



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

U.S. Department  
of Transportation

**National Highway  
Traffic Safety  
Administration**

Dear Crash Data Researchers/Users:

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

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

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

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

**CASE SUMMARY**

PSU 72 CASE NO. 138A TYPE OF ACCIDENT \_\_\_\_\_

**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.)

(SEE ATTACHED)

**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 |                   |
|             |                  |                 |  |                      |                   |

**DO NOT SANITIZE THIS FORM**

### C. PERSON PROFILE(S)

| Vehicle No. | Person Role | Seat Position | Restraint Use | Most Severe Injury<br>(TO BE COMPLETED BY ZONE CENTER) |             |     |               |
|-------------|-------------|---------------|---------------|--|-------------|-----|---------------|
|             |             |               |               | Body Region  | Injury Type | AIS | Injury Source |
|             |             |               |               |  |             |     |               |

**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

**DO NOT SANITIZE THIS FORM**

PSU72

1996 Case Summary Form

CASE 138A

TYPE OF ACCIDENT: CAR/COMPACT UTILITY-RIGHT ANGL

A. DESCRIPTION OF THE ACCIDENT SEQUENCE AND ACCIDENT PECULIARITIES

Vehicle one was south bound on a one way street. Vehicle two was east bound on a one way street. Vehicle two impacted Vehicle ones' right plane with its own front. Vehicle one rolled onto its left side proceeded to roll onto its top and then impacted the curb and a parked vehicle. Vehicle one was towed due to damage. Vehicle two was towed due to damage. The driver of Vehicle one received "K" injuries and was transported. The driver of Vehicle two did not receive any injuries.

01

PSU72

1996 Case Summary Form

CASE 138A

TYPE OF ACCIDENT: CAR/COMPACT UTILITY-RIGHT ANGL

B. VEHICLE PROFILE(S)

| V<br>e<br>h.<br>No | Class of<br>Vehicle | Year/Make/<br>Model   | Most Severe Damage Based<br>on Vehicle Inspection |                    |                      |
|--------------------|---------------------|-----------------------|---|--------------------|----------------------|
|                    |                     |                       | Damage<br>Plane                                   | Severity<br>Descr. | Component<br>Failure |
| 01                 | Compact Utility     | 1995 Toyota 4-Runner  | Right   | Minor              | None                 |
| 02                 | Compact             | 1992 Pontiac Grand AM | Front   | Unknown            | Unknown              |

01

PSU72

1996 Case Summary Form

CASE 138A

TYPE OF ACCIDENT: CAR/COMPACT UTILITY-RIGHT ANGL

C. PERSON PROFILE(S)

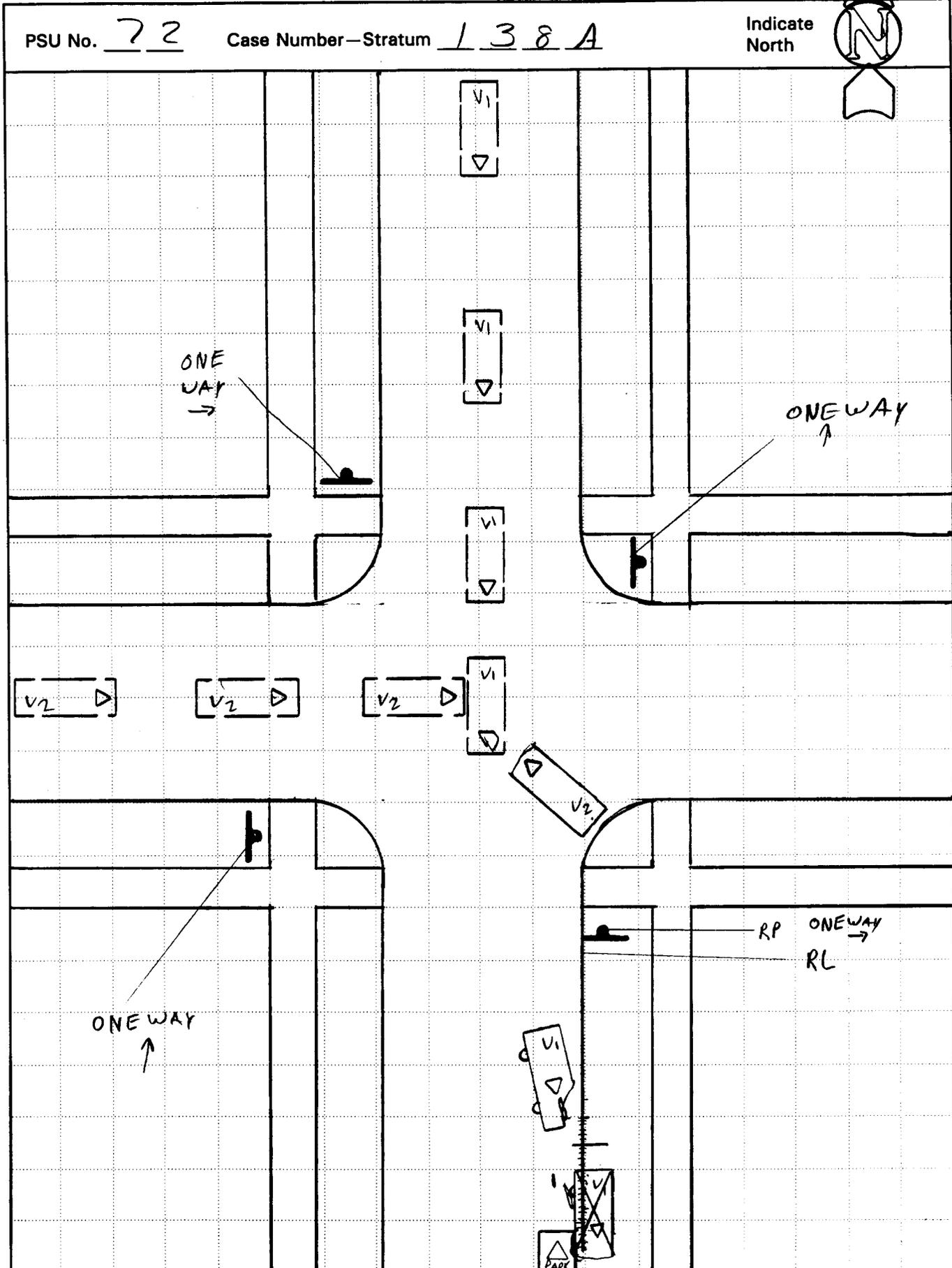
Most Severe Injury  
(TO BE COMPLETED BY ZONE CENTER)

| V<br>e<br>h.<br>No | Person<br>Role | Seat<br>Positon | Restraint<br>Use    | Body<br>Region | Most Severe Injury<br>(TO BE COMPLETED BY ZONE CENTER) |                  |
|--------------------|----------------|-----------------|---------------------|----------------|--|------------------|
|                    |                |                 |                     |                | Injury<br>Type   | Injury<br>Source |
| 01                 | Driver         | Front Left      | Lap and<br>Shoulder | Brain          | Hemorrhage   | 5 Roof           |
| 02                 | Driver         | Front Left      | Unknown             |                | No injury  |                  |

0



# ACCIDENT COLLISION DIAGRAM



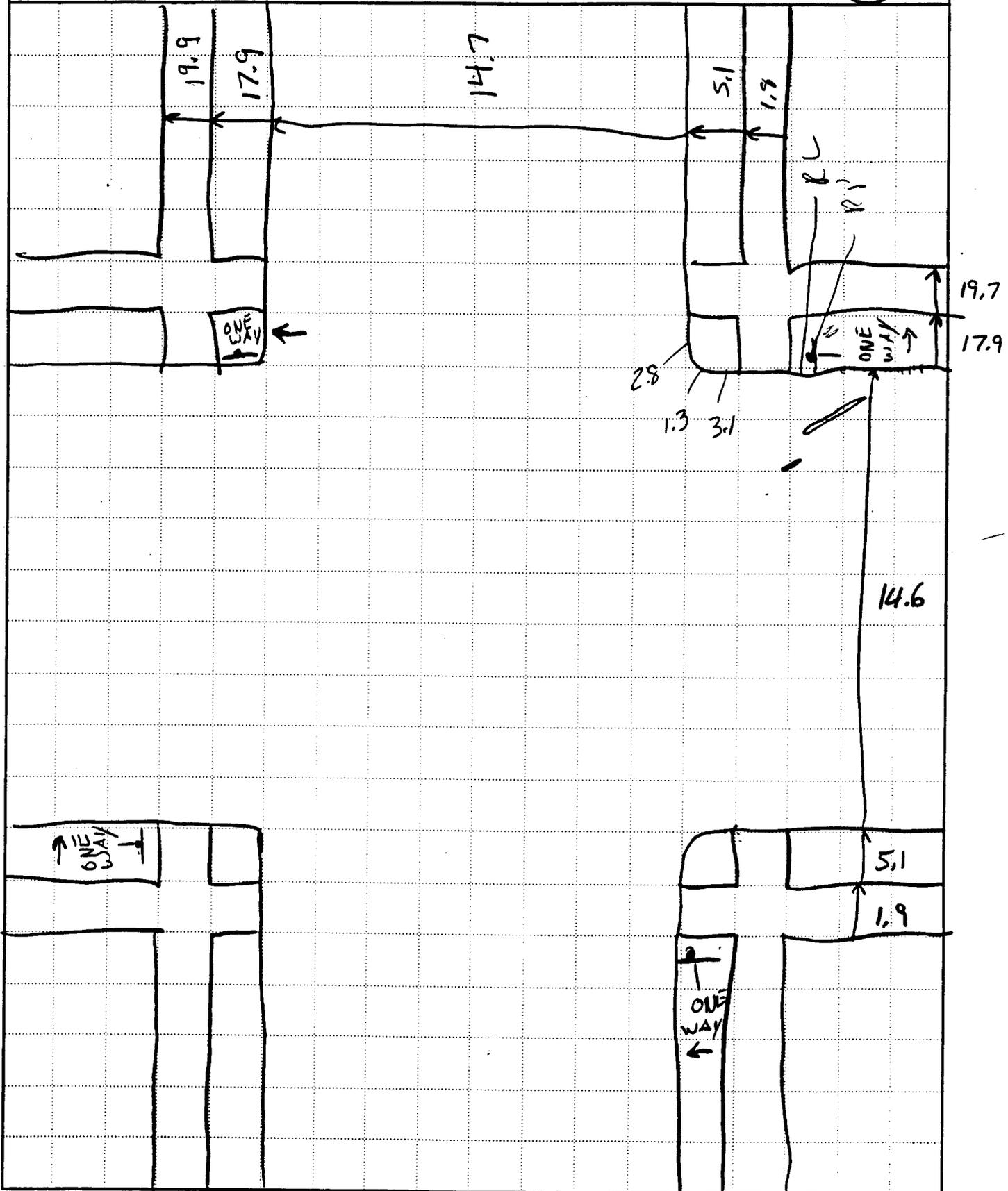


# ACCIDENT COLLISION DIAGRAM

PSU No. 52

Case Number—Stratum 138A

Indicate North





# ACCIDENT COLLISION MEASUREMENT TABLE

Primary Sampling Unit Number 72

Case Number—Stratum 138A

### 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., signs/signals, etc.)
- 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 (include measurement of precrash superelevation for each vehicle if applicable)

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>180</u>   | <u>90</u>    | —       |
| Surface Type   | <u>BIT</u>   | <u>BIT</u>   | —       |
| Surface Condition  | <u>DRY</u>   | <u>DRY</u>   | —       |
| Coefficient of Friction                                      | <u>.6</u>    | <u>.6</u>    | —       |
| Grade (v/h) Measurement (between impact and final rest)      | <u>0/122</u> | <u>0/127</u> | —       |
| Grade (v/h) Measurement (at location of rollover initiation) | <u>0/122</u> | <u>X</u>     | —       |
| Grade (v/h) Measurement (at pre-crash location)              | <u>0/122</u> | <u>0/122</u> | —       |

Reference Point: Pole SE Corner

Reference line: E Curb Edge of N-S Street

| Item                   | Distance and Direction from Reference Point | Distance and Direction from Reference Line |
|------------------------|---|--|
| RP                     | 64  | 18 E                                       |
| Curb South B           | ✓ 8.8 S                                     | 0  |
| Curb South E           | ✓ 15.2 S                                    | 0  |
| Gauge 1 B              | ✓ 7.8 S                                     | 1.1  |
| " 1 E                  | ✓ 8.9 S                                     | .7   |
| Gauge 2 B              | ✓ 11.7 S                                    | 1.4 W                                      |
| " 2 E                  | ✓ 12  | 1.3 W                                      |
| Gauge 3 B              | 12  | .9 W                                       |
| " 3 E                  | 13.7  | .5 W                                       |
| Parked Vehicle B       | 14.2 S                                      | .2 W                                       |
| " " E                  | 15.2 S                                      | .2 W                                       |
| Wheel Print on Vehicle | 15.2 S                                      | .2 W                                       |





# ACCIDENT FORM

1. Primary Sampling Unit Number 72  
2. Case Number - Stratum 138A

## IDENTIFICATION

3. Number of General Vehicle Forms Submitted 02  
4. Date of Accident (Month, Day, Year) [REDACTED] 9 6  
5. Time of Accident 1220  
Code reported military time of accident.  
NOTE: Midnight = 2400  
Unknown = 9999

## SPECIAL STUDIES - INDICATORS

Check (✓) each special study (SS15-SS18 below) that has been completed; code 1 for the checked special studies and 0 for the special studies not checked.

6.  SS15 Administrative Use 0  
7.  SS16 Pedestrian Crash Data Study 0  
*(Data for this special study available in a separate file.)*  
8.  SS17 Impact Fires 0  
9.  SS18 Unsafe Driver Actions 0  
10.  SS19 Run Off Road 0

## NUMBER OF EVENTS

11. Number of Recorded Events in This Accident 04 ~~02~~  
Code the number of events which occurred in this accident.

## ACCIDENT EVENTS

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

| Accident Event Sequence Number | Vehicle Number | Class Of Vehicle | General Area of Damage | Vehicle Number or Object Contacted | Class Of Vehicle | General Area of Damage |
|--------------------------------|----------------|------------------|------------------------|------------------------------------|------------------|------------------------|
| 12. <u>0 1</u>                 | 13. <u>01</u>  | 14. <u>04</u>    | 15. <u>R</u>           | 16. <u>02</u>                      | 17. <u>03</u>    | 18. <u>F</u>           |
| 19. <u>0 2</u>                 | 20. <u>01</u>  | 21. <u>04</u>    | 22. <u>T</u>           | 23. <u>31</u>                      | 24. <u>00</u>    | 25. <u>N</u>           |
| 26. <u>0 3</u>                 | 27. <u>01</u>  | 28. <u>14</u>    | 29. <u>T</u>           | 30. <u>63</u>                      | 31. <u>00</u>    | 32. <u>0</u>           |
| 33. <u>0 4</u>                 | 34. <u>01</u>  | 35. <u>14</u>    | 36. <u>9</u>           | 37. <u>70</u>                      | 38. <u>00</u>    | 39. <u>0</u>           |
| 40. <u>0 5</u>                 | 41. <u>   </u> | 42. <u>   </u>   | 43. <u>   </u>         | 44. <u>   </u>                     | 45. <u>   </u>   | 46. <u>   </u>         |

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

### 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 (≤ 4,536 kgs GVWR)<br>(16) Utility station wagon (≤ 4,536 kgs GVWR)<br>(19) Unknown utility type<br>(20) Minivan (≤ 4,536 kgs GVWR)<br>(21) Large van (≤ 4,536 kgs GVWR)<br>(24) Van Based school bus (≤ 4,536 kgs GVWR)<br>(28) Other van type (≤ 4,536 kgs GVWR)<br>(29) Unknown van type (≤ 4,536 kgs GVWR)<br>(30) Compact pickup truck (≤ 4,536 kgs GVWR) | (31) Large pickup truck (≤ 4,536 kgs GVWR)<br>(38) Other pickup truck (≤ 4,536 kgs GVWR)<br>(39) Unknown pickup truck type (≤ 4,536 kgs GVWR)<br>(45) Other light truck (≤ 4,536 kgs GVWR)<br>(48) Unknown light truck type (≤ 4,536 kgs GVWR)<br>(49) Unknown light vehicle type<br>(50) School bus (excludes van based)(> 4,536 kgs GVWR)<br>(58) Other bus (> 4,536 kgs GVWR)<br>(59) Unknown bus type<br>(60) Truck (> 4,536 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)

- |   |  |  |   |
|---|--|--|---|
| CDS APPLICABLE<br>AND OTHER<br>VEHICLES | (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   |
| TDC<br>APPLICABLE<br>VEHICLES           | (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<br>(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>Noncollision<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>Collision With Fixed Object<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>Nonbreakaway Pole or Post<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)<br>(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>Collision with Nonfixed Object<br>(70) Passenger car, light truck, van, or other vehicle<br>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>_____<br>(99) Unknown event or object |
|---|--|

**PRECRASH ENVIRONMENTAL DATA**

19. Relation To Interchange Or Junction 2  
 (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 3  
 (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 1  
 (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 3  
 (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 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? 1  
 (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 1  
 (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 1.930  
 Code weight to nearest 10 kilograms.  
 (045) Less than 454 kilograms  
 (612) 6,124 kilograms or more  
 (999) Unknown 45  
4,165 lbs X .4536 = 1.934 kgs  
 Source: \_\_\_\_\_

- 44. Vehicle Cargo Weight 0.020  
 Code weight to nearest 10 kilograms.  
 (000) Less than 5 kilograms  
 (454) 4,536 kilograms or more  
 (999) Unknown  
 \_\_\_\_\_ lbs X .4536 = \_\_\_\_\_ kgs  
 Source: \_\_\_\_\_

**ROLLOVER DATA**

- 45. Rollover 02  
 (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 SK 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 1  
 (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 02  
 (Note: Applicable codes on back of page)
- 49. Location on Vehicle Where Initial Principal Tripping Force Is Applied 2  
 (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



# EXTERIOR VEHICLE FORM

|   |                             |
|---|-----------------------------|
| 1. Primary Sampling Unit Number <u>72</u> | 3. Vehicle Number <u>01</u> |
| 2. Case Number - Stratum <u>138A</u>      |                             |

## VEHICLE IDENTIFICATION

VIN JT3VN39WXS8 XXXXXXXXXX Model Year 95

Vehicle Make (specify): Toyota Vehicle Model (specify): 4-Runner

## LOCATOR

Locate the end of the damage with respect to the vehicle's damaged center point or bumper corner for end impacts or an undamaged axle for side impacts.

| Specific Impact No. | Location of Direct Damage    | Location of Field L        | Location of Max Crush |
|---------------------|------------------------------|----------------------------|-----------------------|
| <u>02</u>           | <u>Roof Rail - Roof Rail</u> | <u>Roof Rail Roof Rail</u> | <u>~ C2</u>           |
| <u>01</u>           | <u>17cm F Rake - 72 F</u>    | <u>17cm F Rake - 72 F</u>  | <u>C2</u>             |

## CRUSH PROFILE IN CENTIMETERS

NOTES: Identify the plane at which the C-measurements are taken (e.g., at bumper, above bumper, at sill, above sill, etc.) and label adjustments (e.g., free space).

Measure C1 to C6 from driver to passenger side in front or rear impacts and rear to front in side impacts.

Free space value is defined as the distance between the baseline and the original body contour taken at the individual C locations. This may include the following: bumper lead, bumper taper, side protrusion, side taper, etc. Record the value for each C-measurement and maximum crush.

Use as many lines/columns as necessary to describe each damage profile.

| Specific Impact Number | Plane of Impact C-Measurements | Direct Damage |           | Field L    | C <sub>1</sub> | C <sub>2</sub> | C <sub>3</sub> | C <sub>4</sub> | C <sub>5</sub> | C <sub>6</sub> | ±D         |
|------------------------|--------------------------------|---------------|-----------|------------|----------------|----------------|----------------|----------------|----------------|----------------|------------|
|                        |                                | Width (CDC)   | Max Crush |            |                |                |                |                |                |                |            |
| <u>01</u>              | <u>Sill</u>                    | <u>72</u>     | <u>24</u> | <u>72</u>  | <u>3</u>       | <u>24</u>      | <u>23</u>      | <u>22</u>      | <u>20</u>      | <u>19</u>      | <u>-64</u> |
| <u>01</u>              | <u>Free</u>                    |               | <u>11</u> |            | <u>6</u>       | <u>11</u>      | <u>11</u>      | <u>11</u>      | <u>11</u>      | <u>11</u>      |            |
| <u>01</u>              | <u>Adjust</u>                  |               | <u>2</u>  |            | <u>2</u>       | <u>2</u>       | <u>2</u>       | <u>2</u>       | <u>2</u>       | <u>2</u>       |            |
| <u>01</u>              | <u>Result</u>                  | <u>72</u>     | <u>11</u> | <u>72</u>  | <u>0</u>       | <u>11</u>      | <u>10</u>      | <u>9</u>       | <u>7</u>       | <u>6</u>       |            |
| <u>01</u>              |                                |               |           |            |                |                |                |                |                |                |            |
| <u>02</u>              | <u>Roof</u>                    | <u>106</u>    | <u>25</u> | <u>106</u> |                |                |                |                |                |                | <u>0</u>   |
| <u>(3)</u>             | <u>roof</u>                    | <u>curb</u>   | <u>?</u>  |            |                |                |                |                |                |                |            |
| <u>4</u>               | <u>rotated vehicle</u>         |               |           |            |                |                |                |                |                |                |            |

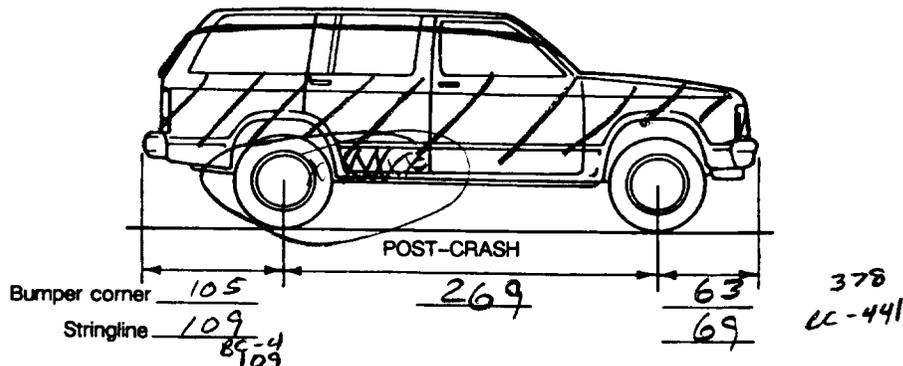
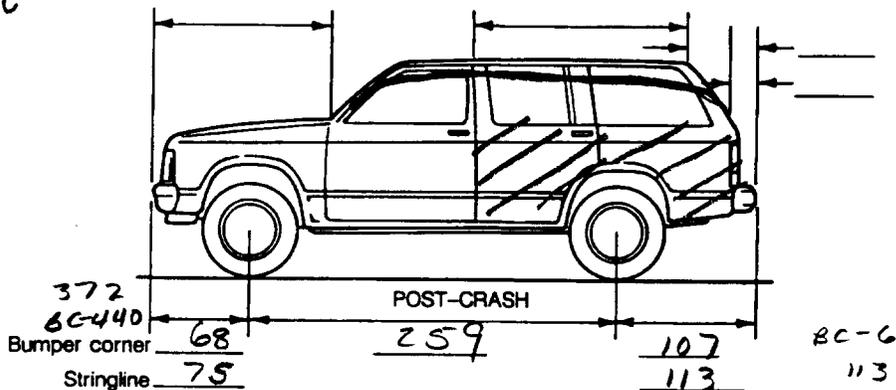
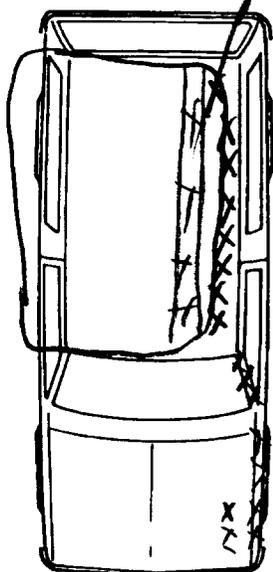
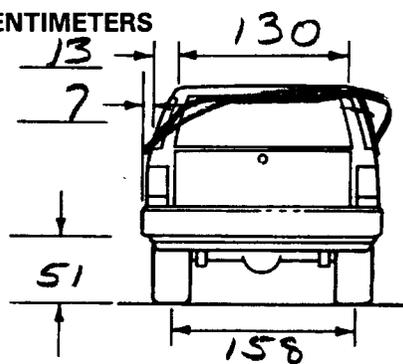
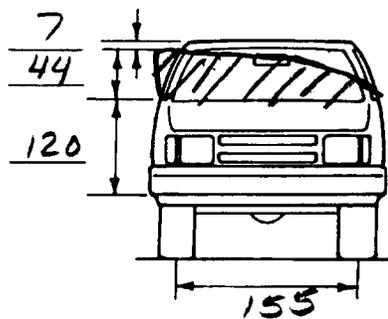
# ORIGINAL SPECIFICATIONS WORK SHEET

|                          |              |        |         |   |             |    |
|--------------------------|--------------|--------|---------|---|-------------|----|
| Wheelbase                | <u>1031</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>4264</u>  | pounds | x .4536 | = | <u>1934</u> | kg |
| Average Track            | <u>61.8</u>  | inches | x 2.54  | = | <u>157</u>  | cm |
| Front Overhang           | <u>29.9</u>  | inches | x 2.54  | = | <u>76</u>   | cm |
| Rear Overhang            | <u>42.5</u>  | inches | x 2.54  | = | <u>108</u>  | cm |
| Undeformed End Width     | <u>63.0</u>  | inches | x 2.54  | = | <u>160</u>  | cm |
| Engine Size: cyl./displ. | <u>3000</u>  | cc     | x .001  | = | <u>3.0</u>  | L  |
|                          | _____        | CID    | x .0164 | = | _____       | L  |

### 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><br/>         LF <u>2</u>                                      LF <u>2</u><br/>         RR <u>2</u>                                      RR <u>2</u><br/>         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>262</u> cm<br/>         Overall Length <u>447</u> cm<br/>         Maximum Width <u>169</u> cm<br/>         Curb Weight <u>1934</u> kg<br/>         Average Track <u>157</u> cm<br/>         Front Overhang <u>76</u> cm<br/>         Rear Overhang <u>108</u> cm<br/>         Undeformed End Width <u>160</u> cm<br/>         Engine Size: cyl./displ. <u>6cyl/3.0</u> L</p> | <p><b>WHEEL STEER ANGLES</b><br/>         (For locked front wheels or displaced rear axles only)</p> <p>RF ± _____ °<br/>         LF ± _____ °<br/>         RR ± _____ °<br/>         LR ± _____ °</p> <p>Within ± 5 degrees</p> <hr/> <p><b>DRIVE WHEELS</b></p> <p><input type="checkbox"/> FWD   <input checked="" type="checkbox"/> RWD   <input type="checkbox"/> 4WD</p> <hr/> <p>Approximate Cargo Weight <u>∅</u> kg</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 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.

**CDC WORKSHEET**

**CODES FOR OBJECT CONTACTED**

(01-30) — Vehicle Number

**Noncollision**

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

(36) Noncollision injury

(38) Other noncollision (specify): \_\_\_\_\_

(39) Noncollision — details unknown

**Collision With Fixed Object**

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

(45) Breakaway pole or post (any diameter)

**Nonbreakaway Pole or Post**

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

(54) Concrete traffic barrier

(55) Impact attenuator

(56) Other traffic barrier (includes guardrail) (specify): \_\_\_\_\_

(57) Fence

(58) Wall

(59) Building

(60) Ditch or culvert

(61) Ground

(62) Fire hydrant

(63) Curb

(64) Bridge

(68) Other fixed object (specify): \_\_\_\_\_

(69) Unknown fixed object

**Collision with Nonfixed Object**

(70) Passenger car, light truck, van, or other vehicle not in-transport

(71) Medium/heavy truck or bus not in-transport

(72) Pedestrian

(73) Cyclist or cycle

(74) Other nonmotorist or conveyance

(75) Vehicle occupant

(76) Animal

(77) Train

(78) Trailer, disconnected in transport

(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

**DEFORMATION CLASSIFICATION BY EVENT NUMBER**

| Accident Event Sequence Number | Object Contacted | (1) (2) Direction of Force (degrees) | Incremental Value of Shift | (3) Deformation Location | (4)                                       | (5)                                   | (6) Type of Damage Distribution | (7) Deformation Extent |
|--------------------------------|------------------|--------------------------------------|----------------------------|--------------------------|---|---------------------------------------|---------------------------------|------------------------|
|                                |                  |                                      |                            |                          | Specific Longitudinal or Lateral Location | Specific Vertical or Lateral Location |                                 |                        |
| 02                             | 31               | 000                                  | 60                         | T                        | D   | DK                                    | 0                               | 03                     |
| 01                             | 02               | <del>080</del> 60                    | 00                         | R                        | Z   | E                                     | W                               | 02                     |
| 03                             | 63               | 000                                  |                            | T                        | D   | L                                     | W                               | 04                     |
| 04                             | 70               |                                      |                            | 9                        | 9   | 9                                     | 9                               | 29                     |
|                                |                  |                                      |                            |                          |   |                                       |                                 |                        |
|                                |                  |                                      |                            |                          |   |                                       |                                 |                        |
|                                |                  |                                      |                            |                          |   |                                       |                                 |                        |

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**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. <sup>02</sup> <del>03</del> | 7. <u>R</u>              | 8. <u>Z</u>                          | 9. <u>E</u>                      | 10. <u>W</u>                    | 11. <u>02</u>          |

Second Highest Delta "V"

|                                 |                                 |               |              |              |                               |                               |                                 |
|---------------------------------|---------------------------------|---------------|--------------|--------------|-------------------------------|-------------------------------|---------------------------------|
| 12. <sup>03</sup> <del>02</del> | 13. <sup>63</sup> <del>31</del> | 14. <u>00</u> | 15. <u>T</u> | 16. <u>D</u> | 17. <del>X</del> <sup>L</sup> | 18. <del>Q</del> <sup>W</sup> | 19. <del>03</del> <sup>04</sup> |
|---------------------------------|---------------------------------|---------------|--------------|--------------|-------------------------------|-------------------------------|---------------------------------|

**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>072</u> | <u>000</u>         | <u>011</u>     | <u>010</u>     | <u>009</u>     | <u>007</u>     | <u>006</u>     | <u>±064</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.) 998  
 \_\_\_\_\_ 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) 072  
 \_\_\_\_\_ Code to the nearest centimeter  
 (250) 250 centimeters or more  
 (999) Unknown

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

29. Original Average Track Width 157  
 \_\_\_\_\_ Code to the nearest centimeter  
 (185) 185 centimeters or more  
 (999) Unknown  
61.9 inches X 2.54 = 157 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 7

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

39. Location of Fuel Tank-1 4

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

**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





# INTERIOR VEHICLE FORM

1. Primary Sampling Unit Number 77  
 2. Case Number - Stratum 138A  
 3. Vehicle Number 01

## INTEGRITY

4. Passenger Compartment Integrity 98  
 (00) No integrity loss

Yes, Integrity Was Lost Through

(01) Windshield  
 (02) Door (side)  
 (03) Door/hatch (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):  
01 / 06  
 (99) Unknown

Door, Tailgate or Hatch Opening

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

(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 Ø

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

(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 3 19. RR 3  
 20. BL 2 21. Roof Ø 22. Other 3

- (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?  
 (9) Unknown

Window Precrash Glazing Status

23. WS 1 24. LF 4 25. RF 4 26. LR 3 27. RR 3  
 28. BL 4 29. Roof 4 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 3 32. LF 1 33. RF 1 34. LR 1 35. RR 1  
 36. BL 1 37. Roof 2 38. Other 6

(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

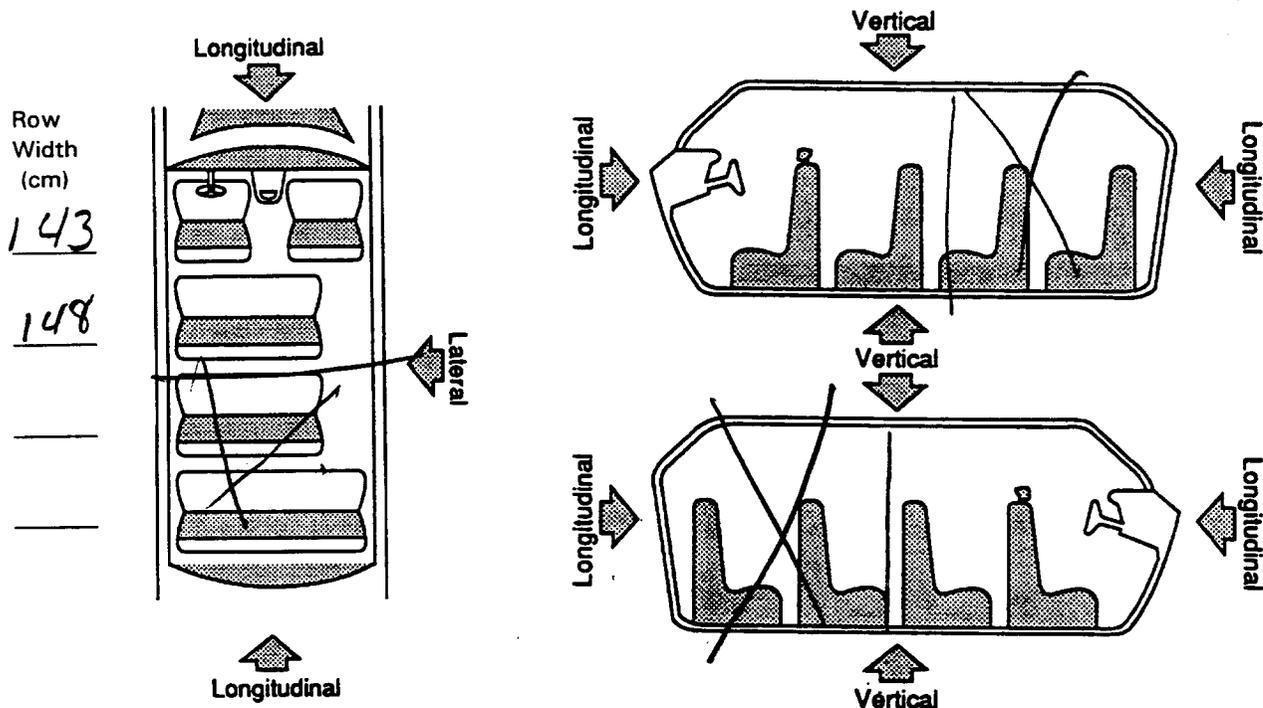
39. WS 3 40. LF 1 41. RF 1 42. LR 1 43. RR 1  
 44. BL 1 45. Roof 1 46. Other 1

(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

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# INTRUSION WORKSHEET

**NOTE: SKETCH INTRUDED AREAS**



| LOCATION OF INTRUSION | INTRUDED COMPONENT | (All Measurements Are in Centimeters) |   |                |         | DOMINANT CRUSH DIRECTION |
|-----------------------|--------------------|---------------------------------------|---|----------------|---------|--------------------------|
|                       |                    | COMPARISON VALUE                      | – | INTRUDED VALUE | =       |                          |
| 11                    | A                  | 0                                     | – | 38             | = 38 1  | lat                      |
| 11                    | B                  | 0                                     | – | 28             | = 28 2  | lat                      |
| 21                    | C                  | 0                                     | – | 27             | = 27 4  | lat                      |
| 9K                    | D                  | 0                                     | – | 28             | = 28 3  | lat                      |
| 11                    | Roof               | 0                                     | – | 25             | = 25 5  | Vert                     |
| 12                    | Roof               | 0                                     | – | 23             | = 23 6  | Vert                     |
| 13                    | Roof               | 0                                     | – | 18             | = 18 8  | Vert                     |
| 21                    | Roof               | 0                                     | – | 19             | = 19 7  | Vert                     |
| 22                    | Roof               | 0                                     | – | 15             | = 15 9  | Vert                     |
| 23                    | Roof               | 0                                     | – | 10             | = 16 10 | Vert                     |
|                       |                    |                                       | – |                | =       |                          |
|                       |                    |                                       | – |                | =       |                          |
|                       |                    |                                       | – |                | =       |                          |
|                       |                    |                                       | – |                | =       |                          |
|                       |                    |                                       | – |                | =       |                          |

## 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

|      | Location of Intrusion | Intruding Component | Magnitude of Intrusion | Dominant Crush Direction |
|------|-----------------------|---------------------|------------------------|--------------------------|
| 1st  | 47. <u>11</u>         | 48. <u>06</u>       | 49. <u>4</u>           | 50. <u>3</u>             |
| 2nd  | 51. <u>11</u>         | 52. <u>07</u>       | 53. <u>3</u>           | 54. <u>3</u>             |
| 3rd  | 55. <u>98</u>         | 56. <u>09</u>       | 57. <u>3</u>           | 58. <u>3</u>             |
| 4th  | 59. <u>21</u>         | 60. <u>08</u>       | 61. <u>3</u>           | 62. <u>3</u>             |
| 5th  | 63. <u>11</u>         | 64. <u>13</u>       | 65. <u>3</u>           | 66. <u>1</u>             |
| 6th  | 67. <u>12</u>         | 68. <u>13</u>       | 69. <u>3</u>           | 70. <u>1</u>             |
| 7th  | 71. <u>21</u>         | 72. <u>13</u>       | 73. <u>3</u>           | 74. <u>1</u>             |
| 8th  | 75. <u>13</u>         | 76. <u>13</u>       | 77. <u>3</u>           | 78. <u>1</u>             |
| 9th  | 79. <u>22</u>         | 80. <u>13</u>       | 81. <u>3</u>           | 82. <u>1</u>             |
| 10th | 83. <u>23</u>         | 84. <u>13</u>       | 85. <u>2</u>           | 86. <u>1</u>             |

### LOCATION OF INTRUSION

#### Front Seat

- (11) Left
- (12) Middle
- (13) Right

#### Second Seat

- (21) Left
- (22) Middle
- (23) Right

#### Third Seat

- (31) Left
- (32) Middle
- (33) Right

#### Fourth Seat

- (41) Left
- (42) Middle
- (43) Right

- (97) Catastrophic
- (98) Other enclosed area (specify)

- (99) Also 0106  
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

# STEERING RIM/SPOKE DEFORMATION

(All Measurements Are in Centimeters)

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

|  |   |  |   |  |
|--|---|--|---|--|
|  | — |  | = |  |
|  | — |  | = |  |
|  | — |  | = |  |
|  | — |  | = |  |
|  | — |  | = |  |

NONE  
FOUND

**STEERING COLUMN**

**INSTRUMENT PANEL**

87. Steering Column Type 2

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

88. Tilt Steering Column Adjustment 1

- (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 60

- 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

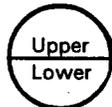
*Quarter Sections*

- (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 021,000

- \_\_\_\_\_ 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
- 13,281 miles X 1.6093 = 21,373 kilometers

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

93. Instrument Panel Damage from Occupant Contact? 0

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

94. Type of Knee Bolster Covering 2

- (0) No knee bolster
- (1) Padded
- (2) Rigid plastic
- (8) Other (specify): \_\_\_\_\_
- (9) Unknown

95. Knee Bolsters Deformed from Occupant Contact? 1

- (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

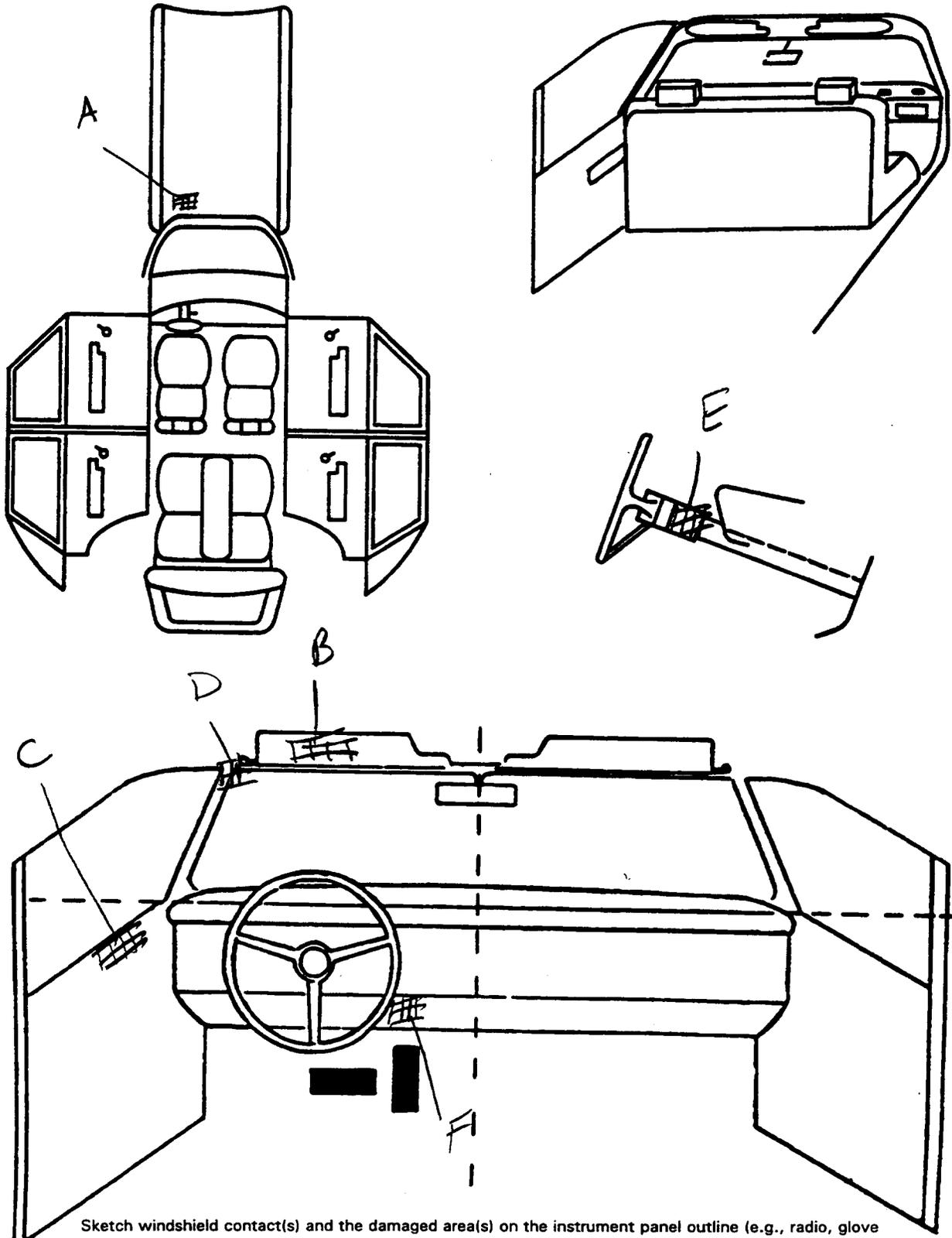
97. Adaptive (Assistive) Driving Equipment 0

- (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                 | Marked / Blood               | 1                                 |
| B       | 003                          | 01                    | Head                 | Bent / Marked                | 1                                 |
| C       | 051                          | 01                    | Trunk                | Dented                       | 1                                 |
| D       | 053                          | 01                    | Head                 | Marked / Bent Handle         | 1                                 |
| E       | 007                          | 01                    | Hand/Arm             | Trunk lever Broken           | 1                                 |
| F       | 010                          | 01                    | Knee                 | Marked / Transfer            | 1                                 |
| 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 11.

If the vehicle has automatic restraints available, encode the appropriate data on page 6.

|  |                        | Left | Center | Right |
|--|------------------------|------|--------|-------|
| <b>F<br/>I<br/>R<br/>S<br/>T</b>       | A-Availability         | 4    | /      | 4     |
|  | B-Evidence of usage    | 04   |        | 04    |
|  | C-Used in this crash?  | 04   |        | 00    |
|  | D-Proper Use           | 1    |        | 0     |
|  | E-Failure Modes        | 1    |        | 0     |
|  | F-Anchorage Adjustment | 1    |        | 1     |
| <b>S<br/>E<br/>C<br/>O<br/>N<br/>D</b> | A-Availability         | 4    | /      | 4     |
|  | B-Evidence of usage    | 04   |        | 04    |
|  | C-Used in this crash?  | 00   |        | 00    |
|  | D-Proper Use           | 0    |        | 0     |
|  | E-Failure Modes        | 0    |        | 0     |
|  | F-Anchorage Adjustment | 1    |        | 1     |
| <b>O<br/>T<br/>H<br/>E<br/>R</b>       | A-Availability         | /    |        |       |
|  | B-Evidence of usage    | /    |        |       |
|  | C-Used in this crash?  | /    |        |       |
|  | D-Proper Use           | /    |        |       |
|  | E-Failure Modes        | /    |        |       |
|  | F-Anchorage Adjustment | /    |        |       |

**A-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

**B/C-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

**D-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

**E-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

**F-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

|                       |                       | Frontal Air Bags--Left Front | Frontal Air Bags-Right Front | Other Air Bag |
|-----------------------|-----------------------|------------------------------|------------------------------|---------------|
| F<br>I<br>R<br>S<br>T | Availability/Function | /                            | /                            | /             |
|                       | Deployment            | /                            | /                            | /             |
|                       | Failure               | /                            | /                            | /             |

- |   |  |   |
|---|--|---|
| <p><b>Air Bag System Availability/Function</b></p> <ul style="list-style-type: none"> <li>(0) Not equipped/not available</li> <li>(1) Air bag</li> </ul> <p><i>Non-functional</i></p> <ul style="list-style-type: none"> <li>(2) Air bag disconnected (specify): _____</li> <li>(3) Air bag not reinstalled</li> <li>(9) Unknown</li> </ul> | <p><b>Air Bag System Deployment (This Occupant Position)</b></p> <ul style="list-style-type: none"> <li>(0) Not equipped/not available</li> <li>(1) Deployed during accident (as a result of impact)</li> <li>(2) Deployed inadvertently just prior to accident</li> <li>(3) Deployed, accident sequence undetermined</li> <li>(4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)</li> <li>(5) Unknown if deployed</li> <li>(7) Nondeployed</li> <li>(9) Unknown</li> </ul> | <p><b>Are There Indications of Air Bag System Failure? (This Occupant Position)</b></p> <ul style="list-style-type: none"> <li>(0) Not equipped/not available</li> <li>(1) No</li> <li>(2) Yes (specify): _____</li> <li>(9) Unknown</li> </ul> |
|---|--|---|

#### AUTOMATIC BELTS

|                       |                         | Left | Right |
|-----------------------|-------------------------|------|-------|
| F<br>I<br>R<br>S<br>T | A-Availability/Function | /    | /     |
|                       | B-Use                   | /    | /     |
|                       | C-Type                  | /    | /     |
|                       | D-Proper Use            | /    | /     |
|                       | E-Failure Modes         | /    | /     |

- |  |   |  |
|--|---|--|
| <p><b>A-Automatic (Passive) Belt System Availability/Function</b></p> <ul style="list-style-type: none"> <li>(0) Not equipped/not available</li> <li>(1) 2 point automatic belts</li> <li>(2) 3 point automatic belts</li> <li>(3) Automatic belts - type unknown</li> </ul> <p><i>Non-functional</i></p> <ul style="list-style-type: none"> <li>(4) Automatic belts destroyed or rendered inoperative</li> <li>(9) Unknown</li> </ul> | <p><b>D-Proper Use of Automatic (Passive) Belt System</b></p> <ul style="list-style-type: none"> <li>(0) Not equipped/not available/not used</li> <li>(1) Automatic belt used properly</li> <li>(2) Automatic belt used properly with child safety seat</li> </ul> <p><i>Automatic Belt Used Improperly</i></p> <ul style="list-style-type: none"> <li>(3) Automatic shoulder belt worn under arm</li> <li>(4) Automatic shoulder belt worn behind back</li> <li>(5) Automatic belt worn around more than one person</li> <li>(6) Lap portion of automatic belt worn on abdomen</li> <li>(7) Automatic lap and shoulder belt or automatic shoulder belt used improperly with child safety seat (specify): _____</li> <li>(8) Other improper use of automatic belt system (specify): _____</li> <li>(9) Unknown</li> </ul> | <p><b>E-Automatic (Passive) Belt Failure Modes During Accident</b></p> <ul style="list-style-type: none"> <li>(0) Not equipped/not available/not in use</li> <li>(1) No automatic belt failure(s)</li> <li>(2) Torn webbing (stretched webbing not included)</li> <li>(3) Broken buckle or latchplate</li> <li>(4) Upper anchorage separated</li> <li>(5) Other anchorage separated (specify): _____</li> <li>(6) Broken retractor</li> <li>(7) Combination of above (specify): _____</li> <li>(8) Other automatic belt failure (specify): _____</li> <li>(9) Unknown</li> </ul> |
|--|---|--|

- C-Automatic (Passive) Belt System Type**
- (0) Not equipped/not available
  - (1) Non-motorized system
  - (2) Motorized system
  - (9) Unknown

## 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 |
|-----------------------------------|--------|-----------|
| A-Type of air bag?                | 1      |           |
| B-Flaps open at tear points?      | 7      |           |
| C-Flaps damaged?                  | 7      |           |
| D-Air bag damaged?                | 97     |           |
| E-Source of air bag damage        | 97     |           |
| F-Air bag tethered?               | 7      |           |
| G-Air bag have vent ports?        | 7      |           |
| H-Other occupant contact air bag? | 7      |           |
| I-Occupant wearing eyewear?       | 7      |           |

**A-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

**B-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

**C-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

**D-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

**E-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

**F-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

**G-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

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

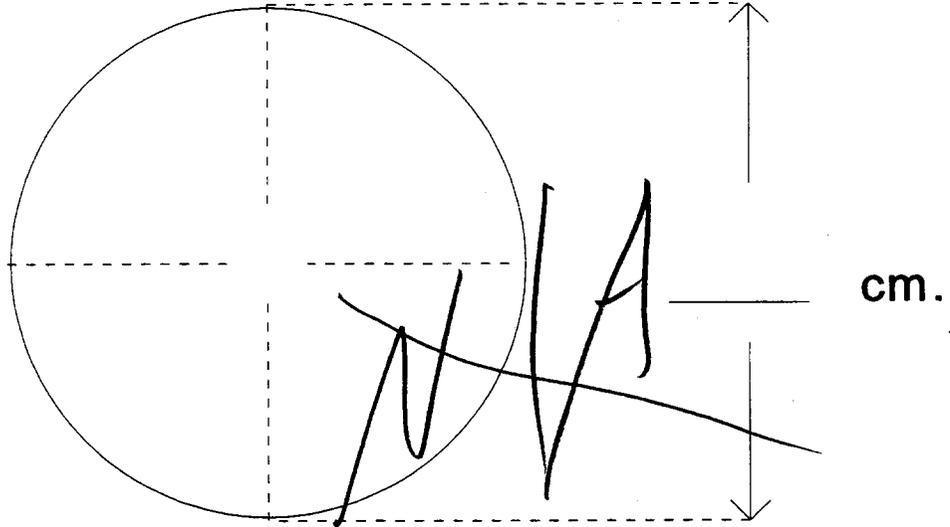
- (0) Not equipped/not available
- (1) No
- (2) Yes (specify): \_\_\_\_\_
- (3) Deployed, unknown if other occupant contact to air bag
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

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

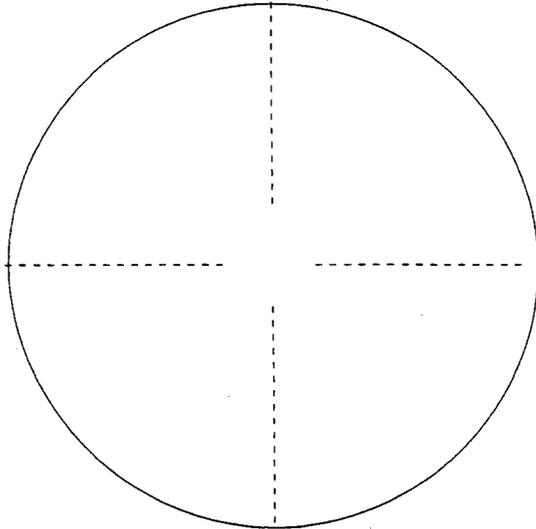
- (0) Not equipped/not available
- (1) No
- (2) Eyeglasses/sunglasses
- (3) Contact lenses
- (4) Deployed, unknown if eyewear worn
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

**DRIVER AIR BAG DAMAGE AND CONTACT SKETCHES**

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



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

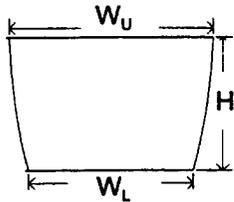


*no  
deposited*

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

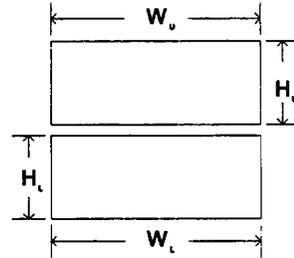
**3. DRIVER AIR BAG MODULE COVER FLAP SIZE (SINGLE)**

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

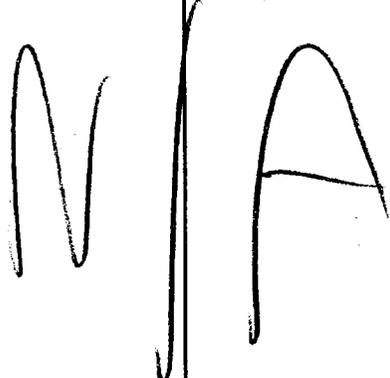


**4. DRIVER AIR BAG MODULE COVER FLAP SIZE (DOUBLE)**

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



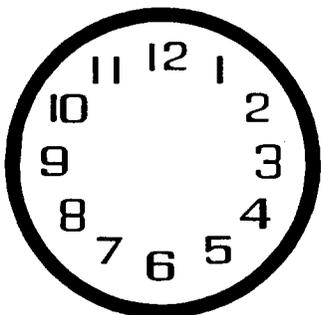
**5. SKETCH OF OTHER TYPE OF AIR BAG MODULE FLAP AND SIZE**



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

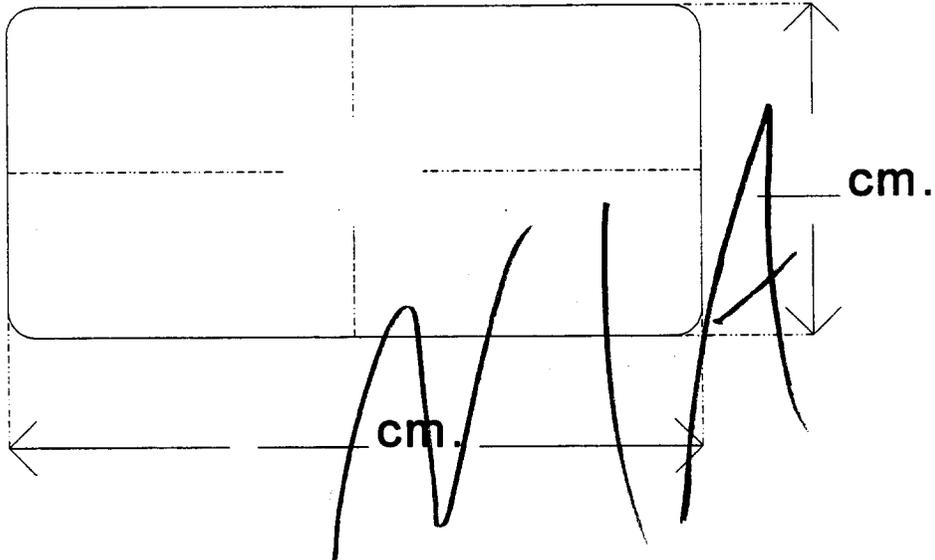


**7. SKETCH LOCATION OF CIRCULAR AIR BAG VENT PORTS**

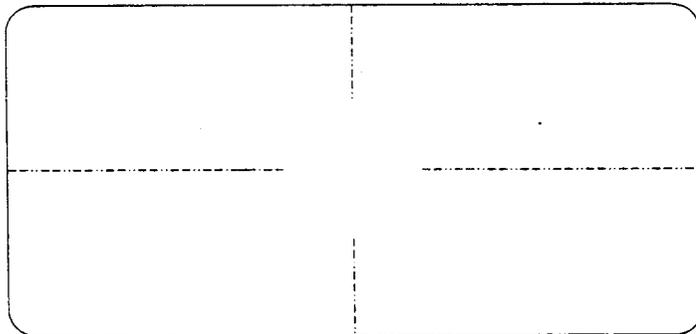


PASSENGER AIR BAG DAMAGE AND CONTACT SKETCHES

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



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

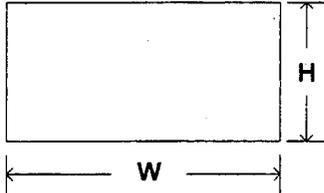


**PASSENGER AIR BAG SKETCHES (Cont'd)**

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

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

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



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

a. Upper Flap

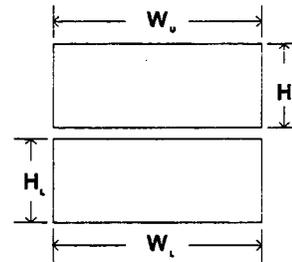
b. Lower Flap

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

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

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

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

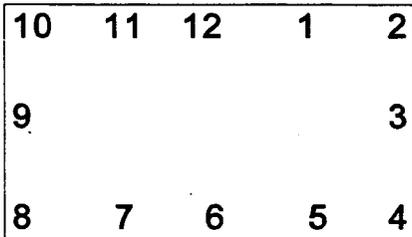


**5. SKETCH OF OTHER TYPE OF AIR BAG MODULE FLAP AND SIZE**

**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)

Handwritten text "N/A" in black ink, indicating no damage or contact evidence was observed on the front air bag.

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**

**A-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

**B-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) Box mounted seat (i.e., van type)
- (10) Other seat type (specify): \_\_\_\_\_
- (99) Unknown

**C-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

**D-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

**E-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**

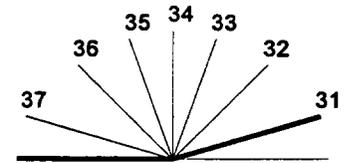
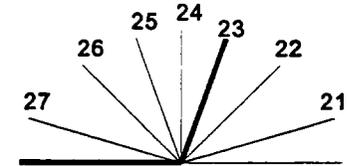
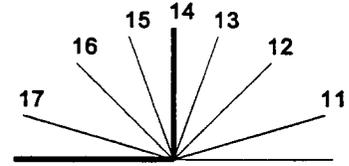
- (21) Moved to completely rearward position
- (22) Moved to rearward midrange position
- (23) Retained pre-impact position
- (24) Moved to upright position
- (25) Moved to slightly forward position
- (26) Moved to forward midrange position
- (27) Moved to completely forward position

**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

**F-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



Coding diagrams for Seat Back Incline Position Prior and Post Impact

## 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 |  |  | NFA |  |  |  |
| 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)<br>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 on vehicle interior sketch)



# OCCUPANT ASSESSMENT FORM

1. Primary Sampling Unit Number 22  
 2. Case Number - Stratum 138A  
 3. Vehicle Number 01  
 4. Occupant Number 01

## OCCUPANT'S CHARACTERISTICS

5. Occupant's Age 27  
 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 999  
 Code actual height to the nearest  
 centimeter.  
 (999) Unknown  
 \_\_\_\_\_ inches X 2.54 = \_\_\_\_\_ centimeters

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

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

## 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 9  
 (0) Normal posture

*Abnormal posture*  
 (1) Kneeling or standing on seat  
 (2) Lying on or across seat  
 (3) Kneeling, standing or sitting in front of seat  
 (4) Sitting sideways or turned to talk with  
 another occupant or to look out a rear  
 window  
 (5) Sitting on a console  
 (6) Lying back in a reclined seat position  
 (7) Bracing with feet or hands on a surface in  
 front of seat  
 (8) Other abnormal posture (specify): \_\_\_\_\_  
 (9) Unknown

**EJECTION/ENTRAPMENT**

12. Ejection 0

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

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 9

- (0) Occupant fatal before removed from vehicle
- (1) Removed from vehicle while unconscious or not oriented to time or place
- (2) Removed from vehicle due to perceived serious injuries
- (3) Exited vehicle with some assistance
- (4) Exited vehicle under own power
- (5) Occupant fully ejected
- (8) Removed from vehicle for other reasons  
(specify): \_\_\_\_\_
- (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. Manual Shoulder Belt Upper Anchorage Adjustment 1
- (0) No manual shoulder belt  
 (1) No upper anchorage adjustment for manual 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 5
- (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 9
- (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.

- Vehicle inspection
- Official injury data
- Driver/occupant interview
- Other (specify):

Unknown if belt used

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

30. Frontal Air Bag System Availability/Function (This Occupant Position) 1
- (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) 7
- (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) 1
- (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)? 9

- (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 9

- (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? 9

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

(9) Unknown

38. Air Bag Deployment Accident Event Sequence Number 9 7

- (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 7

- (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 + 9 9 7

- (\_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? 7

- (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? 7

- (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? 9 7

- (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 97

- (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? 7

- (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? 7

- (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? 7

- (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? 7

- (0) Not air bag equipped/air bag 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) 01

- (00) Occupant not seated or no seat  
 (01) Bucket  
 (02) Bucket with folding back  
 (03) Bench  
 (04) Bench with separate back cushions  
 (05) Bench with folding back(s)  
 (06) Split bench with separate back cushions  
 (07) Split bench with folding back(s)  
 (08) Pedestal (i.e., column supported)  
 (09) 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 5

- (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

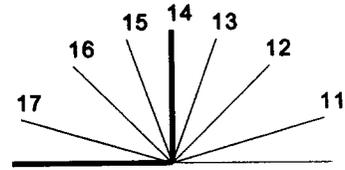
**HEAD RESTRAINT AND SEAT EVALUATION *continued***

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

23

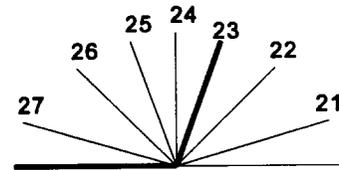
***Upright prior to impact***

- (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



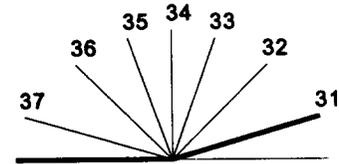
***Slightly reclined prior to impact***

- (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 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) 4

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

62. Treatment - Mortality 1

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

*Nonfatal*

- (3) Hospitalization
- (4) Transported and released
- (5) Treatment at scene - nontransported
- (6) Treatment later
- (7) Treatment - other (specify):  
\_\_\_\_\_
- (8) Transported to a medical facility-unknown if treated
- (9) Unknown

63. Type Of Medical Facility (for Initial Treatment) 1

- (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 62

- \_\_\_\_\_ 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

**EMERGENCY RESPONSE INFORMATION**

EMS Notification

- (1) Not notified ROAD VEHICLE
- (2) Notified AIR VEHICLE
- (9) Unknown

EMS Notification Time (first unit)

- (9999) Unknown ROAD VEHICLE
- AIR VEHICLE

EMS Arrival Time (first unit)

- (9998) EMS cancelled or did not arrive ROAD VEHICLE
- (9999) Unknown AIR VEHICLE

EMS Departure Time To

- Treatment Facility (transporting unit) ROAD VEHICLE
- (9997) EMS arrived, provided treatment, but did not transport AIR VEHICLE
- (9998) EMS arrived, but was not used
- (9999) Unknown

EMS Arrival Time At Treatment Facility

- (9999) Unknown ROAD VEHICLE
- AIR VEHICLE

EMS Type

- (01) Fire department FIRST UNIT TRANSPORTING UNIT
- (02) Rescue squad ROAD VEHICLE
- (03) Police department
- (04) Trauma unit AIR VEHICLE
- (05) Disaster unit
- (06) Ambulance service unit
- (07) Hospital
- (08) Mortuaries/funeral homes
- (98) Other, specify: \_\_\_\_\_
- (99) Unknown

EMS Care

- (01) No care administered ON-SCENE DURING TRANSPORT
- (02) First aid ROAD VEHICLE
- (03) Resuscitation
- (04) CPR AIR VEHICLE
- (05) Emergency cardiac care
- (06) Life support system monitoring (blood pressure, pulse rate, respiration, EKG)
- (07) Emergency burn care
- (08) Combination of above, specify: \_\_\_\_\_
- (98) Other, specify: \_\_\_\_\_
- (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 99  
 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 03

68. 2nd Medically Reported Cause of Death 04

69. 3rd Medically Reported Cause of Death 02  
 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 13  
 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>72</u> | 3. Vehicle Number <u>01</u>  |
| 2. Case Number - Stratum <u>138A</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.

|      | A.I.S. - 90           |             |                            |                             |                 |                 |        |               |                         |                         | Injury Source Confidence Level | Direct/ Indirect Injury | Occupant Area Intrusion Number |
|------|-----------------------|-------------|----------------------------|-----------------------------|-----------------|-----------------|--------|---------------|-------------------------|-------------------------|--------------------------------|-------------------------|--------------------------------|
|      | Source of Injury Data | Body Region | Type of Anatomic Structure | Specific Anatomic Structure | Level of Injury | A.I.S. Severity | Aspect | Injury Source | Injury Confidence Level | Direct/ Indirect Injury |                                |                         |                                |
| 1st  | 5. 1                  | 6. 1        | 7. 5                       | 8. 04                       | 9. 04           | 10. 3           | 11. 2  | 12. 205       | 13. 1                   | 14. 1                   | 15. 05                         |                         |                                |
| 2nd  | 16. 1                 | 17. 1       | 18. 5                      | 19. 02                      | 20. 06          | 21. 4           | 22. 8  | 23. 205       | 24. 1                   | 25. 1                   | 26. 05                         |                         |                                |
| 3rd  | 27. 1                 | 28. 1       | 29. 4                      | 30. 06                      | 31. 54          | 32. 5           | 33. 3  | 34. 205       | 35. 1                   | 36. 1                   | 37. 05                         |                         |                                |
| 4th  | 38. 1                 | 39. 1       | 40. 4                      | 41. 02                      | 42. 02          | 43. 5           | 44. 8  | 45. 205       | 46. 1                   | 47. 1                   | 48. 05                         |                         |                                |
| 5th  | 49. 1                 | 50. 1       | 51. 4                      | 52. 04                      | 53. 30          | 54. 4           | 55. 6  | 56. 205       | 57. 1                   | 58. 1                   | 59. 05                         |                         |                                |
| 6th  | 60. 1                 | 61. 7       | 62. 9                      | 63. 02                      | 64. 02          | 65. 1           | 66. 1  | 67. 004       | 68. 1                   | 69. 1                   | 70. 00                         |                         |                                |
| 7th  | 71. 1                 | 72. 8       | 73. 9                      | 74. 02                      | 75. 02          | 76. 1           | 77. 3  | 78. 010       | 79. 1                   | 80. 1                   | 81. 00                         |                         |                                |
| 8th  | 82. 1                 | 83. 8       | 84. 9                      | 85. 06                      | 86. 02          | 87. 1           | 88. 1  | 89. 007       | 90. 1                   | 91. 1                   | 92. 00                         |                         |                                |
| 9th  | 93. 1                 | 94. 2       | 95. 9                      | 96. 06                      | 97. 02          | 98. 1           | 99. 7  | 100. 010      | 101. 2                  | 102. 1                  | 103. 00                        |                         |                                |
| 10th | 104. 1                | 105. 2      | 106. 9                     | 107. 02                     | 108. 02         | 109. 1          | 110. 7 | 111. 010      | 112. 2                  | 113. 1                  | 114. 00                        |                         |                                |



**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.<br><br>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              |
| <b>Type of Anatomic Structure</b>       | <b>Whole Area</b>                  |   |                               |
| (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 |   |                               |
|   | <b>Head - LOC</b>                  |   |                               |
|   | (02) Length of LOC                 |   |                               |
|   | (04) Level                         |   |                               |
|   | (06) of                            |   |                               |
|   | (08) Consciousness                 |   |                               |
|   | (10) Concussion                    |   |                               |
|   | <b>Spine</b>                       |   |                               |
|   | (02) Cervical                      |   |                               |
|   | (04) Thoracic                      |   |                               |
|   | (06) Lumbar                        |   |                               |

| SOURCE OF INJURY DATA   | INJURY SOURCE CONFIDENCE LEVEL  | DIRECT/INDIRECT INJURY  |
|---|---|---|
| <p><b>OFFICIAL RECORDS</b></p> <p>(1) Autopsy records with or without hospital/medical records</p> <p>(2) Hospital/medical records other than emergency room (e.g., discharge summary)</p> <p>(3) Emergency room records only (including associated X-rays or other lab reports)</p> <p>(4) Private physician, walk-in or emergency clinic</p> <p><b>UNOFFICIAL RECORDS</b></p> <p>(5) Lay coroner report</p> <p>(6) E.M.S. personnel</p> <p>(7) Interviewee</p> <p>(8) Other source (specify): _____</p> <p>(9) Police</p> | <p>(1) Certain</p> <p>(2) Probable</p> <p>(3) Possible</p> <p>(9) Unknown</p> | <p>(1) Direct contact injury</p> <p>(2) Indirect contact injury</p> <p>(3) Noncontact injury</p> <p>(7) Injured, unknown source</p> |

## 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.)

Restrained?

- No
- Yes

Blood Alcohol Level (mg/dl)

BAL =       

Glasgow Coma Scale Score

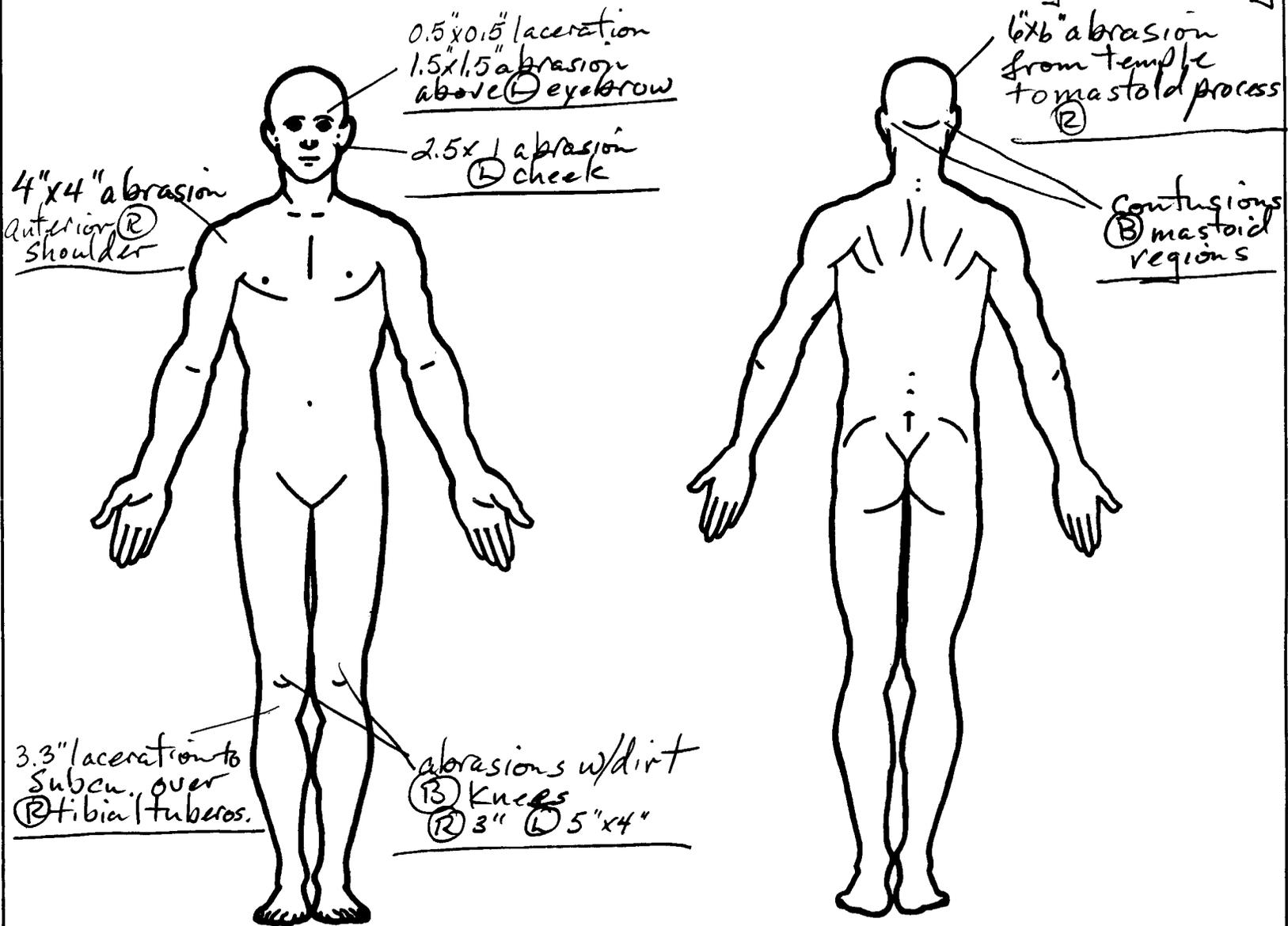
GCSS = 02

Units of Blood Given

Units = 0

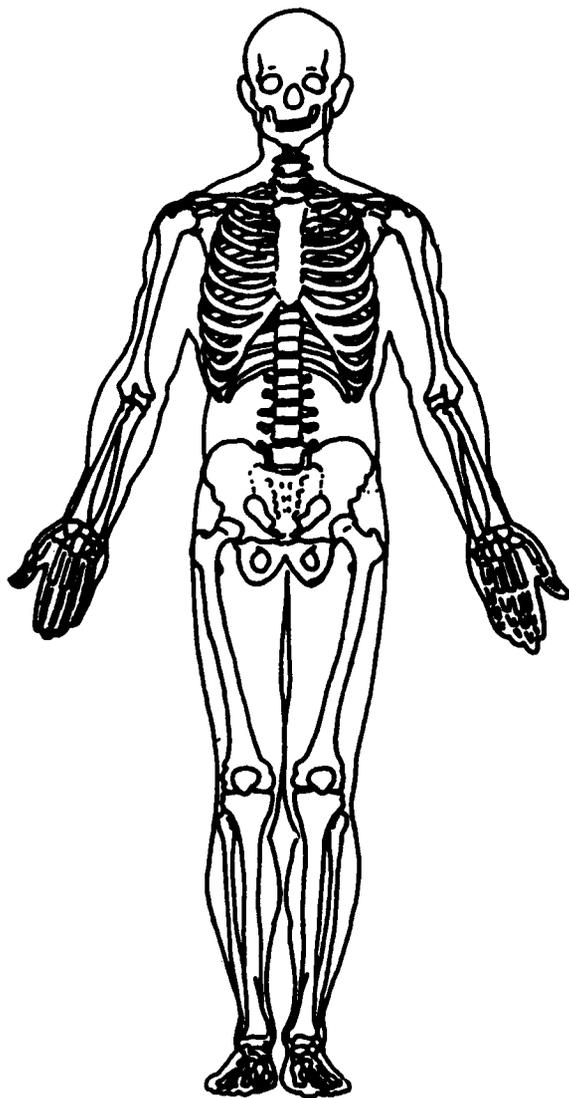
Arterial Blood Gases

pH =      
 PO<sub>2</sub> =      
 PCO<sub>2</sub> =      
 HCO<sub>3</sub> =    

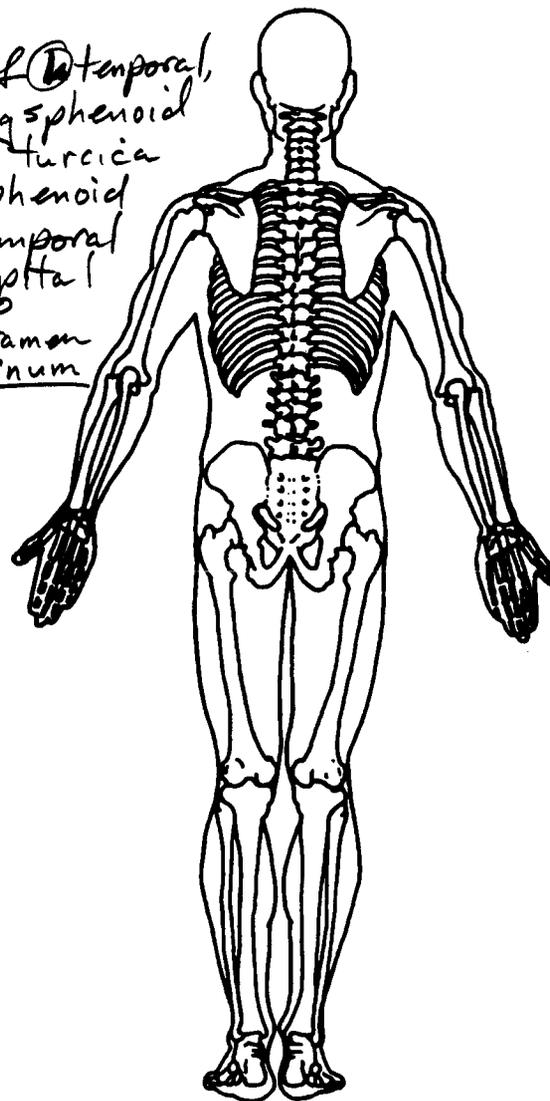


# OFFICIAL INJURY DATA — SKELETAL INJURIES

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.)

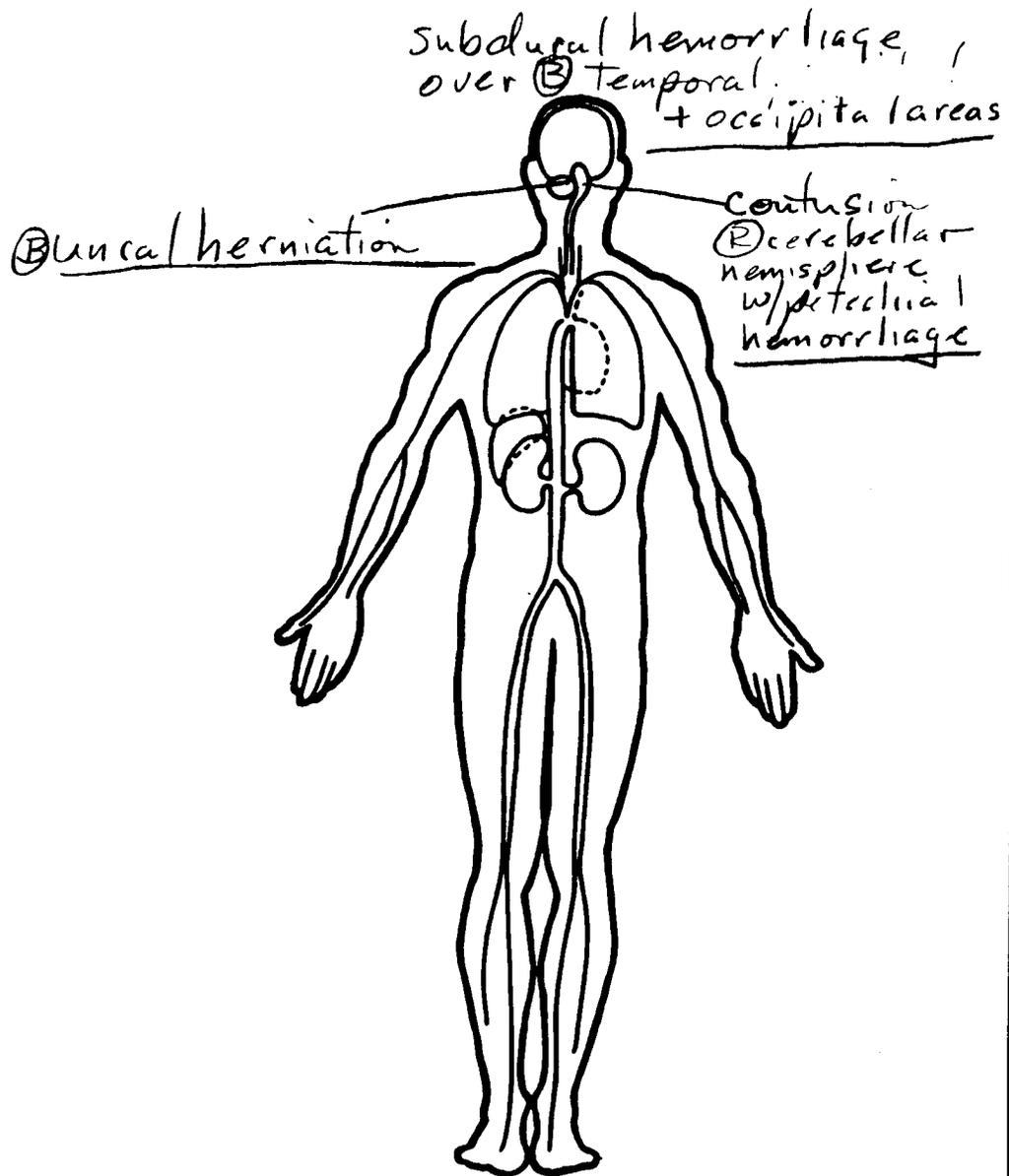
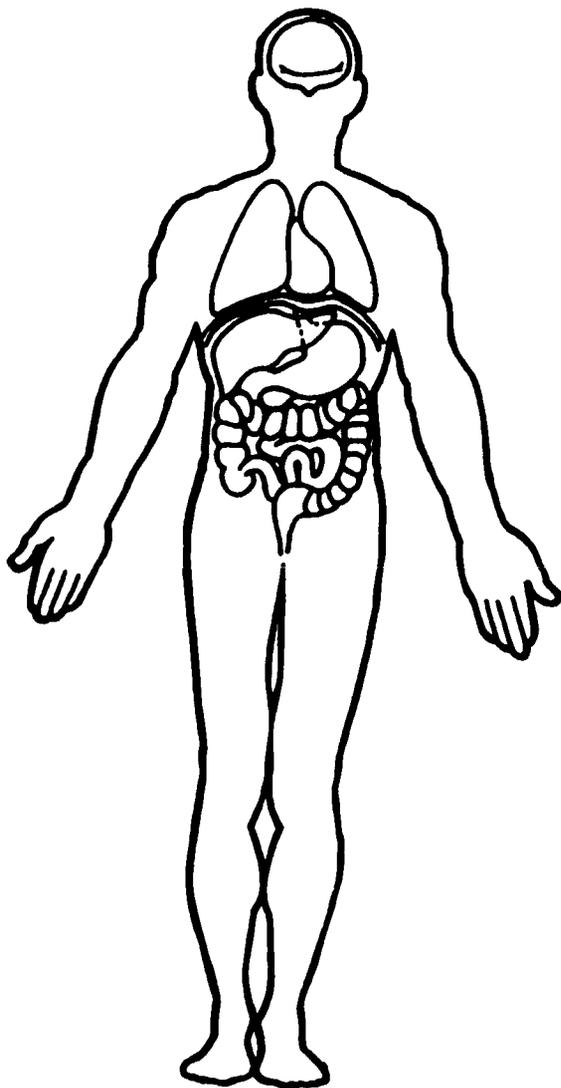


Lx of (L) temporal,  
(L) wing sphenoid  
Sella turcica  
(R) sphenoid  
(L) temporal  
occipital  
into  
foramen  
magnum



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.)



**PRECRASH ENVIRONMENTAL DATA**

19. Relation To Interchange Or Junction 2
- (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 3
- (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 1
- (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 3
- (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 0 1  
 (00-96) Code actual number of occupants for this vehicle  
 (97) 97 or more  
 (99) Unknown
- 39. Number of Occupant Forms Submitted 0 1

**AIR BAG RELATED**

- 40. Is this an AOPS Vehicle? 3  
 (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 1,260  
 Code weight to nearest 10 kilograms.  
 (045) Less than 454 kilograms  
 (612) 6,124 kilograms or more  
 (999) Unknown  
2,777 lbs X .4536 = 1,260 kgs

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

- 44. Vehicle Cargo Weight 9,990  
 Code weight to nearest 10 kilograms.  
 (000) Less than 5 kilograms  
 (454) 4,536 kilograms or more  
 (999) Unknown  
 \_\_\_\_\_ lbs X .4536 = \_\_\_\_\_ kgs

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

**ROLLOVER DATA**

- 45. Rollover 0 0  
 (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 0 0  
 (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 0 0  
 (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 \_\_\_\_\_

**OVERRIDE/UNDERRIDE (THIS VEHICLE)**

51. Front Override/Underride (this Vehicle) 0
52. Rear Override/Underride (this Vehicle) 0  
 (0) No override/underride, or not an end-to-end impact between two CDS applicable vehicles, and no medium/heavy truck or bus underride
- Override (see specific CDC)*  
*[Between 2 CDS applicable vehicles (Bodytype, GV07 = 1-49)]*  
 (1) 1st CDC  
 (2) 2nd CDC  
 (3) Other not automated CDC (specify):  
 \_\_\_\_\_
- Underride (see specific CDC)*  
*[Between 2 CDS applicable vehicles (Bodytype, GV07 = 1-49)]*  
 (4) 1st CDC  
 (5) 2nd CDC  
 (6) Other not automated CDC (specify):  
 \_\_\_\_\_
- (7) Medium/heavy truck or bus override (of any configuration)  
 (9) Unknown

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

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

53. Heading Angle For This Vehicle 090
54. Heading Angle For Other Vehicle 180

**RECONSTRUCTION DATA**

55. Towed Trailing Unit 0  
 (0) No towed unit  
 (1) Yes—towed trailing unit  
 (9) Unknown
56. Documentation of Trajectory Data for This Vehicle 0  
 (0) No  
 (1) Yes
57. Post Collision Condition of Tree or Pole (For Highest Delta V) 0  
 (0) Not collision (for highest delta V) with tree or pole  
 (1) Not damaged  
 (2) Cracked/sheared  
 (3) Tilted < 45 degrees  
 (4) Tilted ≥ 45 degrees  
 (5) Uprooted tree  
 (6) Separated pole from base  
 (7) Pole replaced  
 (8) Other (specify):  
 \_\_\_\_\_  
 (9) Unknown

**ACCIDENT RECONSTRUCTION PROGRAMS HIGHEST DELTA V**

58. Basis for Total (Resultant) Delta V (highest) 03  
00  
 (00) No vehicle inspection

- Delta V Calculated*  
 (01) Reconstruction program-damage only routine  
 (02) Reconstruction program-damage and trajectory routine  
 (03) Missing vehicle algorithm

- Delta V Not Calculated*  
 (04) At least one vehicle (which may be this vehicle) is beyond the scope of an acceptable reconstruction program, regardless of collision conditions.

*All vehicles within scope (CDC applicable) of reconstruction program but one of the collision conditions is beyond the scope of the reconstruction program or other acceptable reconstruction technique, regardless of adequacy of damage data.*

- (05) Rollover  
 (06) Other non-horizontal forces  
 (07) Sideswipe type damage  
 (08) Severe override  
 (09) Yielding object  
 (10) Overlapping damage  
 (11) All vehicle and collision conditions are within scope of one of the acceptable reconstruction programs, but there is insufficient data available, (specify):  
 \_\_\_\_\_  
 \_\_\_\_\_

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

**COMPUTER GENERATED CRASH SEVERITY**

59. Total Delta V Highest

10 ~~010~~ Nearest kmph (highest) 999  
 \_\_\_\_\_ Nearest kmph (secondary)

(NOTE: 000 means less than 0.5 kmph)  
 (160) 159.5 kmph and above  
 (999) Unknown

60. Longitudinal Component of Delta V Highest

+ ~~0009~~ Nearest kmph (highest) 999  
 \_\_\_\_\_ Nearest kmph (secondary)

(NOTE: 000 means greater than -0.5 kmph and less than +0.5 kmph)  
 (±160) ±159.5 kmph and above  
 (999) Unknown

61. Lateral Component of Delta V Highest

+ ~~0002~~ 999 Nearest kmph (highest) Highest  
 \_\_\_\_\_ Nearest kmph (secondary)

(NOTE: 000 means greater than -0.5 kmph and less than +0.5 kmph)  
 (±160) ±159.5 kmph and above  
 (999) Unknown

62. Energy Absorption Highest

3577 ~~003600~~ Nearest 100 joules (highest)  
 \_\_\_\_\_ Nearest 100 joules (secondary)

(NOTE: 0000 means less than 50 joules)  
 (9997) 999,650 joules or more  
 (9999) Unknown

63. Impact Speed Highest

999 ~~999~~ Nearest kmph (highest) 999  
 \_\_\_\_\_ Nearest kmph (secondary)

(NOTE: 000 means less than 0.5 kmph)  
 (160) 159.5 kmph and above  
 (998) Trajectory algorithm not run  
 (999) Unknown

**DELTA V CONFIDENCE LEVEL**

64. Confidence In Reconstruction Program Results (For Highest Delta V) 0 4

- (0) No reconstruction
- (1) Collision fits model — results appear reasonable
- (2) Collision fits model — results appear high
- (3) Collision fits model — results appear low
- (4) Borderline reconstruction — results appear reasonable

**OTHER SPEED ESTIMATE**

65. Barrier Equivalent Speed Highest

80 ~~008~~ Nearest kmph (highest) 999  
 \_\_\_\_\_ Nearest kmph (secondary)

(NOTE: 000 means less than 0.5 kmph)  
 (160) 159.5 kmph and above  
 (999) Unknown

| ESTIMATED DELTA V   | INSPECTION TYPE   |
|---|---|
| <p>66. Estimated Highest Delta V (Researcher Determined) <span style="float: right; margin-right: 20px;">9 <del>0</del></span><br/>                     (0) Reconstruction Delta V coded</p> <p><i>Estimated Delta V</i></p> <p>(1) Less than 10 kmph<br/>                     (2) ≥ 10 kmph but &lt; 25 kmph<br/>                     (3) ≥ 25 kmph but &lt; 40 kmph<br/>                     (4) ≥ 40 kmph but &lt; 55 kmph<br/>                     (5) ≥ 55 kmph</p> <p><i>Other estimates of damage severity</i></p> <p>(6) Minor<br/>                     (7) Moderate<br/>                     (8) Severe</p> <p>(9) Unknown</p> | <p>67. Type of Vehicle Inspection <span style="float: right;">0</span><br/>                     (0) No inspection<br/>                     (1) Vehicle fully repaired-no damage evident<br/>                     (2) Partial inspection (specify): _____<br/>                     (3) Complete inspection</p> |
| DELTA V EVENT NUMBER  |   |
| <p>68. Delta V Event Number <span style="float: right;">99 <del>01</del></span><br/>                     _____ Code the accident event sequence number that resulted in the Delta V that has been coded above for this vehicle<br/>                     (99) Unknown</p>  |   |

**\*\*\* IF THE CDS APPLICABLE VEHICLE WAS NOT INSPECTED (I.E., GV67 = 0), \*\*\***

**DO NOT COMPLETE THE EXTERIOR AND INTERIOR VEHICLE FORMS**

**\*\*\* IF GV07 DOES NOT EQUAL 01-49, DO NOT COMPLETE \*\*\***

**THE EXTERIOR VEHICLE, INTERIOR VEHICLE,  
 OCCUPANT ASSESSMENT, AND OCCUPANT INJURY FORMS.**

PSU NUMBER

72

CASE NUMBER

138A

VEHICLE NUMBER

02

# EXTERIOR VEHICLE FORM

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

ENTIRE FORM

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

|                |             |
|----------------|-------------|
| PSU NUMBER     | <u>72</u>   |
| CASE NUMBER    | <u>138A</u> |
| VEHICLE NUMBER | <u>02</u>   |

# INTERIOR VEHICLE FORM

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

- ENTIRE FORM
- PAGE NUMBER (S) \_\_\_\_\_

# OCCUPANT ASSESSMENT FORM

1. Primary Sampling Unit Number 72  
 2. Case Number - Stratum 138A  
 3. Vehicle Number 02  
 4. Occupant Number 01

## 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 999  
 Code actual height to the nearest  
 centimeter.  
 (999) Unknown  
 \_\_\_\_\_ inches X 2.54 = \_\_\_\_\_ centimeters

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

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

## 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 9  
 (0) Normal posture

*Abnormal posture*  
 (1) Kneeling or standing on seat  
 (2) Lying on or across seat  
 (3) Kneeling, standing or sitting in front of seat  
 (4) Sitting sideways or turned to talk with  
 another occupant or to look out a rear  
 window  
 (5) Sitting on a console  
 (6) Lying back in a reclined seat position  
 (7) Bracing with feet or hands on a surface in  
 front of seat  
 (8) Other abnormal posture (specify): \_\_\_\_\_  
 (9) Unknown

## EJECTION/ENTRAPMENT

12. Ejection 0

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

13. Ejection Area 0

- (0) No ejection
- (1) Windshield
- (2) Left front
- (3) Right front
- (4) Left rear
- (5) Right rear
- (6) Rear
- (7) Roof
- (8) Other area (e.g., back of pickup, etc.)  
(specify): \_\_\_\_\_
- (9) Unknown

14. Ejection Medium 0

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

15. Medium Status (Immediately Prior To Impact) 0

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

16. Entrapment 0

- (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 9

- (0) Occupant fatal before removed from vehicle
- (1) Removed from vehicle while unconscious or not oriented to time or place
- (2) Removed from vehicle due to perceived serious injuries
- (3) Exited vehicle with some assistance
- (4) Exited vehicle under own power
- (5) Occupant fully ejected
- (8) Removed from vehicle for other reasons  
(specify): \_\_\_\_\_
- (9) Unknown

## BELT SYSTEM FUNCTION

- |  |   |
|--|---|
| <p>18. Manual (Active) Belt System Availability <u>9</u></p> <p>(0) None available<br/>           (1) Belt removed/destroyed<br/>           (2) Shoulder belt<br/>           (3) Lap belt<br/>           (4) Lap and shoulder belt<br/>           (5) Belt available—type unknown</p> <p><i>Integral Belt Partially Destroyed</i><br/>           (6) Shoulder belt (lap belt destroyed/removed)<br/>           (7) Lap belt (shoulder belt destroyed/removed)<br/>           (8) Other belt (specify):<br/>           _____</p> <p>(9) Unknown</p>   | <p>22. Manual Shoulder Belt Upper Anchorage Adjustment <u>9</u></p> <p>(0) No manual shoulder belt<br/>           (1) No upper anchorage adjustment for manual shoulder belt</p> <p><i>Adjustable shoulder Belt Upper Anchorage</i><br/>           (2) In full up position<br/>           (3) In mid position<br/>           (4) In full down position<br/>           (5) Position unknown<br/>           (9) Unknown if position has adjustable upper anchorage adjustment</p>   |
| <p>19. Manual (Active) Belt System Use <u>9 9</u></p> <p>(00) None used, not available, or belt removed/destroyed<br/>           (01) Inoperative (specify):<br/>           _____</p> <p>(02) Shoulder belt<br/>           (03) Lap belt<br/>           (04) Lap and shoulder belt<br/>           (05) Belt used—type unknown<br/>           (08) Other belt used (specify):<br/>           _____</p> <p>(12) Shoulder belt used with child safety seat<br/>           (13) Lap belt used with child safety seat<br/>           (14) Lap and shoulder belt used with child safety seat<br/>           (15) Belt used with child safety seat—type unknown<br/>           (18) Other belt used with child safety seat (specify):<br/>           _____</p> <p>(99) Unknown if belt used</p> | <p>23. Automatic (Passive) Belt System Availability/Function <u>9</u></p> <p>(0) Not equipped/not available<br/>           (1) 2 point automatic belts<br/>           (2) 3 point automatic belts<br/>           (3) Automatic belts - type unknown</p> <p><i>Non-functional</i><br/>           (4) Automatic belts destroyed or rendered inoperative<br/>           (9) Unknown</p> <p>24. Automatic (Passive) Belt System Use <u>9</u></p> <p>(0) Not equipped/not available/destroyed or rendered inoperative<br/>           (1) Automatic belt in use<br/>           (2) Automatic belt not in use (manually disconnected, motorized track inoperative) (specify):<br/>           _____</p> <p>(3) Automatic belt use unknown<br/>           (9) Unknown</p>  |
| <p>20. Proper Use of Manual (Active) Belts <u>9</u></p> <p>(0) None used or not available<br/>           (1) Belt used properly<br/>           (2) Belt used properly with child safety seat</p> <p><i>Belt Used Improperly</i><br/>           (3) Shoulder belt worn under arm<br/>           (4) Shoulder belt worn behind back or seat<br/>           (5) Belt worn around more than one person<br/>           (6) Lap belt worn on abdomen<br/>           (7) Lap belt or lap and shoulder belt used improperly with child safety seat (specify):<br/>           _____</p> <p>(8) Other improper use of manual belt system (specify):<br/>           _____</p> <p>(9) Unknown</p>  | <p>25. Automatic (Passive) Belt System Type <u>9</u></p> <p>(0) Not equipped/not available<br/>           (1) Non-motorized system<br/>           (2) Motorized system<br/>           (9) Unknown</p> <p>26. Proper Use of Automatic (Passive) Belt System <u>9</u></p> <p>(0) Not equipped/not available/not used<br/>           (1) Automatic belt used properly<br/>           (2) Automatic belt used properly with child safety seat</p> <p><i>Automatic Belt Used Improperly</i><br/>           (3) Automatic shoulder belt worn under arm<br/>           (4) Automatic shoulder belt worn behind back<br/>           (5) Automatic belt worn around more than one person<br/>           (6) Lap portion of automatic belt worn on abdomen<br/>           (7) Automatic lap and shoulder belt or automatic shoulder belt used improperly with child safety seat (specify):<br/>           _____</p> <p>(8) Other improper use of automatic belt system (specify):<br/>           _____</p> <p>(9) Unknown</p> |
| <p>21. Manual (Active) Belt Failure Modes During Accident <u>9</u></p> <p>(0) No manual belt used or not available<br/>           (1) No manual belt failure(s)<br/>           (2) Torn webbing (stretched webbing not included)<br/>           (3) Broken buckle or latchplate<br/>           (4) Upper anchorage separated<br/>           (5) Other anchorage separated (specify):<br/>           _____</p> <p>(6) Broken retractor<br/>           (7) Combination of above (specify):<br/>           _____</p> <p>(8) Other manual belt failure (specify):<br/>           _____</p> <p>(9) Unknown</p>  | <p>27. Automatic (Passive) Belt Failure Modes During Accident <u>9</u></p> <p>(0) Not equipped/not available/not in use<br/>           (1) No automatic belt failure(s)<br/>           (2) Torn webbing (stretched webbing not included)<br/>           (3) Broken buckle or latchplate<br/>           (4) Upper anchorage separated<br/>           (5) Other anchorage separated (specify):<br/>           _____</p> <p>(6) Broken retractor<br/>           (7) Combination of above (specify):<br/>           _____</p> <p>(8) Other automatic belt failure (specify):<br/>           _____</p> <p>(9) Unknown</p>  |

**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 9
- (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.

- 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 000  
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*

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 air bag equipped/air bag 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

## HEAD RESTRAINT AND SEAT EVALUATION

49. Head Restraint Type/Damage by Occupant at This Occupant Position 9  
 (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) 99  
 (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) 9  
 (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 9  
 (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

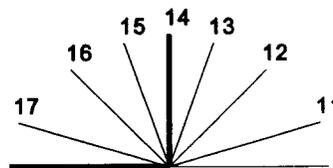
**HEAD RESTRAINT AND SEAT EVALUATION *continued***

53. Seat Back Incline Prior and Post Impact 99

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

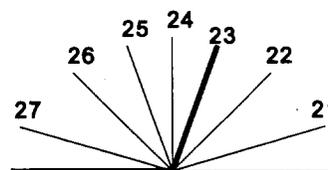
***Upright prior to impact***

- (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



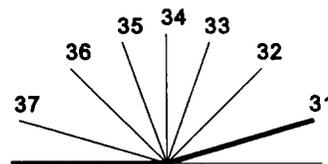
***Slightly reclined prior to impact***

- (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) 9

- (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 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) 0

- (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 0

- (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) 0

- (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

**EMERGENCY RESPONSE INFORMATION**

EMS Notification

- (1) Not notified ROAD VEHICLE
- (2) Notified
- (9) Unknown AIR VEHICLE

EMS Notification Time (first unit)  
(9999) Unknown

- \_\_\_\_\_ ROAD VEHICLE \_\_\_\_\_
- \_\_\_\_\_ AIR VEHICLE \_\_\_\_\_

EMS Arrival Time (first unit)  
(9998) EMS cancelled or did not arrive  
(9999) Unknown

- \_\_\_\_\_ ROAD VEHICLE \_\_\_\_\_
- \_\_\_\_\_ AIR VEHICLE \_\_\_\_\_

EMS Departure Time To Treatment Facility (transporting unit)  
(9997) EMS arrived, provided treatment, but did not transport  
(9998) EMS arrived, but was not used  
(9999) Unknown

- \_\_\_\_\_ ROAD VEHICLE \_\_\_\_\_
- \_\_\_\_\_ AIR VEHICLE \_\_\_\_\_

EMS Arrival Time At Treatment Facility  
(9999) Unknown

- \_\_\_\_\_ ROAD VEHICLE \_\_\_\_\_
- \_\_\_\_\_ AIR VEHICLE \_\_\_\_\_

EMS Type

- |                               |                     |                          |
|-------------------------------|---------------------|--------------------------|
| (01) Fire department          | <u>FIRST UNIT</u>   | <u>TRANSPORTING UNIT</u> |
| (02) Rescue squad             |                     |                          |
| (03) Police department        | <u>ROAD VEHICLE</u> |                          |
| (04) Trauma unit              |                     |                          |
| (05) Disaster unit            | <u>AIR VEHICLE</u>  |                          |
| (06) Ambulance service unit   |                     |                          |
| (07) Hospital                 |                     |                          |
| (08) Mortuaries/funeral homes |                     |                          |
| (98) Other, specify: _____    |                     |                          |
| (99) Unknown                  |                     |                          |

EMS Care

- |  |                     |                         |
|--|---------------------|-------------------------|
| (01) No care administered  | <u>ON-SCENE</u>     | <u>DURING TRANSPORT</u> |
| (02) First aid   |                     |                         |
| (03) Resuscitation   | <u>ROAD VEHICLE</u> |                         |
| (04) CPR   |                     |                         |
| (05) Emergency cardiac care  | <u>AIR VEHICLE</u>  |                         |
| (06) Life support system monitoring (blood pressure, pulse rate, respiration, EKG) |                     |                         |
| (07) Emergency burn care   |                     |                         |
| (08) Combination of above, specify: _____  |                     |                         |
| (98) Other, specify: _____   |                     |                         |
| (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 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) Unknown70. Number of Recorded Injuries for This Occupant 00

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 (at Medical Facility) 00

- (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> 00

- (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 9

- (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

|                 |             |
|-----------------|-------------|
| PSU NUMBER      | <u>72</u>   |
| CASE NUMBER     | <u>138A</u> |
| VEHICLE NUMBER  | <u>02</u>   |
| OCCUPANT NUMBER | <u>01</u>   |

# OCCUPANT INJURY FORM

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

- ENTIRE FORM
- PAGE NUMBER (S) \_\_\_\_\_



GENERAL VEHICLE Vehicle: 1

11

INTRA ERRORS

GG2251 2 If ACCIDENT TYPE GV36 equals 20, 24, 28, 44, 45, 51, 65, 69, 71,
GG2252 73, 77, 79, 81, 83 or 86-89, then PRE-EVENT MOVEMENT GV31 should
GG2253 equal 01.

0

INTERIOR VEHICLE Vehicle: 1

11

INTRA ERRORS

OCC0541 2 \*\*\*\*\* THIS CASE SHOWS A POSSIBLE HOLED WINDSHIELD. \*\*\*\*\*
CC0542 \*\*\*\*\* CHECK YOUR DATA AND IF CORRECT, NOTIFY YOUR ZONE \*\*\*\*\*
CC0543 GLAZING WINDSHIELD IV31 equals 3 or 5 or CONTACT WINDSHIELD IV39
CC0544 equals 4 or 6.

0

OCCUPANT ASSESSMENT Vehicle: 2 Occupant: 1

11

INTRA ERRORS

OHH0191 2 If OCCUPANT POSITION OA10 equals 11 or 13 and AUTOMATIC BELT
HH0192 AVAILABILITY OA23 does not equal 2, then MANUAL BELT
HH0193 AVAILABILITY OA18 should equal 3 or 4.

011

INTER ERRORS

OEC0011 2 If INTRUDING COMPONENT IV48(m) equals 01-06 or 10, then at least
ECO012 one (DEFORMATION LOCATION (EV07(n) should be F, 9 or blank) or
ECO013 (EV07(n) should equal R or L and LONGITUDINAL LOCATION EV08(n)
ECO014 should equal D, Y, or F)). GV=01

EH0011 2 If TREATMENT OA62 equals 1, then 1st DEFORMATION EXTENT EV11
EH0012 should be greater than 03. GV=01 OA=01

MM0141 2 \*\*\*\*\* THIS IS A SPECIAL INTEREST CASE FOR NHTSA \*\*\*\*\*
MM0142 \*\*\*\*\* IT SHOWS AN AIR BAG NON DEPLOYMENT WITH \*\*\*\*\*
MM0143 \*\*\*\*\* CONDITIONS OF DOF AND DELTA V WHICH WOULD \*\*\*\*\*
MM0144 \*\*\*\*\* NORMALLY CAUSE DEPLOYMENT. CHECK YOUR DATA \*\*\*\*\*
MM0145 \*\*\*\*\* AND IF CORRECT, NOTIFY YOUR ZONE CENTER. \*\*\*\*\*
MM0146 FRONTAL AIR BAG SYSTEM DEPLOYMENT OA31 equals 7 and
MM0147 ((LONGITUDINAL DELTA V GV60 equals 999 and
MM0148 1st DIRECTION OF FORCE EV06 equals (10, 11, 12, 01 or 02)(mod20)
MM0149 and 1st DEFORMATION EXTENT EV11 is greater than 01) or
MM014a LONGITUDINAL DELTA V GV60 is less than -8). GV=01 OA=01

01

PSU72
CASE 138A
CURRENT VERSION: 9.00

ERROR SUMMARY SCREEN

12/24/96

Table with 5 columns: FORM NAME, NUMBER OF DOLLAR SIGNS, NUMBER OF LEVEL 1 ERRORS, NUMBER OF LEVEL 2 ERRORS, VERSION NUMBER CONSISTENT. Rows include Accident, General Vehicle, Vehicle Exterior, Vehicle Interior, Occupant Assessment, Occupant Injury, Total Inter Errors, and Total Case Errors.

0







PSU 72-138A (1996) #1



**PSU 72-138A (1996) #2**



PSU 72-138A (1996) #3



PSU 72-138A (1996) #4



**PSU 72-138A (1996) #5**



PSU 72-138A (1998) #6



PSU 72-138A (1996) #7



PSU 72-138A (1996) #8



PSU 72-138A (1996) #9



**PSU 72-138A (1986) #10**



PSU 72-138A (1996) #11



PSU 72-138A (1996) #12



PSU 72-138A (1996) #13



PSU 72-130A (1996) #14



PSU 72-130A (1998) #15



PSU 72-138A (1986) #16



PSU 72-138A (1996) #17



**PSU 72-138A (1998) #18**



PSU 72-138A (1996) #19



PSU 72-138A (1996) #20



**PSU 72-136A (1996) #21  
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**PSU 72-138A (1996) #22**  
**Best Available**



PSU 72-138A (1996) #23



**PSU 72-138A (1996) #24**  
**Best Available**



**PSU 72-138A (1996) #25**  
**Best Available**



**PSU 72-138A (1996) #26**  
**Best Available**



**PSU 72-138A (1996) #27**  
**Best Available**



**PSU 72-138A (1996) #28**



**PSU 72-138A (1996) #29**  
**Best Available**



**PSU 72-138A (1986) #30**  
**Best Available**



**PSU 72-138A (1996) # 31**  
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PSU 72-136A (1996) #32



**PSU 72-138A (1996) #33**



**PSU 72-138A (1996) #34**



**PSU 72-138A (1998) #35**



**PSU 72-138A (1996) #36**



**PSU 72-138A (1996) #37**



**PSU 72-138A (1996) #38**

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PSU 72-138A (1996) #39



**PSU 72-138A (1996) #40**



PSU 72-138A (1986) #41



PSU 72-138A (1998) #42



PSU 72-138A (1996) #43



**PSU 72-138A (1996) # 44**  
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**PSU 72-138A (1996) # 45**  
**Best Available**



**PSU 72-138A (1996) # 46**  
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**PSU 72-138A (1996) #61**  
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**PSU 72-138A (1996) #62**



PSU 72-138A (1996) #63



PSU 72-138A (1996) #64



**PSU 72-138A (1996) #65**



**PSU 72-138A (1996) #86**



**PSU 72-138A (1996) #67**