



U.S. Department  
of Transportation

**National Highway  
Traffic Safety  
Administration**

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

Dear Crash Data Researchers/Users:

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

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

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

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



# CASE SUMMARY

PSU 81 CASE NO. 148J TYPE OF ACCIDENT Car/Compact Utility - Straight Path

## 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 (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**

PSU81

1996 Case Summary Form

CASE 148J

TYPE OF ACCIDENT: CAR/COM.UTILITY-STRAIGHT PATH

A. DESCRIPTION OF THE ACCIDENT SEQUENCE AND ACCIDENT PECULIARITIES

Vehicle #1 was traveling westbound in the #2 lane of a five lane, undivided, two way roadway. Vehicle #2 was traveling southbound in the #1 lane of a three lane, two way, undivided roadway. Both vehicles entered the intersection at the same time. The front of vehicle #1 struck the left side of vehicle #2. On impact vehicle #1 underrode vehicle #2, causing vehicle #2 to flip over onto its top. Both vehicles were towed due to damage.

01

PSU81

1996 Case Summary Form

CASE 148J

TYPE OF ACCIDENT: CAR/COM.UTILITY-STRAIGHT PATH

B. VEHICLE PROFILE(S)

V e h. No	Class of Vehicle	Year/Make/ Model	Most Severe Damage Based on Vehicle Inspection		
			Damage Plane	Severity Descr.	Component Failure
01	Compact	1985 Chevrolet Camaro	Front	Severe	None
02	Compact	1995 Toyota 4-Runner	Left	Severe	None Utility

01

PSUB1

1996 Case Summary Form

CASE 148J

TYPE OF ACCIDENT: CAR/COM.UTILITY-STRAIGHT PATH

C. PERSON PROFILE(S)

Most Severe Injury  
(TO BE COMPLETED BY ZONE CENTER)

V e h. No	Person Role	Seat Positon	Restraint Use	Body Region	Injury Type	A	
						I S	Injury Source
01	Driver	F/L	None	Brain	Hemorrhage	4	Windshield w/hood
01	Pass	F/R	None	Leg	Fracture	2	Floor
02	Driver	F/L	L/S	Face	Contusion	1	Roof
02	Pass	F/R	L/S	Knee	Contusion	1	Instrument panel

0

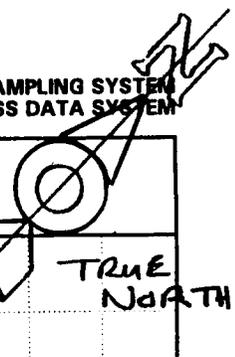
# ACCIDENT COLLISION DIAGRAM

NATIONAL ACCIDENT SAMPLING SYSTEM  
CRASHWORTHINESS DATA SYSTEM

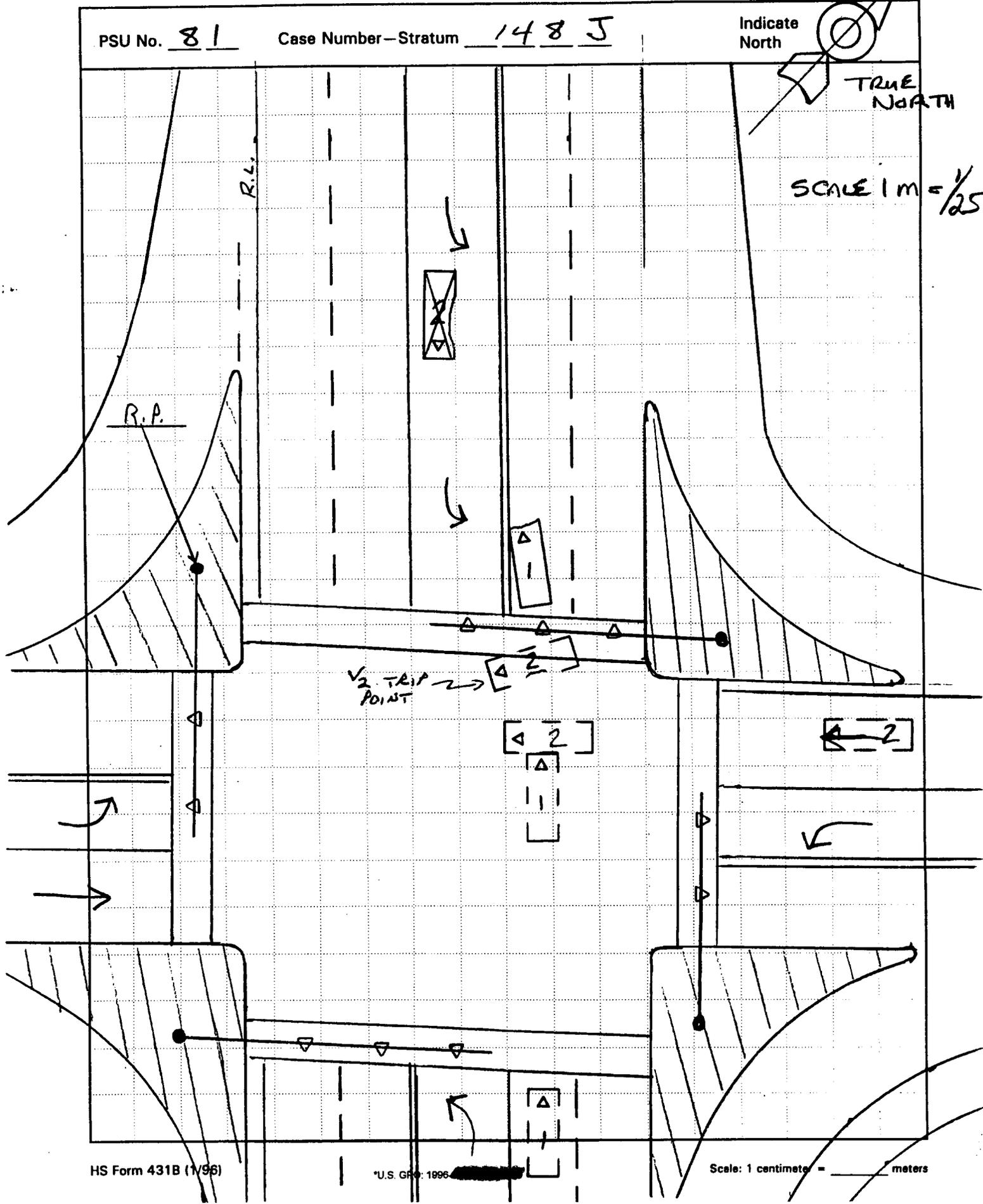
PSU No. 81

Case Number - Stratum 148 J

Indicate North



SCALE 1 m = 1/25





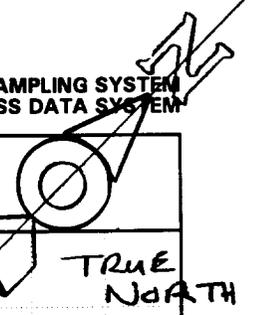
# ACCIDENT COLLISION DIAGRAM

NATIONAL ACCIDENT SAMPLING SYSTEM  
CRASHWORTHINESS DATA SYSTEM

PSU No. 81

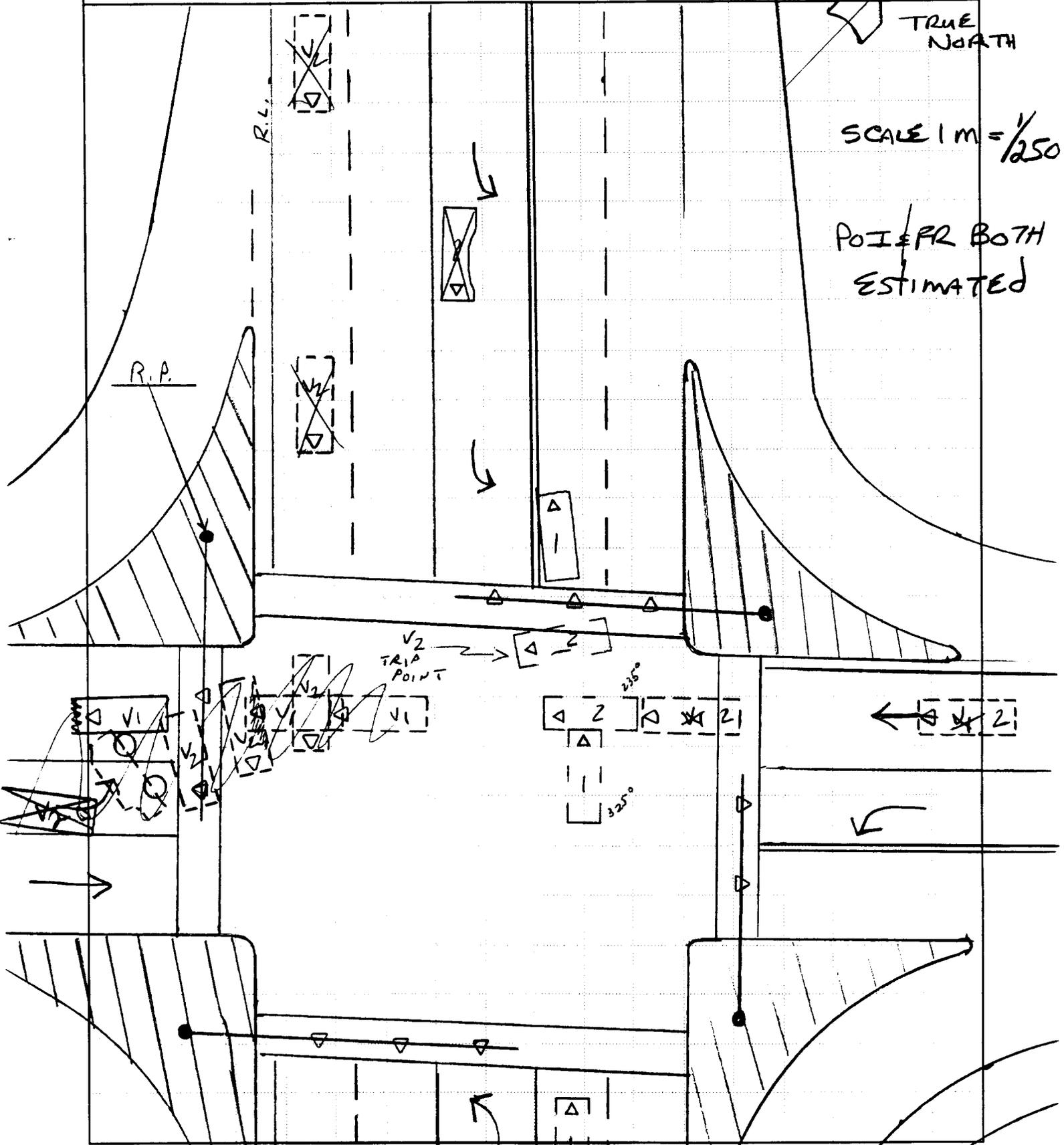
Case Number—Stratum 148 J

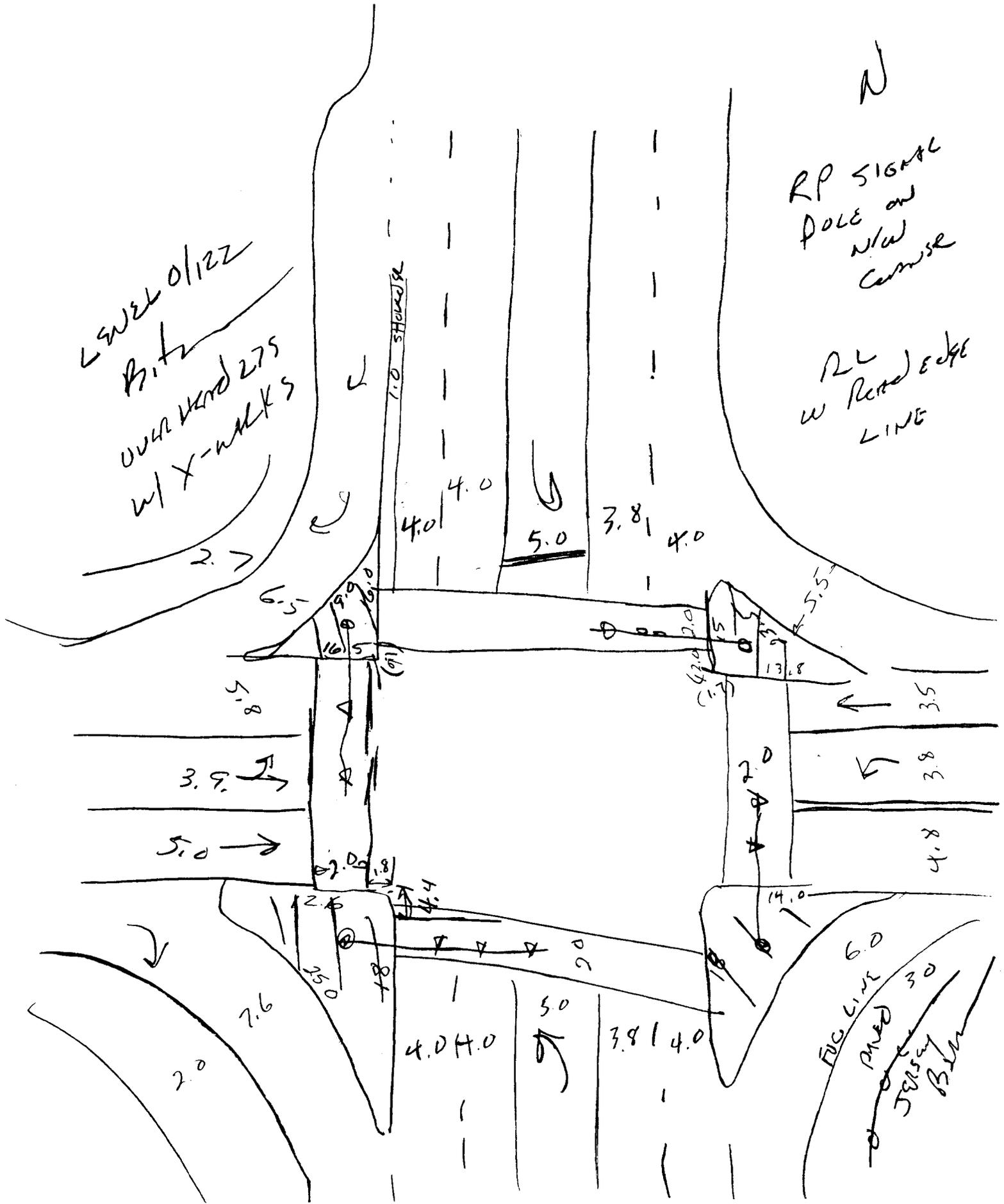
Indicate  
North



SCALE 1 m = 1/250

POI & PR BOTH  
ESTIMATED





LOWER 01/22  
 B.I.T.  
 OVER WARD 275  
 W/ X-WALKS

N  
 RP SIGNAL  
 POLE on  
 NW  
 CORNER

RL  
 W ROAD EDGE  
 LINE

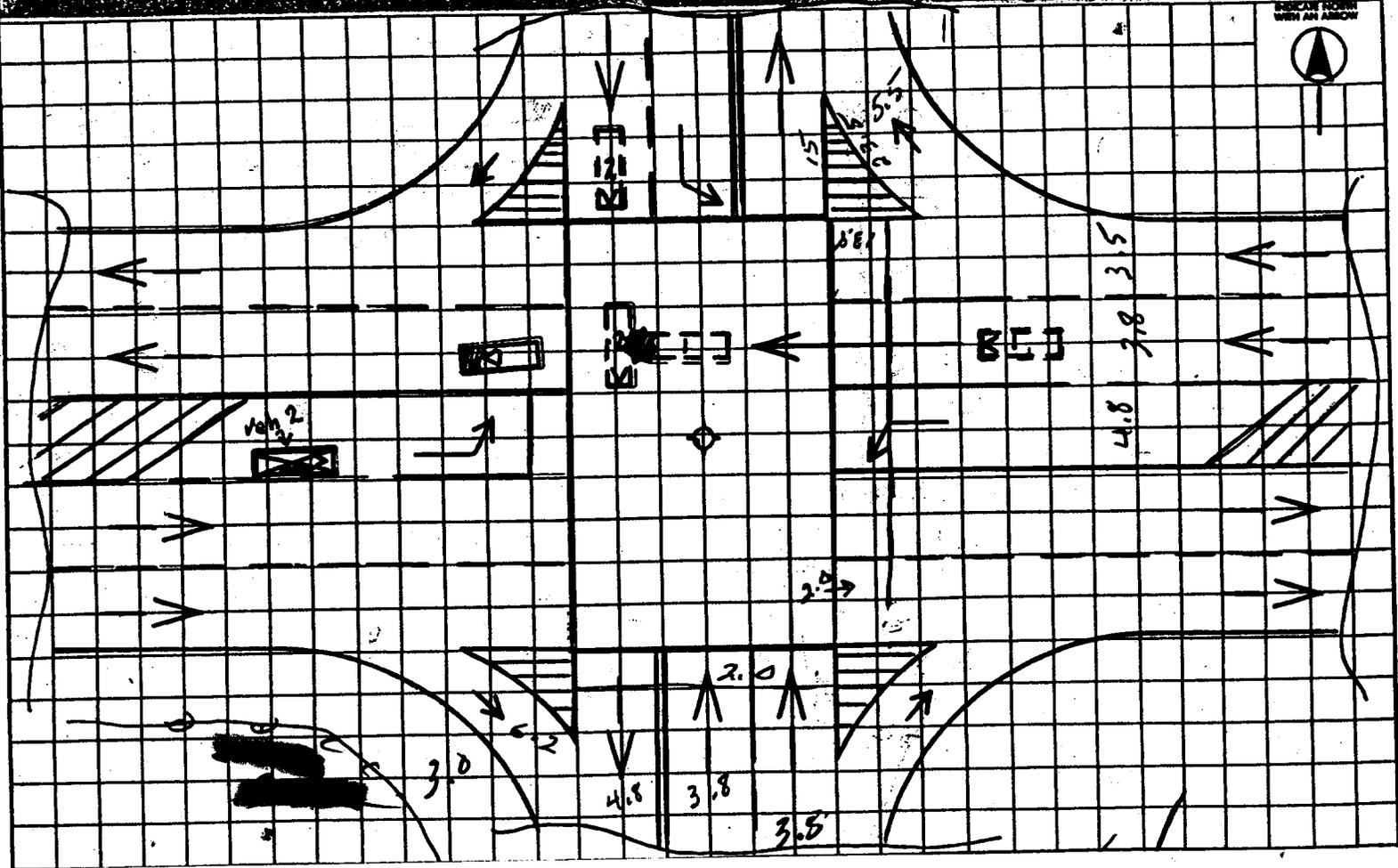
1.0 SHOULDER

Dimensions and lane markings:  
 4.0 | 4.0 | 5.0 | 3.8 | 4.0  
 6.5 | 5.9 | 5.0 | 5.5  
 5.8 | 3.9 | 5.0 | 3.5 | 3.8 | 4.8  
 7.6 | 2.0 | 4.0 | 4.0 | 5.0 | 3.8 | 4.0  
 2.6 | 3.5 | 4.4 | 2.0 | 1.8 | 14.0  
 16 | 5 | 13.8

ENCLOSURE 6.0  
 30  
 30  
 JENSEN  
 Bldg

DIAGRAM DESCRIPTION OF ADDITIONAL INFORMATION

EMPHASIZE POINTS WITH AN ARROW









# ACCIDENT FORM

1. Primary Sampling Unit Number 81  
 2. Case Number - Stratum 148J

### IDENTIFICATION

3. Number of General Vehicle Forms Submitted 02  
 4. Date of Accident (Month,Day,Year)      /      / 9 6  
 5. Time of Accident 0219  
 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 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>02</u>	15. <u>F</u>	16. <u>02</u>	17. <u>14</u>	18. <u>L</u>
19. <u>0 2</u>	20. <u>02</u>	21. <u>14</u>	22. <u>T</u>	23. <u>31</u>	24. <u>00</u>	25. <u>N</u>
26. <u>0 3</u>	27. <u>    </u>	28. <u>    </u>	29. <u>    </u>	30. <u>    </u>	31. <u>    </u>	32. <u>    </u>
33. <u>0 4</u>	34. <u>    </u>	35. <u>    </u>	36. <u>    </u>	37. <u>    </u>	38. <u>    </u>	39. <u>    </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)

- |  |  |  |   |
|--|--|--|---|
| <b>CDS APPLICABLE AND OTHER VEHICLES</b> | (O) Not a motor vehicle<br>(N) Noncollision<br>(F) Front                   | (R) Right side<br>(L) Left side<br>(B) Back  | (T) Top<br>(U) Undercarriage<br>(9) Unknown   |
| <b>TDC APPLICABLE VEHICLES</b>           | (O) Not a motor vehicle<br>(N) Noncollision<br>(F) Front<br>(R) Right side | (L) Left side<br>(B) Back of unit with cargo area<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><b>Noncollision</b><br>(31) Overturn — rollover (excludes end-over-end)<br>(32) Rollover — end-over-end<br>(33) Fire or explosion<br>(34) Jackknife<br>(35) Other intraunit damage (specify):<br>_____<br>(36) Noncollision injury<br>(38) Other noncollision (specify):<br>_____<br>(39) Noncollision — details unknown<br><br><b>Collision With Fixed Object</b><br>(41) Tree (≤ 10 cm in diameter)<br>(42) Tree (> 10 cm in diameter)<br>(43) Shrubbery or bush<br>(44) Embankment<br>(45) Breakaway pole or post (any diameter)<br><br><b>Nonbreakaway Pole or Post</b><br>(50) Pole or post (≤ 10 cm in diameter)<br>(51) Pole or post (> 10 cm but ≤ 30 cm in diameter)<br>(52) Pole or post (> 30 cm in diameter)<br>(53) Pole or post (diameter unknown)<br><br>(54) Concrete traffic barrier<br>(55) Impact attenuator<br>(56) Other traffic barrier (includes guardrail)<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><b>Collision with Nonfixed Object</b><br>(70) Passenger car, light truck, van, or other vehicle not in-transport<br>(71) Medium/heavy truck or bus not in-transport<br>(72) Pedestrian<br>(73) Cyclist or cycle<br>(74) Other nonmotorist or conveyance<br><br>(75) Vehicle occupant<br>(76) Animal<br>(77) Train<br>(78) Trailer, disconnected in transport<br>(79) Object fell from vehicle in-transport<br>(88) Other nonfixed object (specify):<br>_____<br>(89) Unknown nonfixed object<br>(98) Other event (specify):<br>_____<br>(99) Unknown event or object |
|--|---|



# GENERAL VEHICLE FORM

1. Primary Sampling Unit Number 81  
 2. Case Number - Stratum 148J  
 3. Vehicle Number 01

12. Speed Limit 089  
 (000) No statutory limit  
 Code posted or statutory speed limit in kmph  
 (999) Unknown  
55 mph X 1.6093 = 089 kmph

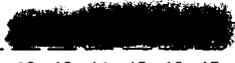
## VEHICLE IDENTIFICATION

4. Vehicle Model Year 85  
 Code the last two digits of the model year  
 (99) Unknown

5. Vehicle Make (specify): 20  
CHEVROLET  
 Applicable codes are found in your  
 NASS Data Collection, Coding and  
 Editing Manual. (B-3)  
 (99) Unknown

6. Vehicle Model (specify): 009  
CAMARO  
 Applicable codes are found in your  
 NASS Data Collection, Coding and  
 Editing Manual.  
 (999) Unknown 3 door

7. Body Type SPORT COUPE 03  
 Note: Applicable codes may be found on  
 the back of this page.

8. Vehicle Identification Number  
1G1FP8750FL   
 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17  
 Left justify; Slash zeros and letter Z (0 and Z)  
 No VIN—Code all zeros  
 Unknown—Code all nines

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

13. Police Reported Alcohol Presence For Driver 1  
 (0) No alcohol present  
 (1) Yes alcohol present  
 (7) Not reported  
 (8) No driver present  
 (9) Unknown

14. Alcohol Test Result For Driver 17  
 Code actual value (decimal implied  
 before first digit—0.xx)  
 (95) Test refused  
 (96) None given  
 (97) AC test performed, results unknown  
 (98) No driver present  
 (99) Unknown  
 Source: 

15. Police Reported Other Drug Presence For Driver 7  
 (0) No other drug(s) present  
 (1) Yes other drug(s) present  
 (7) Not reported  
 (8) No driver present  
 (9) Unknown

16. Other Drug Specimen Test Result For Driver 20  
 (0) No specimen test given  
 (1) Drug(s) not found in specimen  
 (2) Drug(s) found in specimen, (specify):  
opiates  
 (3) Specimen test given, results unknown or not  
 obtained  
 (8) No driver present  
 (9) Unknown if specimen test given

17. Driver's Zip Code   
 (00001) Driver not a resident of U.S. or territories  
 \_\_\_\_\_ Code actual 5-digit zip code  
 (99998) No driver present  
 (99999) Unknown

## OFFICIAL RECORDS

10. Police Reported Vehicle Disposition 1  
 (0) Not towed due to vehicle damage  
 (1) Towed due to vehicle damage  
 (9) Unknown

11. Police Reported Travel Speed 999  
 Code to the nearest kmph (NOTE: 000 means  
 less than 0.5 kmph)  
 (160) 159.5 kmph and above  
 (999) Unknown  
 \_\_\_\_\_ mph X 1.6093 = \_\_\_\_\_ kmph

18. Driver's Race/Ethnic Origin 1  
 (1) White (non-Hispanic)  
 (2) Black (non-Hispanic)  
 (3) White (Hispanic)  
 (4) Black (Hispanic)  
 (5) American Indian, Eskimo or Aleut  
 (6) Asian or Pacific Islander  
 (7) Other (specify): \_\_\_\_\_  
 (8) No driver present  
 (9) Unknown

# CODES FOR BODY TYPE

## CDS APPLICABLE VEHICLES

### Automobiles

- (01) Convertible (excludes sun-roof, t-bar)
- (02) 2-door sedan, hardtop, coupe
- (03) 3-door/2-door hatchback
- (04) 4-door sedan, hardtop
- (05) 5-door/4-door hatchback
- (06) Station wagon (excluding van and truck based)
- (07) Hatchback, number of doors unknown
- (08) Other automobile type (specify): \_\_\_\_\_
- (09) Unknown automobile type

### Automobile Derivatives

- (10) Auto based pickup (includes El Camino, Caballero, Ranchero, Brat, and Rabbit pickup)
- (11) Auto based panel (cargo station wagon, auto based ambulance/hearse)
- (12) Large limousine - more than four side doors or stretched chassis
- (13) Three-wheel automobile or automobile derivative

### Utility Vehicles ( $\leq 4,536$ kgs GVWR)

- (14) Compact utility (Jeep CJ-2 - CJ-7, Scrambler, Golden Eagle, Renegade, Laredo, Wrangler, Cherokee [84 and after], Dispatcher, Raider, Bronco II, Bronco [76 and before], Explorer, S-10 Blazer, Geo Tracker, Bravada, S-15 Jimmy, Thing, Pathfinder, Trooper, Trooper II, Rodeo, Amigo, Navajo, 4-Runner, Montero, Passport, Samurai, Sidekick, Rocky)
- (15) Large utility (includes Jeep Cherokee [83 and before], Ramcharger, Trailduster, Bronco-fullsize [78 and after], fullsize Blazer, fullsize Jimmy, Hummer, Landcruiser, Rover, Scout, Yukon)
- (16) Utility station wagon (Chevy Suburban, GMC Suburban, Travelall, Grand Wagoneer, includes suburban limousine)
- (19) Utility, unknown body type

### Van Based Light Trucks ( $\leq 4,536$ kgs GVWR)

- (20) Minivan (Town and Country, Caravan, Grand Caravan, Voyager, Grand Voyager, Mini-Ram, Vista, Aerostar, Windstar, Villager, Lumina APV, Trans Sport, Silhouette, Astro, Safari, Toyota Van, Toyota Minivan, Previa, Nissan Minivan, Quest, Mitsubishi Minivan, Expo Wagon, Vanagon/Camper.)
- (21) Large van (B150-B350, Sportsman, Royal, Maxiwagon, Ram, Tradesman, Voyager [83 and before], E150-E350, Econoline, Clubwagon, Chateau, G10-G30, Chevy Van, Beauville, Sport Van, G15-G35, Rally Van, Vandura.)
- (22) Step van or walk-in van ( $\leq 4,536$  kgs GVWR)
- (23) Van based motorhome ( $\leq 4,536$  kgs GVWR)
- (24) Van based school bus ( $\leq 4,536$  kgs GVWR)
- (25) Van based other bus ( $\leq 4,536$  kgs GVWR)
- (28) Other van type (Hi-Cube Van, Kary) (specify): \_\_\_\_\_
- (29) Unknown van type

### Light Conventional Trucks (Pickup style cab, $\leq 4,536$ kgs GVWR)

- (30) Compact pickup (D50, Colt P/U, Ram 50, Dakota, Arrow Pickup [foreign], Ranger, Courier, S-10, T-10, LUV, S-15, T-15, Sonoma, Datsun/Nissan Pickup, P'up, Mazda Pickup, Toyota Pickup, Mitsubishi Pickup)
- (31) Large Pickup (Jeep Pickup, Comanche, Ram Pickup, D100-D350, W100-W350, F100-F350, C10-C35, K10-K35, R10-R35, V10-V35, Silverado, Sierra, R100-R500, T100)
- (32) Pickup with slide-in camper
- (33) Convertible pickup
- (39) Unknown pickup style light conventional truck type

### Other Light Trucks ( $\leq 4,536$ kgs GVWR)

- (40) Cab chassis based (includes rescue vehicles, light stake, dump, and tow truck)
- (41) Truck based panel
- (42) Light truck based motorhome (chassis mounted)
- (45) Other light conventional truck type
- (48) Unknown light truck type
- (49) Unknown light vehicle type (automobile, utility, van, or light truck)

## OTHER VEHICLES

### Buses (Excludes Van Based)

- (50) School bus (designed to carry students, not cross country or transit)
- (58) Other bus type (e.g., transit, intercity, bus based motorhome) (specify): \_\_\_\_\_
- (59) Unknown bus type

### Medium/Heavy Trucks ( $> 4,536$ kgs GVWR)

- (60) Step van ( $> 4,536$  kgs GVWR)
- (61) Single unit straight truck ( $4,536$  kgs  $<$  GVWR  $\leq 8,845$  kgs)
- (62) Single unit straight truck ( $8,845$  kgs  $<$  GVWR  $\leq 11,793$  kgs)
- (63) Single unit straight truck ( $> 11,793$  kgs GVWR)
- (64) Single unit straight truck, GVWR unknown
- (65) Medium/heavy truck based motorhome
- (67) Truck-tractor with no cargo trailer
- (68) Truck-tractor pulling one trailer
- (69) Truck-tractor pulling two or more trailers
- (70) Truck-tractor (unknown if pulling trailer)
- (78) Unknown medium/heavy truck type
- (79) Unknown truck type (light/medium/heavy)

### Motored Cycles (Does Not Include All-Terrain Vehicles/Cycles)

- (80) Motorcycle
- (81) Moped (motorized bicycle)
- (82) Three-wheel motorcycle or moped
- (88) Other motored cycle (minibike, motorscooter) (specify): \_\_\_\_\_
- (89) Unknown motored cycle type

### Other Vehicles

- (90) ATV (All-Terrain Vehicle) and ATC (All-Terrain Cycle)
- (91) Snowmobile
- (92) Farm equipment other than trucks
- (93) Construction equipment other than trucks
- (97) Other vehicle type
- (99) Unknown body type



**PRECRASH DRIVER RELATED DATA**

30. Driver's Distraction/Inattention To Driving 99  
(Prior To Recognition Of Critical Event)
- (00) No driver present  
(01) Attentive or not distracted  
(02) Looked but did not see
- Distractions*  
(03) By other occupant(s), (specify): \_\_\_\_\_  
(04) By moving object in vehicle (specify): \_\_\_\_\_  
(05) While talking or listening to cellular phone (specify location and type of phone): \_\_\_\_\_  
(06) While dialing cellular phone (specify location and type of phone): \_\_\_\_\_  
(07) While adjusting climate controls  
(08) While adjusting radio, cassette, CD (specify): \_\_\_\_\_  
(09) While using other device/controls integral to vehicle (specify): \_\_\_\_\_  
(10) While using or reaching for device/object brought into vehicle (specify): \_\_\_\_\_  
(11) Sleepy or fell asleep  
(12) Distracted by outside person, object, or event (specify): \_\_\_\_\_  
(13) Eating or drinking  
(14) Smoking related  
(97) Distracted/inattentive, details unknown  
(98) Other, distraction (specify): \_\_\_\_\_  
(99) Unknown
31. Pre-Event Movement (Prior to Recognition of Critical Event) 01
- (00) No driver present  
(01) Going straight  
(02) Decelerating in traffic lane  
(03) Accelerating in traffic lane  
(04) Starting in traffic lane  
(05) Stopped in traffic lane  
(06) Passing or overtaking another vehicle  
(07) Disabled or parked in travel lane  
(08) Leaving a parking position  
(09) Entering a parking position  
(10) Turning right  
(11) Turning left  
(12) Making a U-turn  
(13) Backing up (other than for parking position)  
(14) Negotiating a curve  
(15) Changing lanes  
(16) Merging  
(17) Successful avoidance maneuver to a previous critical event  
(97) Other (specify): \_\_\_\_\_  
(99) Unknown
32. Critical Precrash Event 17
- THIS VEHICLE LOSS OF CONTROL DUE TO:**
- (01) Blow out or flat tire  
(02) Stalled engine  
(03) Disabling vehicle failure (e.g., wheel fell off) (specify): \_\_\_\_\_  
(04) Non-disabling vehicle problem (e.g., hood flew up) (specify): \_\_\_\_\_  
(05) Poor road conditions (puddle, pot hole, ice, etc.) (specify): \_\_\_\_\_  
(06) Traveling too fast for conditions  
(08) Other cause of control loss (specify): \_\_\_\_\_  
(09) Unknown cause of control loss

**THIS VEHICLE TRAVELLING**

- (10) Over the lane line on left side of travel lane  
(11) Over the lane line on right side of travel lane  
(12) Off the edge of the road on the left side  
(13) Off the edge of the road on the right side  
(14) End departure  
(15) Turning left at intersection  
(16) Turning right at intersection  
(17) Crossing over (passing through) intersection  
(18) This vehicle decelerating  
(19) Unknown travel direction

**OTHER MOTOR VEHICLE IN LANE**

- (50) Other vehicle stopped  
(51) Traveling in same direction with lower steady speed  
(52) Traveling in same direction while decelerating  
(53) Traveling in same direction with higher speed  
(54) Traveling in opposite direction  
(55) In crossover  
(56) Backing  
(59) Unknown travel direction of other motor vehicle in lane

**OTHER MOTOR VEHICLE ENCROACHING INTO LANE**

- (60) From adjacent lane (same direction)—over left lane line  
(61) From adjacent lane (same direction)—over right lane line  
(62) From opposite direction—over left lane line  
(63) From opposite direction—over right lane line  
(64) From parking lane  
(65) From crossing street, turning into same direction  
(66) From crossing street, across path  
(67) From crossing street, turning into opposite direction  
(68) From crossing street, intended path not known  
(70) From driveway, turning into same direction  
(71) From driveway, across path  
(72) From driveway, turning into opposite direction  
(73) From driveway, intended path not known  
(74) From entrance to limited access highway  
(78) Encroachment by other vehicle—details unknown

**PEDESTRIAN, PEDALCYCLIST, OR OTHER NONMOTORIST**

- (80) Pedestrian in roadway  
(81) Pedestrian approaching roadway  
(82) Pedestrian—unknown location  
(83) Pedalcyclist or other nonmotorist in roadway (specify): \_\_\_\_\_  
(84) Pedalcyclist or other nonmotorist approaching roadway, (specify): \_\_\_\_\_  
(85) Pedalcyclist or other nonmotorist—unknown location (specify): \_\_\_\_\_

**OBJECT OR ANIMAL**

- (87) Animal in roadway  
(88) Animal approaching roadway  
(89) Animal—unknown location  
(90) Object in roadway  
(91) Object approaching roadway  
(92) Object—unknown location  
(98) Other critical precrash event (specify): \_\_\_\_\_  
(99) Unknown

<p>33. Attempted Avoidance Maneuver <span style="float: right;"><u>99</u></span></p> <p>(00) No driver present</p> <p>(01) No avoidance maneuver</p> <p>(02) Braking (no lockup)</p> <p>(03) Braking (lockup)</p> <p>(04) Braking (lockup unknown)</p> <p>(05) Releasing brakes</p> <p>(06) Steering left</p> <p>(07) Steering right</p> <p>(08) Braking and steering left</p> <p>(09) Braking and steering right</p> <p>(10) Accelerating</p> <p>(11) Accelerating and steering left</p> <p>(12) Accelerating and steering right</p> <p>(98) Other action (specify): _____</p> <p>(99) Unknown</p> <p>34. Pre-Impact Stability <span style="float: right;"><u>1</u></span></p> <p>(0) No driver present</p> <p>(1) Tracking</p> <p>(2) Skidding longitudinally—rotation less than 30 degrees</p> <p>(3) Skidding laterally—clockwise rotation</p> <p>(4) Skidding laterally—counterclockwise rotation</p> <p>(7) Other vehicle loss-of-control (specify): _____</p> <p>(9) Precrash stability unknown</p>	<p>35. Pre-Impact Location <span style="float: right;"><u>1</u></span></p> <p>(0) No driver present</p> <p>(1) Stayed in original travel lane</p> <p>(2) Stayed on roadway but left original travel lane</p> <p>(3) Stayed on roadway, not known if left original travel lane</p> <p>(4) Departed roadway</p> <p>(5) Remained off roadway</p> <p>(6) Returned to roadway</p> <p>(7) Entered roadway</p> <p>(9) Unknown</p> <p>36. Accident Type <span style="float: right;"><u>88</u></span></p> <p>(Note: Applicable codes on back of this page)</p> <p>(00) No impact Code the number of the diagram that best describes the accident circumstance</p> <p>(98) Other accident type (specify): _____</p> <p>(99) Unknown</p>
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**STOP HERE IF GV07 DOES NOT EQUAL 01 - 49**

Category	Configuration	ACCIDENT TYPES (Includes Intent)						
I Single Driver	A Right Roadside Departure	01 DRIVE OFF ROAD	02 CONTROL/ TRACTION LOSS	03 AVOID COLLISION WITH VEH., PED., ANIM.	04 SPECIFICS OTHER	05 SPECIFICS UNKNOWN		
	B Left Roadside Departure	06 DRIVE OFF ROAD	07 CONTROL/ TRACTION LOSS	08 AVOID COLLISION WITH VEH., PED., ANIM.	09 SPECIFICS OTHER	10 SPECIFICS UNKNOWN		
	C Forward Impact	11 PARKED VEH.	12 STA. OBJECT	13 PEDESTRIAN/ ANIMAL	14 END DEPARTURE	15 SPECIFICS OTHER	16 SPECIFICS UNKNOWN	
II Same Trafficway Same Direction	D Rear-End	20 STOPPED 21, 22, 23	22 SLOWER 24, 25, 27	24 DECEL. 26, 28, 31	25 AVOID COLLISION WITH VEH.	26 AVOID COLLISION WITH OBJECT	(EACH • 32) SPECIFICS OTHER	(EACH • 33) SPECIFICS UNKNOWN
	E Forward Impact	34 CONTROL/ TRACTION LOSS	36 CONTROL/ TRACTION LOSS	38 AVOID COLLISION WITH VEH.	40 AVOID COLLISION WITH OBJECT	35 SPECIFICS OTHER	37 SPECIFICS UNKNOWN	
	F Sideswipe Angle	44 LATERAL MOVE	45 LATERAL MOVE	46 LATERAL MOVE	47 LATERAL MOVE	(EACH • 48) SPECIFICS OTHER	(EACH • 49) SPECIFICS UNKNOWN	
III Same Trafficway (Opposite Direction)	G Head-On	50 LATERAL MOVE	51 LATERAL MOVE	(EACH • 52) SPECIFICS OTHER	(EACH • 53) SPECIFICS UNKNOWN			
	H Forward Impact	54 CONTROL/ TRACTION LOSS	56 CONTROL/ TRACTION LOSS	58 AVOID COLLISION WITH VEH.	60 AVOID COLLISION WITH OBJECT	55 SPECIFICS OTHER	57 SPECIFICS UNKNOWN	
	I Sideswipe Angle	64 LATERAL MOVE	65 LATERAL MOVE	(EACH • 66) SPECIFICS OTHER	(EACH • 67) SPECIFICS UNKNOWN			
IV Change Trafficway Vehicle Turning	J Turn Across Path	68 INITIAL OPPOSITE DIRECTIONS	71 INITIAL SAME DIRECTIONS	73 INITIAL SAME DIRECTIONS	72 INITIAL SAME DIRECTIONS	(EACH • 74) SPECIFICS OTHER	(EACH • 75) SPECIFICS UNKNOWN	
	K Turn Into Path	77 TURN INTO SAME DIRECTION	78 TURN INTO SAME DIRECTION	80 TURN INTO OPPOSITE DIRECTIONS	81 TURN INTO OPPOSITE DIRECTIONS	82 TURN INTO OPPOSITE DIRECTIONS	(EACH • 84) SPECIFICS OTHER	(EACH • 85) SPECIFICS UNKNOWN
V Intersecting Paths (Vehicle Damage)	L Straight Paths	87 STRAIGHT PATHS	88 STRAIGHT PATHS	(EACH • 89) SPECIFICS OTHER	(EACH • 90) SPECIFICS UNKNOWN			
VI Miscellaneous	M Backing Etc.	92 BACKING VEH.	93 OTHER VEH. OR OBJECT	98 Other Accident Type 99 Unknown Accident Type 00 No Impact				

**OCCUPANT RELATED**

37. Driver Presence in Vehicle 1  
 (0) Driver not present  
 (1) Driver present  
 (9) Unknown
38. Number of Occupants This Vehicle 02  
 (00-96) Code actual number of occupants for this vehicle  
 (97) 97 or more  
 (99) Unknown
39. Number of Occupant Forms Submitted 02

**AIR BAG RELATED**

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

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

**VEHICLE WEIGHT ITEMS**

43. Vehicle Curb Weight 1,340  
 Code weight to nearest 10 kilograms.  
 (045) Less than 454 kilograms  
 (612) 6,124 kilograms or more  
 (999) Unknown  
2,958 lbs X .4536 = 1,342 kgs  
 Source: 1985

44. Vehicle Cargo Weight 0000  
 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 00  
 (00) No rollover (no overturning)  
*Rollover (primarily about the longitudinal axis)*  
 (01-16) Code the number of quarter turns  
 (17) Rollover, 17 or more quarter turns (specify): \_\_\_\_\_  
 (98) Rollover--end-over-end (i.e., primarily about the lateral axis)  
 (99) Rollover (overturn), details unknown
46. Rollover Initiation Type 00  
 (00) No rollover  
 (01) Trip-over  
 (02) Flip-over  
 (03) Turn-over  
 (04) Climb-over  
 (05) Fall-over  
 (06) Bounce-over  
 (07) Collision with another vehicle  
 (08) Other rollover initiation type specify): \_\_\_\_\_  
 (98) Rollover--end-over-end  
 (99) Unknown rollover initiation type
47. Location of Rollover Initiation 0  
 (0) No rollover  
 (1) On roadway  
 (2) On shoulder—paved  
 (3) On shoulder—unpaved  
 (4) On roadside or divided trafficway median  
 (8) Rollover--end-over-end  
 (9) Unknown
48. Rollover Initiation Object Contacted 00  
 (Note: Applicable codes on back of page)
49. Location on Vehicle Where Initial Principal Tripping Force Is Applied 0  
 (0) No rollover  
 (1) Wheels/tires  
 (2) Side plane  
 (3) End plane  
 (4) Undercarriage  
 (5) Other location on vehicle (specify): \_\_\_\_\_  
 (6) Non-contact rollover forces (specify): \_\_\_\_\_  
 (8) Rollover--end-over-end  
 (9) Unknown
50. Direction of Initial Roll 0  
 (0) No rollover  
 (1) Roll right - primarily about the longitudinal axis  
 (2) Roll left - primarily about the longitudinal axis  
 (8) Rollover--end-over-end  
 (9) Unknown roll direction

## CODES FOR ROLLOVER INITIATION OBJECT CONTACTED

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

### Noncollision

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

### Collision With Fixed Object

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

### Nonbreakaway Pole or Post

- (50) Pole or post ( $\leq$  10 cm in diameter)
- (51) Pole or post ( $>$  10 cm but  $\leq$  30 cm in diameter)
- (52) Pole or post ( $>$  30 cm in diameter)
- (53) Pole or post (diameter unknown)
  
- (54) Concrete traffic barrier
- (55) Impact attenuator
- (56) Other traffic barrier (includes guardrail)  
(specify): \_\_\_\_\_

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

- (69) Unknown fixed object

### Collision with Nonfixed Object

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

- (89) Unknown nonfixed object

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

- (99) Unknown event or object

**VERRIDE/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

**ACCIDENT RECONSTRUCTION PROGRAMS HIGHEST DELTA V**

58. Basis for Total (Resultant) Delta V (highest) 01

(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): \_\_\_\_\_  
 \_\_\_\_\_

**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 220

54. Heading Angle For Other Vehicle 235 140

**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



ESTIMATED DELTA V	INSPECTION TYPE		
<p>66. Estimated Highest Delta V (Researcher Determined) <u>0</u></p> <p>(0) Reconstruction Delta V coded</p> <p><i>Estimated Delta V</i></p> <p>(1) Less than 10 kmph  (2) ≥ 10 kmph but &lt; 25 kmph  (3) ≥ 25 kmph but &lt; 40 kmph  (4) ≥ 40 kmph but &lt; 55 kmph  (5) ≥ 55 kmph</p> <p><i>Other estimates of damage severity</i></p> <p>(6) Minor  (7) Moderate  (8) Severe  (9) Unknown</p>	<p>67. Type of Vehicle Inspection <u>3</u></p> <p>(0) No inspection  (1) Vehicle fully repaired-no damage evident  (2) Partial inspection (specify): _____  (3) Complete inspection</p> <tr> <th colspan="2" data-bbox="836 504 1559 556">DELTA V EVENT NUMBER</th> </tr> <p>68. Delta V Event Number <u>01</u></p> <p><u>1</u> Code the accident event sequence number that resulted in the Delta V that has been coded above for this vehicle</p> <p>(99) Unknown</p>	DELTA V EVENT NUMBER	
DELTA V EVENT NUMBER			
<p>*** IF THE CDS APPLICABLE VEHICLE WAS NOT INSPECTED (I.E., GV67 = 0), ***</p> <p><b>DO NOT COMPLETE THE EXTERIOR AND INTERIOR VEHICLE FORMS</b></p> <p>*** IF GV07 DOES NOT EQUAL 01-49, DO NOT COMPLETE ***</p> <p><b>THE EXTERIOR VEHICLE, INTERIOR VEHICLE, OCCUPANT ASSESSMENT, AND OCCUPANT INJURY FORMS.</b></p>			



# EXTERIOR VEHICLE FORM

4

1. Primary Sampling Unit Number <u>81</u>	3. Vehicle Number <u>01</u>
2. Case Number - Stratum <u>148J</u>	

## VEHICLE IDENTIFICATION

VIN 1G1FP87S0FL XXXXXXXXXX Model Year 85

Vehicle Make (specify): CHEV Vehicle Model (specify): CAMARO

## 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
1	STARTS AT RT. FRONT BUMPER CORNER	BUMPER CORNER TO BUMPER CORNER	C-6

## 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.

\* STRINGLINE PLACED 477 CM FROM REAR PLANE.

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								
1	FRONT BUMPER	160		160	43	44	47	49	52	59	0
"	FREE SPACE				15	7	3	3	7	15	
"	SKIN BUMPER DEPTH → (ESTIMATED)				5	5	5	5	5	5	0
1	FINAL	160		160	23	32	39	41	40	39	
1	OVERRIDE HOOD LEVEL	156		160	71	80	82	87	109	<del>123</del>	0
"	FREE SPACE				31	23	19	19	23	15	
1	DEPTH OF BUMPER SKIN → (ESTIMATED)				5	5	5	5	5	5	0
1	FINAL	156		160	35	52	58	63	81	<del>103</del>	
										93	
	FRONT BUMPER TORN OFF — CORNERS ESTIMATED.										
<del>AVERAGE</del> 1	ADJ FINAL	160	C-6	160	23	42	48.5	52	60.5	71	0
			71							66	

# ORIGINAL SPECIFICATIONS WORK SHEET

Wheelbase	<u>101.0</u>	inches	x 2.54	=	<u>257</u>	cm
Overall Length	<u>187.8</u>	inches	x 2.54	=	<u>477</u>	cm
Maximum Width	<u>72.8</u>	inches	x 2.54	=	<u>185</u>	cm
Curb Weight	<u>2,958</u>	pounds	x .4536	=	<u>1,342</u>	kg
Average Track	<u>61.15</u>	inches	x 2.54	=	<u>155</u>	cm
Front Overhang	_____	inches	x 2.54	=	<u>108</u>	cm
Rear Overhang	_____	inches	x 2.54	=	<u>114</u>	cm
Undeformed End Width	_____	inches	x 2.54	=	_____	cm
Engine Size: cyl./displ.	<u>V-6</u>	cc	x .001	=	<u>2.8</u>	L
	_____	CID	x .0164	=	_____	L

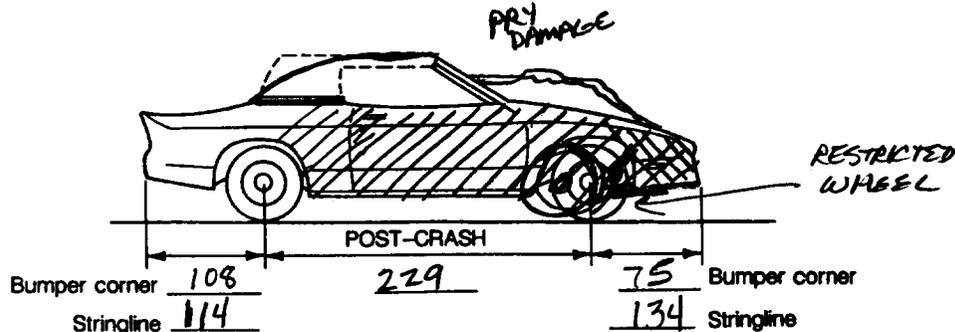
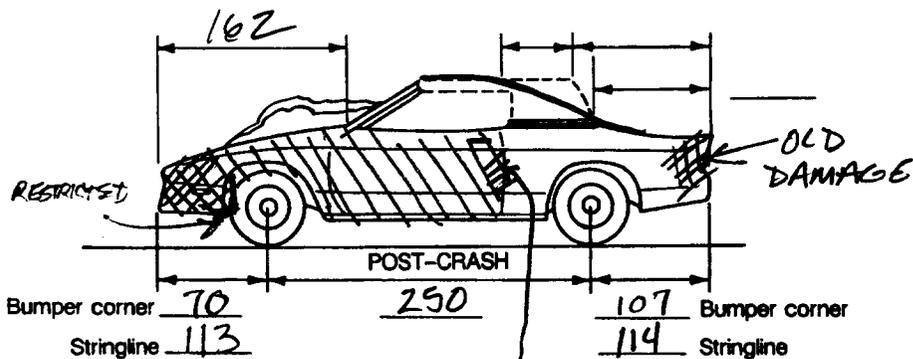
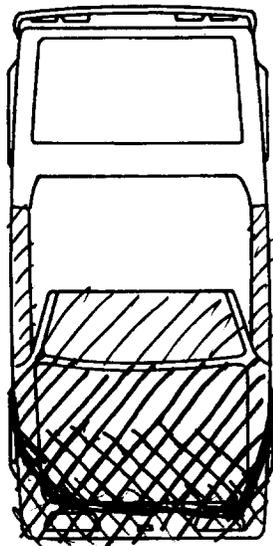
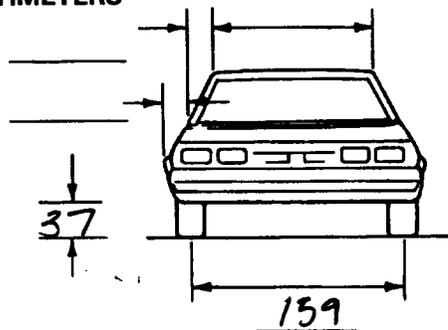
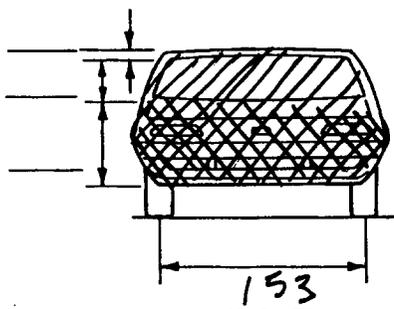
60.7 - 154  
61.6 - 156

V-6 2.8L  
V-8 5.0

### VEHICLE DAMAGE SKETCH

<p><b>TIRE—WHEEL DAMAGE</b></p> <p>a. Rotation physically restricted</p> <p>RF <u>1</u> LF <u>1</u> RR <u>2</u> LR <u>2</u></p> <p>b. Tire deflated</p> <p>RF <u>1</u> LF <u>1</u> RR <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>257</u> cm</p> <p>Overall Length <u>477</u> cm</p> <p>Maximum Width <u>185</u> cm</p> <p>Curb Weight <u>1342</u> kg</p> <p>Average Track <u>155</u> cm</p> <p>Front Overhang <u>108</u> cm</p> <p>Rear Overhang <u>114</u> cm</p> <p>Undeformed End Width <u>160</u> cm</p> <p>Engine Size: cyl./displ. <u>V-6 2.8 L</u></p>	<p><b>WHEEL STEER ANGLES</b> (For locked front wheels or displaced rear axles only)</p> <p>RF ± <u>+30</u> °</p> <p>LF ± <u>+5</u> °</p> <p>RR ± <u>/</u> °</p> <p>LR ± <u>/</u> °</p> <p>Within ± 5 degrees</p>
<p><b>TYPE OF TRANSMISSION</b></p> <p><input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic</p> <p>END SHIFT ≥ 10 CM</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		<p><b>DRIVE WHEELS</b></p> <p><input type="checkbox"/> FWD <input checked="" type="checkbox"/> RWD <input type="checkbox"/> 4WD</p>
		<p>Approximate Cargo Weight <u>Ø</u> kg</p>

**MEASUREMENTS IN CENTIMETERS**



**FRONT BUMPER GONE**

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



**COLLISION DEFORMATION CLASSIFICATION**

HIGHEST DELTA "V"

Accident Event Sequence Number	Object Contacted	(1) (2) Direction of Force	(3) Deformation Location	(4) Longitudinal or Lateral Location	(5) Vertical or Lateral Location	(6) Type of Damage Distribution	(7) Deformation Extent
4. <u>01</u>	5. <u>02</u>	6. <u>01</u>	7. <u>F</u>	8. <u>D</u>	9. <u>E</u>	10. <u>W</u>	11. <u>04</u> <sup>03</sup>

Second Highest Delta "V"

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

**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>160</u>	<u>023</u>	<u>042</u>	<u>049</u>	<u>052</u>	<u>061</u>	<u>077</u> <sup>066</sup>	<u>±000</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.) 160  
 \_\_\_\_\_ 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) 160  
 \_\_\_\_\_ Code to the nearest centimeter  
 (250) 250 centimeters or more  
 (999) Unknown

28. Original Wheelbase 257  
 \_\_\_\_\_ Code to the nearest centimeter  
 (650) 650 centimeters or more  
 (999) Unknown  
 \_\_\_\_\_ inches X 2.54 = \_\_\_\_\_ centimeters

29. Original Average Track Width 159  
 \_\_\_\_\_ Code to the nearest centimeter  
 (185) 185 centimeters or more  
 (999) Unknown  
 \_\_\_\_\_ inches X 2.54 = \_\_\_\_\_ centimeters

*pen apple*

## 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 2

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 *MAGNET* 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 5

40. Location of Fuel Tank-2 0

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

41. Damage to Fuel Tank-1 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 81  
 2. Case Number - Stratum 148 J  
 3. Vehicle Number 01

## INTEGRITY

4. Passenger Compartment Integrity 06  
 (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 RF
- (07) Rear window (backlight)
- (08) Roof and roof glass
- (09) Windshield and door (side)
- (10) Windshield and roof
- (11) Side and rear window (side window and backlight)
- (12) Windshield and side window
- (13) Door and side window
- (98) Other combination of above (specify):
- (99) Unknown

Door, Tailgate or Hatch Opening

5. LF 3 6. RF 3 7. LR 0 8. RR 0 9. TG/H 1

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

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

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

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

Door, Tailgate or Hatch Came Open During Collision

- (1) Door operational (no damage)
- (2) Latch/striker failure due to damage
- (3) Hinge failure due to damage
- (4) Door structure failure due to damage
- (5) Door support (i.e., pillar, sill, roof side rail, etc.) failure due to damage
- (6) Latch/striker and hinge failure due to damage
- (8) Other failure (specify):
- (9) Unknown

## GLAZING

Type of Window/Windshield Glazing

15. WS 1 16. LF 2 17. RF 2 18. LR 0 19. RR 0  
 20. BL 2 21. Roof 3 22. Other 0

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

Window Precrash Glazing Status

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

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

Glazing Damage from Impact Forces

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

- (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

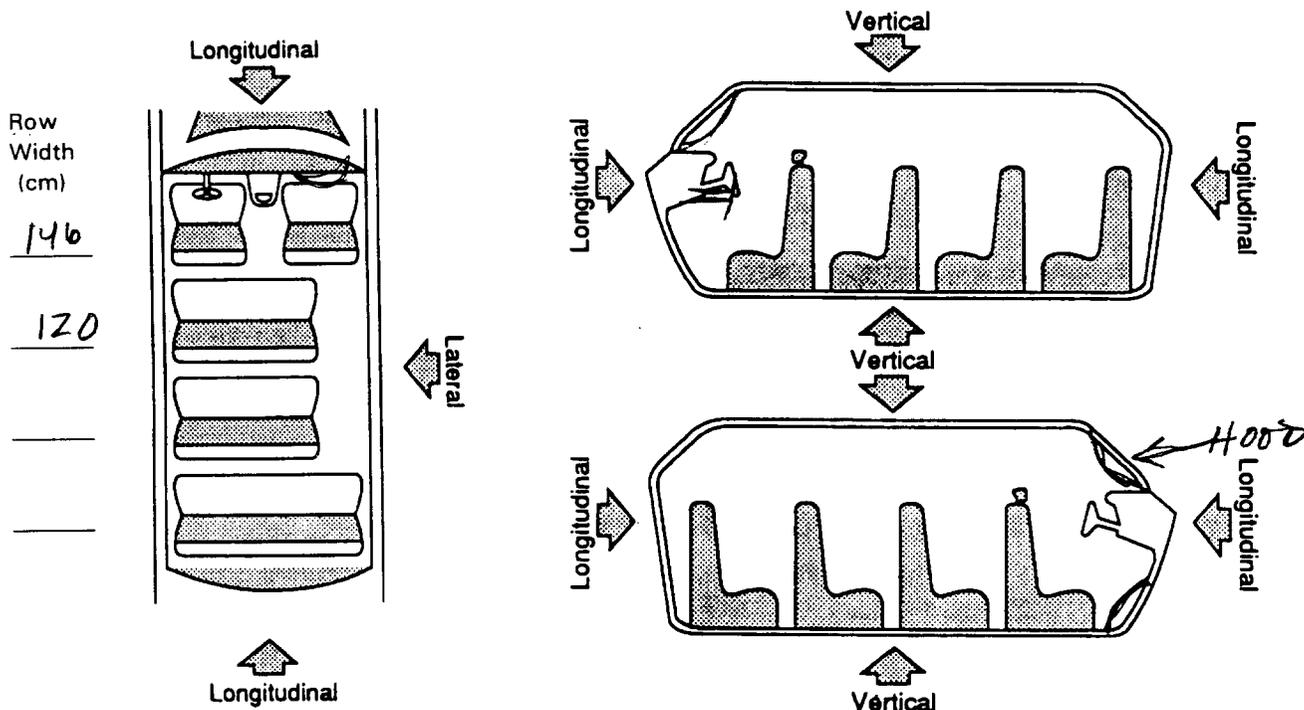
Glazing Damage from Occupant Contact

39. WS 3 40. LF 1 41. RF 1 42. LR 0 43. RR 0  
 44. BL 1 45. Roof 1 46. Other 0

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

# INTRUSION WORKSHEET

**NOTE: SKETCH INTRUDED AREAS**



LOCATION OF INTRUSION	INTRUDED COMPONENT	(All Measurements Are In Centimeters)				DOMINANT CRUSH DIRECTION
		COMPARISON VALUE	INTRUDED VALUE	INTRUSION		
11	STEERING COLUMN	0	10	10	6	VERT
13	RIGHT INST. PANEL	90	79	11	6	LONG
13	TOE PAN	55	41	14	4	LONG
23	FRONT SEAT BACK	0	30	30	1	LONG
12	HOOD	0	24	24	3	LONG
13	HOOD	0	25	25	2	LONG

**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>23</u>	48. <u>20</u>	49. <u>4</u>	50. <u>2</u>
2nd	51. <u>13</u>	52. <u>30</u>	53. <u>3</u>	54. <u>2</u>
3rd	55. <u>12</u>	56. <u>30</u>	57. <u>3</u>	58. <u>2</u>
4th	59. <u>13</u>	60. <u>05</u>	61. <u>2</u>	62. <u>2</u>
5th	63. <u>13</u>	64. <u>04</u>	65. <u>1</u>	66. <u>2</u>
6th	67. <u>11</u>	68. <u>01</u>	69. <u>1</u>	70. <u>1</u>
7th	71. _____	72. _____	73. _____	74. _____
8th	75. _____	76. _____	77. _____	78. _____
9th	79. _____	80. _____	81. _____	82. _____
10th	83. _____	84. _____	85. _____	86. _____

**LOCATION OF INTRUSION**

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

**MAGNITUDE OF INTRUSION**

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

**DOMINANT CRUSH DIRECTION**

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

## STEERING RIM/SPOKE DEFORMATION

(All Measurements Are in Centimeters)

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

	—		=	
--	---	--	---	--

	—		=	
--	---	--	---	--

	—		=	
--	---	--	---	--

	—		=	
--	---	--	---	--

UNKNOWN —  
STEERING WHEEL CUT & DESTROYED BY  
RESCUE PERSONNEL.

## 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 9

- (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 99

- 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 99

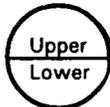
- (00) No steering rim deformation

*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 999,000

- \_\_\_\_\_ 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  
45,989 miles X 1.6093 = \_\_\_\_\_ kilometers

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

93. Instrument Panel Damage from Occupant Contact? 1

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

94. Type of Knee Bolster Covering 0

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

95. Knee Bolsters Deformed from Occupant Contact? 0

- (0) No knee bolster  
 (1) No deformation  
 (2) Yes - deformation  
 (9) Unknown

96. Did Glove Compartment Door Open During Collision(s)? 0

- (0) No glove compartment door  
 (1) No - door did not open  
 (2) Yes - door opened  
 (9) Unknown

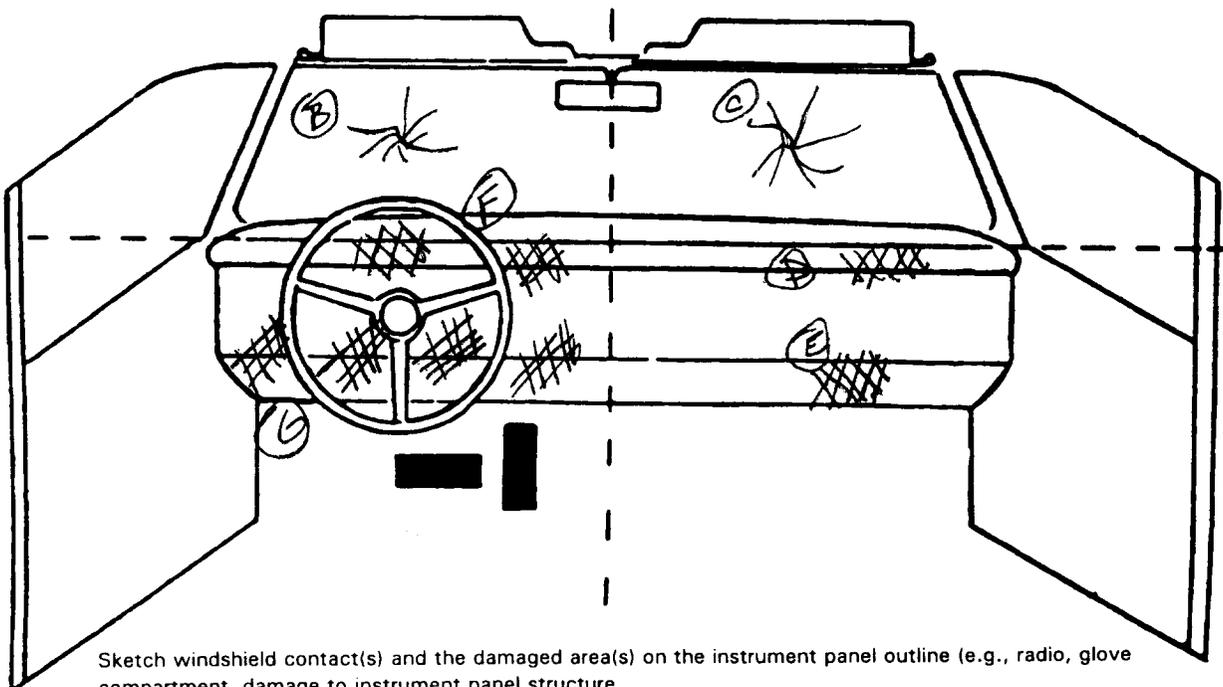
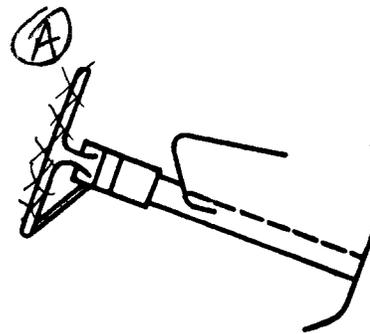
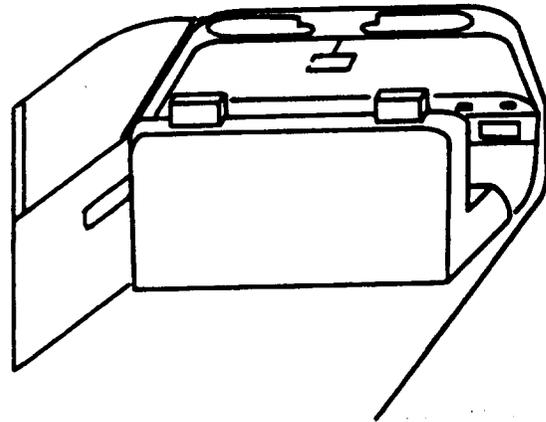
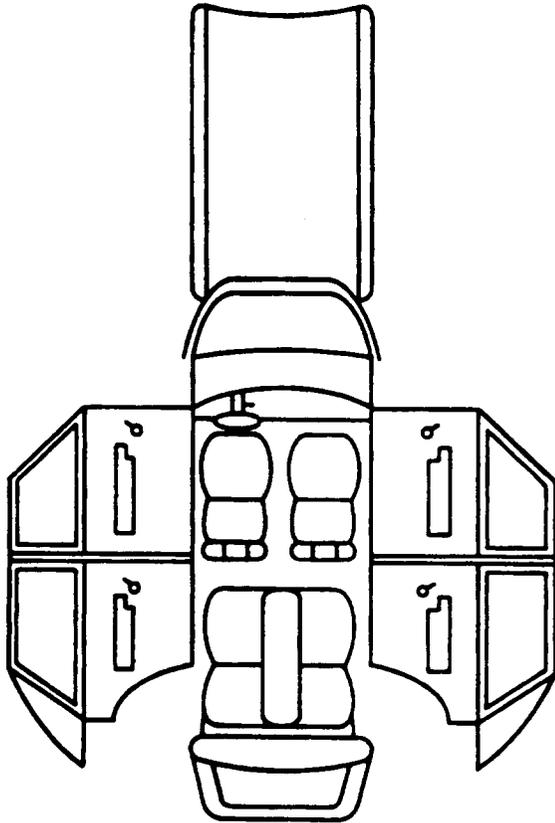
97. Adaptive (Assistive) Driving Equipment 0

- (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	000	1	TORSO	STEEL WHEEL HAD TO BE CUT OUT	2
B	001	1	HEAD	SPIRAL CRACK - HAIR	1
C	001	2	HEAD	SPIRAL CRACK	1
D	012	2	BODY	DAMAGE	1
E	012	2	LEGS BODY	"	1
F	010	1	BODY	"	1
G	010	1	LEGS BODY	"	1
H					
I					
J					
K					
L					
M					
N					

**FRONT**

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

**CODES FOR INTERIOR COMPONENTS**

**LEFT SIDE**

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

**RIGHT SIDE**

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

**INTERIOR**

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

**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>FIRST</b>	A-Availability	4	/	4
	B-Evidence of usage	04		04
	C-Used in this crash?	NO		NO
	D-Proper Use	0		0
	E-Failure Modes	0		0
	F-Anchorage Adjustment	1		1
<b>SECOND</b>	A-Availability	3	/	3
	B-Evidence of usage	99		99
	C-Used in this crash?	NO		NO
	D-Proper Use	0		0
	E-Failure Modes	0		0
	F-Anchorage Adjustment	0		0
<b>OTHER</b>	A-Availability			
	B-Evidence of usage			
	C-Used in this crash?			
	D-Proper Use			
	E-Failure Modes			
	F-Anchorage Adjustment			

- |   |   |  |
|---|---|--|
| <p><b>A-Manual (Active) Belt System Availability</b></p> <ul style="list-style-type: none"> <li>(0) None available</li> <li>(1) Belt removed/destroyed</li> <li>(2) Shoulder belt</li> <li>(3) Lap belt</li> <li>(4) Lap and shoulder belt</li> <li>(5) Belt available - type unknown</li> </ul> <p><i>Integral Belt Partially Destroyed</i></p> <ul style="list-style-type: none"> <li>(6) Shoulder belt (lap belt destroyed/removed)</li> <li>(7) Lap belt (shoulder belt destroyed/removed)</li> <li>(8) Other belt (specify): _____</li> <li>(9) Unknown</li> </ul> <p><b>B/C-Manual (Active) Belt System Use</b></p> <ul style="list-style-type: none"> <li>(00) None used, not available, or belt removed/destroyed</li> <li>(01) Inoperable (specify): _____</li> <li>(02) Shoulder belt</li> <li>(03) Lap belt</li> <li>(04) Lap and shoulder belt</li> <li>(05) Belt used - type unknown</li> <li>(08) Other belt used (specify): _____</li> <li>(12) Shoulder belt used with child safety seat</li> <li>(13) Lap belt used with child safety seat</li> <li>(14) Lap and shoulder belt used with child safety seat</li> <li>(15) Belt used with child safety seat - type unknown</li> <li>(18) Other belt used with child safety seat (specify): _____</li> <li>(99) Unknown if belt used</li> </ul> | <p><b>D-Proper Use of Manual (Active) Belts</b></p> <ul style="list-style-type: none"> <li>(0) None used or not available</li> <li>(1) Belt used properly</li> <li>(2) Belt used properly with child safety seat</li> </ul> <p><i>Belt Used Improperly</i></p> <ul style="list-style-type: none"> <li>(3) Shoulder belt worn under arm</li> <li>(4) Shoulder belt worn behind back or seat</li> <li>(5) Belt worn around more than one person</li> <li>(6) Lap belt worn on abdomen</li> <li>(7) Lap belt or lap and shoulder belt used improperly with child safety seat (specify): _____</li> <li>(8) Other improper use of manual belt system (specify): _____</li> <li>(9) Unknown</li> </ul> <p><b>E-Manual (Active) Belt Failure Modes During Accident</b></p> <ul style="list-style-type: none"> <li>(0) No manual belt used or not available</li> <li>(1) No manual 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 manual belt failure (specify): _____</li> <li>(9) Unknown</li> </ul> | <p><b>F-Shoulder Belt Upper Anchorage Adjustment</b></p> <ul style="list-style-type: none"> <li>(0) No shoulder belt</li> <li>(1) No upper anchorage adjustment for shoulder belt</li> </ul> <p><i>Adjustable shoulder Belt Upper Anchorage</i></p> <ul style="list-style-type: none"> <li>(2) In full up position</li> <li>(3) In mid position</li> <li>(4) In full down position</li> <li>(5) Position unknown</li> <li>(9) Unknown if position has adjustable upper anchorage adjustment</li> </ul> |
|---|---|--|

### 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
<b>F I R S T</b>	Availability/Function			
	Deployment			
	Failure			

**Air Bag System Availability/Function**

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

**Air Bag System Deployment (This Occupant Position)**

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

**Are There Indications of Air Bag System Failure? (This Occupant Position)**

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

#### AUTOMATIC BELTS

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

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

- (0) Not equipped/not available
- (1) 2 point automatic belts
- (2) 3 point automatic belts
- (3) Automatic belts - type unknown
- Non-functional*
- (4) Automatic belts destroyed or rendered inoperative
- (9) Unknown

**B-Automatic (Passive) Belt System Use**

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

**C-Automatic (Passive) Belt System Type**

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

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

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

*Automatic Belt Used Improperly*

- (3) Automatic shoulder belt worn under arm
- (4) Automatic shoulder belt worn behind back
- (5) Automatic belt worn around more than one person
- (6) Lap portion of automatic belt worn on abdomen
- (7) Automatic lap and shoulder belt or

automatic shoulder belt used improperly with child safety seat (specify): \_\_\_\_\_

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

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

- (0) Not equipped/not available/not in use
- (1) No automatic belt failure(s)
- (2) Torn webbing (stretched webbing not included)
- (3) Broken buckle or latchplate
- (4) Upper anchorage separated
- (5) Other anchorage separated (specify): \_\_\_\_\_
- (6) Broken retractor
- (7) Combination of above (specify): \_\_\_\_\_
- (8) Other automatic belt failure (specify): \_\_\_\_\_
- (9) Unknown

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

**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?**

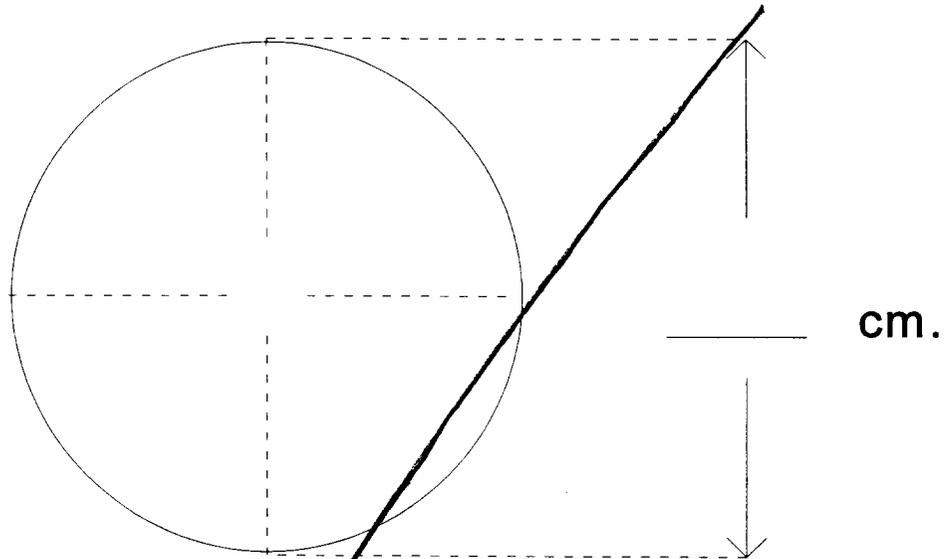
- (0) Not equipped/not available
- (1) No
- (2) Yes (specify): \_\_\_\_\_
- (3) Deployed, unknown if other occupant contact to air bag
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

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

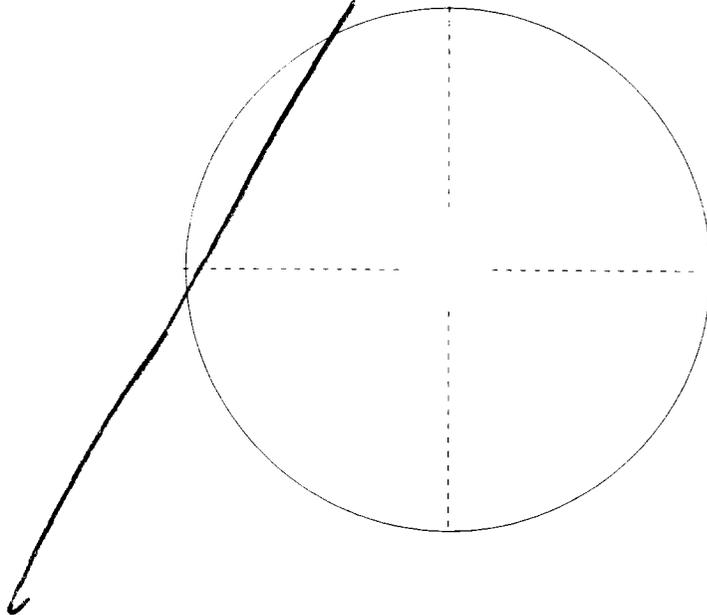
- (0) Not equipped/not available
- (1) No
- (2) Eyeglasses/sunglasses
- (3) Contact lenses
- (4) Deployed, unknown if eyewear worn
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

**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)

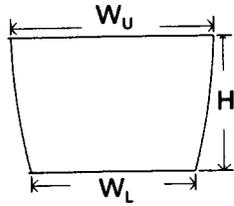


# DRIVER AIR BAG SKETCHES (Cont'd)

## 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

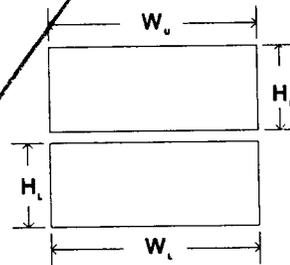
width ( $W_U$ ) \_\_\_\_\_

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

b. Lower Flap

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

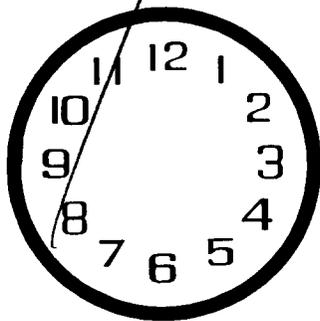
height ( $H_L$ ) \_\_\_\_\_



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

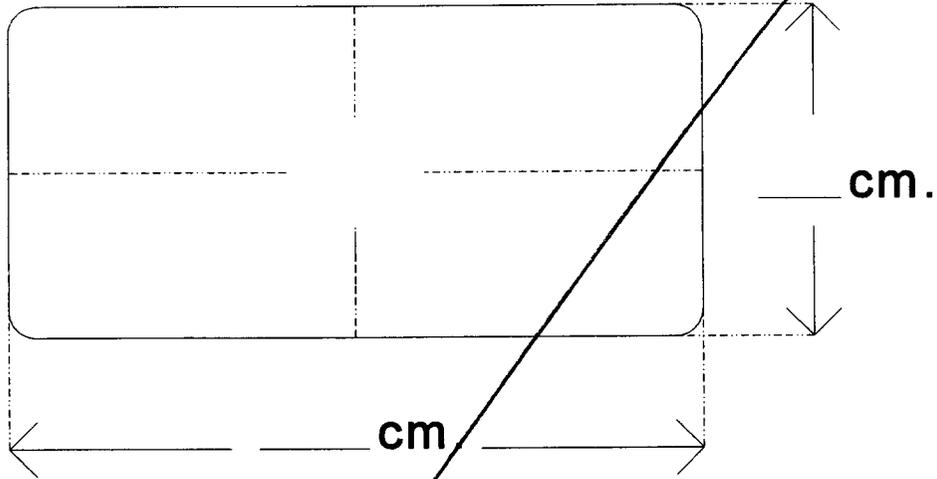
## 6. SKETCH OF OTHER TYPE OF AIR BAG VENT PORTS

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

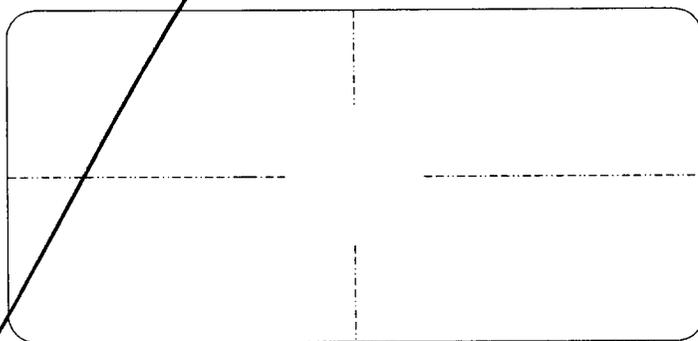


PASSENGER AIR BAG DAMAGE AND CONTACT SKETCHES

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



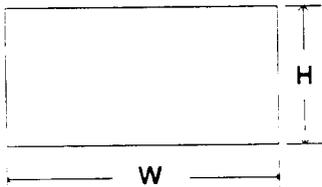
2. SKETCH DAMAGE AND CONTACT EVIDENCE ON PASSENGER AIR BAG (Back)



## PASSENGER AIR BAG SKETCHES (Cont'd)

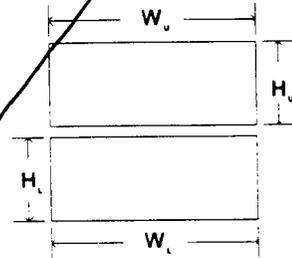
### 3. PASSENGER AIR BAG MODULE COVER FLAP SIZE (SINGLE)

width (W) \_\_\_\_\_  
 height (H) \_\_\_\_\_



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

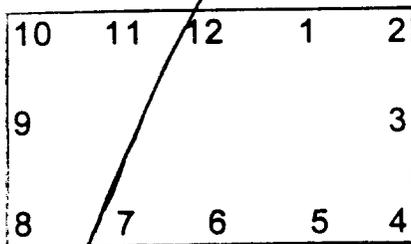
a. Upper Flap width ( $W_U$ ) \_\_\_\_\_ height ( $H_U$ ) \_\_\_\_\_  
 b. Lower Flap width ( $W_L$ ) \_\_\_\_\_ height ( $H_L$ ) \_\_\_\_\_



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

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

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



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

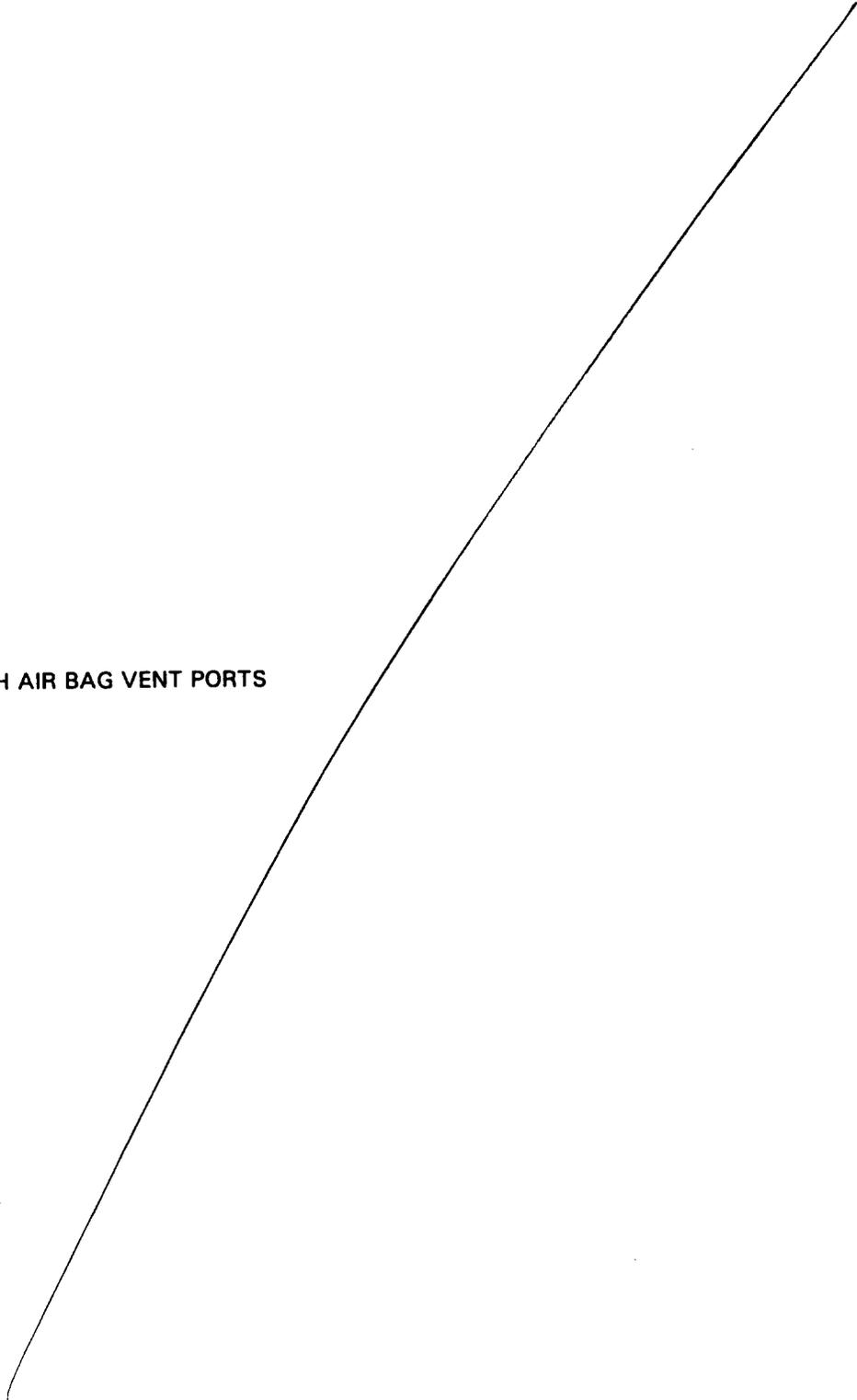
1. SKETCH DAMAGE AND CONTACT EVIDENCE ON "OTHER" AIR BAG (Front)

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

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

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

**4. SKETCH AIR BAG VENT PORTS**



**HEAD RESTRAINTS/SEAT EVALUATION**

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

		Left	Center	Right
FIRST	A-Head Restraint Type/Damage	1	/	1
	B-Seat Type	02		02
	C-Seat Orientation	1		1
	D-Seat Track Position	4		4
	E-Seat Back Incline Pre/Post Impact	14		22
	F-Seat Performance	1		3
SECOND	A-Head Restraint Type/Damage	0	/	0
	B-Seat Type	05		05
	C-Seat Orientation	1		1
	D-Seat Track Position	1		1
	E-Seat Back Incline Pre/Post Impact	01		01
	F-Seat Performance	1		1
THIRD	A-Head Restraint Type/Damage			
	B-Seat Type			
	C-Seat Orientation			
	D-Seat Track Position			
	E-Seat Back Incline Pre/Post Impact			
	F-Seat Performance			
OTHER	A-Head Restraint Type/Damage			
	B-Seat Type			
	C-Seat Orientation			
	D-Seat Track Position			
	E-Seat Back Incline Pre/Post Impact			
	F-Seat Performance			

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

## 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*

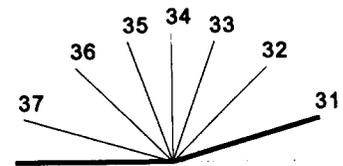
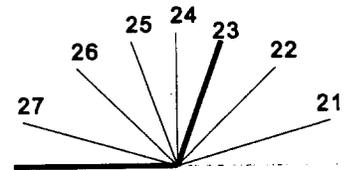
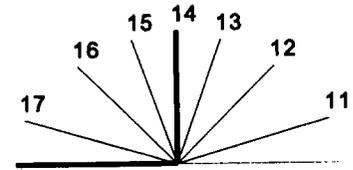
- (21) Moved to completely rearward position
- (22) Moved to rearward midrange position
- (23) Retained pre-impact position
- (24) Moved to upright position
- (25) Moved to slightly forward position
- (26) Moved to forward midrange position
- (27) Moved to completely forward position

*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):  
FOLDING LOCKS
- (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*

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

## CHILD SAFETY SEAT FIELD ASSESSMENT

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

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

**1. Type of Child Safety Seat**

- (0) No child safety seat
- (1) Infant seat
- (2) Toddler seat
- (3) Convertible seat
- (4) Booster seat
- (7) Other type child safety seat (specify):  
\_\_\_\_\_
- (8) Unknown child safety seat type
- (9) Unknown if child safety seat used

**2. Child Safety Seat Orientation**

- (00) No child safety seat
- Designed for Rear Facing for This Age/Weight
- (01) Rear facing
- (02) Forward facing
- (08) Other orientation (specify):  
\_\_\_\_\_
- (09) Unknown orientation

Designed for Forward Facing for This Age/Weight

- (11) Rear facing
- (12) Forward facing
- (18) Other orientation (specify):  
\_\_\_\_\_
- (19) Unknown orientation

Unknown Design or Orientation For This Age/Weight, or Unknown Age/Weight

- (21) Rear facing
- (22) Forward facing
- (28) Other orientation (specify):  
\_\_\_\_\_
- (29) Unknown orientation

(99) Unknown if child safety seat used

**3. Child Safety Seat Harness Usage**

**4. Child Safety Seat Shield Usage**

**5. Child Safety Seat Tether Usage**

Note: Options Below Are Used for Variables 3-5.  
(00) No child safety seat

Not Designed with Harness/Shield/Tether

- (01) After market harness/shield/tether added, not used
- (02) After market harness/shield/tether used
- (03) Child safety seat used, but no after market harness/shield/tether added
- (09) Unknown if harness/shield/tether added or used

Designed With Harness/Shield/Tether

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

Unknown If Designed With Harness/Shield/Tether

- (21) Harness/shield/tether not used
- (22) Harness/shield/tether used
- (29) Unknown if harness/shield/tether used

(99) Unknown if child safety seat used

**6. Child Safety Seat Make/Model**

(Specify make/model and occupant number)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**EJECTION/ENTRAPMENT DATA**

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

**EJECTION** No [] Yes [ ]

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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

<p><b>Ejection</b></p> <p>(1) Complete ejection (2) Partial ejection (3) Ejection, Unknown degree (9) Unknown</p> <p><b>Ejection Area</b></p> <p>(1) Windshield (2) Left front (3) Right front (4) Left rear (5) Right rear (6) Rear</p>	<p>(7) Roof (8) Other area (e.g., back of pickup, etc.) (specify): _____</p> <p>(9) Unknown</p> <p><b>Ejection Medium</b></p> <p>(1) Door/hatch/tailgate (2) Nonfixed roof structure (3) Fixed glazing (4) Nonfixed glazing (specify): _____</p>	<p>(5) Integral structure (8) Other medium (specify): _____</p> <p>(9) Unknown</p> <p><b>Medium Status (Immediately Prior to Impact)</b></p> <p>(1) Open (2) Closed (3) Integral structure (9) Unknown</p>
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**ENTRAPMENT** No [ ] Yes []

Describe entrapment mechanism: \_\_\_\_\_

DRIVER TRAPPED BY DOOR AND STEERING COLUMN. STEERING  
WHEEL CUT OFF AND DOOR PRIED OPEN BY RESCUE PERSONNEL.

Component(s): \_\_\_\_\_

(Note on vehicle interior sketch)



# OCCUPANT ASSESSMENT FORM

1. Primary Sampling Unit Number 81  
 2. Case Number - Stratum 1485  
 3. Vehicle Number 01  
 4. Occupant Number 01

## OCCUPANT'S CHARACTERISTICS

5. Occupant's Age 25  
 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 178  
 Code actual height to the nearest  
 centimeter.  
 (999) Unknown  
70 inches X 2.54 = 178 centimeters

8. Occupant's Weight 073  
 Code actual weight to the nearest  
 kilogram.  
 (999) Unknown  
160 pounds X .4536 = 073 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 1

- (0) Not entrapped/exit not inhibited
- (1) Entrapped/pinned - mechanically restrained
- (2) Could not exit vehicle due to jammed doors, fire, etc.  
(specify): STEERING WHEEL & DOOR PANEL INTRUSION
- (9) Unknown

17. Occupant Mobility 1

- (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>4</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): _____</p> <p>(9) Unknown</p>  | <p>22. Manual Shoulder Belt Upper Anchorage Adjustment <u>1</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>00</u></p> <p>(00) None used, not available, or belt removed/destroyed<br/>           (01) Inoperative (specify): _____</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): _____</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): _____</p> <p>(99) Unknown if belt used</p> | <p>23. Automatic (Passive) Belt System Availability/Function <u>0</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>0</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/>           (3) Automatic belt use unknown<br/>           (9) Unknown</p>   |
| <p>20. Proper Use of Manual (Active) Belts <u>0</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): _____</p> <p>(8) Other improper use of manual belt system (specify): _____</p> <p>(9) Unknown</p>  | <p>25. Automatic (Passive) Belt System Type <u>0</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>0</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): _____</p> <p>(8) Other improper use of automatic belt system (specify): _____</p> <p>(9) Unknown</p> |
| <p>21. Manual (Active) Belt Failure Modes During Accident <u>0</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): _____</p> <p>(6) Broken retractor<br/>           (7) Combination of above (specify): _____</p> <p>(8) Other manual belt failure (specify): _____</p> <p>(9) Unknown</p>   | <p>27. Automatic (Passive) Belt Failure Modes During Accident <u>0</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): _____</p> <p>(6) Broken retractor<br/>           (7) Combination of above (specify): _____<br/>           (8) Other automatic belt failure (specify): _____</p> <p>(9) Unknown</p>   |

**POLICE REPORTED RESTRAINT USE**

**AIR BAG SYSTEM FUNCTION**

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

(9) Police indicated "unknown"

29. Police Reported Air Bag Availability/Function 1
- (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 Deployment Impact + - 000

- (\_000) Not equipped/not available  
*Code the value of the delta V for the impact that initiated the air bag deployment*  
 (\_996) Deployment, unknown longitudinal Delta V  
 (\_997) Not deployed  
 (\_998) Unknown if deployed  
 (\_999) Unknown

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

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

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

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

43. Was There Damage To The Air Bag? 00

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

Yes - Air Bag Damage

- (02) Ruptured  
 (03) Cut  
 (04) Torn  
 (05) Holed  
 (06) Burned  
 (07) Abraded  
 (88) Other damage (specify): \_\_\_\_\_  
 (95) Damaged, details unknown  
 (96) Deployed, unknown if damaged  
 (97) Not deployed  
 (98) Unknown if deployed  
 (99) Unknown

FIRST SEAT FRONTAL AIR BAG SYSTEM  
EVALUATION *continued*

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

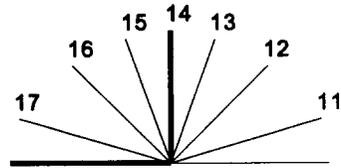
49. Head Restraint Type/Damage by Occupant at This Occupant Position 1  
 (0) No head restraints  
 (1) Integral—no damage  
 (2) Integral—damaged during accident  
 (3) Adjustable—no damage  
 (4) Adjustable—damaged during accident  
 (5) Add-on—no damage  
 (6) Add-on—damaged during accident  
 (8) Other (specify):  
 \_\_\_\_\_  
 (9) Unknown
50. Seat Type (this Occupant Position) 02  
 (00) Occupant not seated or no seat  
 (01) Bucket  
 (02) Bucket with folding back  
 (03) Bench  
 (04) Bench with separate back cushions  
 (05) Bench with folding back(s)  
 (06) Split bench with separate back cushions  
 (07) Split bench with folding back(s)  
 (08) Pedestal (i.e., column supported)  
 (09) Box mounted seat (i.e., van type)  
 (10) Other seat type (specify):  
 \_\_\_\_\_  
 (99) Unknown
51. Seat Orientation (this Occupant Position) 1  
 (0) Occupant not seated or no seat  
 (1) Forward facing seat  
 (2) Rear facing seat  
 (3) Side facing seat (inward)  
 (4) Side facing seat (outward)  
 (8) Other (specify):  
 \_\_\_\_\_  
 (9) Unknown
52. Seat Track Adjusted Position Prior To Impact 4  
 (0) Occupant not seated or no seat  
 (1) Non-adjustable seat track  
  
*Adjustable Seat Track*  
 (2) Seat at forward most track position  
 (3) Seat between forward most and middle track positions  
 (4) Seat at middle track position  
 (5) Seat between middle and rear most track positions  
 (6) Seat at rear most track position  
 (9) Unknown

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

53. Seat Back Incline Prior and Post Impact 14  
 (00) Occupant not seated or no seat  
 (01) Not adjustable

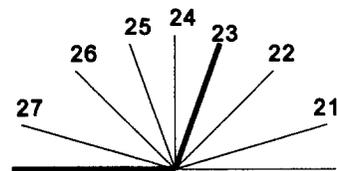
***Upright prior to impact***

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



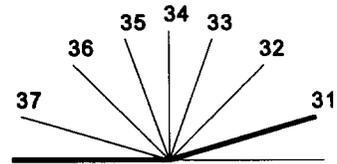
***Slightly reclined prior to impact***

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



***Completely reclined prior to impact***

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



(99) Unknown

54. Seat Performance (this Occupant Position) 1

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

## CHILD SAFETY SEAT

55. Child Safety Seat Make/Model 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) 3

- (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 3

- (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 10

- (00) Not Hospitalized
- 10 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 FIRST UNIT TRANSPORTING UNIT
- (02) Rescue squad
- (03) Police department ROAD VEHICLE
- (04) Trauma unit
- (05) Disaster unit AIR VEHICLE
- (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
- (03) Resuscitation ROAD VEHICLE
- (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**

**TRAUMA DATA**

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

67. 1st Medically Reported Cause of Death 00

68. 2nd Medically Reported Cause of Death 00

69. 3rd Medically Reported Cause of Death 00  
 Code the Occupant Injury from line number(s) for the medically reported injury(s) which reportedly contributed to this occupant's death  
 (00) Not fatal or no additional causes  
 (96) Mode of death given but specific injuries are not linked to cause of death. (specify):  
 (97) Other result (includes fatal ruled disease) (specify):  
 (99) Unknown

70. Number of Recorded Injuries for This Occupant 11  
 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 08  
 (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> 20  
 (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 4  
 (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>81</u>	3. Vehicle Number <u>01</u>
2. Case Number - Stratum <u>14 &amp; J</u>	4. Occupant Number <u>01</u>

## INJURY DATA

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

	Source of Injury Data	A.I.S. - 90						Injury Source	Injury Source Confidence Level	Direct/Indirect Injury	Occupant Area Intrusion Number
		Body Region	Type of Anatomic Structure	Specific Anatomic Structure	Level of Injury	A.I.S. Severity	Aspect				
1st	5. <u>2</u>	6. <u>1</u>	7. <u>4</u>	8. <u>06</u>	9. <u>42</u>	10. <u>4</u>	11. <u>2</u>	12. <u>017</u>	13. <u>1</u>	14. <u>1</u>	15. <u>00</u>
2nd	16. <u>2</u>	17. <u>1</u>	18. <u>4</u>	19. <u>06</u>	20. <u>78</u>	21. <u>4</u>	22. <u>1</u>	23. <u>017</u>	24. <u>1</u>	25. <u>1</u>	26. <u>00</u>
3rd	27. <u>2</u>	28. <u>1</u>	29. <u>6</u>	30. <u>08</u>	31. <u>02</u>	32. <u>3</u>	33. <u>0</u>	34. <u>017</u>	35. <u>1</u>	36. <u>1</u>	37. <u>00</u>
4th	38. <u>2</u>	39. <u>6</u>	40. <u>5</u>	41. <u>02</u>	42. <u>30</u>	43. <u>2</u>	44. <u>6</u>	45. <u>017</u>	46. <u>1</u>	47. <u>2</u>	48. <u>00</u>
5th	49. <u>2</u>	50. <u>8</u>	51. <u>5</u>	52. <u>32</u>	53. <u>00</u>	54. <u>2</u>	55. <u>1</u>	56. <u>251</u>	57. <u>1</u>	58. <u>1</u>	59. <u>00</u>
6th	60. <u>2</u>	61. <u>8</u>	62. <u>5</u>	63. <u>18</u>	64. <u>14</u>	65. <u>3</u>	66. <u>1</u>	67. <u>010</u>	68. <u>3</u>	69. <u>1</u>	70. <u>00</u>
7th	71. <u>2</u>	72. <u>1</u>	73. <u>9</u>	74. <u>06</u>	75. <u>02</u>	76. <u>1</u>	77. <u>7</u>	78. <u>001</u>	79. <u>1</u>	80. <u>1</u>	81. <u>00</u>
8th	82. <u>2</u>	83. <u>7</u>	84. <u>9</u>	85. <u>02</u>	86. <u>02</u>	87. <u>1</u>	88. <u>1</u>	89. <u>010</u>	90. <u>1</u>	91. <u>1</u>	92. <u>00</u>
9th	93. <u>2</u>	94. <u>8</u>	95. <u>9</u>	96. <u>02</u>	97. <u>02</u>	98. <u>1</u>	99. <u>3</u>	100. <u>010</u>	101. <u>1</u>	102. <u>1</u>	103. <u>00</u>
10th	104. <u>2</u>	105. <u>8</u>	106. <u>9</u>	107. <u>04</u>	108. <u>02</u>	109. <u>1</u>	110. <u>1</u>	111. <u>004</u>	112. <u>2</u>	113. <u>1</u>	114. <u>00</u>



**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.  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
	<u>Vessels, Nerves, Organs, Bones, Joints</u> are assigned consecutive two digit numbers beginning with 02.		
	The exceptions to this rule apply to:		
<b>Type of Anatomic Structure</b>	<u>Whole Area</u>		
(1) Whole Area	(02) Skin - Abrasion	<b>Abbreviated Injury Scale</b>	
(2) Vessels	(04) Skin - Contusion		(1) Minor Injury
(3) Nerves	(06) Skin - Laceration		(2) Moderate Injury
(4) Organs (includes Muscles/ligaments)	(08) Skin - Avulsion		(3) Serious Injury
(5) Skeletal (includes joints)	(10) Amputation		(4) Severe Injury
(6) Head - LOC	(20) Burn		(5) Critical Injury
(9) Skin	(30) Crush		(6) Maximum (untreatable)
	(40) Degloving		(7) Injured, unknown severity
	(50) Injury - NFS		
	(90) Trauma, other than mechanical		
	<u>Head - LOC</u>		
	(02) Length of LOC		
	(04) Level		
	(06) of		
	(08) Consciousness		
	(10) Concussion		
	<u>Spine</u>		
	(02) Cervical		
	(04) Thoracic		
	(06) Lumbar		

**SOURCE OF INJURY DATA**

**INJURY SOURCE**

**DIRECT/INDIRECT INJURY**

OFFICIAL RECORDS

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

UNOFFICIAL RECORDS

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

**CONFIDENCE LEVEL**

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

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

## INJURY SOURCES

### FRONT

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

### 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 = 161  
topiates

Glasgow Coma Scale Score

GCSS = 8

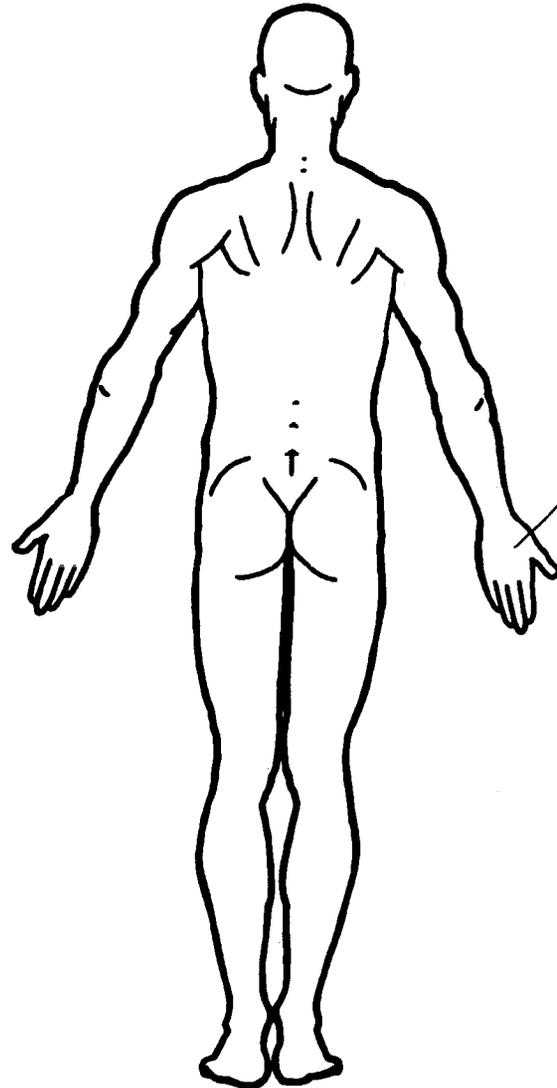
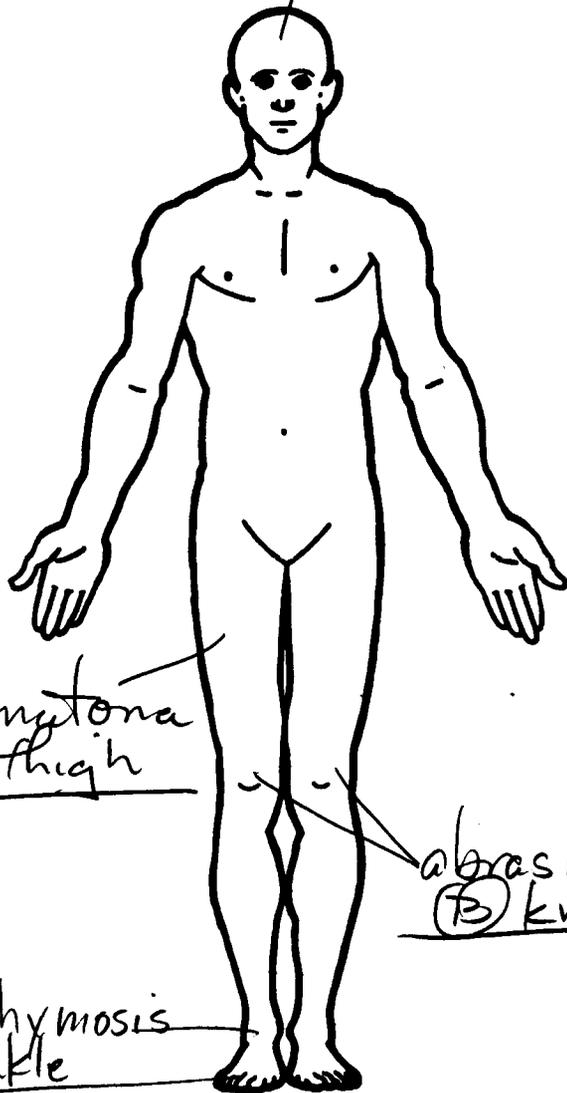
Units of Blood Given

Units = 0

Arterial Blood Gases

pH = 7.44  
PO<sub>2</sub> = 194  
PCO<sub>2</sub> = 30  
HCO<sub>3</sub> = 20

lacerations.  
abrasions forehead

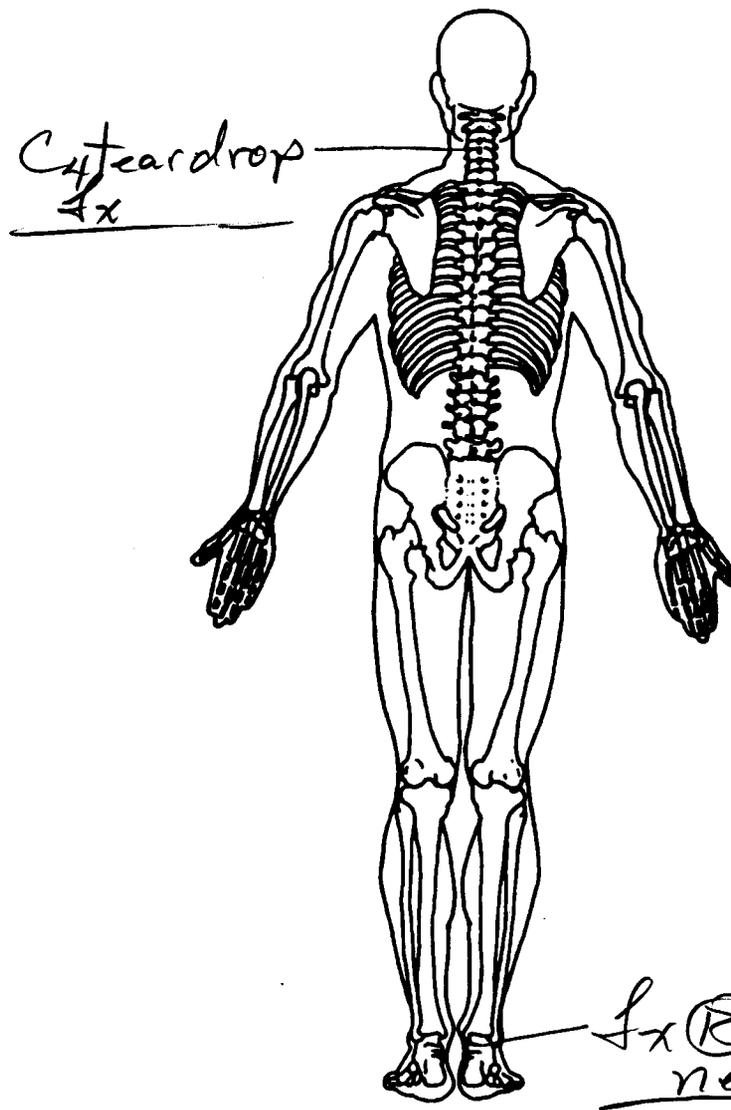
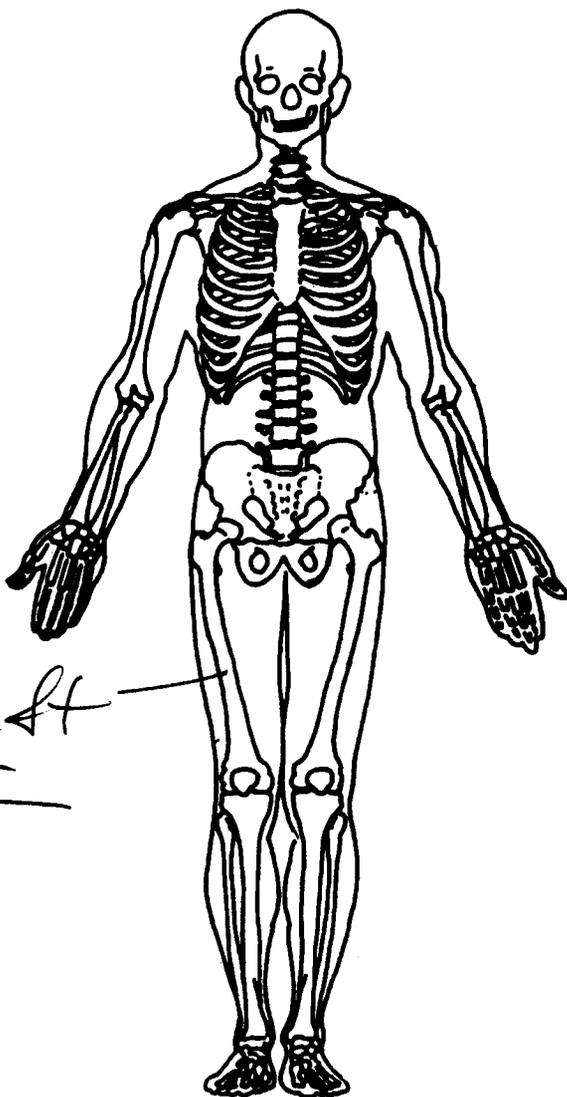


ecchymosis @ ankle

abrasion @ hand

OFFICIAL INJURY DATA — SKELETAL INJURIES

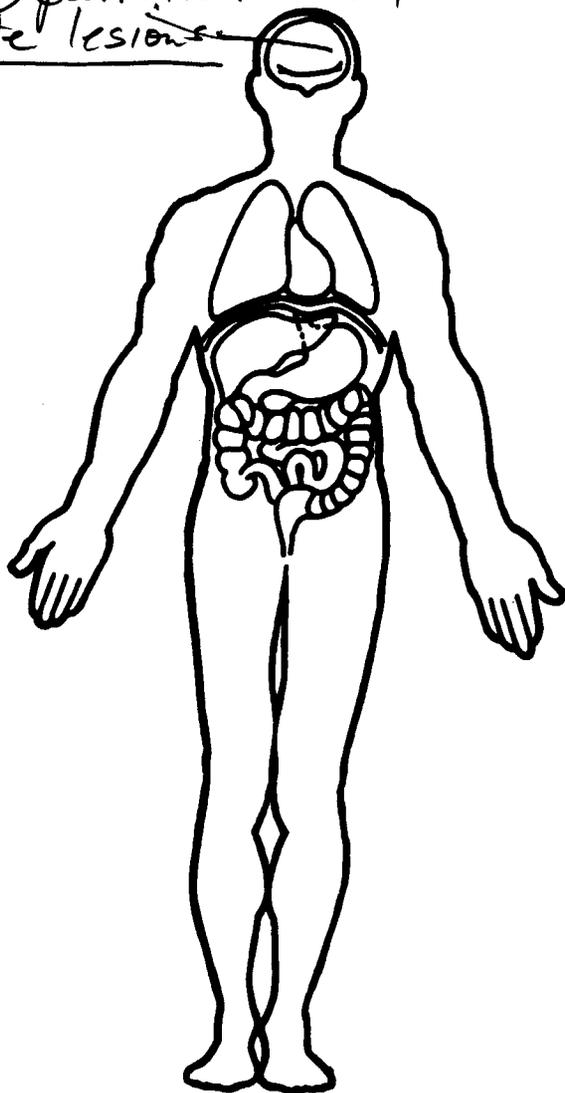
Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



OFFICIAL INJURY DATA INTERNAL INJURIES

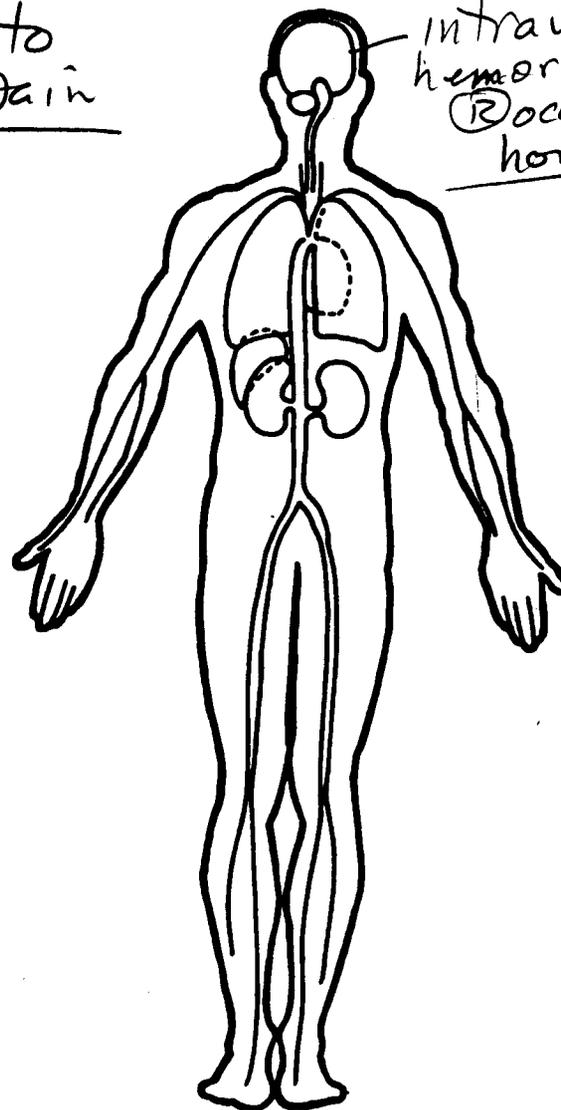
Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)

Small @ parietal-frontal  
punctate lesions



HOC  
GCS = 8  
responsive to  
deep pain

intraventricular  
hemorrhage  
@ occipital  
horn





# OCCUPANT ASSESSMENT FORM

1. Primary Sampling Unit Number 81  
 2. Case Number - Stratum 148 J  
 3. Vehicle Number 01  
 4. Occupant Number 02

## OCCUPANT'S CHARACTERISTICS

5. Occupant's Age 35  
 Code actual age at time of accident.  
 (00) Less than one year old (specify by month): \_\_\_\_\_  
 (97) 97 years and older \_\_\_\_\_  
 (99) Unknown

6. Occupant's Sex 2  
 (1) Male  
 (2) Female-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 = 164 kilograms

9. Occupant's Role 2  
 (1) Driver  
 (2) Passenger  
 (9) Unknown  
*manually filled chart*

## OCCUPANT'S SEATING

10. Occupant's Seat Position 13  
*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 1

- (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 00

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

- (02) Shoulder belt
- (03) Lap belt
- (04) Lap and shoulder belt
- (05) Belt used—type unknown
- (08) Other belt used (specify): \_\_\_\_\_

- (12) Shoulder belt used with child safety seat
- (13) Lap belt used with child safety seat
- (14) Lap and shoulder belt used with child safety seat
- (15) Belt used with child safety seat—type unknown
- (18) Other belt used with child safety seat (specify): \_\_\_\_\_
- (99) Unknown if belt used

20. Proper Use of Manual (Active) Belts 0

- (0) None used or not available
- (1) Belt used properly
- (2) Belt used properly with child safety seat

*Belt Used Improperly*

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

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

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

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

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

(6) Broken retractor \_\_\_\_\_

(7) Combination of above (specify): \_\_\_\_\_

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

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

22. 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
<p>28. Police Reported Belt Use <span style="float: right;"><u>0</u></span></p> <p>(0) None used</p> <p>(1) Police did not indicate belt use</p> <p>(2) Shoulder belt</p> <p>(3) Lap belt</p> <p>(4) Lap and shoulder belt</p> <p>(5) Belt used, type not specified</p> <p>(6) Child safety seat</p> <p>(7) Automatic belt</p> <p>(8) Other type belt, (specify):</p> <p>_____</p> <p>(9) Police indicated "unknown"</p>	<p>30. Frontal Air Bag System Availability/Function (This Occupant Position) <span style="float: right;"><u>0</u></span></p> <p>(0) Not equipped/not available</p> <p>(1) Air bag</p> <p><i>Non-functional</i></p> <p>(2) Air bag disconnected (specify):</p> <p>_____</p> <p>(3) Air bag not reinstalled</p> <p>(9) Unknown</p>
<p>29. Police Reported Air Bag Availability/Function <span style="float: right;"><u>1</u></span></p> <p>(0) No air bag available</p> <p>(1) Police did not indicate air bag availability/function</p> <p>(2) Deployed</p> <p>(3) Not deployed</p> <p>(4) Unknown if deployed</p> <p>(9) Police indicated "unknown"</p>	<p>31. Frontal Air Bag System Deployment (This Occupant Position) <span style="float: right;"><u>0</u></span></p> <p>(0) Not equipped/not available</p> <p>(1) Deployed during accident (as a result of impact)</p> <p>(2) Deployed inadvertently just prior to accident</p> <p>(3) Deployed, details unknown</p> <p>(4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)</p> <p>(5) Unknown if deployed</p> <p>(7) Nondeployed</p> <p>(9) Unknown</p>
<p>Check the Primary Source Used In Determining Belt Use.</p> <p><input checked="" type="checkbox"/> Vehicle inspection</p> <p><input type="checkbox"/> Official injury data</p> <p><input type="checkbox"/> Driver/occupant interview</p> <p><input type="checkbox"/> Other (specify):</p> <p>_____</p> <p><input type="checkbox"/> Unknown if belt used</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>32. Other Than First Seat Frontal Air Bag Availability/Function (This Occupant Position) <span style="float: right;"><u>0</u></span></p> <p>(0) Not equipped/not available</p> <p>(1) Air bag</p> <p><i>Non-functional</i></p> <p>(2) Air bag disconnected (specify):</p> <p>_____</p> <p>(3) Air bag not reinstalled</p> <p>(9) Unknown</p> <p><i>Specify type of "other" air bag present:</i></p> <p>_____</p>
	<p>33. Air Bag(s) Deployment, Other Than First Seat Frontal (This Occupant Position) <span style="float: right;"><u>0</u></span></p> <p>(0) Not equipped with an "other" air bag</p> <p>(1) Deployed during accident (as a result of impact)</p> <p>(2) Deployed inadvertently just prior to accident</p> <p>(3) Deployed, details unknown</p> <p>(4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)</p> <p>(5) Unknown if deployed</p> <p>(7) Nondeployed</p> <p>(9) Unknown</p>
	<p>34. Are There Indications of Air Bag System Failure? (This Occupant Position) <span style="float: right;"><u>0</u></span></p> <p>(0) Not equipped/not available</p> <p>(1) No</p> <p>(2) Yes (specify):</p> <p>_____</p> <p>(9) Unknown</p>

## FIRST SEAT FRONTAL AIR BAG SYSTEM EVALUATION

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

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

Yes

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

36. Type of Air Bag 0

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

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

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

(9) Unknown

38. Air Bag Deployment Accident Event Sequence Number 00

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

39. CDC For Air Bag Deployment Impact 0

- (0) Not equipped/not available  
 (1) Highest delta V  
 (2) Second highest delta V  
 (3) Other non-coded delta V (specify): \_\_\_\_\_

- (6) Deployed, unknown event  
 (7) Not deployed  
 (8) Unknown if deployed  
 (9) Unknown

40. Longitudinal Component of Delta V For Air Bag Deployment Impact + - 000

- (\_000) Not equipped/not available  
*Code the value of the delta V for the impact that initiated the air bag deployment*  
 (\_996) Deployment, unknown longitudinal Delta V  
 (\_997) Not deployed  
 (\_998) Unknown if deployed  
 (\_999) Unknown

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

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

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

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

43. Was There Damage To The Air Bag? 00

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

Yes - Air Bag Damage

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

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

**FIRST SEAT FRONTAL AIR BAG SYSTEM  
EVALUATION** *continued*

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**

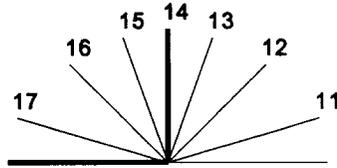
49. Head Restraint Type/Damage by Occupant at This Occupant Position 1  
 (0) No head restraints  
 (1) Integral—no damage  
 (2) Integral—damaged during accident  
 (3) Adjustable—no damage  
 (4) Adjustable—damaged during accident  
 (5) Add-on—no damage  
 (6) Add-on—damaged during accident  
 (8) Other (specify):  
 \_\_\_\_\_  
 (9) Unknown
50. Seat Type (this Occupant Position) 02  
 (00) Occupant not seated or no seat  
 (01) Bucket  
 (02) Bucket with folding back  
 (03) Bench  
 (04) Bench with separate back cushions  
 (05) Bench with folding back(s)  
 (06) Split bench with separate back cushions  
 (07) Split bench with folding back(s)  
 (08) Pedestal (i.e., column supported)  
 (09) Box mounted seat (i.e., van type)  
 (10) Other seat type (specify):  
 \_\_\_\_\_  
 (99) Unknown
51. Seat Orientation (this Occupant Position) 1  
 (0) Occupant not seated or no seat  
 (1) Forward facing seat  
 (2) Rear facing seat  
 (3) Side facing seat (inward)  
 (4) Side facing seat (outward)  
 (8) Other (specify):  
 \_\_\_\_\_  
 (9) Unknown
52. Seat Track Adjusted Position Prior To Impact 4  
 (0) Occupant not seated or no seat  
 (1) Non-adjustable seat track  
  
*Adjustable Seat Track*  
 (2) Seat at forward most track position  
 (3) Seat between forward most and middle track positions  
 (4) Seat at middle track position  
 (5) Seat between middle and rear most track positions  
 (6) Seat at rear most track position  
 (9) Unknown

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

53. Seat Back Incline Prior and Post Impact 22  
 (00) Occupant not seated or no seat  
 (01) Not adjustable

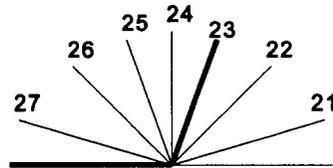
***Upright prior to impact***

- (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



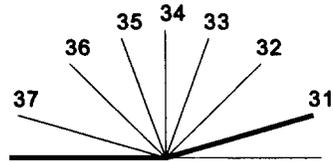
***Slightly reclined prior to impact***

- (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) 3

- (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): BROKEN - SEAT LEANING BACK
- (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) 3

- (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 3

- (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 10

- (00) Not Hospitalized
- 10 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 FIRST UNIT TRANSPORTING UNIT
- (02) Rescue squad
- (03) Police department ROAD VEHICLE
- (04) Trauma unit
- (05) Disaster unit AIR VEHICLE
- (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
- (03) Resuscitation ROAD VEHICLE
- (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****TRAUMA DATA**

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

67. 1st Medically Reported Cause of Death 00

68. 2nd Medically Reported Cause of Death 00

69. 3rd Medically Reported Cause of Death 00  
 Code the Occupant Injury from line number(s) for the medically reported injury(s) which reportedly contributed to this occupant's death  
 (00) Not fatal or no additional causes  
 (96) Mode of death given but specific injuries are not linked to cause of death. (specify):

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

(99) Unknown

70. Number of Recorded Injuries for This Occupant 10  
 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 08  
 (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> 17  
 (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>81</u>	3. Vehicle Number <u>01</u>
2. Case Number - Stratum <u>148J</u>	4. Occupant Number <u>02</u>

## INJURY DATA

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

	Source of Injury Data	A.I.S. - 90						Injury Source	Injury Source Confidence Level	Direct/Indirect Injury	Occupant Area Intrusion Number
		Body Region	Type of Anatomic Structure	Specific Anatomic Structure	Level of Injury	A.I.S. Severity	Aspect				
1st	5. <u>2</u>	6. <u>1</u>	7. <u>6</u>	8. <u>06</u>	9. <u>06</u>	10. <u>2</u>	11. <u>0</u>	12. <u>013</u>	13. <u>2</u>	14. <u>1</u>	15. <u>05</u>
2nd	16. <u>2</u>	17. <u>2</u>	18. <u>9</u>	19. <u>08</u>	20. <u>04</u>	21. <u>2</u>	22. <u>7</u>	23. <u>013</u>	24. <u>1</u>	25. <u>1</u>	26. <u>05</u>
3rd	27. <u>2</u>	28. <u>2</u>	29. <u>9</u>	30. <u>76</u>	31. <u>02</u>	32. <u>1</u>	33. <u>2</u>	34. <u>013</u>	35. <u>2</u>	36. <u>1</u>	37. <u>05</u>
4th	38. <u>2</u>	39. <u>8</u>	40. <u>9</u>	41. <u>02</u>	42. <u>02</u>	43. <u>1</u>	44. <u>1</u>	45. <u>251</u>	46. <u>2</u>	47. <u>1</u>	48. <u>04</u>
5th	49. <u>2</u>	50. <u>8</u>	51. <u>5</u>	52. <u>76</u>	53. <u>02</u>	54. <u>2</u>	55. <u>5</u>	56. <u>012</u>	57. <u>2</u>	58. <u>1</u>	59. <u>05</u>
6th	60. <u>2</u>	61. <u>8</u>	62. <u>5</u>	63. <u>16</u>	64. <u>06</u>	65. <u>2</u>	66. <u>1</u>	67. <u>251</u>	68. <u>2</u>	69. <u>1</u>	70. <u>04</u>
7th	71. <u>2</u>	72. <u>2</u>	73. <u>9</u>	74. <u>02</u>	75. <u>02</u>	76. <u>1</u>	77. <u>1</u>	78. <u>001</u>	79. <u>2</u>	80. <u>1</u>	81. <u>00</u>
8th	82. <u>2</u>	83. <u>8</u>	84. <u>9</u>	85. <u>02</u>	86. <u>02</u>	87. <u>1</u>	88. <u>1</u>	89. <u>012</u>	90. <u>1</u>	91. <u>1</u>	92. <u>05</u>
9th	93. <u>2</u>	94. <u>8</u>	95. <u>9</u>	96. <u>04</u>	97. <u>02</u>	98. <u>1</u>	99. <u>1</u>	100. <u>251</u>	101. <u>2</u>	102. <u>1</u>	103. <u>04</u>
10th	104. <u>2</u>	105. <u>7</u>	106. <u>9</u>	107. <u>06</u>	108. <u>02</u>	109. <u>1</u>	110. <u>1</u>	111. <u>012</u>	112. <u>2</u>	113. <u>1</u>	114. <u>05</u>



**OCCUPANT INJURY CLASSIFICATION**

Body Region	Specific Anatomic Structure	Level of Injury	Aspect
(1) Head		Specific injuries are assigned consecutive two-digit numbers beginning with 02.	(1) Right
(2) Face			(2) Left
(3) Neck	<u>Vessels, Nerves, Organs, Bones, Joints</u> are assigned consecutive two digit numbers beginning with 02.	To the extent possible, within the organizational framework of the AIS, 00 is assigned to an injury NFS as to severity or where only one injury is given in the dictionary for that anatomic structure. 99 is assigned to any injury NFS as to lesion or severity.	(3) Bilateral
(4) Thorax			(4) Central
(5) Abdomen			(5) Anterior
(6) Spine			(6) Posterior
(7) Upper Extremity			(7) Superior
(8) Lower Extremity			(8) Inferior
(9) Unspecified			(9) Unknown
			(0) Whole region
			The exceptions to this rule apply to:
Type of Anatomic Structure	Whole Area	Abbreviated Injury Scale	
(1) Whole Area	(02) Skin - Abrasion	(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		
	Head - LOC		
	(02) Length of LOC		
	(04) Level		
	(06) of		
	(08) Consciousness		
	(10) Concussion		
	Spine		
	(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 = 201  
topiates + cocaine

Glasgow Coma Scale Score

GCSS = 8

Units of Blood Given

Units = 0

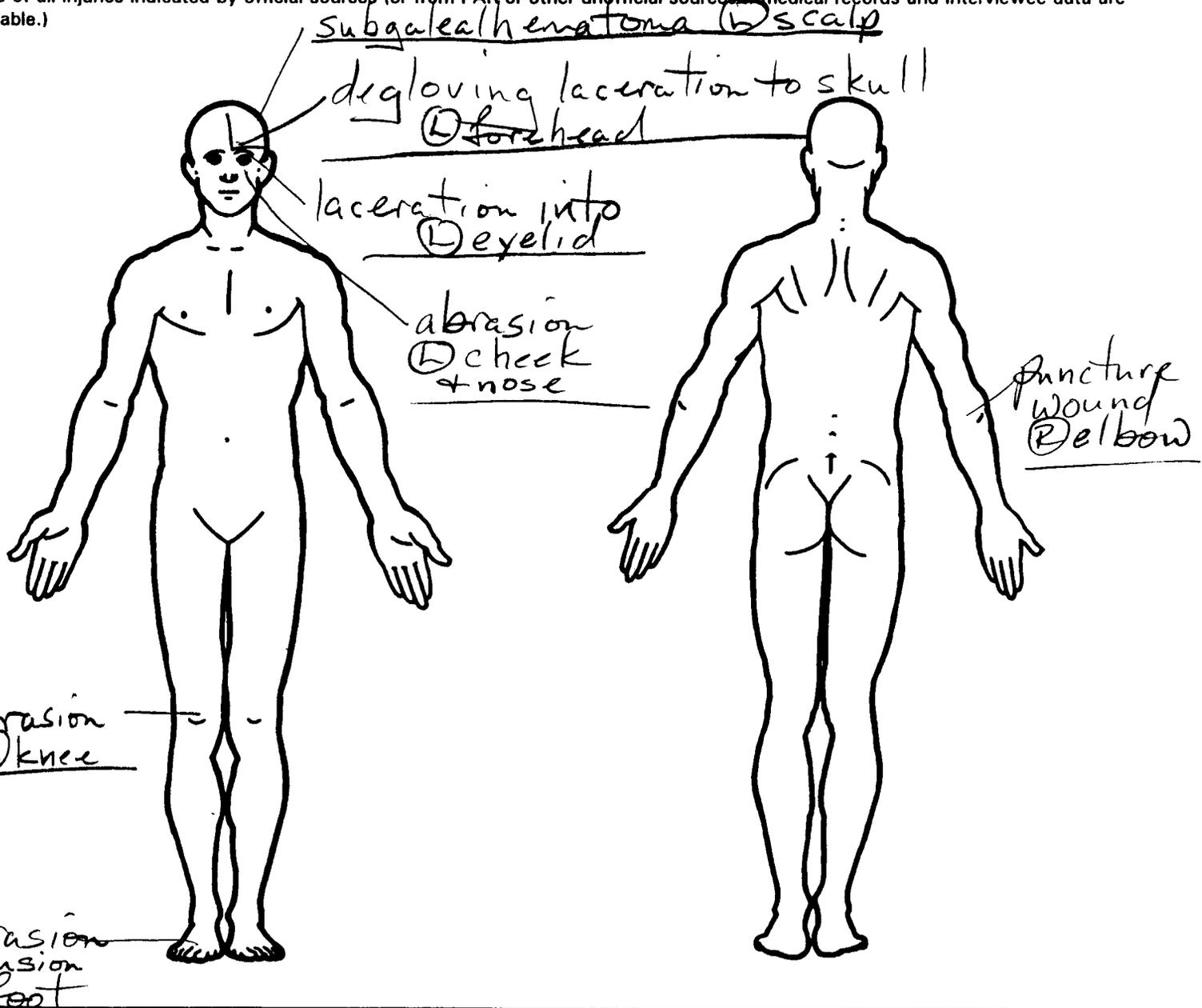
Arterial Blood Gases

pH = 7.45

PO<sub>2</sub> = 129

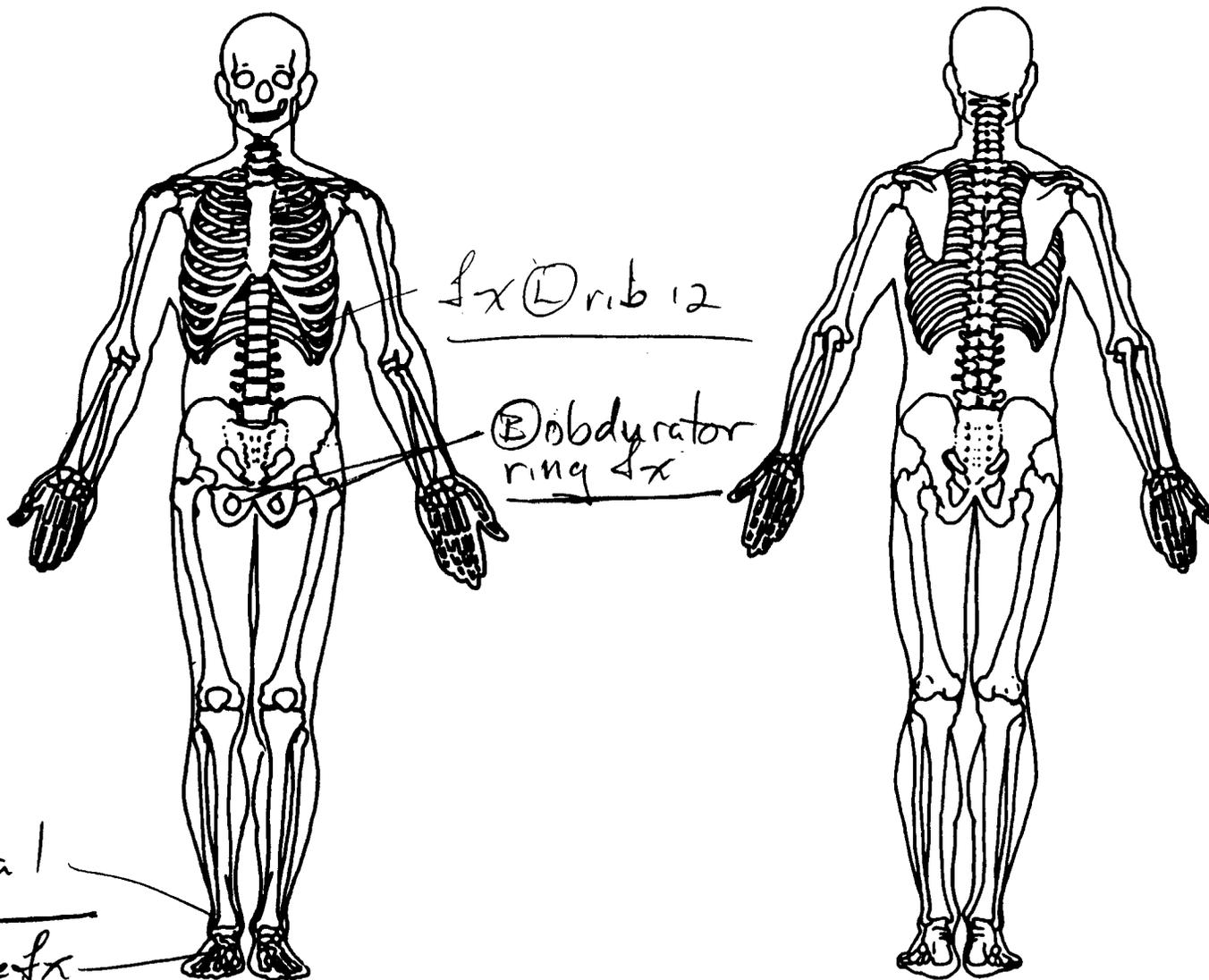
PCO<sub>2</sub> = 24

HCO<sub>3</sub> = 17



# OFFICIAL INJURY DATA — SKELETAL INJURIES

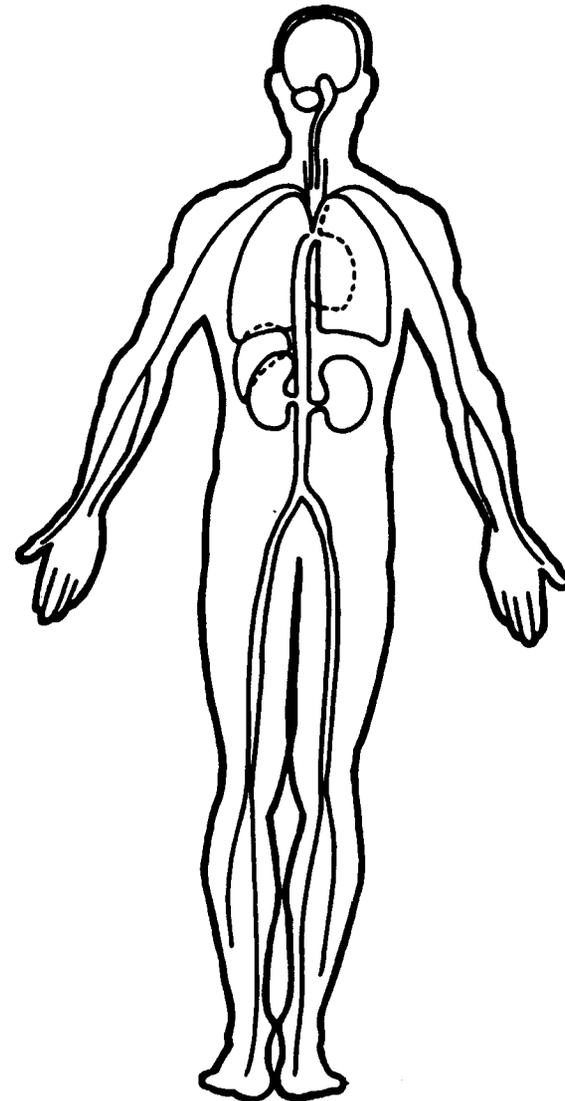
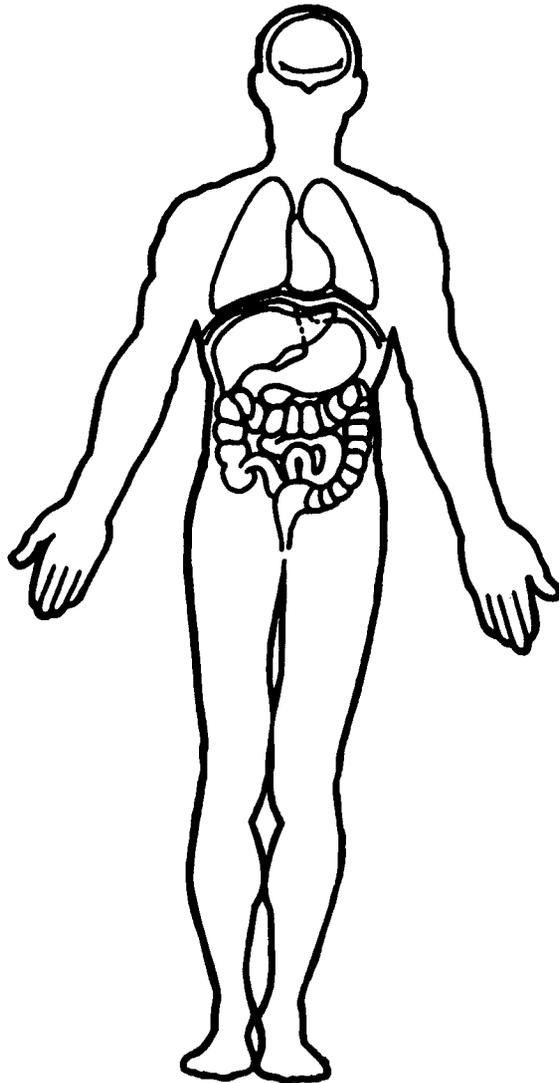
Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



# 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.)

+ LOC GCS 8





# GENERAL VEHICLE FORM

1. Primary Sampling Unit Number 81  
 2. Case Number - Stratum 148J  
 3. Vehicle Number 02

12. Speed Limit 056  
 (000) No statutory limit  
 Code posted or statutory speed limit in kmph  
 (999) Unknown  
35 mph X 1.6093 = 056 kmph

## VEHICLE IDENTIFICATION

4. Vehicle Model Year 95  
 Code the last two digits of the model year  
 (99) Unknown

13. Police Reported Alcohol Presence For Driver 0  
 (0) No alcohol present  
 (1) Yes alcohol present  
 (7) Not reported  
 (8) No driver present  
 (9) Unknown

5. Vehicle Make (specify): 49  
TOYOTA  
 Applicable codes are found in your  
 NASS Data Collection, Coding and  
 Editing Manual.  
 (99) Unknown 3-8xx

14. Alcohol Test Result For Driver 96  
 Code actual value (decimal implied  
 before first digit - 0.xx)  
 (95) Test refused  
 (96) None given  
 (97) AC test performed, results unknown  
 (98) No driver present  
 (99) Unknown

6. Vehicle Model (specify): 401  
4RUNNER  
 Applicable codes are found in your  
 NASS Data Collection, Coding and  
 Editing Manual. 4WD SRS  
 (999) Unknown

Source: PAR

7. Body Type COMPACT UTILITY 14  
 Note: Applicable codes may be found on  
 the back of this page.

15. Police Reported Other Drug Presence For Driver 7  
 (0) No other drug(s) present  
 (1) Yes other drug(s) present  
 (7) Not reported  
 (8) No driver present  
 (9) Unknown

8. Vehicle Identification Number  
JT3VN39WXS8  
 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17  
 Left justify; Slash zeros and letter Z (0 and Z)  
 No VIN - Code all zeros  
 Unknown - Code all nines

16. Other Drug Specimen Test Result For Driver 0  
 (0) No specimen test given  
 (1) Drug(s) not found in specimen  
 (2) Drug(s) found in specimen, (specify):  
 (3) Specimen test given, results unknown or not  
 obtained  
 (8) No driver present  
 (9) Unknown if specimen test given

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

17. Driver's Zip Code [REDACTED]  
 (00001) Driver not a resident of U.S. or territories  
 Code actual 5-digit zip code  
 (99998) No driver present  
 (99999) Unknown

## OFFICIAL RECORDS

10. Police Reported Vehicle Disposition 1  
 (0) Not towed due to vehicle damage  
 (1) Towed due to vehicle damage  
 (9) Unknown

18. Driver's Race/Ethnic Origin 6  
 (1) White (non-Hispanic)  
 (2) Black (non-Hispanic)  
 (3) White (Hispanic)  
 (4) Black (Hispanic)  
 (5) American Indian, Eskimo or Aleut  
 (6) Asian or Pacific Islander  
 (7) Other (specify):  
 (8) No driver present  
 (9) Unknown

11. Police Reported Travel Speed 999  
 Code to the nearest kmph (NOTE: 000 means  
 less than 0.5 kmph)  
 (160) 159.5 kmph and above  
 (999) Unknown  
 \_\_\_ mph X 1.6093 = \_\_\_ kmph

# CODES FOR BODY TYPE

## CDS APPLICABLE VEHICLES

### Automobiles

- (01) Convertible (excludes sun-roof, t-bar)
- (02) 2-door sedan, hardtop, coupe
- (03) 3-door/2-door hatchback
- (04) 4-door sedan, hardtop
- (05) 5-door/4-door hatchback
- (06) Station wagon (excluding van and truck based)
- (07) Hatchback, number of doors unknown
- (08) Other automobile type (specify): \_\_\_\_\_

- (09) Unknown automobile type

### Automobile Derivatives

- (10) Auto based pickup (includes El Camino, Caballero, Ranchero, Brat, and Rabbit pickup)
- (11) Auto based panel (cargo station wagon, auto based ambulance/hearse)
- (12) Large limousine - more than four side doors or stretched chassis
- (13) Three-wheel automobile or automobile derivative

### Utility Vehicles ( $\leq 4,536$ kgs GVWR)

- (14) Compact utility (Jeep CJ-2 - CJ-7, Scrambler, Golden Eagle, Renegade, Laredo, Wrangler, Cherokee [84 and after], Dispatcher, Raider, Bronco II, Bronco [76 and before], Explorer, S-10 Blazer, Geo Tracker, Bravada, S-15 Jimmy, Thing, Pathfinder, Trooper, Trooper II, Rodeo, Amigo, Navajo, 4-Runner, Montero, Passport, Samurai, Sidekick, Rocky)
- (15) Large utility (includes Jeep Cherokee [83 and before], Ramcharger, Trailduster, Bronco-fullsize [78 and after], fullsize Blazer, fullsize Jimmy, Hummer, Landcruiser, Rover, Scout, Yukon)
- (16) Utility station wagon (Chevy Suburban, GMC Suburban, Travelall, Grand Wagoneer, includes suburban limousine)
- (19) Utility, unknown body type

### Van Based Light Trucks ( $\leq 4,536$ kgs GVWR)

- (20) Minivan (Town and Country, Caravan, Grand Caravan, Voyager, Grand Voyager, Mini-Ram, Vista, Aerostar, Windstar, Villager, Lumina APV, Trans Sport, Silhouette, Astro, Safari, Toyota Van, Toyota Minivan, Previa, Nissan Minivan, Quest, Mitsubishi Minivan, Expo Wagon, Vanagon/Camper.)
- (21) Large van (B150-B350, Sportsman, Royal, Maxiwagon, Ram, Tradesman, Voyager [83 and before], E150-E350, Econoline, Clubwagon, Chateau, G10-G30, Chevy Van, Beauville, Sport Van, G15-G35, Rally Van, Vandura.)
- (22) Step van or walk-in van ( $\leq 4,536$  kgs GVWR)
- (23) Van based motorhome ( $\leq 4,536$  kgs GVWR)
- (24) Van based school bus ( $\leq 4,536$  kgs GVWR)
- (25) Van based other bus ( $\leq 4,536$  kgs GVWR)
- (28) Other van type (Hi-Cube Van, Kary) (specify): \_\_\_\_\_
- (29) Unknown van type

### Light Conventional Trucks (Pickup style cab, $\leq 4,536$ kgs GVWR)

- (30) Compact pickup (D50, Colt P/U, Ram 50, Dakota, Arrow Pickup [foreign], Ranger, Courier, S-10, T-10, LUV, S-15, T-15, Sonoma, Datsun/Nissan Pickup, P'up, Mazda Pickup, Toyota Pickup, Mitsubishi Pickup)
- (31) Large Pickup (Jeep Pickup, Comanche, Ram Pickup, D100-D350, W100-W350, F100-F350, C10-C35, K10-K35, R10-R35, V10-V35, Silverado, Sierra, R100-R500, T100)
- (32) Pickup with slide-in camper
- (33) Convertible pickup
- (39) Unknown pickup style light conventional truck type

### Other Light Trucks ( $\leq 4,536$ kgs GVWR)

- (40) Cab chassis based (includes rescue vehicles, light stake, dump, and tow truck)
- (41) Truck based panel
- (42) Light truck based motorhome (chassis mounted)
- (45) Other light conventional truck type
- (48) Unknown light truck type
- (49) Unknown light vehicle type (automobile, utility, van, or light truck)

## OTHER VEHICLES

### Buses (Excludes Van Based)

- (50) School bus (designed to carry students, not cross country or transit)
- (58) Other bus type (e.g., transit, intercity, bus based motorhome) (specify): \_\_\_\_\_
- (59) Unknown bus type

### Medium/Heavy Trucks ( $> 4,536$ kgs GVWR)

- (60) Step van ( $> 4,536$  kgs GVWR)
- (61) Single unit straight truck ( $4,536$  kgs  $<$  GVWR  $\leq 8,845$  kgs)
- (62) Single unit straight truck ( $8,845$  kgs  $<$  GVWR  $\leq 11,793$  kgs)
- (63) Single unit straight truck ( $> 11,793$  kgs GVWR)
- (64) Single unit straight truck, GVWR unknown
- (65) Medium/heavy truck based motorhome
- (67) Truck-tractor with no cargo trailer
- (68) Truck-tractor pulling one trailer
- (69) Truck-tractor pulling two or more trailers
- (70) Truck-tractor (unknown if pulling trailer)
- (78) Unknown medium/heavy truck type
- (79) Unknown truck type (light/medium/heavy)

### Motored Cycles (Does Not Include All-Terrain Vehicles/Cycles)

- (80) Motorcycle
- (81) Moped (motorized bicycle)
- (82) Three-wheel motorcycle or moped
- (88) Other motored cycle (minibike, motorscooter) (specify): \_\_\_\_\_
- (89) Unknown motored cycle type

### Other Vehicles

- (90) ATV (All-Terrain Vehicle) and ATC (All-Terrain Cycle)
- (91) Snowmobile
- (92) Farm equipment other than trucks
- (93) Construction equipment other than trucks
- (97) Other vehicle type
- (99) Unknown body type



**PRECRASH DRIVER RELATED DATA**

30. Driver's Distraction/Inattention To Driving (Prior To Recognition Of Critical Event) 99
- (00) No driver present
  - (01) Attentive or not distracted
  - (02) Looked but did not see
  - Distractions*
  - (03) By other occupant(s), (specify): \_\_\_\_\_
  - (04) By moving object in vehicle (specify): \_\_\_\_\_
  - (05) While talking or listening to cellular phone (specify location and type of phone): \_\_\_\_\_
  - (06) While dialing cellular phone (specify location and type of phone): \_\_\_\_\_
  - (07) While adjusting climate controls
  - (08) While adjusting radio, cassette, CD (specify): \_\_\_\_\_
  - (09) While using other device/controls integral to vehicle (specify): \_\_\_\_\_
  - (10) While using or reaching for device/object brought into vehicle (specify): \_\_\_\_\_
  - (11) Sleepy or fell asleep
  - (12) Distracted by outside person, object, or event (specify): \_\_\_\_\_
  - (13) Eating or drinking
  - (14) Smoking related
  - (97) Distracted/inattentive, details unknown
  - (98) Other, distraction (specify): \_\_\_\_\_
  - (99) Unknown

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

32. Critical Precrash Event 6.6
- THIS VEHICLE LOSS OF CONTROL DUE TO:**
- (01) Blow out or flat tire
  - (02) Stalled engine
  - (03) Disabling vehicle failure (e.g., wheel fell off) (specify): \_\_\_\_\_
  - (04) Non-disabling vehicle problem (e.g., hood flew up) (specify): \_\_\_\_\_
  - (05) Poor road conditions (puddle, pot hole, ice, etc.) (specify): \_\_\_\_\_
  - (06) Traveling too fast for conditions
  - (08) Other cause of control loss (specify): \_\_\_\_\_
  - (09) Unknown cause of control loss

**THIS VEHICLE TRAVELLING**

- (10) Over the lane line on left side of travel lane
- (11) Over the lane line on right side of travel lane
- (12) Off the edge of the road on the left side
- (13) Off the edge of the road on the right side
- (14) End departure
- (15) Turning left at intersection
- (16) Turning right at intersection
- (17) Crossing over (passing through) intersection
- (18) This vehicle decelerating
- (19) Unknown travel direction

**OTHER MOTOR VEHICLE IN LANE**

- (50) Other vehicle stopped
- (51) Traveling in same direction with lower steady speed
- (52) Traveling in same direction while decelerating
- (53) Traveling in same direction with higher speed
- (54) Traveling in opposite direction
- (55) In crossover
- (56) Backing
- (59) Unknown travel direction of other motor vehicle in lane

**OTHER MOTOR VEHICLE ENCROACHING INTO LANE**

- (60) From adjacent lane (same direction)—over left lane line
- (61) From adjacent lane (same direction)—over right lane line
- (62) From opposite direction—over left lane line
- (63) From opposite direction—over right lane line
- (64) From parking lane
- (65) From crossing street, turning into same direction
- (66) From crossing street, across path
- (67) From crossing street, turning into opposite direction
- (68) From crossing street, intended path not known
- (70) From driveway, turning into same direction
- (71) From driveway, across path
- (72) From driveway, turning into opposite direction
- (73) From driveway, intended path not known
- (74) From entrance to limited access highway
- (78) Encroachment by other vehicle—details unknown

**PEDESTRIAN, PEDALCYCLIST, OR OTHER NONMOTORIST**

- (80) Pedestrian in roadway
- (81) Pedestrian approaching roadway
- (82) Pedestrian—unknown location
- (83) Pedalcyclist or other nonmotorist in roadway (specify): \_\_\_\_\_
- (84) Pedalcyclist or other nonmotorist approaching roadway, (specify): \_\_\_\_\_
- (85) Pedalcyclist or other nonmotorist—unknown location (specify): \_\_\_\_\_

**OBJECT OR ANIMAL**

- (87) Animal in roadway
- (88) Animal approaching roadway
- (89) Animal—unknown location
- (90) Object in roadway
- (91) Object approaching roadway
- (92) Object—unknown location
- (98) Other critical precrash event (specify): \_\_\_\_\_
- (99) Unknown

33. Attempted Avoidance Maneuver 99

- (00) No driver present
- (01) No avoidance maneuver
- (02) Braking (no lockup)
- (03) Braking (lockup)
- (04) Braking (lockup unknown)
- (05) Releasing brakes
- (06) Steering left
- (07) Steering right
- (08) Braking and steering left
- (09) Braking and steering right
- (10) Accelerating
- (11) Accelerating and steering left
- (12) Accelerating and steering right
- (98) Other action (specify):  
\_\_\_\_\_
- (99) Unknown

34. Pre-Impact Stability 1

- (0) No driver present
- (1) Tracking
- (2) Skidding longitudinally—rotation less than 30 degrees
- (3) Skidding laterally—clockwise rotation
- (4) Skidding laterally—counterclockwise rotation
- (7) Other vehicle loss-of-control (specify):  
\_\_\_\_\_
- (9) Precrash stability unknown

35. Pre-Impact Location 1

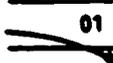
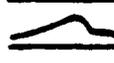
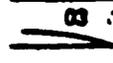
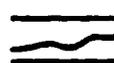
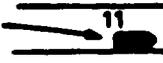
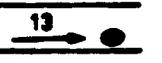
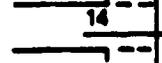
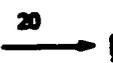
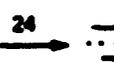
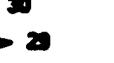
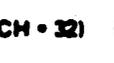
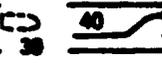
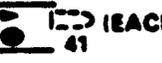
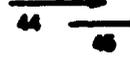
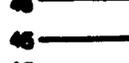
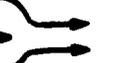
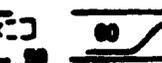
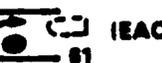
- (0) No driver present
- (1) Stayed in original travel lane
- (2) Stayed on roadway but left original travel lane
- (3) Stayed on roadway, not known if left original travel lane
- (4) Departed roadway
- (5) Remained off roadway
- (6) Returned to roadway
- (7) Entered roadway
- (9) Unknown

36. Accident Type 89

(Note: Applicable codes on back of this page)

- (00) No impact  
Code the number of the diagram that best describes the accident circumstance
- (98) Other accident type (specify):  
\_\_\_\_\_
- (99) Unknown

**STOP HERE IF GV07 DOES NOT EQUAL 01 - 49**

Category	Configuration	ACCIDENT TYPES (Includes Intent)					
I Single Driver	A Right Roadside Departure	 01 DRIVE OFF ROAD	 02 CONTROL/TRACTION LOSS	 03 AVOID COLLISION WITH VEH., PED., ANIM.	04 SPECIFICS OTHER	05 SPECIFICS UNKNOWN	
	B Left Roadside Departure	 06 DRIVE OFF ROAD	 07 CONTROL/TRACTION LOSS	 08 AVOID COLLISION WITH VEH., PED., ANIM.	09 SPECIFICS OTHER	10 SPECIFICS UNKNOWN	
	C Forward Impact	 11 PARKED VEH.	 12 STA. OBJECT	 13 PEDESTRIAN/ANIMAL	 14 END DEPARTURE	15 SPECIFICS OTHER	16 SPECIFICS UNKNOWN
II Same Trafficway Same Direction	D Rear-End	 20 STOPPED 21, 22, 23	 22 BLOWER 25, 26, 27	 24 DECEL. 28, 29, 31	 25 (EACH - 32) SPECIFICS OTHER	 26 (EACH - 33) SPECIFICS UNKNOWN	
	E Forward Impact	 34 CONTROL/TRACTION LOSS	 35 CONTROL/TRACTION LOSS	 36 AVOID COLLISION WITH VEH.	 37 AVOID COLLISION WITH OBJECT	 38 (EACH - 42) SPECIFICS OTHER	 39 (EACH - 43) SPECIFICS UNKNOWN
	F Sideswipe Angle	 44 LATERAL MOVE	 45 (EACH - 48) SPECIFICS OTHER	 46 (EACH - 49) SPECIFICS UNKNOWN			
III Same Trafficway Opposite Direction	G Head-On	 50 LATERAL MOVE	 51 (EACH - 62) SPECIFICS OTHER	 52 (EACH - 63) SPECIFICS UNKNOWN			
	H Forward Impact	 54 CONTROL/TRACTION LOSS	 55 CONTROL/TRACTION LOSS	 56 AVOID COLLISION WITH VEH.	 57 AVOID COLLISION WITH OBJECT	 58 (EACH - 62) SPECIFICS OTHER	 59 (EACH - 63) SPECIFICS UNKNOWN
	I Sideswipe Angle	 64 LATERAL MOVE	 65 (EACH - 66) SPECIFICS OTHER	 66 (EACH - 67) SPECIFICS UNKNOWN			
IV Change Trafficway Vehicle Turning	J Turn Across Path	 68 INITIAL OPPOSITE DIRECTIONS	 69 INITIAL SAME DIRECTIONS	 70 (EACH - 74) SPECIFICS OTHER	 71 (EACH - 75) SPECIFICS UNKNOWN		
	K Turn Into Path	 77 TURN INTO SAME DIRECTION	 78 TURN INTO OPPOSITE DIRECTIONS	 79 (EACH - 84) SPECIFICS OTHER	 80 (EACH - 85) SPECIFICS UNKNOWN		
V Intersecting Paths (Vehicle Damage)	L Straight Paths	 87 (EACH - 89) SPECIFICS OTHER	 88 (EACH - 91) SPECIFICS UNKNOWN				
VI Miscellaneous	M Backing Etc.	 82 BACKING VEH.	 83 OTHER VEH. OR OBJECT	 84 98 Other Accident Type	 85 99 Unknown Accident Type	 86 00 No Impact	

**OCCUPANT RELATED**

- 37. Driver Presence in Vehicle 1  
 (0) Driver not present  
 (1) Driver present  
 (9) Unknown
- 38. Number of Occupants This Vehicle 02  
 (00-96) Code actual number of occupants for this vehicle  
 (97) 97 or more  
 (99) Unknown
- 39. Number of Occupant Forms Submitted 02

**AIR BAG RELATED**

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

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

**VEHICLE WEIGHT ITEMS**

- 43. Vehicle Curb Weight 1890  
 (000) Code weight to nearest 10 kilograms. 186  
 (045) Less than 454 kilograms  
 (612) 6,124 kilograms or more  
 (999) Unknown 1862  
 4105 4165 lbs X .4536 = 1899 kgs  
 Source: 1995

- 44. Vehicle Cargo Weight 0000  
 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 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 01  
 (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 1  
 (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)	ACCIDENT RECONSTRUCTION PROGRAMS HIGHEST DELTA V
51. Front Override/Underride (this Vehicle) <span style="float: right;"><u>0</u></span> 52. Rear Override/Underride (this Vehicle) <span style="float: right;"><u>0</u></span> (0) No override/underride, or not an end-to-end impact between two CDS applicable vehicles, and no medium/heavy truck or bus underride  <i>Override (see specific CDC)</i> <i>[Between 2 CDS applicable vehicles (Bodytype, GV07 = 1-49)]</i> (1) 1st CDC (2) 2nd CDC (3) Other not automated CDC (specify): _____  <i>Underride (see specific CDC)</i> <i>[Between 2 CDS applicable vehicles (Bodytype, GV07 = 1-49)]</i> (4) 1st CDC (5) 2nd CDC (6) Other not automated CDC (specify): _____  (7) Medium/heavy truck or bus override (of any configuration) (9) Unknown	58. Basis for Total (Resultant) Delta V <span style="float: right;"><u>01</u></span> (highest)  (00) No vehicle inspection  <i>Delta V Calculated</i> (01) Reconstruction program-damage only routine (02) Reconstruction program-damage and trajectory routine (03) Missing vehicle algorithm  <i>Delta V Not Calculated</i> (04) At least one vehicle (which may be this vehicle) is beyond the scope of an acceptable reconstruction program, regardless of collision conditions.  <i>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.</i>  (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): _____ _____
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 <span style="float: right;"><u>235</u></span> 54. Heading Angle For Other Vehicle <span style="float: right;"><u>140</u></span> <span style="float: right; margin-right: 20px;"><u>220</u></span>	
RECONSTRUCTION DATA	
55. Towed Trailing Unit <span style="float: right;"><u>0</u></span> (0) No towed unit (1) Yes—towed trailing unit (9) Unknown  56. Documentation of Trajectory Data for This Vehicle <span style="float: right;"><u>0</u></span> (0) No (1) Yes  57. Post Collision Condition of Tree or Pole (For Highest Delta V) <span style="float: right;"><u>0</u></span> (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	

**COMPUTER GENERATED CRASH SEVERITY**

59. Total Delta V Highest  
41 041  
 \_\_\_\_\_ Nearest kmph (highest)  
 \_\_\_\_\_ 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  
-14 014  
 \_\_\_\_\_ Nearest kmph (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

61. Lateral Component of Delta V Highest  
38 038  
 \_\_\_\_\_ Nearest kmph (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  
166665 166.7 00  
 \_\_\_\_\_ 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  
 \_\_\_\_\_ 998  
 \_\_\_\_\_ Nearest kmph (highest)  
 \_\_\_\_\_ 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) 1  
 (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  
 \_\_\_\_\_ 045  
45 Nearest kmph (highest)  
 \_\_\_\_\_ 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) <u>0</u></p> <p>(0) Reconstruction Delta V coded</p> <p><i>Estimated Delta V</i></p> <p>(1) Less than 10 kmph            (2) ≥ 10 kmph but &lt; 25 kmph            (3) ≥ 25 kmph but &lt; 40 kmph            (4) ≥ 40 kmph but &lt; 55 kmph            (5) ≥ 55 kmph</p> <p><i>Other estimates of damage severity</i></p> <p>(6) Minor            (7) Moderate            (8) Severe</p> <p>(9) Unknown</p>	<p>67. Type of Vehicle Inspection <u>3</u></p> <p>(0) No inspection            (1) Vehicle fully repaired-no damage evident            (2) Partial inspection (specify): _____            (3) Complete inspection</p> <hr/> <p style="text-align: center;"><b>DELTA V EVENT NUMBER</b></p> <p>68. Delta V Event Number <u>01</u></p> <p><u>1</u> Code the accident event sequence number that resulted in the Delta V that has been coded above for this vehicle</p> <p>(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.**



# EXTERIOR VEHICLE FORM

1. Primary Sampling Unit Number <u>81</u> 2. Case Number - Stratum <u>148J</u>	3. Vehicle Number <u>02</u>
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## VEHICLE IDENTIFICATION

VIN 9 — NOT VISABLE — 9 Model Year 95  
 Vehicle Make (specify): TOYOTA Vehicle Model (specify): 4RUNNER

## 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
1	<u>STARTS 28 CM FORWARD THE LR AXLE</u>	<u>STARTS AT THE LR AXLE</u>	C-3

## 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								
1	<u>LEFT SIDE AT SILL</u>	197	C-3	250	1	39	62	52	30	0	-4.5
2	<u>ROUOVER</u>										

ORIGINAL SPECIFICATIONS WORK SHEET

4X4 4 RUNNER 4 DR

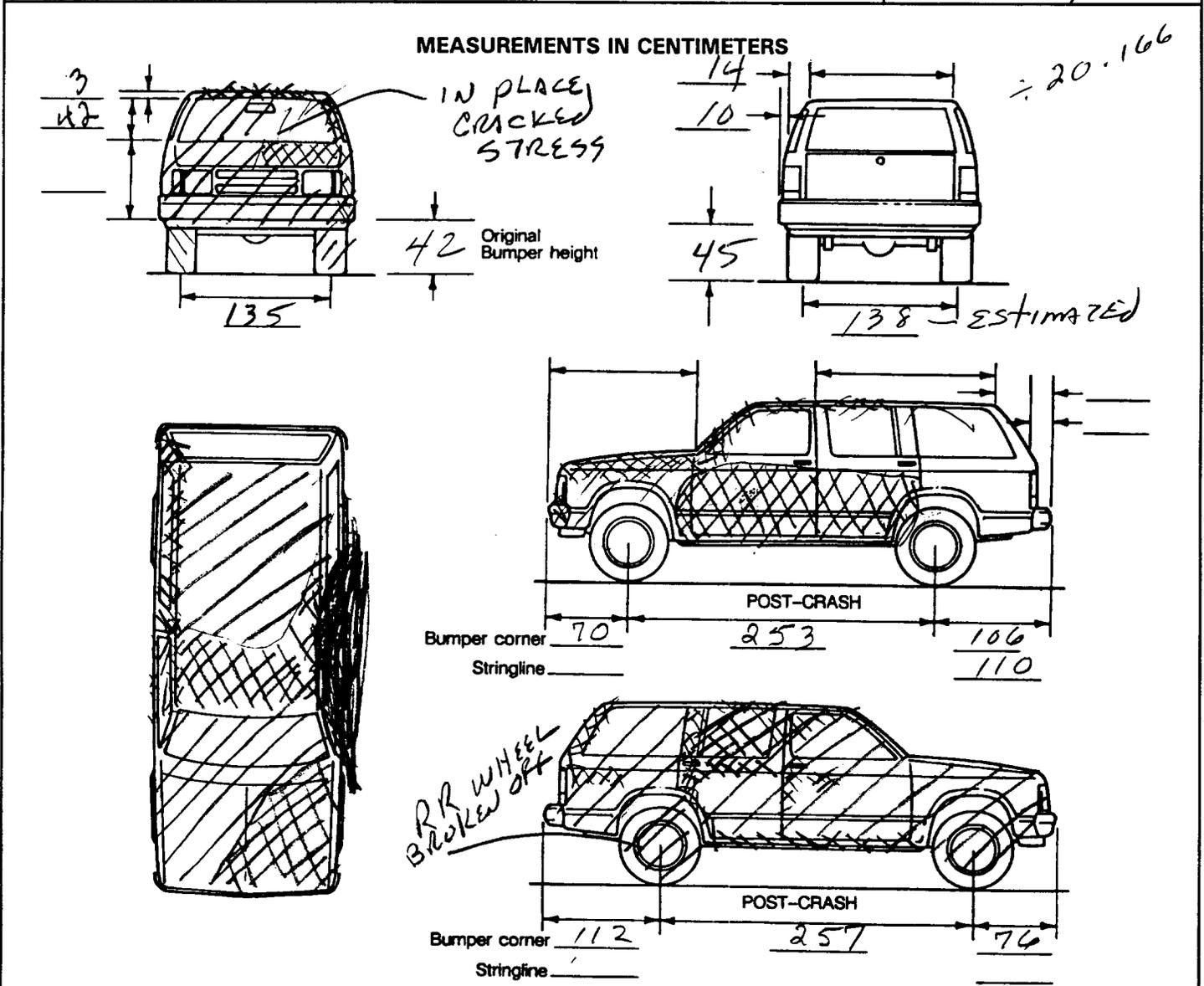
Wheelbase	<u>103.3</u> inches	x 2.54 =	<u>262</u> cm
Overall Length	<u>176.0</u> inches	x 2.54 =	<u>447</u> cm
Maximum Width	<u>410566.5</u> inches	x 2.54 =	<u>169</u> cm
Curb Weight	<u>4165</u> pounds	x .4536 =	<u>1864.889</u> kg
Average Track	_____ inches	x 2.54 =	<u>137</u> cm
Front Overhang	<u>NOT AVAILABLE</u> inches	x 2.54 =	<u>75</u> cm
Rear Overhang	_____ inches	x 2.54 =	<u>110</u> cm
Undeformed End Width	_____ inches	x 2.54 =	<u>154</u> cm
Engine Size: cyl./displ.	_____ cc	x .001 =	_____ L
	_____ CID	x .0164 =	_____ L

Brownham 1995 { I-4 - 2.4 WT - 3825 = 1735  
 V-6 - 3.0 WT - 4165 = 1889

TRUCK INDEX { 4X4  
 WT V6 - 4105  
 WT I4 - 3825

**VEHICLE DAMAGE SKETCH**

<p><b>TIRE—WHEEL DAMAGE</b></p> <p>a. Rotation physically restricted      b. Tire deflated</p> <table style="width:100%;"> <tr> <td>RF <u>2</u></td> <td>RF <u>1</u></td> </tr> <tr> <td>LF <u>2</u></td> <td>LF <u>1</u></td> </tr> <tr> <td>RR <u>1</u></td> <td>RR <u>2</u></td> </tr> <tr> <td>LR <u>2</u></td> <td>LR <u>2</u></td> </tr> </table> <p>(1) Yes (2) No (8) NA (9) Unk.</p>	RF <u>2</u>	RF <u>1</u>	LF <u>2</u>	LF <u>1</u>	RR <u>1</u>	RR <u>2</u>	LR <u>2</u>	LR <u>2</u>	<p><b>ORIGINAL SPECIFICATIONS</b></p> <p>Wheelbase <u>262</u> cm</p> <p>Overall Length <u>447</u> cm</p> <p>Maximum Width <u>169</u> cm</p> <p>Curb Weight <u>1862-1889</u> kg</p> <p>Average Track <u>127</u> cm</p> <p>Front Overhang _____ cm</p> <p>Rear Overhang _____ cm</p> <p>Undeformed End Width <u>154</u> cm</p> <p>Engine Size: cyl./displ. <u>V6 3.0</u> L</p>	<p><b>WHEEL STEER ANGLES</b> (For locked front wheels or displaced rear axles only)</p> <p>RF ± _____ °</p> <p>LF ± _____ °</p> <p>RR ± <u>TORN OFF</u></p> <p>LR ± _____ °</p> <p>Within ± 5 degrees</p>
RF <u>2</u>	RF <u>1</u>									
LF <u>2</u>	LF <u>1</u>									
RR <u>1</u>	RR <u>2</u>									
LR <u>2</u>	LR <u>2</u>									
<p><b>TYPE OF TRANSMISSION</b></p> <p><input type="checkbox"/> Manual    <input checked="" type="checkbox"/> Automatic</p> <p>END SHIFT ≥ 10 CM</p> <p><input type="checkbox"/> Yes    <input checked="" type="checkbox"/> No</p>	<p><b>DRIVE WHEELS</b></p> <p><input type="checkbox"/> FWD    <input type="checkbox"/> RWD    <input checked="" type="checkbox"/> 4WD</p>	<p>Approximate Cargo Weight <u>∅</u> kg</p>								



**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		
01	01	10:00 -70°	00	L	Y	E	W	04
02	31	±00	00	T	D	D	0	04
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*Questionable using 3cm ruler could be a*

**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>01</u>	6. <u>10</u>	7. <u>L</u>	8. <u>Y</u>	9. <u>E</u>	10. <u>W</u>	11. <u>04</u>

Second Highest Delta "V"

12. <u>02</u>	13. <u>31</u>	14. <u>00</u>	15. <u>T</u>	16. <u>D</u>	17. <u>D</u>	18. <u>0</u>	19. <u>04</u>
---------------	---------------	---------------	--------------	--------------	--------------	--------------	---------------

**CRUSH PROFILE IN CENTIMETERS**

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

HIGHEST DELTA "V"

20. L	21. C <sub>1</sub>	C <sub>2</sub>	C <sub>3</sub>	C <sub>4</sub>	C <sub>5</sub>	C <sub>6</sub>	22. ±D
<u>250</u>	<u>001</u>	<u>039</u>	<u>062</u>	<u>052</u>	<u>030</u>	<u>000</u>	<u>+0005</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) 197  
 \_\_\_\_\_ 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  
 \_\_\_\_\_ inches X 2.54 = \_\_\_\_\_ centimeters

29. Original Average Track Width 135  
 \_\_\_\_\_ Code to the nearest centimeter  
 (185) 185 centimeters or more  
 (999) Unknown  
 \_\_\_\_\_ inches X 2.54 = \_\_\_\_\_ 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 8
- 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): DIRECTLY OVER THE RR AXLE  
 (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 MAGNET ALSO HAS METAL GUARD.  
 (9) Unknown

**FIRE OCCURRENCE**

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

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





# INTERIOR VEHICLE FORM

1. Primary Sampling Unit Number 81  
 2. Case Number - Stratum 148J  
 3. Vehicle Number 02

## INTEGRITY

4. Passenger Compartment Integrity 06  
 (00) No integrity loss

Yes, Integrity Was Lost Through

(01) Windshield 74x42 cm  
 (02) Door (side)  
 (03) Door/hatch (back door)  
 (04) Roof  
 (05) Roof glass  
 (06) Side window  
 (07) Rear window (backlight)  
 (08) Roof and roof glass  
 (09) Windshield and door (side)  
 (10) Windshield and roof  
 (11) Side and rear window (side window and backlight)  
 (12) Windshield and side window  
 (13) Door and side window  
 (98) Other combination of above (specify):  
 (99) Unknown

### Door, Tailgate or Hatch Opening

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

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

### Damage/Failure Associated with Door, Tailgate or Hatch Opening in Collision. If IV05-IV09 ≠ 2, Then code 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 3 17. RF 3 18. LR 3 19. RR 3  
 20. BL 3 21. Roof 0 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) Unknown

### Window Precrash Glazing Status

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

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

### Glazing Damage from Impact Forces

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

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

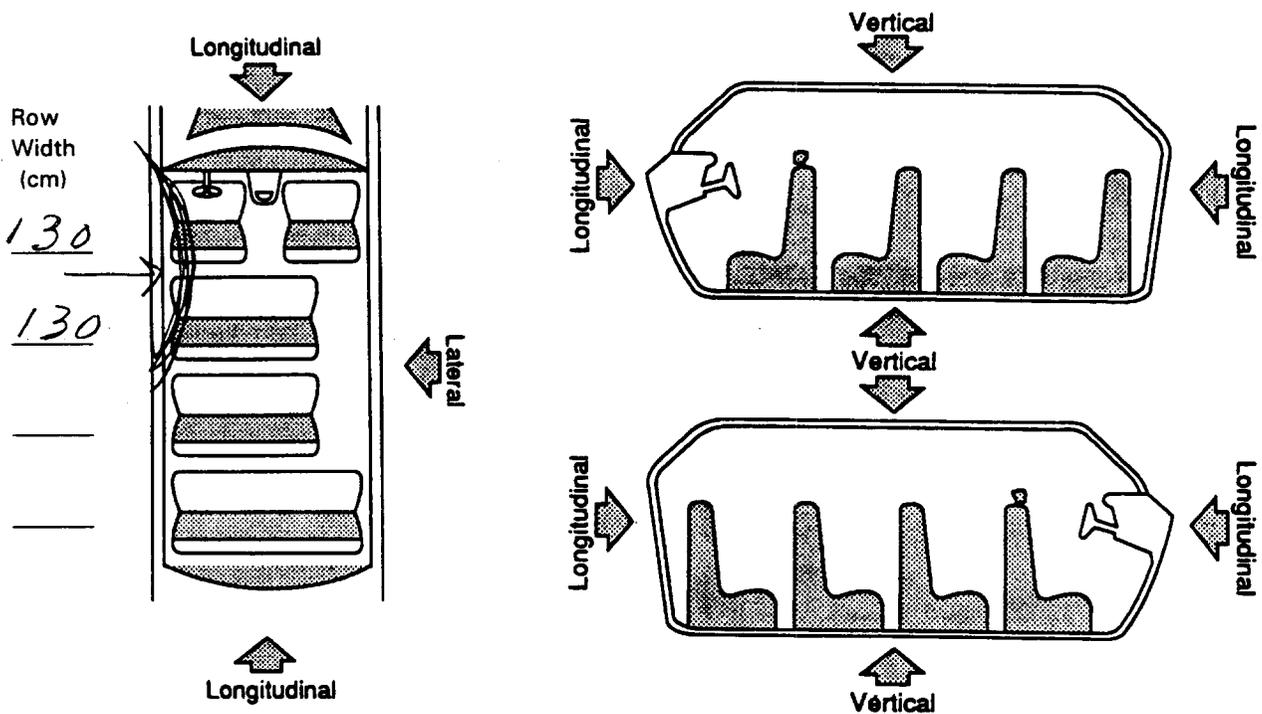
### Glazing Damage from Occupant Contact

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

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

# INTRUSION WORKSHEET

**NOTE: SKETCH INTRUDED AREAS**



11 - A PILLAR - VERT COMP = 80 VALUE = 58 INTRUSION = 22

LOCATION OF INTRUSION	INTRUDED COMPONENT	(All Measurements Are In Centimeters)				DOMINANT CRUSH DIRECTION
		COMPARISON VALUE	-	INTRUDED VALUE	=	
11	WINDSHIELD HEADER	96	-	70	=	26 6 VERT
11	WINDSHIELD	80	-	63	=	17 11 "
11	ROOF SIDE RAIL	64	-	41	=	23 8 VERT
11	ROOF	86	-	59	=	27 4 "
11	SIDE DOOR PANEL	65	-	39	=	26 5 LAT
11	DOOR SILL	80	-	37	=	43 2 "
11	FLOOR BOARD	50	-	45	=	5 18 VERT
11	DRIVERS SEAT CUSHION	74	-	68	=	6 17 "
13	WINDSHIELD	80	-	72	=	8 16 "
13	WINDSHIELD HEADER	96	-	87	=	9 15 "
13	ROOF	86	-	70	=	16 12 "
21	B PILLAR BELOW GRN HSE	79	-	43	=	36 3 LAT
21	SIDE DOOR PANEL	65	-	42	=	23 7 "
21	SIDE DOOR SILL	80	-	24	=	56 1 "
21	FLOOR BOARD	97	-	86	=	11 13 VERT
21	SEAT CUSHION	86	-	65	=	21 10 "
23	" "	86	-	76	=	10 14 "

Document no more than the 15 most severe intrusions

**OCCUPANT AREA INTRUSION**

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

**INTRUDING COMPONENT**

*Interior Components*

- (01) Steering assembly
- (02) Instrument panel left
- (03) Instrument panel center
- (04) Instrument panel right
- (05) Toe pan
- (06) A (A1/A2)-pillar
- (07) B-pillar
- (08) C-pillar
- (09) D-pillar
- (10) Side panel - forward of the A1/A2-pillar
- (11) Door panel (side)
- (12) Side panel - rear of the B-pillar
- (13) Roof (or convertible top)
- (14) Roof side rail
- (15) Windshield
- (16) Windshield header
- (17) Window frame
- (18) Floor pan (includes sill)
- (19) Backlight header
- (20) Front seat back
- (21) Second seat back
- (22) Third seat back
- (23) Fourth seat back
- (24) Fifth seat back
- (25) Seat cushion
- (26) Back door/panel (e.g., tailgate)
- (27) Other interior component (specify):

DOOR SILL

*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>21</u>	48. <u>27</u>	49. <u>5</u>	50. <u>3</u>
2nd	51. <u>11</u>	52. <u>27</u>	53. <u>4</u>	54. <u>3</u>
3rd	55. <u>21</u>	56. <u>07</u>	57. <u>4</u>	58. <u>3</u>
4th	59. <u>11</u>	60. <u>13</u>	61. <u>3</u>	62. <u>1</u>
5th	63. <u>11</u>	64. <u>11</u>	65. <u>3</u>	66. <u>3</u>
6th	67. <u>11</u>	68. <u>16</u>	69. <u>3</u>	70. <u>1</u>
7th	71. <u>21</u>	72. <u>11</u>	73. <u>3</u>	74. <u>3</u>
8th	75. <u>11</u>	76. <u>14</u>	77. <u>3</u>	78. <u>1</u>
9th	79. <u>11</u>	80. <u>06</u>	81. <u>3</u>	82. <u>1</u>
10th	83. <u>21</u>	84. <u>25</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) 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
------------------	---	--------------	---	-------------

	—		=	
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	—		=	
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	—		=	
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	—		=	
--	---	--	---	--

**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 2  
 (0) No tilt steering column  
 (1) Full up  
 (2) Between full up and center  
 (3) Center  
 (4) Between center and full down  
 (5) Full down  
 (9) Unknown

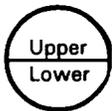
89. Telescoping Steering Column Adjustment 0  
 (0) No telescoping steering column  
 (1) Full back  
 (2) Between full back and midpoint  
 (3) Midpoint  
 (4) Between midpoint and full forward  
 (5) Full forward  
 (9) Unknown

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

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

*Quarter Sections*

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



*Half Sections*

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



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

92. Odometer Reading 044,000  
 \_\_\_\_\_ 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  
27.156 miles X 1.6093 = 43,702 kilometers

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

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

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

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

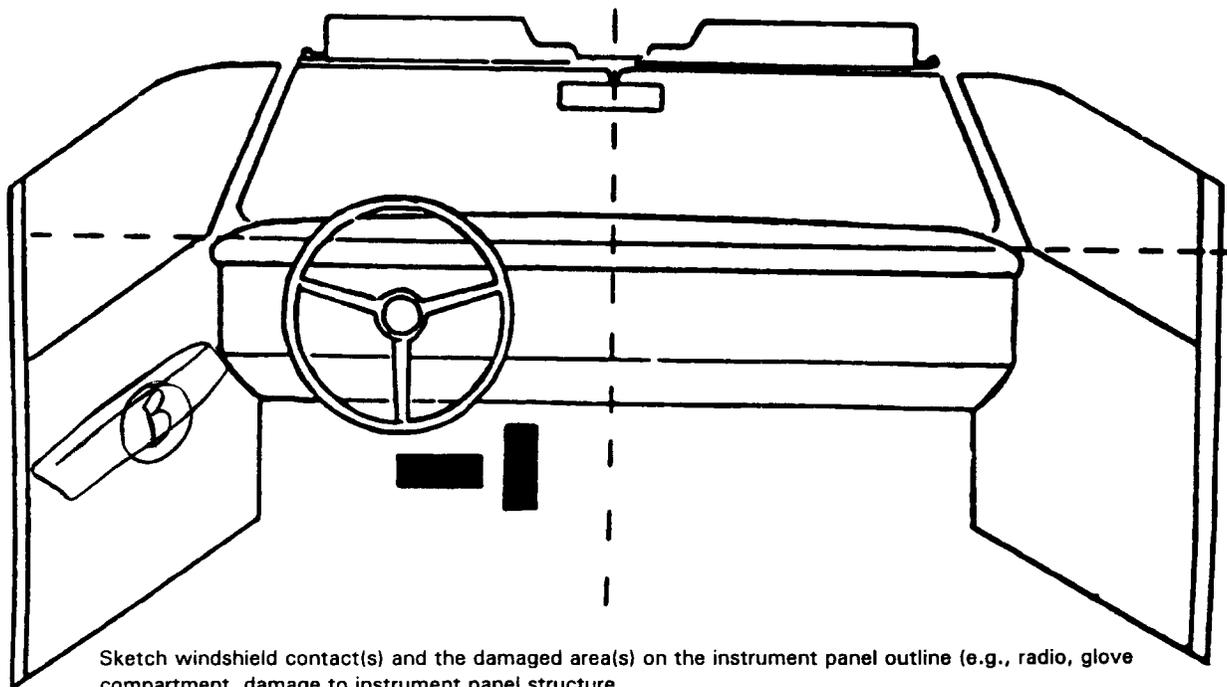
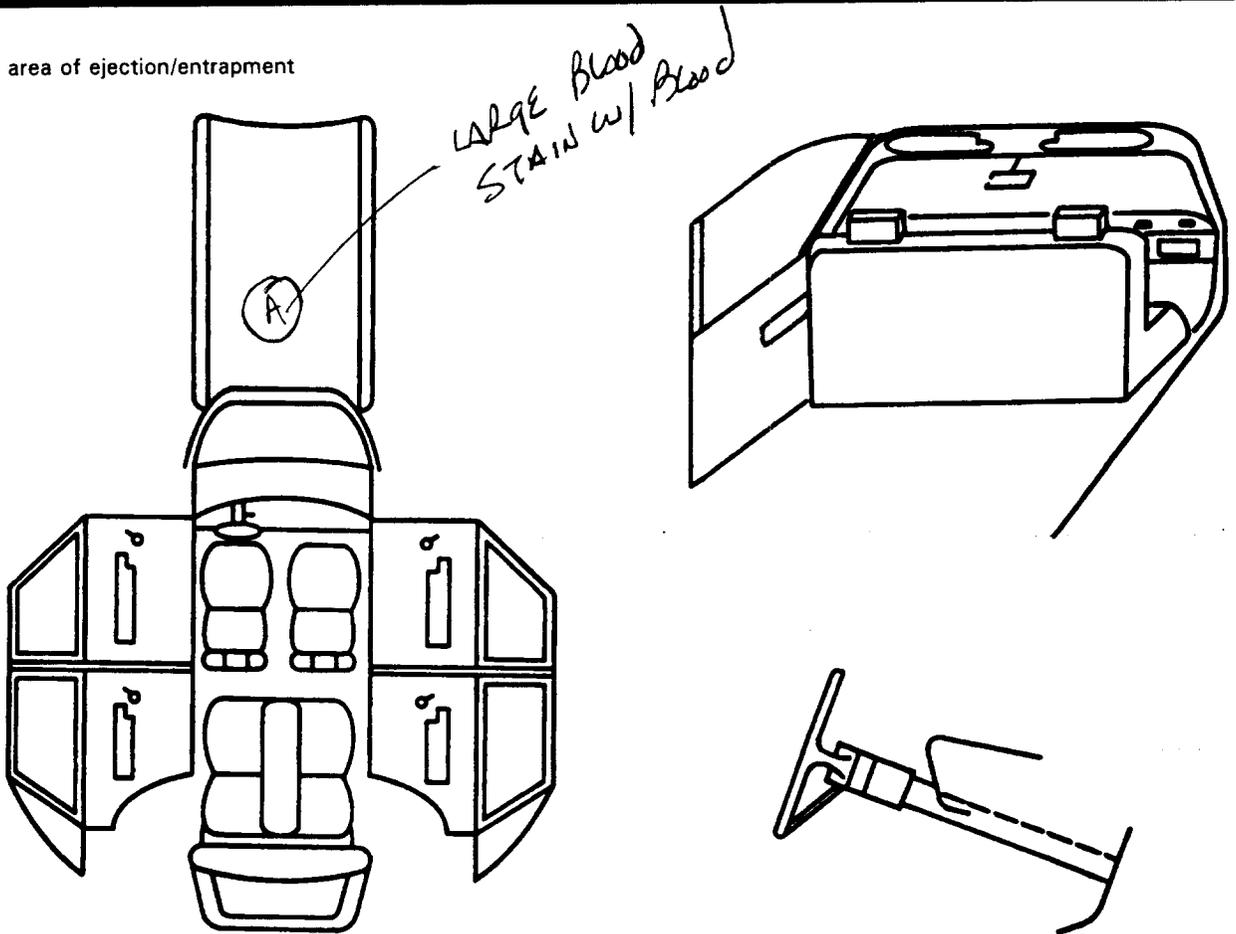
96. Did Glove Compartment Door Open During Collision(s)? 1  
 (0) No glove compartment door  
 (1) No - door did not open  
 (2) Yes - door opened  
 (9) Unknown

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

(9) Unknown

### VEHICLE INTERIOR SKETCHES

Note area of ejection/entrapment



Sketch windshield contact(s) and the damaged area(s) on the instrument panel outline (e.g., radio, glove compartment, damage to instrument panel structure).  
Cross hatch contact points, draw spider webs or use other annotation as may be appropriate.  
Annotate the contacted area with a letter (begin with A) and list on the Points of Occupant Contact page.

**POINTS OF OCCUPANT CONTACT**

Contact	Interior Component Contacted	Occupant No. If Known	Body Region If Known	Supporting Physical Evidence	Confidence Level of Contact Point
A	205	?	HEAD	BLOOD STAIN & HAIR	1
B	052	1	L SIDE	INTRUSION & DOOR	2
C	051	1	"	" "	2
D					
E					
F					
G					
H					
I					
J					
K					
L					
M					
N					

**CODES FOR INTERIOR COMPONENTS**

**FRONT**

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

**LEFT SIDE**

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

**RIGHT SIDE**

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

**INTERIOR**

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

**AIR BAG**

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

**ROOF**

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

**FLOOR**

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

**REAR**

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

**ADAPTIVE (ASSISTIVE) DRIVING EQUIPMENT**

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

**CONFIDENCE LEVEL OF CONTACT POINT**

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



**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
FIRST	Availability/Function			
	Deployment			
	Failure			

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

**AUTOMATIC BELTS**

		Left	Right
FIRST	A-Availability/Function		
	B-Use		
	C-Type		
	D-Proper Use		
	E-Failure Modes		

A-Automatic (Passive) Belt System Availability/Function	D-Proper Use of Automatic (Passive) Belt System	E-Automatic (Passive) Belt Failure Modes During Accident
(0) Not equipped/not available (1) 2 point automatic belts (2) 3 point automatic belts (3) Automatic belts - type unknown  <i>Non-functional</i> (4) Automatic belts destroyed or rendered inoperative (9) Unknown	(0) Not equipped/not available/not used (1) Automatic belt used properly (2) Automatic belt used properly with child safety seat  <i>Automatic Belt Used Improperly</i> (3) Automatic shoulder belt worn under arm (4) Automatic shoulder belt worn behind back (5) Automatic belt worn around more than one person (6) Lap portion of automatic belt worn on abdomen (7) Automatic lap and shoulder belt or automatic shoulder belt used improperly with child safety seat (specify): _____  (8) Other improper use of automatic belt system (specify): _____ (9) Unknown	(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
<b>B-Automatic (Passive) Belt System Use</b> (0) Not equipped/not available/destroyed or rendered inoperative (1) Automatic belt in use (2) Automatic belt not in use (manually disconnected, motorized track inoperative) (3) Automatic belt use unknown (9) Unknown		
<b>C-Automatic (Passive) Belt System Type</b> (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?		
B-Flaps open at tear points?		
C-Flaps damaged?		
D-Air bag damaged?		
E-Source of air bag damage		
F-Air bag tethered?		
G-Air bag have vent ports?		
H-Other occupant contact air bag?		
I-Occupant wearing eyewear?		

**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?**

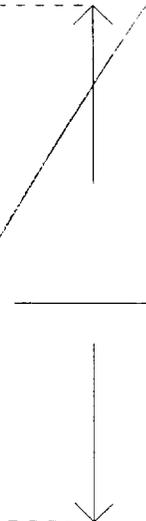
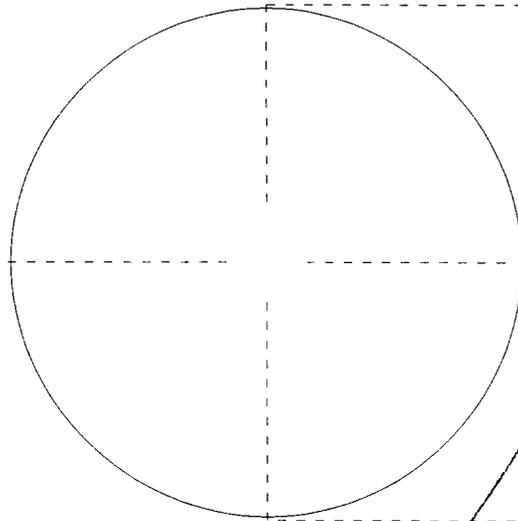
- (0) Not equipped/not available
- (1) No
- (2) Yes (specify): \_\_\_\_\_
- (3) Deployed, unknown if other occupant contact to air bag
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

**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

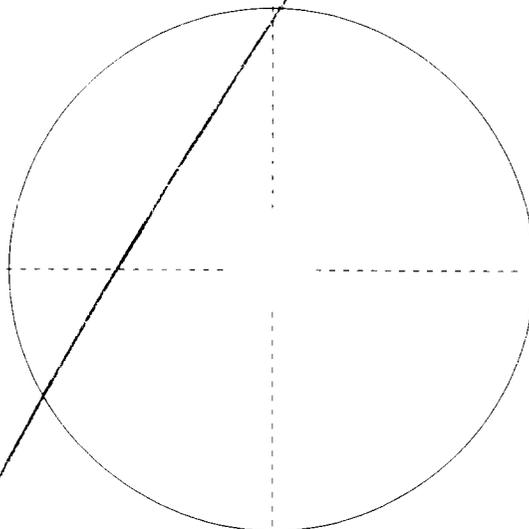
**DRIVER AIR BAG DAMAGE AND CONTACT SKETCHES**

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



cm.

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

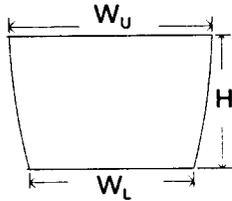


**DRIVER AIR BAG SKETCHES (Cont'd)**

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

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

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



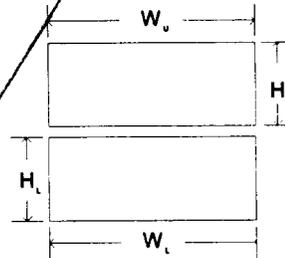
4. DRIVER AIR BAG MODULE COVER FLAP SIZE (DOUBLE)

a. Upper Flap

b. Lower Flap

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

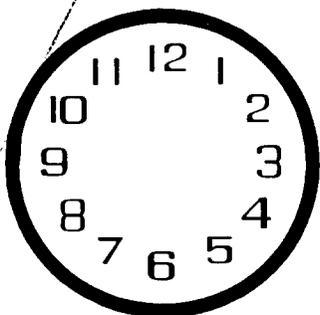
height ( $H_U$ ) \_\_\_\_\_ height ( $H_L$ ) \_\_\_\_\_



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

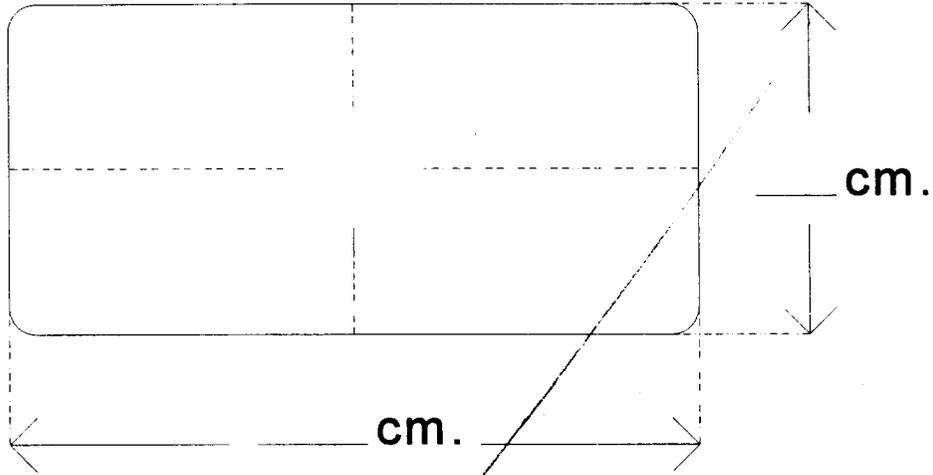
6. SKETCH OF OTHER TYPE OF AIR BAG VENT PORTS

7. SKETCH LOCATION OF CIRCULAR AIR BAG VENT PORTS

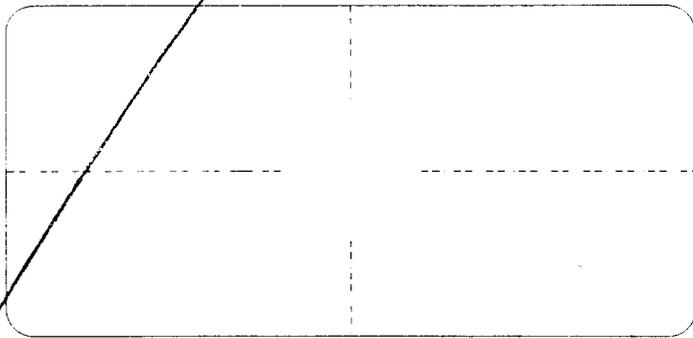


**PASSENGER AIR BAG DAMAGE AND CONTACT SKETCHES**

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



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

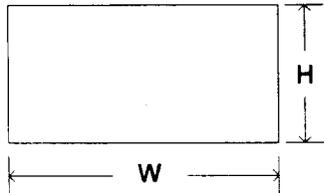


**PASSENGER AIR BAG SKETCHES (Cont'd)**

**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

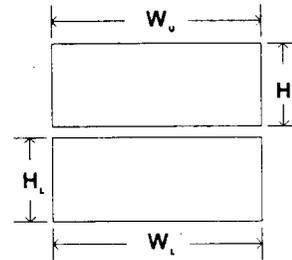
b. Lower Flap

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

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

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

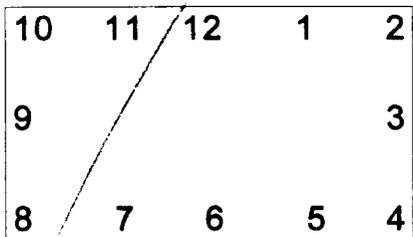
height ( $H_l$ ) \_\_\_\_\_



**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**

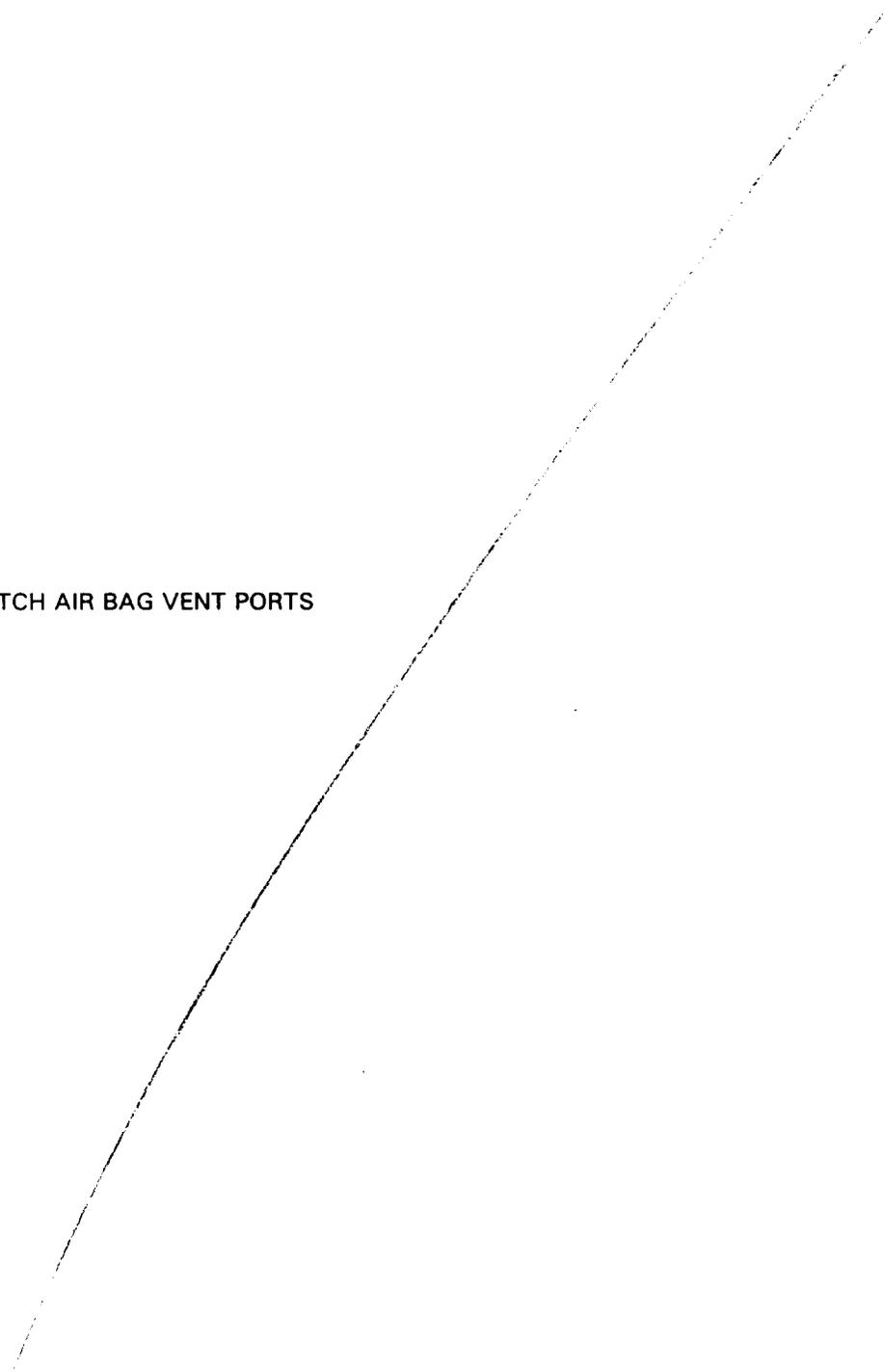
1. SKETCH DAMAGE AND CONTACT EVIDENCE ON "OTHER" AIR BAG (Front)

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

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

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

**4. SKETCH AIR BAG VENT PORTS**



**HEAD RESTRAINTS/SEAT EVALUATION**

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

		Left	Center	Right
<b>FIRST</b>	A-Head Restraint Type/Damage	3	0	3
	B-Seat Type	01	00	01
	C-Seat Orientation	1	0	1
	D-Seat Track Position	4	0	6
	E-Seat Back Incline Pre/Post Impact	23	0	23
	F-Seat Performance	1	0	1
<b>SECOND</b>	A-Head Restraint Type/Damage	3	0	3
	B-Seat Type	05	05	05
	C-Seat Orientation	1	1	1
	D-Seat Track Position	1	1	1
	E-Seat Back Incline Pre/Post Impact	01	01	01
	F-Seat Performance	6	6	6
<b>THIRD</b>	A-Head Restraint Type/Damage			
	B-Seat Type			
	C-Seat Orientation			
	D-Seat Track Position			
	E-Seat Back Incline Pre/Post Impact			
	F-Seat Performance			
<b>OTHER</b>	A-Head Restraint Type/Damage			
	B-Seat Type			
	C-Seat Orientation			
	D-Seat Track Position			
	E-Seat Back Incline Pre/Post Impact			
	F-Seat Performance			

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

**HEAD RESTRAINTS/SEAT EVALUATION**

**A-Head Restraint Type/Damage by Occupant at This Occupant Position**

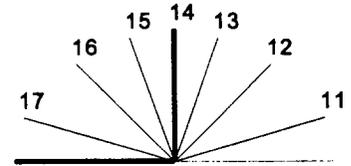
- (0) No head restraints
- (1) Integral — no damage
- (2) Integral — damaged during accident
- (3) Adjustable — no damage
- (4) Adjustable — damaged during accident
- (5) Add-on — no damage
- (6) Add-on — damaged during accident
- (8) Other  
Specify: \_\_\_\_\_
- (9) Unknown

**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

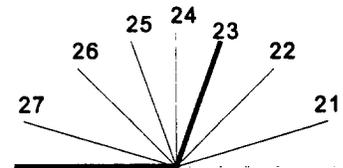


**B-Seat Type (this Occupant Position)**

- (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

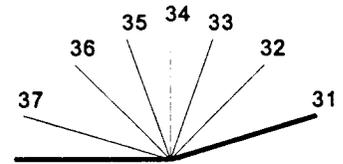
*Slightly reclined prior to impact*

- (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



**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

- (99) Unknown

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

**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

**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): FLOOR BOARD PUSHED up
- (7) Combination of above (specify): \_\_\_\_\_
- (8) Other (specify): \_\_\_\_\_
- (9) Unknown

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

## CHILD SAFETY SEAT FIELD ASSESSMENT

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

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

**1. Type of Child Safety Seat**

- (0) No child safety seat
- (1) Infant seat
- (2) Toddler seat
- (3) Convertible seat
- (4) Booster seat
- (7) Other type child safety seat (specify):  
\_\_\_\_\_
- (8) Unknown child safety seat type
- (9) Unknown if child safety seat used

**2. Child Safety Seat Orientation**

- (00) No child safety seat
- Designed for Rear Facing for This Age/Weight
- (01) Rear facing
- (02) Forward facing
- (08) Other orientation (specify):  
\_\_\_\_\_
- (09) Unknown orientation

Designed for Forward Facing for This Age/Weight

- (11) Rear facing
- (12) Forward facing
- (18) Other orientation (specify):  
\_\_\_\_\_
- (19) Unknown orientation

Unknown Design or Orientation For This Age/Weight, or Unknown Age/Weight

- (21) Rear facing
- (22) Forward facing
- (28) Other orientation (specify):  
\_\_\_\_\_
- (29) Unknown orientation

(99) Unknown if child safety seat used

**3. Child Safety Seat Harness Usage**

**4. Child Safety Seat Shield Usage**

**5. Child Safety Seat Tether Usage**

Note: Options Below Are Used for Variables 3-5.

(00) No child safety seat

Not Designed with Harness/Shield/Tether

- (01) After market harness/shield/tether added, not used
- (02) After market harness/shield/tether used
- (03) Child safety seat used, but no after market harness/shield/tether added
- (09) Unknown if harness/shield/tether added or used

Designed With Harness/Shield/Tether

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

Unknown If Designed With Harness/Shield/Tether

- (21) Harness/shield/tether not used
- (22) Harness/shield/tether used
- (29) Unknown if harness/shield/tether used

(99) Unknown if child safety seat used

**6. Child Safety Seat Make/Model**

(Specify make/model and occupant number)

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**EJECTION/ENTRAPMENT DATA**

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

**EJECTION**      No [  ]      Yes [  ]

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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

**Ejection**

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

**Ejection Area**

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

(7) Roof

- (8) Other area (e.g., back of pickup, etc.) (specify): \_\_\_\_\_
- (9) Unknown

**Ejection Medium**

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

(5) Integral structure

- (8) Other medium (specify): \_\_\_\_\_
- (9) Unknown

**Medium Status (Immediately Prior to Impact)**

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

**ENTRAPMENT**      No [  ]      Yes [  ]

Describe entrapment mechanism: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Component(s): \_\_\_\_\_

(Note on vehicle interior sketch) \_\_\_\_\_

# OCCUPANT ASSESSMENT FORM

NATIONAL ACCIDENT SAMPLING SYSTEM  
CRASHWORTHINESS DATA SYSTEM

1. Primary Sampling Unit Number 81  
2. Case Number - Stratum 148J  
3. Vehicle Number 02  
4. Occupant Number 01

## OCCUPANT'S CHARACTERISTICS

5. Occupant's Age 52  
Code actual age at time of accident.  
(00) Less than one year old (specify by month):  
\_\_\_\_\_  
(97) 97 years and older  
(99) Unknown

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

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

8. Occupant's Weight 064  
Code actual weight to the nearest  
kilogram.  
(999) Unknown  
140 pounds X .4536 = 064 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>4</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): _____</p> <p>(9) <u>Unknown</u></p>   | <p>22. Manual Shoulder Belt Upper Anchorage Adjustment <u>1</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>04</u></p> <p>(00) None used, not available, or belt removed/destroyed<br/>           (01) Inoperative (specify): _____</p> <p>(02) <u>Shoulder belt</u><br/>           (03) Lap belt<br/>           (04) Lap and shoulder belt<br/>           (05) Belt used—type unknown<br/>           (08) Other belt used (specify): _____</p> <p>(12) <u>Shoulder belt used with child safety seat</u><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): _____</p> <p>(99) Unknown if belt used</p> | <p>23. Automatic (Passive) Belt System Availability/Function <u>0</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>0</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/>           (3) Automatic belt use unknown<br/>           (9) Unknown</p>  |
| <p>20. Proper Use of Manual (Active) Belts <u>1</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): _____</p> <p>(8) <u>Other improper use of manual belt system (specify): _____</u></p> <p>(9) <u>Unknown</u></p>  | <p>25. Automatic (Passive) Belt System Type <u>0</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>0</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): _____</p> <p>(8) <u>Other improper use of automatic belt system (specify): _____</u></p> <p>(9) Unknown</p> |
| <p>21. Manual (Active) Belt Failure Modes During Accident <u>1</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): _____</p> <p>(6) <u>Broken retractor</u><br/>           (7) Combination of above (specify): _____</p> <p>(8) <u>Other manual belt failure (specify): _____</u></p> <p>(9) <u>Unknown</u></p>  | <p>27. Automatic (Passive) Belt Failure Modes During Accident <u>0</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): _____</p> <p>(6) <u>Broken retractor</u><br/>           (7) Combination of above (specify): _____<br/>           (8) Other automatic belt failure (specify): _____</p> <p>(9) Unknown</p>   |

POLICE REPORTED RESTRAINT USE	AIR BAG SYSTEM FUNCTION
<p>28. Police Reported Belt Use <span style="float: right; margin-right: 20px;"><u>4</u></span></p> <p>(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):                      _____</p> <p>(9) Police indicated "unknown"</p>	<p>30. Frontal Air Bag System Availability/Function (This Occupant Position) <span style="float: right; margin-right: 20px;"><u>0</u></span></p> <p>(0) Not equipped/not available                      (1) Air bag  <i>Non-functional</i>                      (2) Air bag disconnected (specify):                      _____</p> <p>(3) Air bag not reinstalled                      (9) Unknown</p>
<p>29. Police Reported Air Bag Availability/Function <span style="float: right; margin-right: 20px;"><u>1</u></span></p> <p>(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"</p>	<p>31. Frontal Air Bag System Deployment (This Occupant Position) <span style="float: right; margin-right: 20px;"><u>0</u></span></p> <p>(0) Not equipped/not available                      (1) Deployed during accident (as a result of impact)                      (2) Deployed inadvertently just prior to accident                      (3) Deployed, details unknown                      (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)                      (5) Unknown if deployed                      (7) Nondeployed                      (9) Unknown</p>
<p>Check the Primary Source Used In Determining Belt Use.</p> <p><input checked="" type="checkbox"/> Vehicle inspection  <input type="checkbox"/> Official injury data  <input type="checkbox"/> Driver/occupant interview  <input type="checkbox"/> Other (specify):                      _____</p> <p><input type="checkbox"/> Unknown if belt used                      _____                      _____                      _____                      _____</p>	<p>32. Other Than First Seat Frontal Air Bag Availability/Function (This Occupant Position) <span style="float: right; margin-right: 20px;"><u>0</u></span></p> <p>(0) Not equipped/not available                      (1) Air bag  <i>Non-functional</i>                      (2) Air bag disconnected (specify):                      _____</p> <p>(3) Air bag not reinstalled                      (9) Unknown  <i>Specify type of "other" air bag present:</i>                      _____</p>
	<p>33. Air Bag(s) Deployment, Other Than First Seat Frontal (This Occupant Position) <span style="float: right; margin-right: 20px;"><u>0</u></span></p> <p>(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</p>
	<p>34. Are There Indications of Air Bag System Failure? (This Occupant Position) <span style="float: right; margin-right: 20px;"><u>0</u></span></p> <p>(0) Not equipped/not available                      (1) No                      (2) Yes (specify):                      _____</p> <p>(9) Unknown</p>

## FIRST SEAT FRONTAL AIR BAG SYSTEM EVALUATION

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

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

Yes

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

36. Type of Air Bag 0

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

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

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

38. Air Bag Deployment Accident Event Sequence Number 00

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

39. CDC For Air Bag Deployment Impact 0

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

40. Longitudinal Component of Delta V For Air Bag Deployment Impact + 000  
- 000

- (\_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

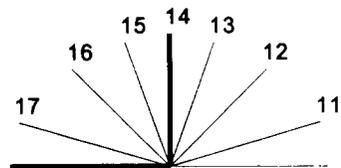
49. Head Restraint Type/Damage by Occupant at This Occupant Position 3  
 (0) No head restraints  
 (1) Integral—no damage  
 (2) Integral—damaged during accident  
 (3) Adjustable—no damage  
 (4) Adjustable—damaged during accident  
 (5) Add-on—no damage  
 (6) Add-on—damaged during accident  
 (8) 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 4  
 (0) Occupant not seated or no seat  
 (1) Non-adjustable seat track  
  
*Adjustable Seat Track*  
 (2) Seat at forward most track position  
 (3) Seat between forward most and middle track positions  
 (4) Seat at middle track position  
 (5) Seat between middle and rear most track positions  
 (6) Seat at rear most track position  
 (9) Unknown

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

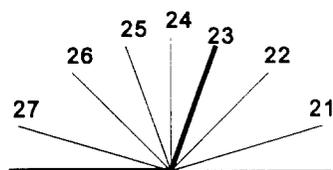
- (00) Occupant not seated or no seat  
 (01) Not adjustable

***Upright prior to impact***

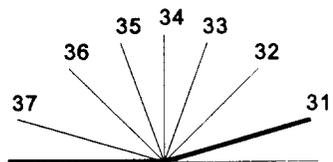
- (11) Moved to completely rearward position  
 (12) Moved to rearward midrange position  
 (13) Moved to slightly rearward position  
 (14) Retained pre-impact position  
 (15) Moved to slightly forward position  
 (16) Moved to forward midrange position  
 (17) Moved to completely forward position

***Slightly reclined prior to impact***

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

***Completely reclined prior to impact***

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

54. Seat Performance (this Occupant Position) 1

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

## CHILD SAFETY SEAT

55. Child Safety Seat Make/Model 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) 2

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

62. Treatment - Mortality 3/4

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

*Nonfatal*

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

63. Type Of Medical Facility (for Initial Treatment) 1/4

- (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) ROAD VEHICLE  
(9999) Unknown

AIR VEHICLE

EMS Arrival Time (first unit) ROAD VEHICLE  
(9998) EMS cancelled or did not arrive

(9999) Unknown AIR VEHICLE

EMS Departure Time To Treatment Facility (transporting unit) ROAD VEHICLE

(9997) EMS arrived, provided treatment, but did not transport

(9998) EMS arrived, but was not used

(9999) Unknown

EMS Arrival Time At Treatment Facility ROAD VEHICLE

(9999) Unknown 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 00
- 68. 2nd Medically Reported Cause of Death 00
- 69. 3rd Medically Reported Cause of Death 00  
Code the Occupant Injury from line number(s) for the medically reported injury(s) which reportedly contributed to this occupant's death  
(00) Not fatal or no additional causes  
(96) Mode of death given but specific injuries are not linked to cause of death. (specify):  
  
(97) Other result (includes fatal ruled disease) (specify):  
  
(99) Unknown
- 70. Number of Recorded Injuries for This Occupant 05  
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) 15  
(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> 19  
(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>81</u>	3. Vehicle Number <u>02</u>
2. Case Number - Stratum <u>148J</u>	4. Occupant Number <u>01</u>

## INJURY DATA

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

	Source of Injury Data	A.I.S. - 90					Aspect	Injury Source	Injury Confidence Level	Direct/Indirect Injury	Occupant Area Intrusion Number
		Body Region	Type of Anatomic Structure	Specific Anatomic Structure	Level of Injury	A.I.S. Severity					
1st	5. <u>3</u>	6. <u>2</u>	7. <u>9</u>	8. <u>06</u>	9. <u>02</u>	10. <u>1</u>	11. <u>7</u>	12. <u>205</u>	13. <u>2</u>	14. <u>1</u>	15. <u>04</u>
2nd	16. <u>3</u>	17. <u>2</u>	18. <u>9</u>	19. <u>04</u>	20. <u>02</u>	21. <u>1</u>	22. <u>7</u>	23. <u>205</u>	24. <u>2</u>	25. <u>1</u>	26. <u>04</u>
3rd	27. <u>3</u>	28. <u>2</u>	29. <u>9</u>	30. <u>02</u>	31. <u>02</u>	32. <u>1</u>	33. <u>7</u>	34. <u>205</u>	35. <u>2</u>	36. <u>1</u>	37. <u>04</u>
4th	38. <u>3</u>	39. <u>7</u>	40. <u>9</u>	41. <u>02</u>	42. <u>02</u>	43. <u>1</u>	44. <u>2</u>	45. <u>051</u>	46. <u>2</u>	47. <u>1</u>	48. <u>05</u>
5th	49. <u>3</u>	50. <u>8</u>	51. <u>9</u>	52. <u>02</u>	53. <u>02</u>	54. <u>1</u>	55. <u>2</u>	56. <u>010</u>	57. <u>2</u>	58. <u>1</u>	59. <u>00</u>
6th	60. ___	61. ___	62. ___	63. ___	64. ___	65. ___	66. ___	67. ___	68. ___	69. ___	70. ___
7th	71. ___	72. ___	73. ___	74. ___	75. ___	76. ___	77. ___	78. ___	79. ___	80. ___	81. ___
8th	82. ___	83. ___	84. ___	85. ___	86. ___	87. ___	88. ___	89. ___	90. ___	91. ___	92. ___
9th	93. ___	94. ___	95. ___	96. ___	97. ___	98. ___	99. ___	100. ___	101. ___	102. ___	103. ___
10th	104. ___	105. ___	106. ___	107. ___	108. ___	109. ___	110. ___	111. ___	112. ___	113. ___	114. ___



**OCCUPANT INJURY CLASSIFICATION**

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

SOURCE OF INJURY DATA	INJURY SOURCE 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

- |   |  |  |   |
|---|--|--|---|
| <p><b>FRONT</b></p> <p>(001) Windshield</p> <p>(002) Mirror</p> <p>(003) Sunvisor</p> <p>(004) Steering wheel rim</p> <p>(005) Steering wheel hub/spoke</p> <p>(006) Steering wheel (combination of codes 004 and 005)</p> <p>(007) Steering column, transmission selector lever, other attachment</p> <p>(008) Cellular telephone or CB radio</p> <p>(009) Add on equipment (e.g., tape deck, air conditioner)</p> <p>(010) Left instrument panel and below</p> <p>(011) Center instrument panel and below</p> <p>(012) Right instrument panel and below</p> <p>(013) Glove compartment door</p> <p>(014) Knee bolster</p> <p>(015) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, mirror, or steering assembly (driver side only)</p> <p>(016) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, or mirror (passenger side only)</p> <p>(017) Windshield reinforced by exterior object (specify): _____</p> <p>(019) Other front object (specify): _____</p> | <p>(102) Right side hardware or armrest</p> <p>(103) Right A (A1/A2)-pillar</p> <p>(104) Right B-pillar</p> <p>(105) Other right pillar (specify): _____</p> <p>(106) Right side window glass</p> <p>(107) Right side window frame</p> <p>(108) Right side window sill</p> <p>(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.</p> <p>(110) Other right side object (specify): _____</p> <p><b>INTERIOR</b></p> <p>(151) Seat, back support</p> <p>(152) Belt restraint webbing/buckle</p> <p>(153) Belt restraint B-pillar or door frame attachment point</p> <p>(154) Other restraint system component (specify): _____</p> <p>(155) Head restraint system</p> <p>(160) Other occupants (specify): _____</p> <p>(161) Interior loose objects</p> <p>(162) Child safety seat (specify): _____</p> <p>(163) Other interior object (specify): _____</p> <p><b>AIR BAG</b></p> <p>(170) Air bag-driver side</p> <p>(171) Air bag-driver side and eyewear</p> <p>(172) Air bag-driver side and jewelry</p> <p>(173) Air bag-driver side and object held</p> <p>(174) Air bag-driver side and object in mouth</p> <p>(175) Air bag compartment cover-driver side</p> <p>(176) Air bag compartment cover-driver side and eyewear</p> <p>(177) Air bag compartment cover-driver side and jewelry</p> <p>(178) Air bag compartment cover-driver side and object held</p> <p>(179) Air bag compartment cover-driver side and object in mouth</p> <p>(180) Air bag-passenger side</p> <p>(181) Air bag-passenger side and eyewear</p> <p>(182) Air bag-passenger side and jewelry</p> | <p>(183) Air bag-passenger side and object held</p> <p>(184) Air bag-passenger side and object in mouth</p> <p>(185) Air bag compartment cover-passenger side</p> <p>(186) Air bag compartment cover-passenger side and eyewear</p> <p>(187) Air bag compartment cover-passenger side and jewelry</p> <p>(188) Air bag compartment cover-passenger side and object held</p> <p>(189) Air bag compartment cover-passenger side and object in mouth</p> <p>(190) Other air bag (specify) _____</p> <p>(195) Other air bag compartment cover (specify) _____</p> <p><b>ROOF</b></p> <p>(201) Front header</p> <p>(202) Rear header</p> <p>(203) Roof left side rail</p> <p>(204) Roof right side rail</p> <p>(205) Roof or convertible top</p> <p><b>FLOOR</b></p> <p>(251) Floor (including toe pan)</p> <p>(252) Floor or console mounted transmission lever, including console</p> <p>(253) Parking brake handle</p> <p>(254) Foot controls including parking brake</p> <p><b>REAR</b></p> <p>(301) Backlight (rear window)</p> <p>(302) Backlight storage rack, door, etc.</p> <p>(303) Other rear object (specify): _____</p> <p><b>ADAPTIVE (ASSISTIVE) DRIVING EQUIPMENT</b></p> <p>(401) Hand controls for braking/acceleration</p> <p>(402) Steering control devices (attached to OEM steering wheel)</p> <p>(403) Steering knob attached to steering wheel</p> <p>(405) Replacement steering wheel (i.e., reduced diameter)</p> <p>(406) Joy stick steering controls</p> <p>(407) Wheelchair tie-downs</p> <p>(408) Modification to seat belts, (specify): _____</p> <p>(409) Additional or relocated switches, (specify): _____</p> <p>(410) Raised roof</p> | <p>(411) Wall mounted head rest (used behind wheel chair)</p> <p>(412) Other adaptive device (specify): _____</p> <p><b>EXTERIOR of OCCUPANT'S VEHICLE</b></p> <p>(451) Hood</p> <p>(452) Outside hardware (e.g., outside mirror, antenna)</p> <p>(453) Other exterior surface or tires (specify): _____</p> <p>(454) Unknown exterior objects</p> <p><b>EXTERIOR OF OTHER MOTOR VEHICLE</b></p> <p>(501) Front bumper</p> <p>(502) Hood edge</p> <p>(503) Other front of vehicle (specify): _____</p> <p>(504) Hood</p> <p>(505) Hood ornament</p> <p>(506) Windshield, roof rail, A-pillar</p> <p>(507) Side surface</p> <p>(508) Side mirrors</p> <p>(509) Other side protrusions (specify): _____</p> <p>(510) Rear surface</p> <p>(511) Undercarriage</p> <p>(512) Tires and wheels</p> <p>(513) Other exterior of other motor vehicle (specify): _____</p> <p>(514) Unknown exterior of other motor vehicle</p> <p><b>OTHER VEHICLE OR OBJECT IN THE ENVIRONMENT</b></p> <p>(551) Ground</p> <p>(598) Other vehicle or object (specify): _____</p> <p>(599) Unknown vehicle or object</p> <p><b>NONCONTACT INJURY</b></p> <p>(601) Fire in vehicle</p> <p>(602) Flying glass</p> <p>(603) Other noncontact injury source (specify): _____</p> <p>(604) Air bag exhaust gases</p> <p>(697) Injured, unknown source</p> |
| <p><b>LEFT SIDE</b></p> <p>(051) Left side interior surface, excluding hardware or armrests</p> <p>(052) Left side hardware or armrest</p> <p>(053) Left A (A1/A2)-pillar</p> <p>(054) Left B-pillar</p> <p>(055) Other left pillar (specify): _____</p> <p>(056) Left side window glass</p> <p>(057) Left side window frame</p> <p>(058) Left side window sill</p> <p>(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.</p> <p>(060) Other left side object (specify): _____</p> <p><b>RIGHT SIDE</b></p> <p>(101) Right side interior surface, excluding hardware or armrests</p>   |  |  |   |

# 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 = 075

Glasgow Coma Scale Score

GCSS = 15

Units of Blood Given

Units = 0

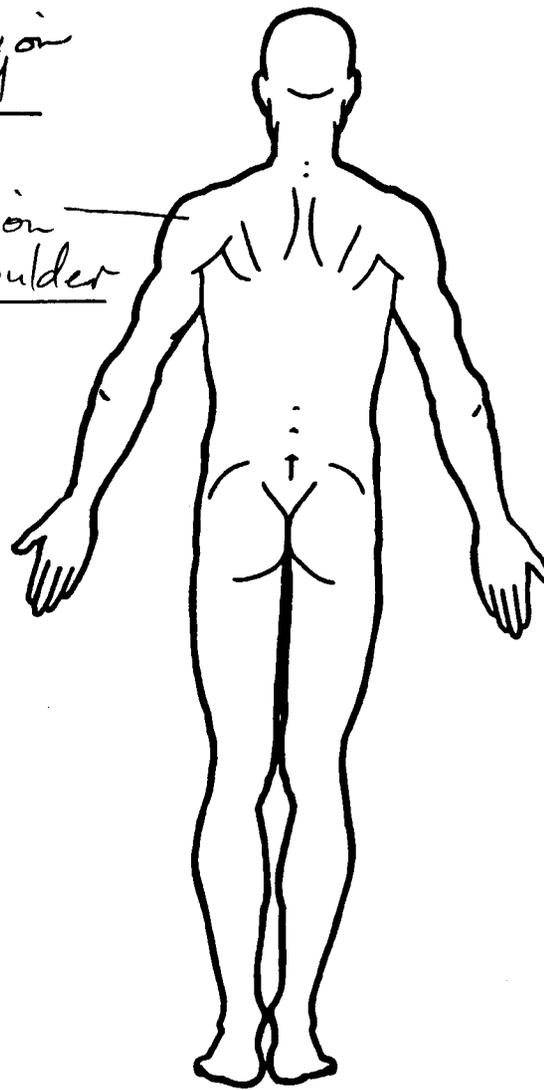
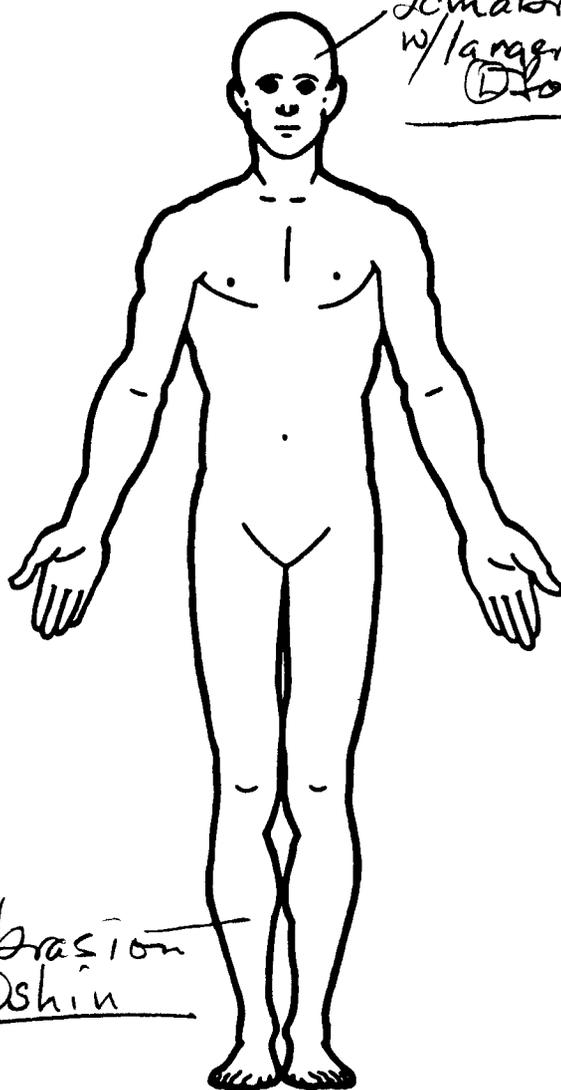
Arterial Blood Gases

pH = 7.34

PO<sub>2</sub> = 216

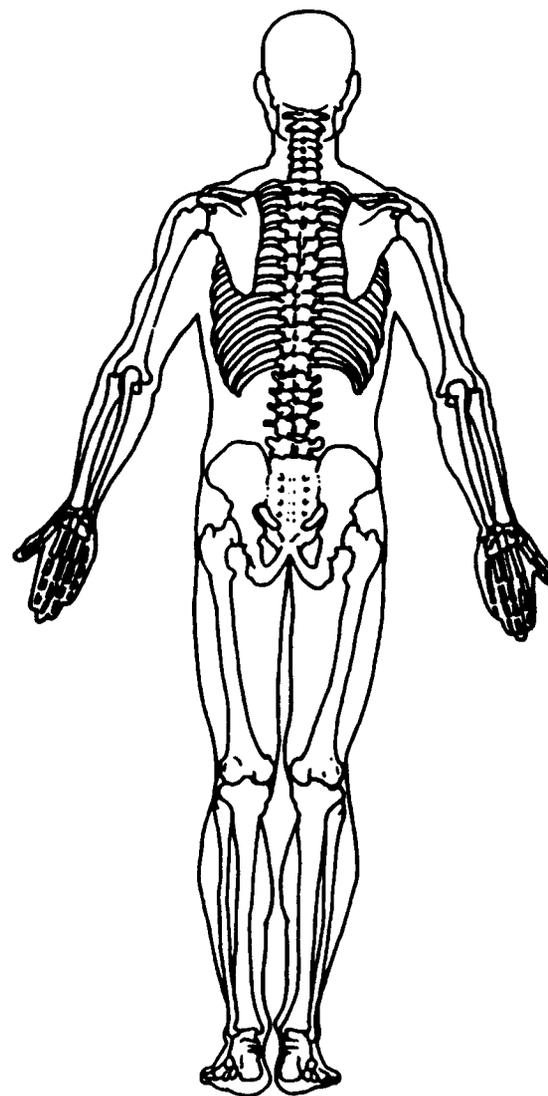
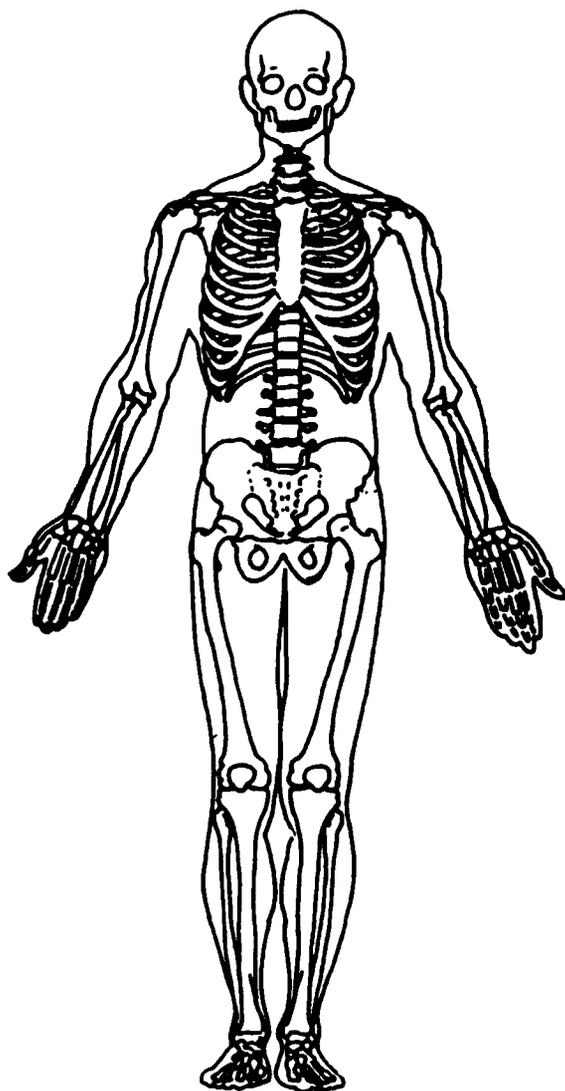
PCO<sub>2</sub> = 36

HCO<sub>3</sub> = 19



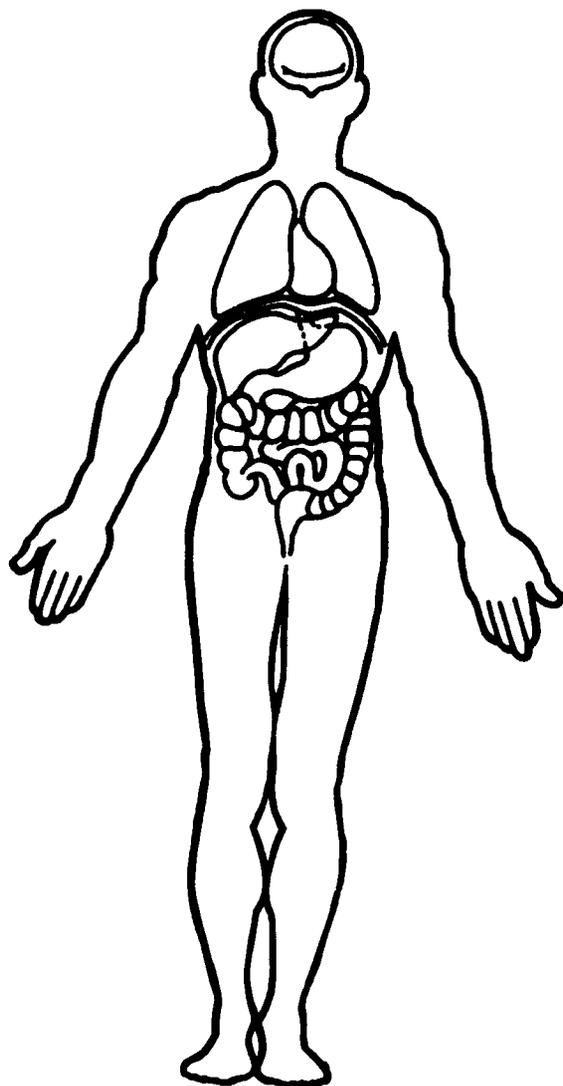
## OFFICIAL INJURY DATA — SKELETAL INJURIES

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.)

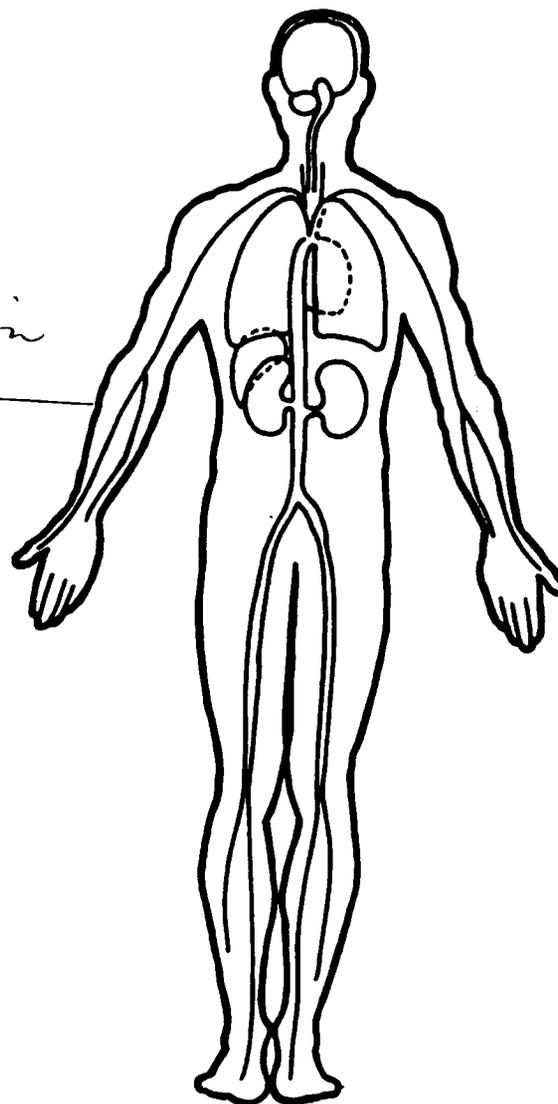


# OFFICIAL INJURY DATA – INTERNAL INJURIES

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.)



Contusion  
Kidney





# OCCUPANT ASSESSMENT FORM

1. Primary Sampling Unit Number 81  
 2. Case Number - Stratum 1485  
 3. Vehicle Number 02  
 4. Occupant Number 02

## OCCUPANT'S CHARACTERISTICS

5. Occupant's Age 46  
 Code actual age at time of accident.  
 (00) Less than one year old (specify by month):  
 (97) 97 years and older DOB 5-23-50  
 (99) Unknown

6. Occupant's Sex 2  
 (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 2  
 (1) Driver  
 (2) Passenger  
 (9) Unknown  
66 - For SMASH FROM CHART MANUAL

## OCCUPANT'S SEATING

10. Occupant's Seat Position 13  
*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

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) Unknown19. 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) Unknown21. 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) Unknown22. 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) Unknown27. 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



## 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**

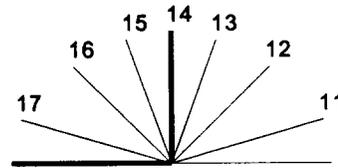
49. Head Restraint Type/Damage by Occupant at This Occupant Position 3  
 (0) No head restraints  
 (1) Integral—no damage  
 (2) Integral—damaged during accident  
 (3) Adjustable—no damage  
 (4) Adjustable—damaged during accident  
 (5) Add-on—no damage  
 (6) Add-on—damaged during accident  
 (8) 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 6  
 (0) Occupant not seated or no seat  
 (1) Non-adjustable seat track
- Adjustable Seat Track*  
 (2) Seat at forward most track position  
 (3) Seat between forward most and middle track positions  
 (4) Seat at middle track position  
 (5) Seat between middle and rear most track positions  
 (6) Seat at rear most track position  
 (9) Unknown

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

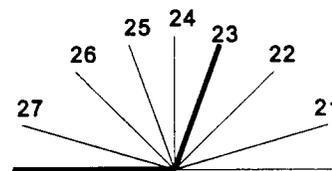
- (00) Occupant not seated or no seat  
 (01) Not adjustable

***Upright prior to impact***

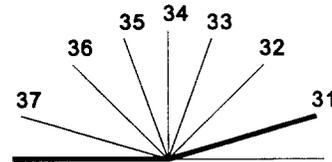
- (11) Moved to completely rearward position  
 (12) Moved to rearward midrange position  
 (13) Moved to slightly rearward position  
 (14) Retained pre-impact position  
 (15) Moved to slightly forward position  
 (16) Moved to forward midrange position  
 (17) Moved to completely forward position

***Slightly reclined prior to impact***

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

***Completely reclined prior to impact***

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

54. Seat Performance (this Occupant Position) 1

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

## CHILD SAFETY SEAT

55. Child Safety Seat Make/Model 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) 3

- (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 3

- (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 01

- (00) Not Hospitalized
- 1 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**

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

67. 1st Medically Reported Cause of Death 00

68. 2nd Medically Reported Cause of Death 00

69. 3rd Medically Reported Cause of Death 00  
 Code the Occupant Injury from line number(s) for the medically reported injury(s) which reportedly contributed to this occupant's death  
 (00) Not fatal or no additional causes  
 (96) Mode of death given but specific injuries are not linked to cause of death. (specify):

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

(99) Unknown

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

**TRAUMA DATA**

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

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

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

**BELT USE DETERMINATION**

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



# OCCUPANT INJURY FORM

1. Primary Sampling Unit Number <u>81</u>	3. Vehicle Number <u>02</u>
2. Case Number - Stratum <u>148J</u>	4. Occupant Number <u>02</u>

## INJURY DATA

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

	A.I.S. - 90						Aspect	Injury Source	Injury 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					
1st	5. <u>3</u>	6. <u>2</u>	7. <u>9</u>	8. <u>74</u>	9. <u>02</u>	10. <u>1</u>	11. <u>1</u>	12. <u>205</u>	13. <u>1</u>	14. <u>1</u>	15. <u>00</u>
2nd	16. <u>3</u>	17. <u>8</u>	18. <u>9</u>	19. <u>04</u>	20. <u>02</u>	21. <u>1</u>	22. <u>1</u>	23. <u>012</u>	24. <u>1</u>	25. <u>1</u>	26. <u>00</u>
3rd	27. <u>3</u>	28. <u>8</u>	29. <u>9</u>	30. <u>02</u>	31. <u>02</u>	32. <u>1</u>	33. <u>1</u>	34. <u>012</u>	35. <u>1</u>	36. <u>1</u>	37. <u>00</u>
4th	38. ___	39. ___	40. ___	41. ___	42. ___	43. ___	44. ___	45. ___	46. ___	47. ___	48. ___
5th	49. ___	50. ___	51. ___	52. ___	53. ___	54. ___	55. ___	56. ___	57. ___	58. ___	59. ___
6th	60. ___	61. ___	62. ___	63. ___	64. ___	65. ___	66. ___	67. ___	68. ___	69. ___	70. ___
7th	71. ___	72. ___	73. ___	74. ___	75. ___	76. ___	77. ___	78. ___	79. ___	80. ___	81. ___
8th	82. ___	83. ___	84. ___	85. ___	86. ___	87. ___	88. ___	89. ___	90. ___	91. ___	92. ___
9th	93. ___	94. ___	95. ___	96. ___	97. ___	98. ___	99. ___	100. ___	101. ___	102. ___	103. ___
10th	104. ___	105. ___	106. ___	107. ___	108. ___	109. ___	110. ___	111. ___	112. ___	113. ___	114. ___



**OCCUPANT INJURY CLASSIFICATION**

Body Region	Specific Anatomic Structure	Level of Injury	Aspect
(1) Head		Specific injuries are assigned consecutive two-digit numbers beginning with 02.  To the extent possible, within the organizational framework of the AIS, 00 is assigned to an injury NFS as to severity or where only one injury is given in the dictionary for that anatomic structure. 99 is assigned to any injury NFS as to lesion or severity.	(1) Right
(2) Face			(2) Left
(3) Neck			(3) Bilateral
(4) Thorax			(4) Central
(5) Abdomen			(5) Anterior
(6) Spine			(6) Posterior
(7) Upper Extremity			(7) Superior
(8) Lower Extremity			(8) Inferior
(9) Unspecified			(9) Unknown
			(0) Whole region

**Type of Anatomic Structure**

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

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

- Head - LOC
- (02) Length of LOC
  - (04) Level
  - (06) of
  - (08) Consciousness

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

**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

SOURCE OF INJURY DATA	INJURY SOURCE CONFIDENCE LEVEL	DIRECT/INDIRECT INJURY
<p><u>OFFICIAL RECORDS</u></p> <ul style="list-style-type: none"> <li>(1) Autopsy records with or without hospital/medical records</li> <li>(2) Hospital/medical records other than emergency room (e.g., discharge summary)</li> <li>(3) Emergency room records only (including associated X-rays or other lab reports)</li> <li>(4) Private physician, walk-in or emergency clinic</li> </ul> <p><u>UNOFFICIAL RECORDS</u></p> <ul style="list-style-type: none"> <li>(5) Lay coroner report</li> <li>(6) E.M.S. personnel</li> <li>(7) Interviewee</li> <li>(8) Other source (specify): _____</li> <li>(9) Police</li> </ul>	<ul style="list-style-type: none"> <li>(1) Certain</li> <li>(2) Probable</li> <li>(3) Possible</li> <li>(9) Unknown</li> </ul>	<ul style="list-style-type: none"> <li>(1) Direct contact injury</li> <li>(2) Indirect contact injury</li> <li>(3) Noncontact injury</li> <li>(7) Injured, unknown source</li> </ul>

## INJURY SOURCES

- |   |  |  |   |
|---|--|--|---|
| <p><b>FRONT</b></p> <p>(001) Windshield</p> <p>(002) Mirror</p> <p>(003) Sunvisor</p> <p>(004) Steering wheel rim</p> <p>(005) Steering wheel hub/spoke</p> <p>(006) Steering wheel (combination of codes 004 and 005)</p> <p>(007) Steering column, transmission selector lever, other attachment</p> <p>(008) Cellular telephone or CB radio</p> <p>(009) Add on equipment (e.g., tape deck, air conditioner)</p> <p>(010) Left instrument panel and below</p> <p>(011) Center instrument panel and below</p> <p>(012) Right instrument panel and below</p> <p>(013) Glove compartment door</p> <p>(014) Knee bolster</p> <p>(015) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, mirror, or steering assembly (driver side only)</p> <p>(016) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, or mirror (passenger side only)</p> <p>(017) Windshield reinforced by exterior object (specify): _____</p> <p>(019) Other front object (specify): _____</p> | <p>(102) Right side hardware or armrest</p> <p>(103) Right A (A1/A2)-pillar</p> <p>(104) Right B-pillar</p> <p>(105) Other right pillar (specify): _____</p> <p>(106) Right side window glass</p> <p>(107) Right side window frame</p> <p>(108) Right side window sill</p> <p>(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.</p> <p>(110) Other right side object (specify): _____</p> <p><b>INTERIOR</b></p> <p>(151) Seat, back support</p> <p>(152) Belt restraint webbing/buckle</p> <p>(153) Belt restraint B-pillar or door frame attachment point</p> <p>(154) Other restraint system component (specify): _____</p> <p>(155) Head restraint system</p> <p>(160) Other occupants (specify): _____</p> <p>(161) Interior loose objects</p> <p>(162) Child safety seat (specify): _____</p> <p>(163) Other interior object (specify): _____</p> <p><b>AIR BAG</b></p> <p>(170) Air bag-driver side</p> <p>(171) Air bag-driver side and eyewear</p> <p>(172) Air bag-driver side and jewelry</p> <p>(173) Air bag-driver side and object held</p> <p>(174) Air bag-driver side and object in mouth</p> <p>(175) Air bag compartment cover-driver side</p> <p>(176) Air bag compartment cover-driver side and eyewear</p> <p>(177) Air bag compartment cover-driver side and jewelry</p> <p>(178) Air bag compartment cover-driver side and object held</p> <p>(179) Air bag compartment cover-driver side and object in mouth</p> <p>(180) Air bag-passenger side</p> <p>(181) Air bag-passenger side and eyewear</p> <p>(182) Air bag-passenger side and jewelry</p> | <p>(183) Air bag-passenger side and object held</p> <p>(184) Air bag-passenger side and object in mouth</p> <p>(185) Air bag compartment cover-passenger side</p> <p>(186) Air bag compartment cover-passenger side and eyewear</p> <p>(187) Air bag compartment cover-passenger side and jewelry</p> <p>(188) Air bag compartment cover-passenger side and object held</p> <p>(189) Air bag compartment cover-passenger side and object in mouth</p> <p>(190) Other air bag (specify) _____</p> <p>(195) Other air bag compartment cover (specify) _____</p> <p><b>ROOF</b></p> <p>(201) Front header</p> <p>(202) Rear header</p> <p>(203) Roof left side rail</p> <p>(204) Roof right side rail</p> <p>(205) Roof or convertible top</p> <p><b>FLOOR</b></p> <p>(251) Floor (including toe pan)</p> <p>(252) Floor or console mounted transmission lever, including console</p> <p>(253) Parking brake handle</p> <p>(254) Foot controls including parking brake</p> <p><b>REAR</b></p> <p>(301) Backlight (rear window)</p> <p>(302) Backlight storage rack, door, etc.</p> <p>(303) Other rear object (specify): _____</p> <p><b>ADAPTIVE (ASSISTIVE) DRIVING EQUIPMENT</b></p> <p>(401) Hand controls for braking/acceleration</p> <p>(402) Steering control devices (attached to OEM steering wheel)</p> <p>(403) Steering knob attached to steering wheel</p> <p>(405) Replacement steering wheel (i.e., reduced diameter)</p> <p>(406) Joy stick steering controls</p> <p>(407) Wheelchair tie-downs</p> <p>(408) Modification to seat belts, (specify): _____</p> <p>(409) Additional or relocated switches, (specify): _____</p> <p>(410) Raised roof</p> | <p>(411) Wall mounted head rest (used behind wheel chair)</p> <p>(412) Other adaptive device (specify): _____</p> <p><b>EXTERIOR of OCCUPANT'S VEHICLE</b></p> <p>(451) Hood</p> <p>(452) Outside hardware (e.g., outside mirror, antenna)</p> <p>(453) Other exterior surface or tires (specify): _____</p> <p>(454) Unknown exterior objects</p> <p><b>EXTERIOR OF OTHER MOTOR VEHICLE</b></p> <p>(501) Front bumper</p> <p>(502) Hood edge</p> <p>(503) Other front of vehicle (specify): _____</p> <p>(504) Hood</p> <p>(505) Hood ornament</p> <p>(506) Windshield, roof rail, A-pillar</p> <p>(507) Side surface</p> <p>(508) Side mirrors</p> <p>(509) Other side protrusions (specify): _____</p> <p>(510) Rear surface</p> <p>(511) Undercarriage</p> <p>(512) Tires and wheels</p> <p>(513) Other exterior of other motor vehicle (specify): _____</p> <p>(514) Unknown exterior of other motor vehicle</p> <p><b>OTHER VEHICLE OR OBJECT IN THE ENVIRONMENT</b></p> <p>(551) Ground</p> <p>(598) Other vehicle or object (specify): _____</p> <p>(599) Unknown vehicle or object</p> <p><b>NONCONTACT INJURY</b></p> <p>(601) Fire in vehicle</p> <p>(602) Flying glass</p> <p>(603) Other noncontact injury source (specify): _____</p> <p>(604) Air bag exhaust gases</p> <p>(697) Injured, unknown source</p> |
| <p><b>LEFT SIDE</b></p> <p>(051) Left side interior surface, excluding hardware or armrests</p> <p>(052) Left side hardware or armrest</p> <p>(053) Left A (A1/A2)-pillar</p> <p>(054) Left B-pillar</p> <p>(055) Other left pillar (specify): _____</p> <p>(056) Left side window glass</p> <p>(057) Left side window frame</p> <p>(058) Left side window sill</p> <p>(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.</p> <p>(060) Other left side object (specify): _____</p> <p><b>RIGHT SIDE</b></p> <p>(101) Right side interior surface, excluding hardware or armrests</p>   |  |  |   |

# 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 = 0

Glasgow Coma Scale Score

GCSS = 15

Units of Blood Given

Units = 0

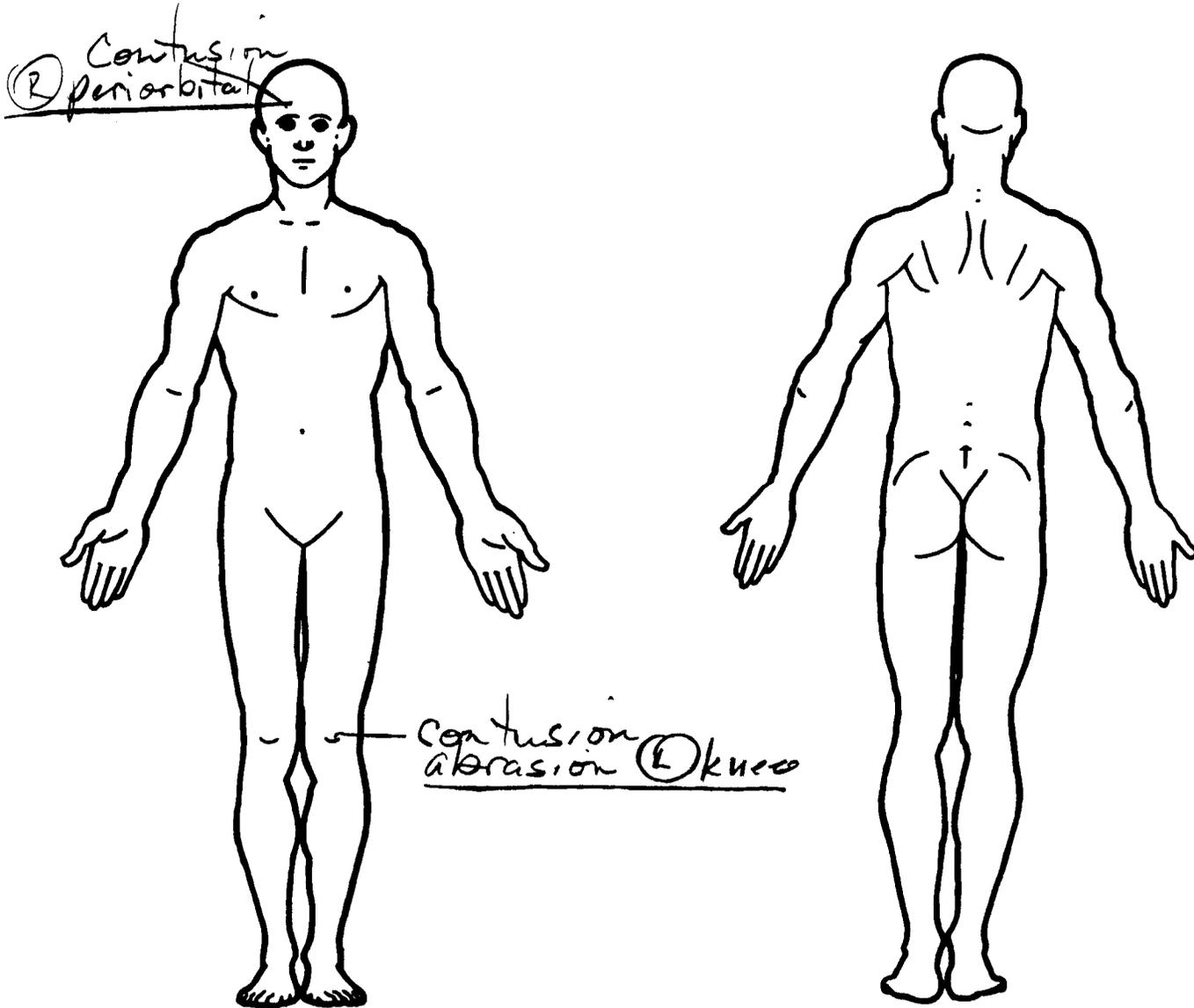
Arterial Blood Gases

pH =     

PO<sub>2</sub> =     

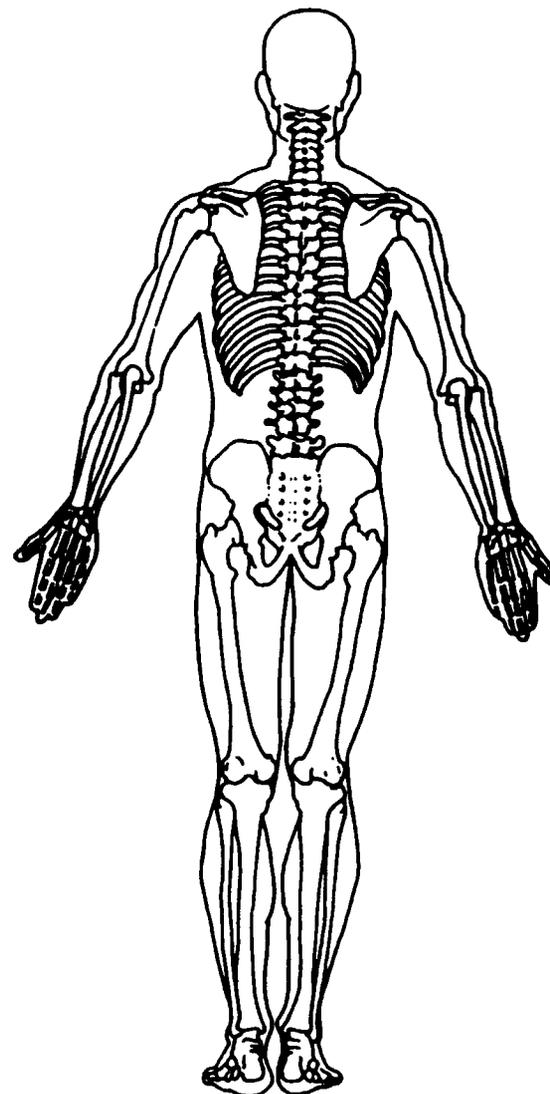
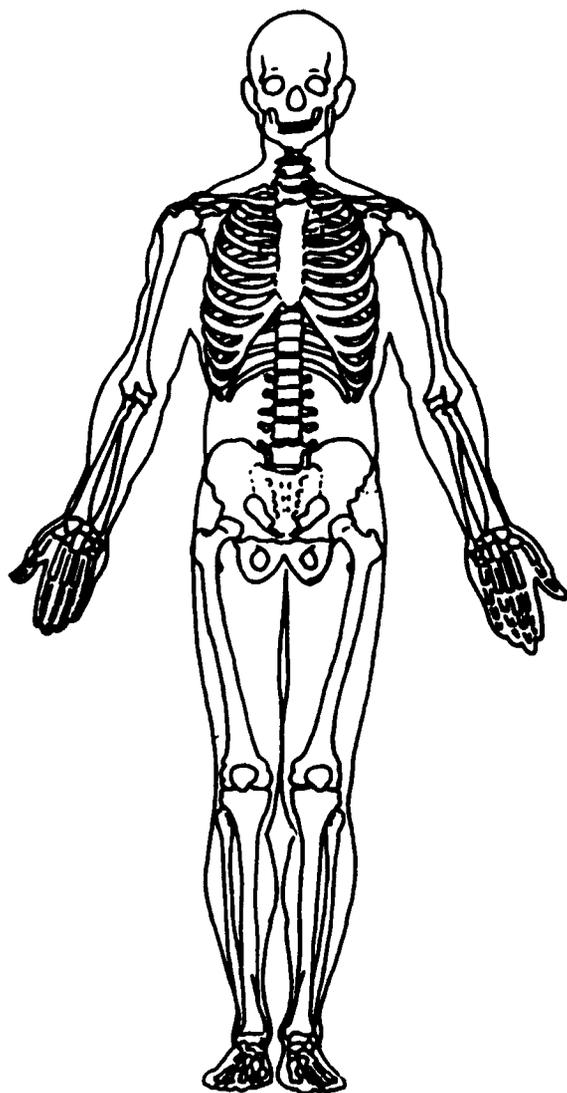
PCO<sub>2</sub> =     

HCO<sub>3</sub> =     



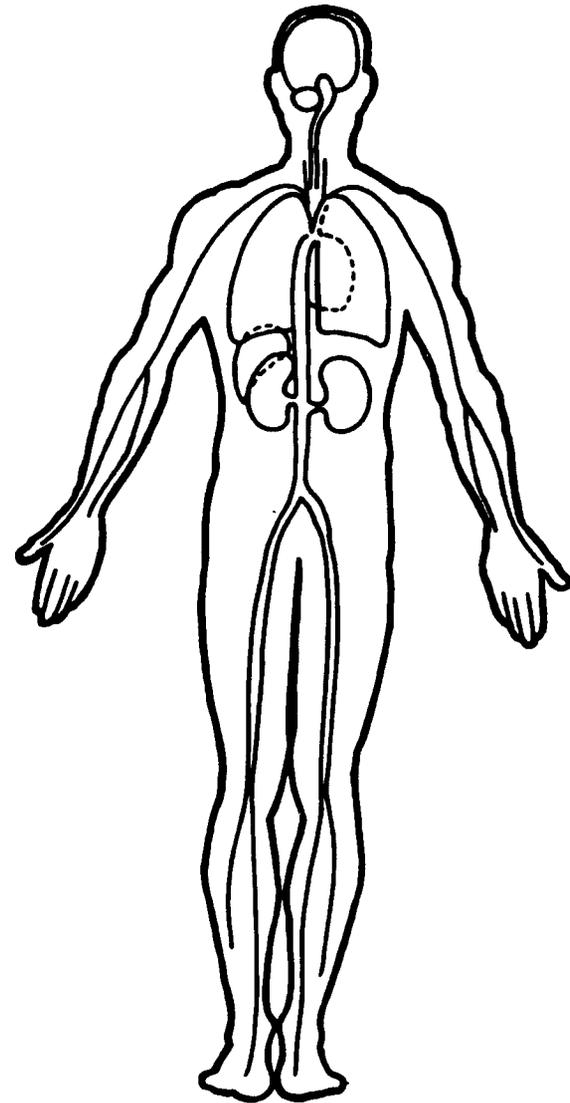
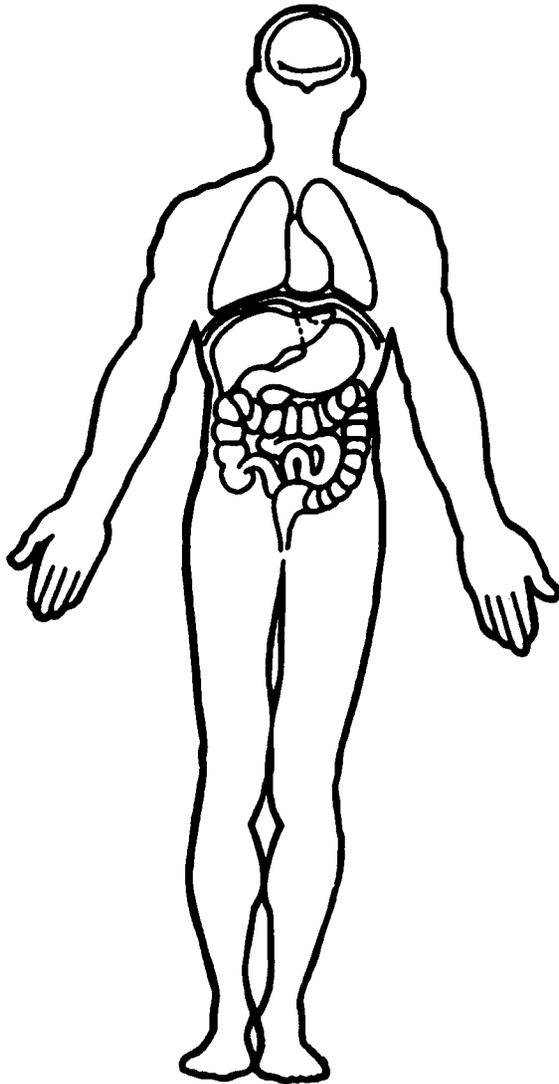
## OFFICIAL INJURY DATA — SKELETAL INJURIES

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.)



## 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.)





# SMASH PROGRAM SUMMARY

(All Measurements In Metric)

## Identifying Title

81

Primary  
Sampling Unit

148J

Case No.-Stratum

01

Accident Event  
Sequence No.

[REDACTED] 197

Date (Month, day, year) of Run

## GENERAL INFORMATION

### VEHICLE 1

### VEHICLE 2

NASS Vehicle Number 01  
Year 1985  
Make CHEVROLET  
Model CAMERO  
Body Style 3H  
CDC 01FD EW 4  
Damaged Side F  
PDOF  $\pm +20^\circ$   
Heading Angle  $325 \pm 220^\circ$

NASS Vehicle Number 02  
Year 1995  
Make TOYOTA  
Model 4 RUNNER  
Body Style 44  
CDC 10LY EW 4  
Damaged Side L  
PDOF  $\pm -70^\circ$   
Heading Angle  $235 \pm 140^\circ$

## VEHICLE SPECIFICATIONS

### VEHICLE 1

### VEHICLE 2

Wheelbase 257 cm  
Overall Length <sup>13</sup> 477 cm  
Overall Width <sup>13</sup> 185 cm ✓  
Weight  $1342 + 137 + 0 = 1479$  kg  
Curb Occupant(s) Cargo  
Engine Displacement 2.8 L  
Drive System RWD  
Size 3 ✓  
Stiffness 3

Wheelbase 262 cm  
Overall Length <sup>14</sup> 447 cm  
Overall Width <sup>14</sup> 169 cm  
Weight <sup>182</sup>  $1889 + 130 + 0 = 2019$  kg ✓  
Curb Occupant(s) Cargo  
Engine Displacement 3.0 L  
Drive System 4WD  
Size 3  
Stiffness 3

## DAMAGE INFORMATION

### VEHICLE 1

### VEHICLE 2

Damage known? Y  
Damage Length 160 cm  
Damage Offset  $\pm 000$  cm  
Crush Depth:  
C1 23 cm  
C2 42 cm ✓  
C3 49 cm  
C4 52 cm  
C5 61 cm  
C6 66 cm

Damage known? Y  
Damage Length 250 cm  
Damage Offset  $\pm -4.5$  cm  
Crush Depth:  
C1 1 cm  
C2 39 cm ✓  
C3 62 cm  
C4 52 cm  
C5 30 cm  
C6 0 cm

### SCENE INFORMATION

Rest and Impact Positions  No  Yes

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

### VEHICLE MOTION

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

### FRICITION INFORMATION

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

Rolling Resistance Option \_\_\_\_\_ **1**

Vehicle 1 Rolling Resistance		Vehicle 2 Rolling Resistance	
LF _____	RF _____	LF _____	RF _____
LR _____	RR _____	LR _____	RR _____

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

Model Year: \_\_\_\_\_

Make: \_\_\_\_\_

Model: \_\_\_\_\_

VIN: \_\_\_\_\_

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

**Complete and ATTACH the appropriate damage sketch and dimensions to the form.**

Summary of Results Using Damage

148J

Speed Change  
(Damage)

Vehicle #1

Total 56 km/h ( 35 mph)  
 Longitudinal -52 km/h ( -33 mph)  
 Latitudinal -19 km/h ( -12 mph)  
 PDOF Angle 20 °  
 Energy Dissipated = 179471 Joules ( 132353 Ft-Lb)  
 Barrier Equivalent Speed = 51.7 km/h ( 32.1 mph)  
 Calculated using size and stiffness categories.

Vehicle #2

Total 41 km/h ( 25 mph)  
 Longitudinal -14 km/h ( -9 mph)  
 Latitudinal 38 km/h ( 24 mph)  
 PDOF Angle -70 °  
 Energy Dissipated = 166665 Joules ( 122909 Ft-Lb)  
 Barrier Equivalent Speed = 43.0 km/h ( 27.9 mph)  
 Calculated using size and stiffness categories.

*Impact w/in tolerance - No charges made*

General Information

	Vehicle #1	Vehicle #2
Year	1985	1995
Make	CHEVROLET	TOYOTA
Model	CAMARO	4RUNNER
CDC	01FDEW4	10LYEW4
Side Damaged	F	L
PDOF Angle	20 °	-70 °
Heading Angle	220 °	140 °

Calculation method:	Size and Stiffness	Size and Stiffness
Size Category	3	3
Stiffness Category	3	3
Vehicle Weight	1479 kgs ( 3261 lbs)	2019 kgs ( 4451 lbs)

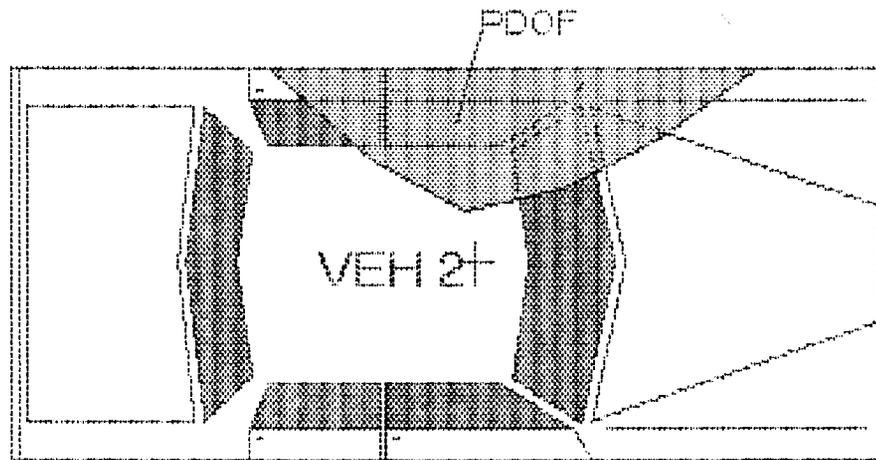
## Damage Information

Vehicle Damage Known	Vehicle #1	Vehicle #2
	Yes	Yes
Crush Length	160.0 cm ( 63 in)	250.0 cm ( 98 in)
C1	23.0 cm ( 9 in)	1.0 cm ( 0 in)
C2	42.0 cm ( 17 in)	39.0 cm ( 15 in)
C3	49.0 cm ( 19 in)	62.0 cm ( 24 in)
C4	52.0 cm ( 20 in)	52.0 cm ( 20 in)
C5	61.0 cm ( 24 in)	30.0 cm ( 12 in)
C6	71.0 cm ( 28 in)	0.0 cm ( 0 in)
D	0.0 cm ( 0 in)	-4.4 cm ( -2 in)
D'	10.5 cm ( 4 in)	-9.7 cm ( -4 in)

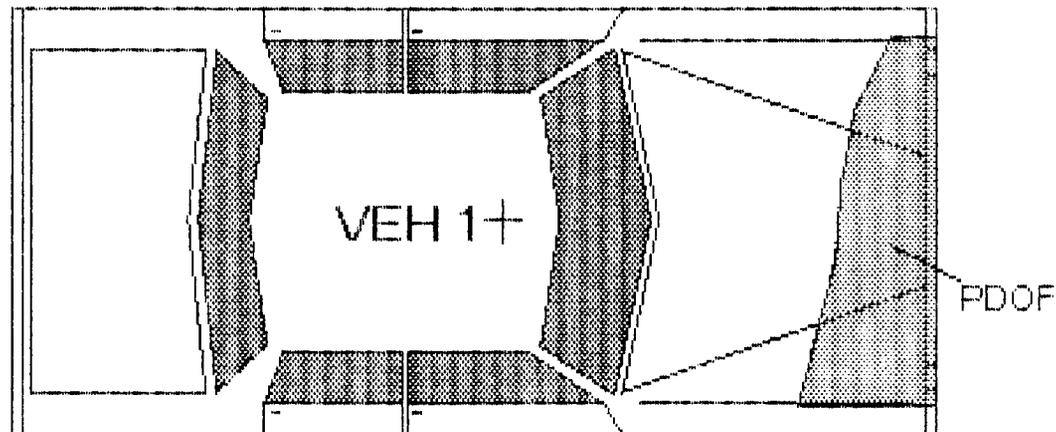
## Vehicle Dimensions

	Vehicle #1	Vehicle #2
Length	477.0 cm ( 188 in)	447.0 cm ( 176 in)
Width	185.0 cm ( 73 in)	169.0 cm ( 67 in)
Wheelbase	257.0 cm ( 101 in)	262.0 cm ( 103 in)
Weight	1479 kgs ( 3261 lbs)	2019 kgs ( 4451 lbs)
CG to Front of Veh	228.1 cm ( 90 in)	228.1 cm ( 90 in)
Engine Displacement	2.8 liters	3.0 liters
Moment of Inertia	304021 kgs ( 26909 lbs)	364460 kgs ( 32259 lbs)
Vehicle Mass	1479 kgs ( 8.5 lb-s <sup>2</sup> /in)	2019 kgs ( 11.6 lb-s <sup>2</sup> /in)

1995 TOYOTA 4RUNNER



1985 CHEVROLET CAMARO



*final*

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GENERAL VEHICLE Vehicle: 2

11

INTRA ERRORS

0GG0421 2 If ROLLOVER GV45 equals 01-17 or 98, then BASIS FOR DELTA V GV58  
GG0422 should equal 04-10.

011

INTER ERRORS

0HT0351 2 If GLASGOW SCORE DA71 equals 07 or 08, then at least one A.I.S.  
HT0352 SEVERITY OI10(n) should equal 3-6. GV=01 DA=02

01

PSU81

ERROR SUMMARY SCREEN

██████████/97

CASE 148J

CURRENT VERSION: 9.04

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

0







SLIDE INDEX

Primary Sampling Unit Number 81

Case Number - Stratum 148 J

Slide No.	Vehicle No.	Direction of Picture	Description of Slide Subject Matter
			(SCENE)
<del>4-5</del>	<del>1</del>	<del>SWNW</del>	<del>APPROACH</del>
<del>6-7</del>	<del>"</del>	<del>NWSE</del>	<del>LOOKING BACK</del>
<del>8-12</del>	<del>2</del>	<del>SESW</del>	<del>APPROACH</del>
<del>13</del>	<del>"</del>	<del>NW</del>	<del>LOOKING BACK</del>
<del>14-15</del>	<del>"</del>	<del>S</del>	<del>PATH OF TRAVEL TO RECOVER &amp; AR</del>
<del>16</del>	<del>"</del>	<del>N</del>	<del>LOOKING BACK</del>
<del>17-18</del>	<del>"</del>	<del>NW</del>	<del>RL &amp; RP</del>
<del>19</del>	<del>"</del>	<del>SE</del>	<del>" "</del>
			(VEH #1) REPAIRED
20-56	1		EXTERIOR
57-59	"		GAS TANK
60-84	"		INTERIOR
85-86	"		HOOD INTRUSION
			(VEH #2)
87-120	2		EXTERIOR
121-123	"		GAS TANK
124-150	"		INTERIOR

See page #1 photo  
for scene info





PSU 81-148J (1996) #1



PSU 81-148J (1996) #2



PSU 81-148J (1996) #3



PSU81-148J (1996) #4



PSU 81-148J (1996) #5



**PSU 81-148J (1996) #6**



PSU 81-148J (1996) #7



PSU 81-148J (1995) #8



PSU 81-148J (1996) #9



PSU81-148J(1996) #10



PSU81-148J (1996) #11



PSU 81-148J (1996) #12



PSU81-148J (1996) #13



PSU 81-148J (1996) #14



PSU 81-148J (1998) #15



PSU 81-148J (1996) #16



PSU 81-148J (1996) #17



PSU 81-148J (1996) #18



PSU 81-148J (1996) #19



**PSU 81-148J (1996) #20**



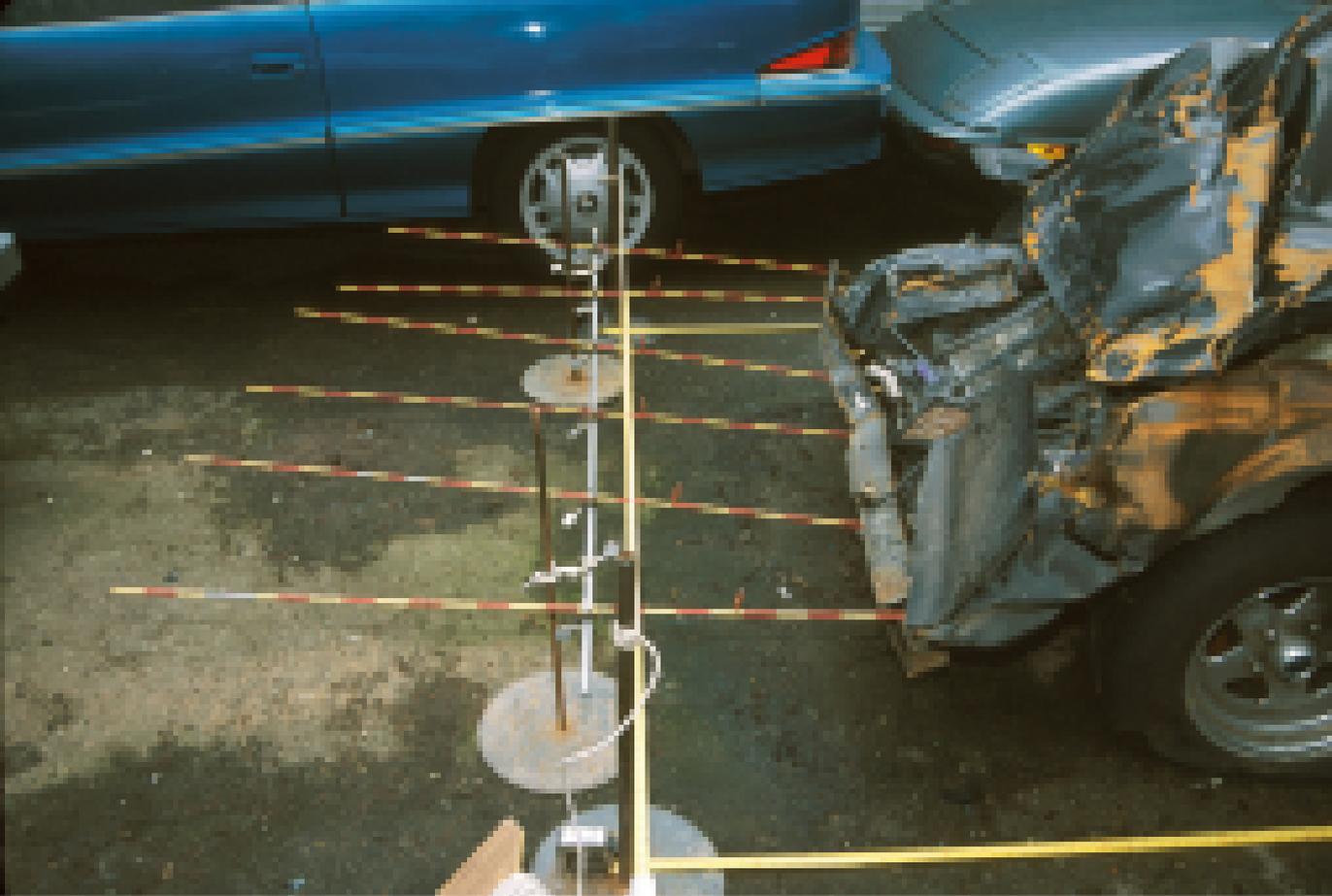
**PSU 81-148J (1996) #21**



PSU 81-146J (1996) #22



**PSU 81-148J (1996) #23**  
**Best Available**



**PSU 81-148J (1996) #24**  
**Best Available**



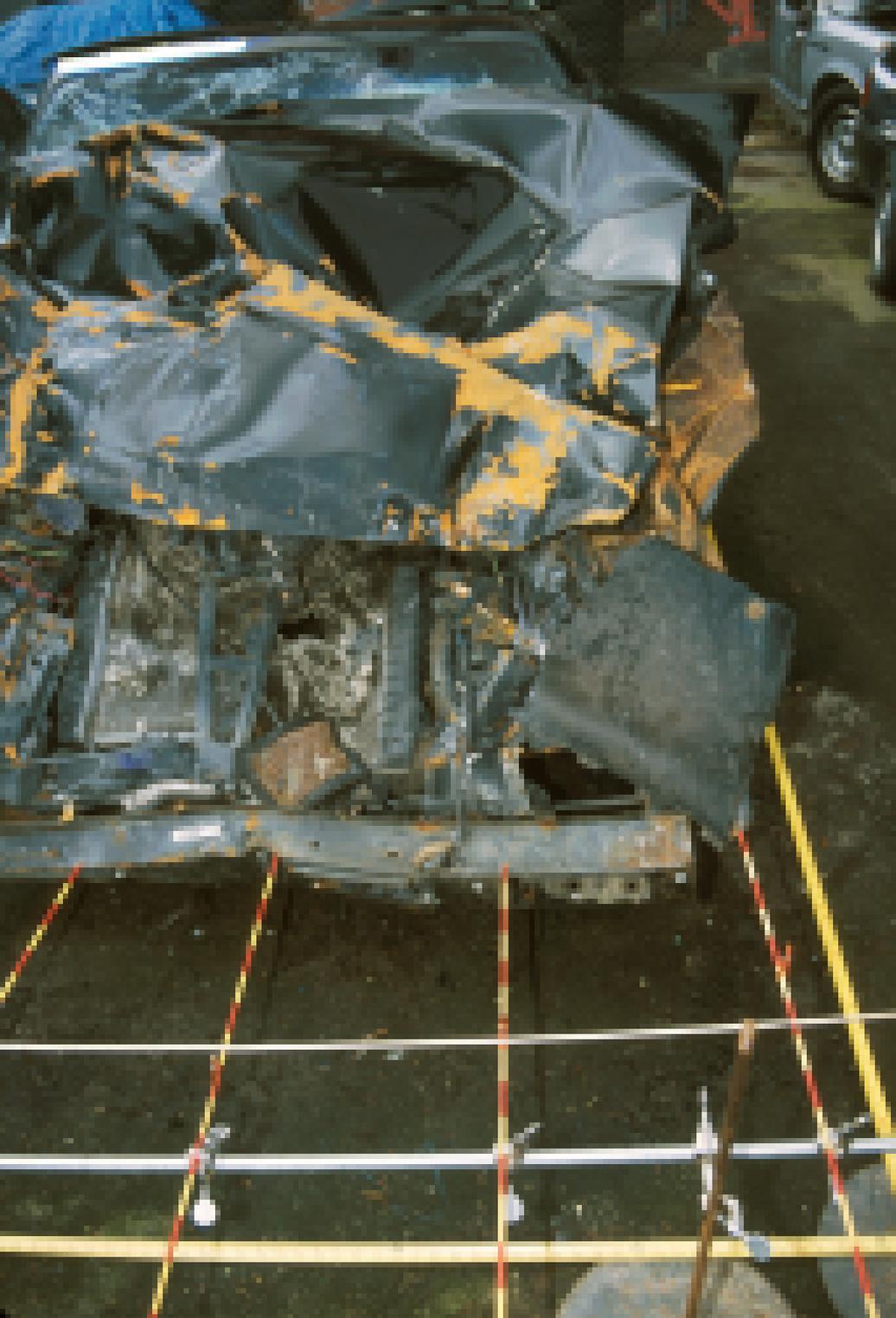
**PSU 81-148J (1996) #25**  
**Best Available**



**PSU 81-146J (1996) #26**  
**Best Available**



**PSU 81-148J (1998) #27**  
**Best Available**



**PSU 81-148J (1998) #28**  
**Best Available**



**PSU 81-146J (1996) #29**  
**Best Available**



**PSU 81-148J (1996) #30**  
**Best Available**



**PSU 81-148J (1996) #31**  
**Best Available**



**PSU 81-148J (1996) #32**  
**Best Available**



**PSU 81-148J (1996) #33**  
**Best Available**



**PSU 81-148J (1996) #34  
Best Available**



**PSU 81-148J (1996) #35**  
**Best Available**



**PSU 81-148J (1996) #36**

**Best Available**



PSU81-148J (1996) #37



**PSU 81-146J (1996) #38**



**PSU 81-148J (1996) #39**

**Best Available**



**PSU 81-148J (1996) #40**  
**Best Available**



**PSU 81-148J (1996) #41  
Best Available**



**PSU 81-146J (1996) #42**  
**Best Available**



**PSU 81-148J (1996) #43**  
**Best Available**



**PSU 81-148J (1996) #44**  
**Best Available**



**PSU 81-148J (1996) #45**

**Best Available**



**PSU81-146J (1996) #46**  
**Best Available**



**PSU 81-148J (1996) #47**  
**Best Available**



**PSU 81-148J (1996) #48**  
**Best Available**



**PSU 01-146J (1996) #49**  
**Best Available**



**PSU 81-146J (1996) #50**  
**Best Available**



**PSU 81-148J (1996) #51**  
**Best Available**



**PSU 81-148J (1996) #52**  
**Best Available**



**PSU 81-148J (1996) #53**  
**Best Available**



**PSU 81-148J (1996) #54  
Best Available**



**PSU 01-146J (1996) #55**  
**Best Available**



**PSU 81-148J (1996) #56**  
**Best Available**



PSU 81-148J (1996) #57



**FSU 81-148J (1996) #58**



PSU 81-148J (1996) #59



**PSU 81-148J (1996) #60**

**Best Available**



**PSU 81-148J (1996) #61**  
**Best Available**



**PSU 81-148J (1996) #62**

**Best Available**



**PSU 81-148J (1996) #63**  
**Best Available**



**PSU 81-148J (1996) #64**



**PSU 81-148J (1996) #65**

**Best Available**



**PSU 81-148J (1996) #66**

**Best Available**



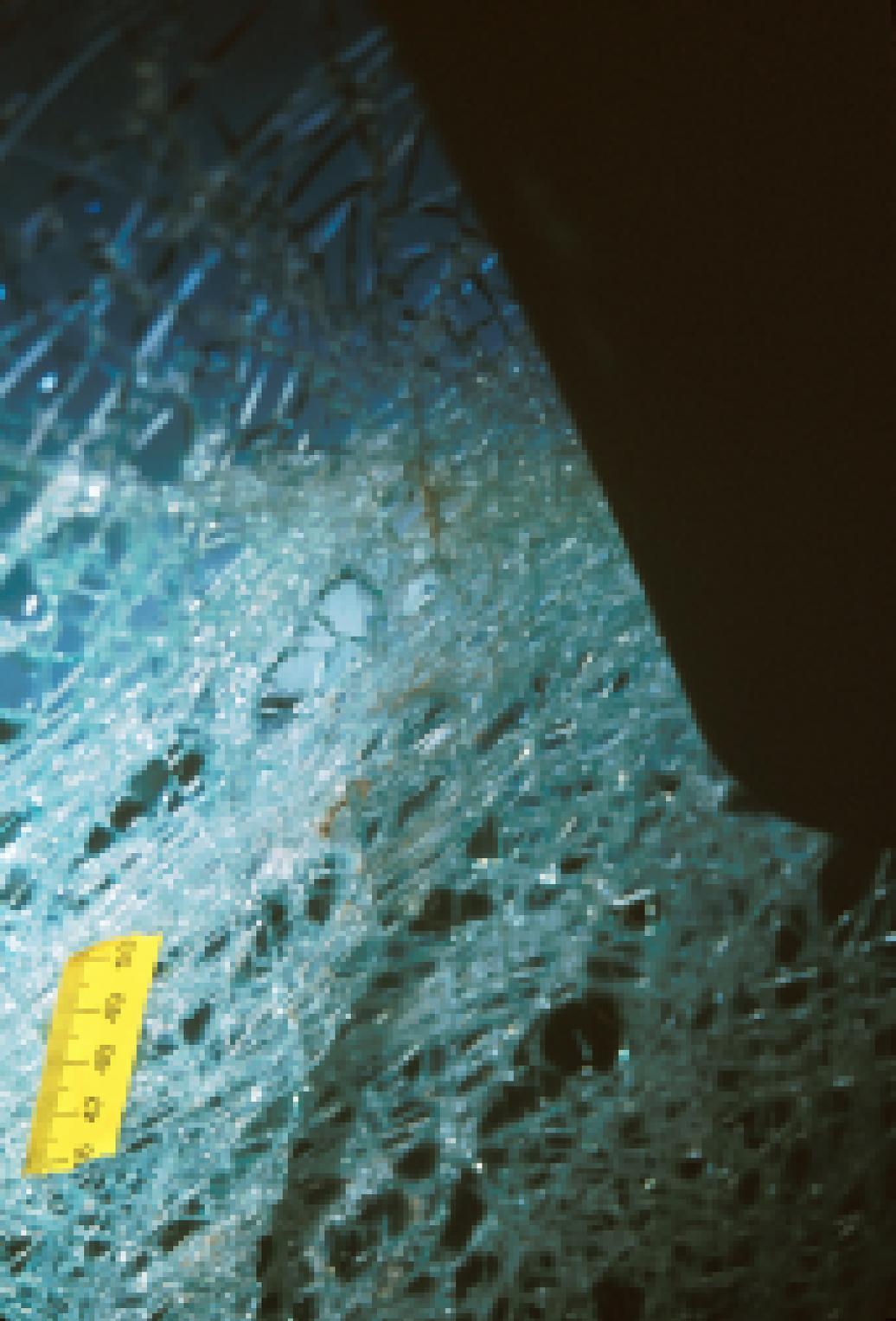
**PSU 81-148J (1996) #67**  
**Best Available**



**PSU 81-148J (1986) #68**  
**Best Available**



**PSU 81-146J (1986) #69**  
**Best Available**



PSU 81-148J (1996) #70



**PSU 81-148J (1996) #71**

**Best Available**



**PSU 81-148J (1998) #72**  
**Best Available**



PSU 01-148J (1996) #73



**PSU 81-148J (1996) #74**  
**Best Available**



**PSU 81-148J (1996) #75**  
**Best Available**



**PSU 81-148J (1996) #76**  
**Best Available**



**PSU 81-148J (1996) #77  
Best Available**



**PSU 81-148J (1996) #78**

**Best Available**

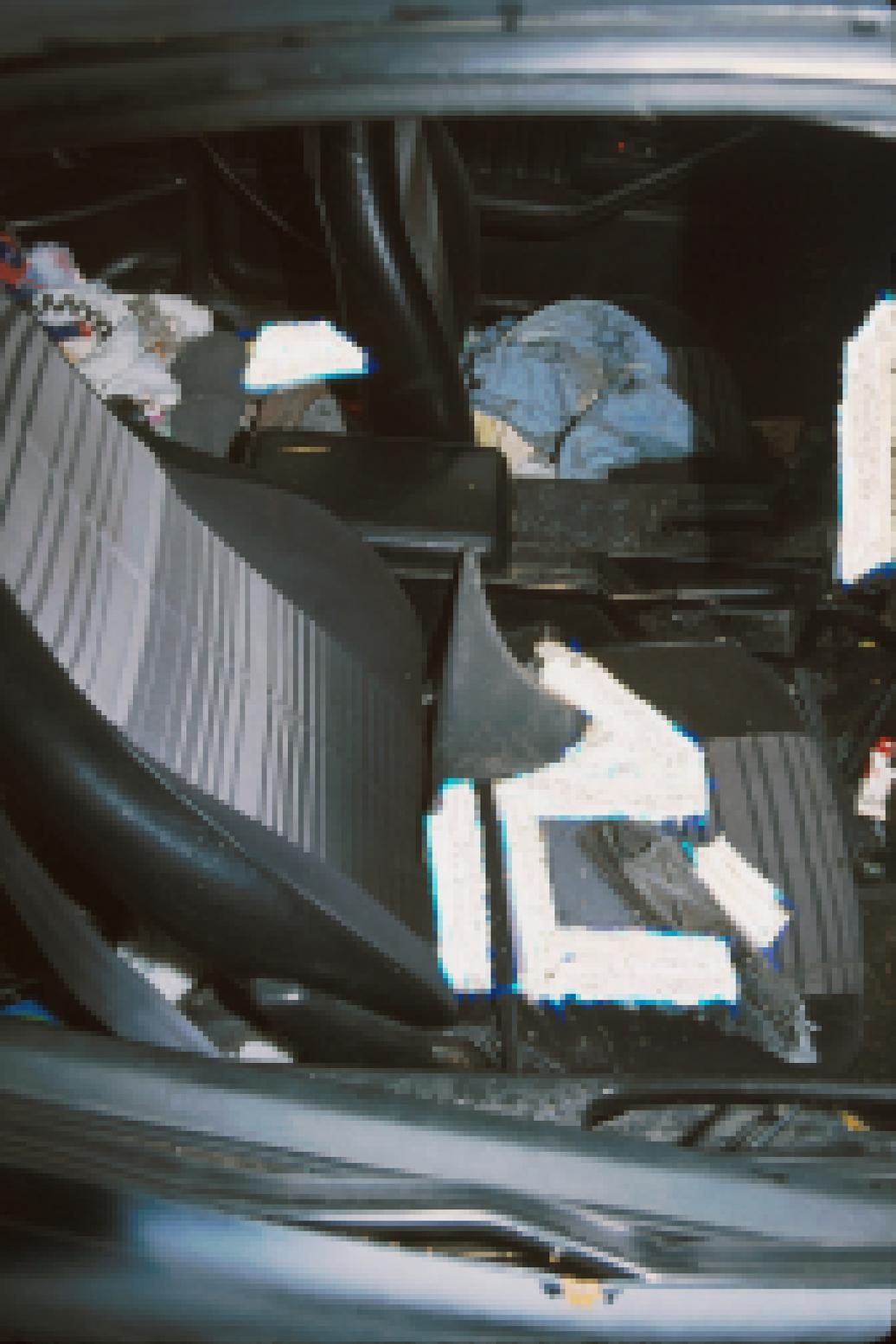


PSU 81-148J (1996) #79



**PSU 81-148J (1996) #80**

**Best Available**



PSU 01-146J (1998) #01



PSU 61-148J (1996) #82



PSU 81-148J (1998) #63



PSU 81-148J (1996) #84



PSU 81-148J (1998) #85



**PSU 81-148J (1996) #86**



**PSU 81-148J (1996) #87**



**PSU 81-146J (1996) #68**



PSU 81-148J (1996) #89



**PSU 81-148J (1996) #90**



**PSU 81-148J (1998) #91  
Best Available**



**PSU 81-146J (1996) #92**



**PSU 81-146J (1996) #93**  
**Best Available**



**PSU 81-148J (1996) #94**  
**Best Available**



PSU 81-148J (1996) #95



**PSU 81-148J (1996) #96**

**Best Available**



**PSU 81-148J (1996) #97**  
**Best Available**



PSU 81-148J (1996) #98



**PSU 81-148J (1996) #99**  
**Best Available**



PSU 81-148J (1996) #100



**PSU 81-148J (1996) #101  
Best Available**



**PSU 81-146J (1996) #102**  
**Best Available**



**PSU81-148J (1996) #103**  
**Best Available**



**PSU81-148J (1996) #104**



PSU 81-148J (1996) #105



PSU 81-148J (1996) #106



**FSU 81-148J (1996) #107**



PSU 81-148J (1996) #108



PSU 81-146J (1996) #109



**PSU 81-148J (1996) #110**



PSU81-148J (1996) #111



PSU 81-148J (1996) #112



**PSU 81-148J (1996) #113**



PSU81-148J (1996) #114



PSU 01-148J (1996) #115



**PSU 81-148J (1996) #116**



**PSU81-148J (1998) #117**

**Best Available**



PSU81-148J (1996) #118



PSU 81-148J (1996) #119



PSU 81-148J (1996) #120



PSU 81-148J (1996) #121



**PSU 81-148J (1996) #122**



PSU 81-148J (1996) #123



PSU 81-148J (1996) #124



**PSU 81-148J (1996) #125**

**Best Available**



**PSU 81-148J (1998) #126**

**Best Available**



**PSU 81-148J (1996) #127**

**Best Available**



**PSU 81-148J (1996) #128**



**PSU 01-148J (1996) #129**



**PSU 81-148J (1996) #130**  
**Best Available**



**PSU 81-148J (1996) #131**  
**Best Available**



**PSU 81-148J (1996) #132**  
**Best Available**



**PSU 81-148J (1996) #133**  
**Best Available**



PSU 01-146J (1996) #134



**PSU 81-148J (1996) #135**



**PSU 81-148J (1996) #138**



PSU01-148J (1996) #137



**PSU 81-148J (1996) #138**  
**Best Available**



**PSU 81-148J (1996) #139**  
**Best Available**



**PSU 81-148J (1996) #140**  
**Best Available**



**PSU 81-148J (1996) #141**  
**Best Available**



**PSU 81-148J (1996) #142**

**Best Available**



PSU 81-148J (1996) #143



PSU 81-148J (1996) #144



PSU 81-148J (1996) #145



PSU 81-148J (1996) #146



**PSU 81-148J (1996) #147**



**PSU 81-148J (1996) #148**  
**Best Available**



**PSU 81-148J (1996) #149**



**PSU 81-148J (1996) #150**