 Runner To  
p Moderate None  
02010F000000191 8.02 00000000001 Driver L-Front None used Abdomen C  
ontusion 1 Front seatback  
02010F000000291 8.02 00000000001 Pass. M-Front None used Neck S  
train 1 Impact force  
02010F000000391 8.02 00000000001 Pass. No seat avail. N/A Arm C  
ontusion 1 Ground



GENERAL VEHICLE Vehicle: 1

INTRA ERRORS

GG2271 2 If ACCIDENT TYPE GV36 equals 21-23, then PRE-EVENT MOVEMENT GV31  
GG2272 should equal 05 or 99

EXTERIOR VEHICLE Vehicle: 1

INTRA ERRORS

EE1221 2 \*\*\*\*\* THIS IS A SPECIAL INTEREST CASE FOR NHTSA \*\*\*\*\*  
EE1222 \*\*\*\*\* THIS CASE SHOWS FUEL LEAKAGE. \*\*\*\*\*  
EE1223 LEAKAGE SYSTEM-1 EV43 equals 2-8 or LEAKAGE SYSTEM-2 EV44 equals  
EE1224 2-8.

OCCUPANT ASSESSMENT Vehicle: 1 Occupant: 2

INTRA ERRORS

HH0071 2 Given OCCUPANT AGE OA05 and OCCUPANT SEX OA06, OCCUPANT WEIGHT  
HH0072 OA08 is questionable. See Table A2.

INTER ERRORS

EC0021 2 If INTRUDING COMPONENT IV48 equals 07, 11, 12 or 14, then at  
EC0022 least one ((DEFORMATION LOCATION EV07(n) should equal 9 or  
EC0023 blank) or ((EV07(n) should equal R, L or T) and (LONGITUDINAL  
EC0024 LOCATION EV08(n) should equal D, P, Y, or Z))). GV=01

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	1	Y
Vehicle Exterior	0	0	1	Y
Vehicle Interior	0	0	0	Y
Occupant Assessment	0	0	1	Y
Occupant Injury	0	0	0	Y
Total Inter Errors		0	1	
Total Case Errors	0	0	4	







PSU 02-010F (1995) #1



**PSU 02-010F (1995) #2**



PSU 02-010F (1995) #3



PSU 02-010F (1995) #4



**PSU 02-010F (1995) #5**



PSU 02-010F (1995) #8



**PSU 02-010F (1995) #7**



**PSU02-010F (1995) #8**



**PSU 02-010F (1995) #9**



**PSU 02-010F (1995) #10**



**PSU 02-010F (1995) #11**



**PSU 02-010F (1995) #12**



PSU 02-010F (1995) #13



**PSU 02-010F (1995) #14**



**PSU 02-010F (1995) #15**



**PSU 02-010F (1995) #16**



PSU 02-010F (1995) #17



PSU 02-010F (1995) #18



PSU 02-010F (1995) #19



PSU 02-010F (1995) #20



PSU 02-010F (1995) #21



PSU02-010F (1995) #22



PSU 02-010F (1995) #23



PSU 02-010F (1995) #24



PSU 02-010F (1995) #25



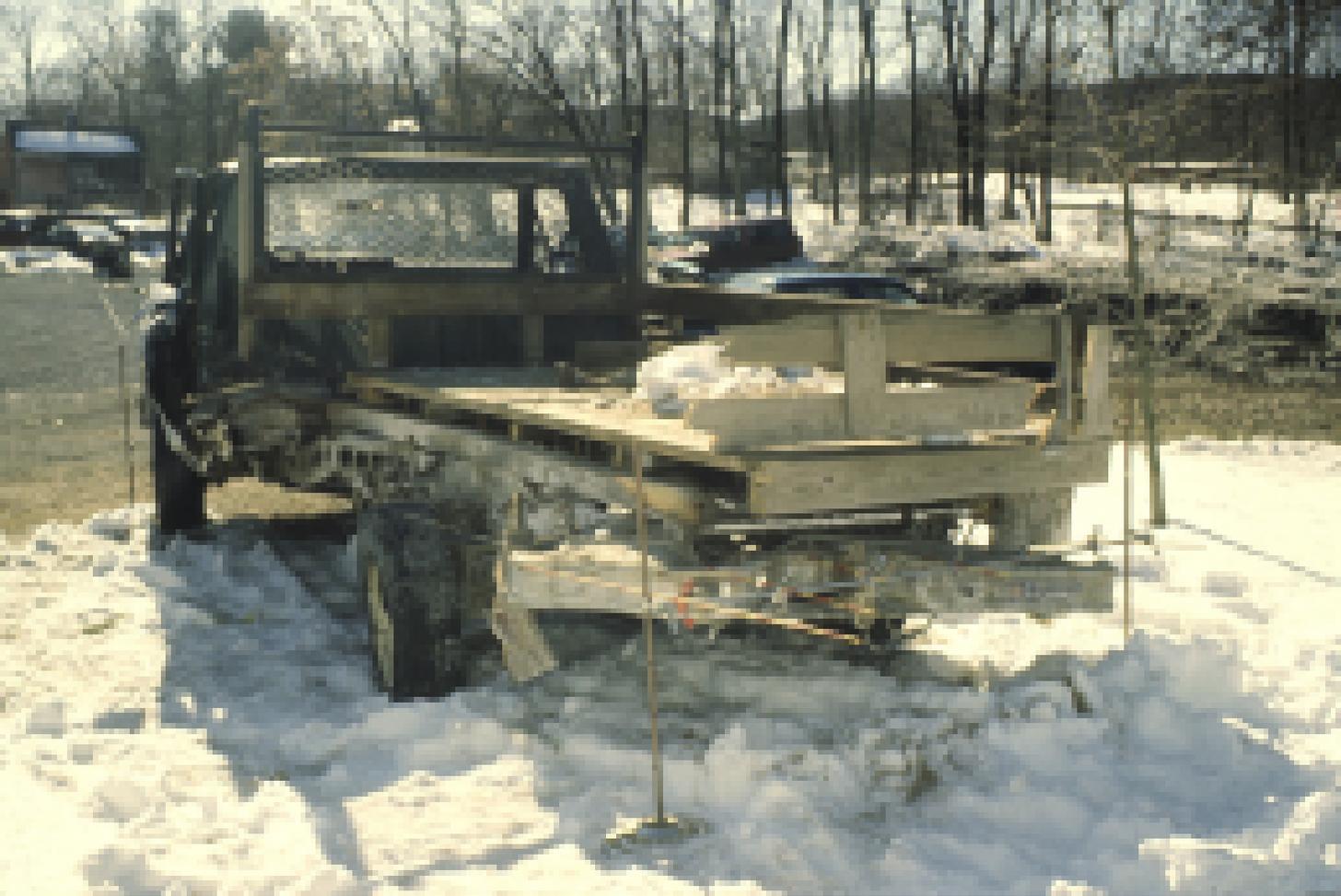
PSU 02-010F (1995) #28



PSU 02-010F (1995) #27



PSU 02-010F (1995) #28



PSU 02-010F (1995) #29



PSU 02-010F (1995) #30



PSU 02-010F (1995) #31



PSU 02-010F (1995) #32



PSU 02-010F (1995) #33



PSU 02-010F (1995) #34



PSU 02-010F (1995) #35



**PSU 02-010F (1995) #36**



PSU 02-010F (1995) #37



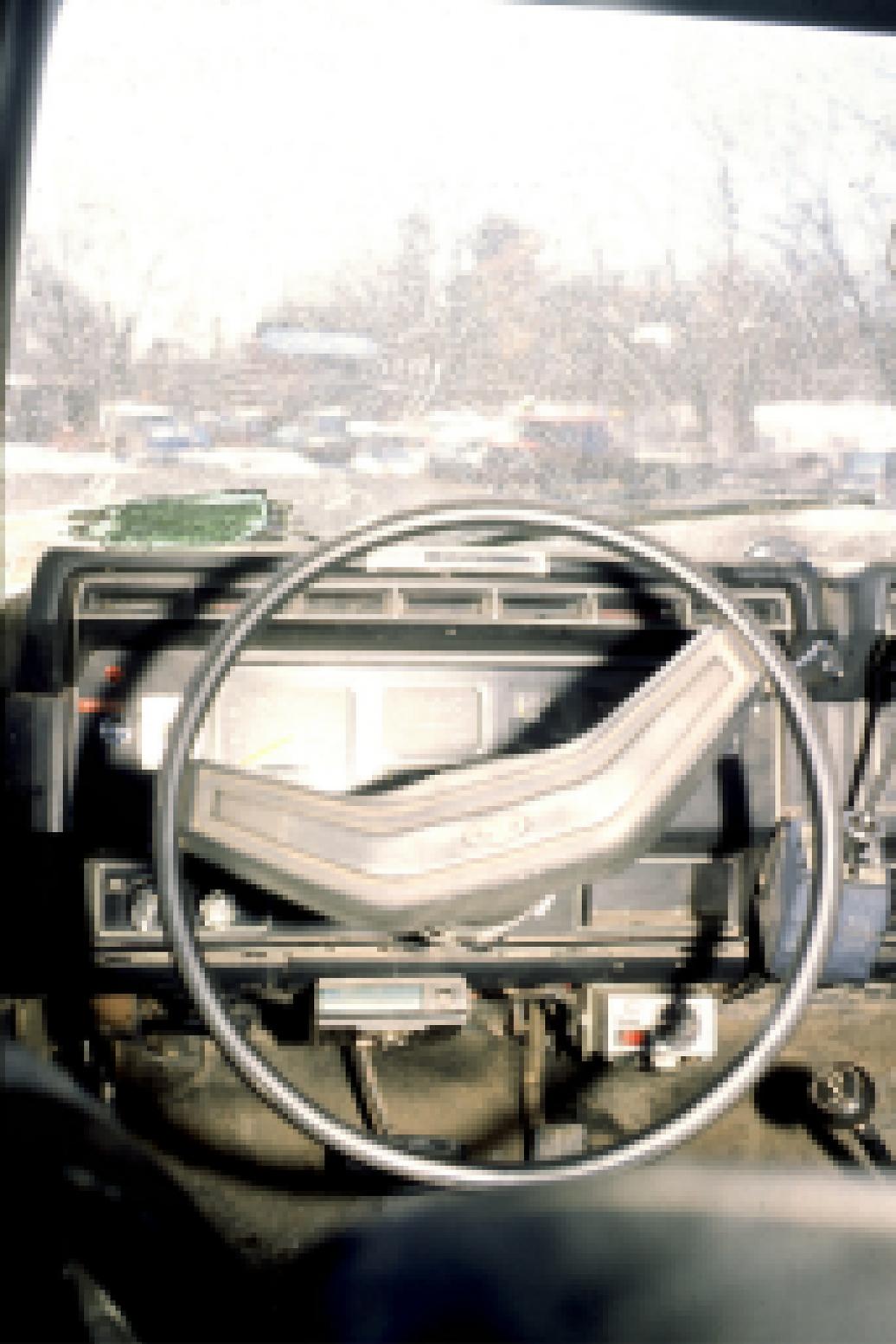
**PSU 02-010F (1995) #38**  
**Best Available**



**PSU 02-010F (1995) #39**  
**Best Available**



PSU 02-010F (1995) #40



PSJ 02-010F (1995) #41



PSU 02-010F (1995) #42



PSU 02-010F (1995) #43



PSU 02-010F (1995) #44



PSU 02-010F (1995) #45



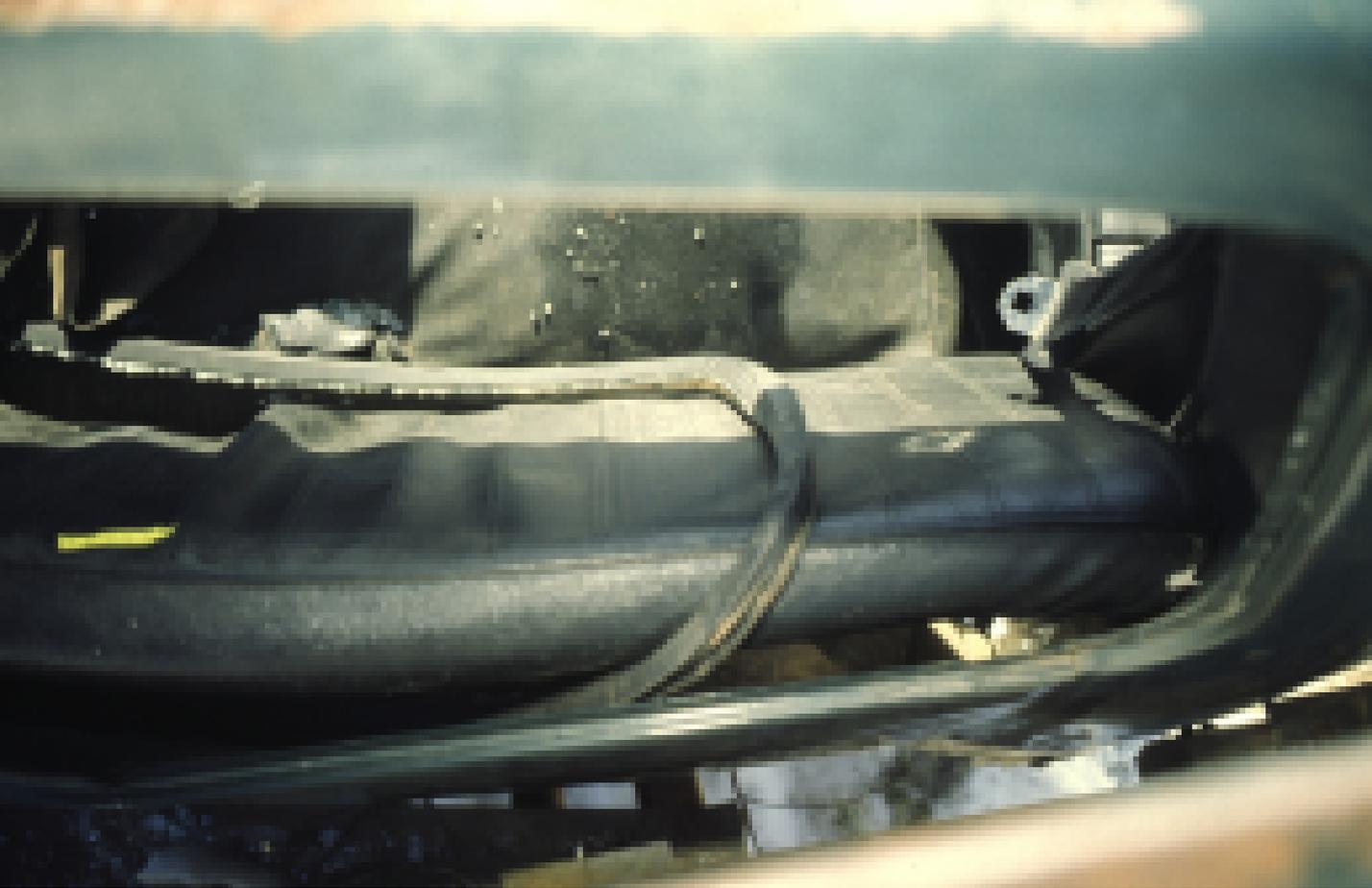
PSU 02-010F (1995) #46



PSU 02-010F (1995) #47



**PSU 02-010F (1995) #48**  
**Best Available**



**PSU 02-010F (1995) #49**  
**Best Available**



**PSU 02-010F (1995) #50**  
**Best Available**



**PSJ 02-010F (1995) #51**



**PSU 02-010F (1995) #52**  
**Best Available**



PSU 02-010F (1995) #53



PSU 02-010F (1995) #54



PSU 02-010F (1995) #55



PSU 02-010F (1995) #58



PSU 02-010F (1995) #57



PSU 02-010F (1995) #58



PSU 02-010F (1995) #59



PSU 02-010F (1995) #60



PSU 02-010F (1995) #61



PSU 02-010F (1995) #62



PSU 02-010F (1995) #63



PSU 02-010F (1995) #64



PSU 02-010F (1995) #65



PSU 02-010F (1995) #66



PSU 02-010F (1995) #67



PSU 02-010F (1995) #68



PSU 02-010F (1995) #69



PSU 02-010F (1995) #70



PSU 02-010F (1995) #71



PSU 02-010F (1995) #72



**PSU 02-010F (1995) #73**

**Best Available**



**PSU 02-010F (1995) #74**  
**Best Available**



PSU 02-010F (1995) #75



**PSU 02-010F (1995) #76**  
**Best Available**



**PSU 02-010F (1995) #77**



**PSU02-010F (1995) #78**

**Best Available**



PSU02-010F (1995) #79



**PSU 02-010F (1995) #80**  
**Best Available**



PSU 02-010F (1995) #81



PSU 02-010F (1995) #82



**PSU 02-010F (1995) #83**



PSU 02-010F (1995) #84



PSU 02-010F (1995) #85



PSU 02-010F (1995) #86



PSU 02-010F (1995) #87



PSU 02-010F (1995) #88



**PSU 02-010F (1995) #69**



PSU02-010F (1995) #90



PSU 02-010F (1995) #91



PSU02-010F (1995) #92