



U.S. Department  
of Transportation

**National Highway  
Traffic Safety  
Administration**

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

Dear Crash Data Researchers/Users:

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

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

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

\*\*\* \*\*



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



# CASE SUMMARY

PSU 72 CASE NO. 048B TYPE OF ACCIDENT Four Cars/Rear End/Rollover

## A. DESCRIPTION OF THE ACCIDENT SEQUENCE AND ACCIDENT PECULIARITIES

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

Vehicles #1 and #2 were traveling northbound on a six lane divided expressway in the second lane. Vehicle #3 was traveling southbound on the same six lane divided expressway in the fourth lane. Vehicle #4 was also traveling southbound on a six lane divided expressway in the sixth lane. Vehicle #1 struck the back of Vehicle #2 causing Vehicle #1 to lose control and cross the center median of the expressway. Vehicle #1 was then clipped by Vehicle #3 on the right side causing Vehicle #1 to rollover four quarter turns. When Vehicle #1 was rolling over it struck the front of Vehicle #4. A tire from Vehicle #1 then side slapped Vehicle #4. Vehicles #1 and #4 were towed from the scene. Vehicles #2 and #3 were driven away from the scene. The driver and one occupant of Vehicle #1 was ejected from the vehicle and was fatally injured. Another occupant from Vehicle #1 and the driver of Vehicle #4 were transported to the hospital.

## 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	
01	Subcompact	1984/Nissan/Stanza	Back	Severe	None
02	Intermediate	1993/Oldsmobile/Cutlass Supreme	Back	Unknown	Unknown
03	Compact	1994/Ford/Probe	Right	Unknown	Unknown
04	Intermediate	1990/Honda/Accord	Front	Moderate	None

**DO NOT SANITIZE THIS FORM**

### C. PERSON PROFILE(S)

Vehicle No.	Person Role	Seat Position	Restraint Use	Most Severe Injury (TO BE COMPLETED BY ZONE CENTER)			
				Body Region	Injury Type	AIS	Injury Source
01	Driver	Front-Left	None	Brain Injured Aorta	laceration severity laceration	6 Un 6	ground known ground
01	Passenger	Front-Right	None				
01	Passenger	Back-Left	None				
04	Driver	Front-Left	Automatic Shoulder	Skull	fracture	5	Intruding object (Muffled)
04	Passenger	Front-Right	Automatic Shoulder	Injured	severity	Un	

**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**



U.S. Department of Transportation  
National Highway Traffic Safety  
Administration

# ACCIDENT COLLISION DIAGRAM

BEST AVAILABLE

NATIONAL ACCIDENT SAMPLING SYSTEM  
CRASHWORTHINESS DATA SYSTEM

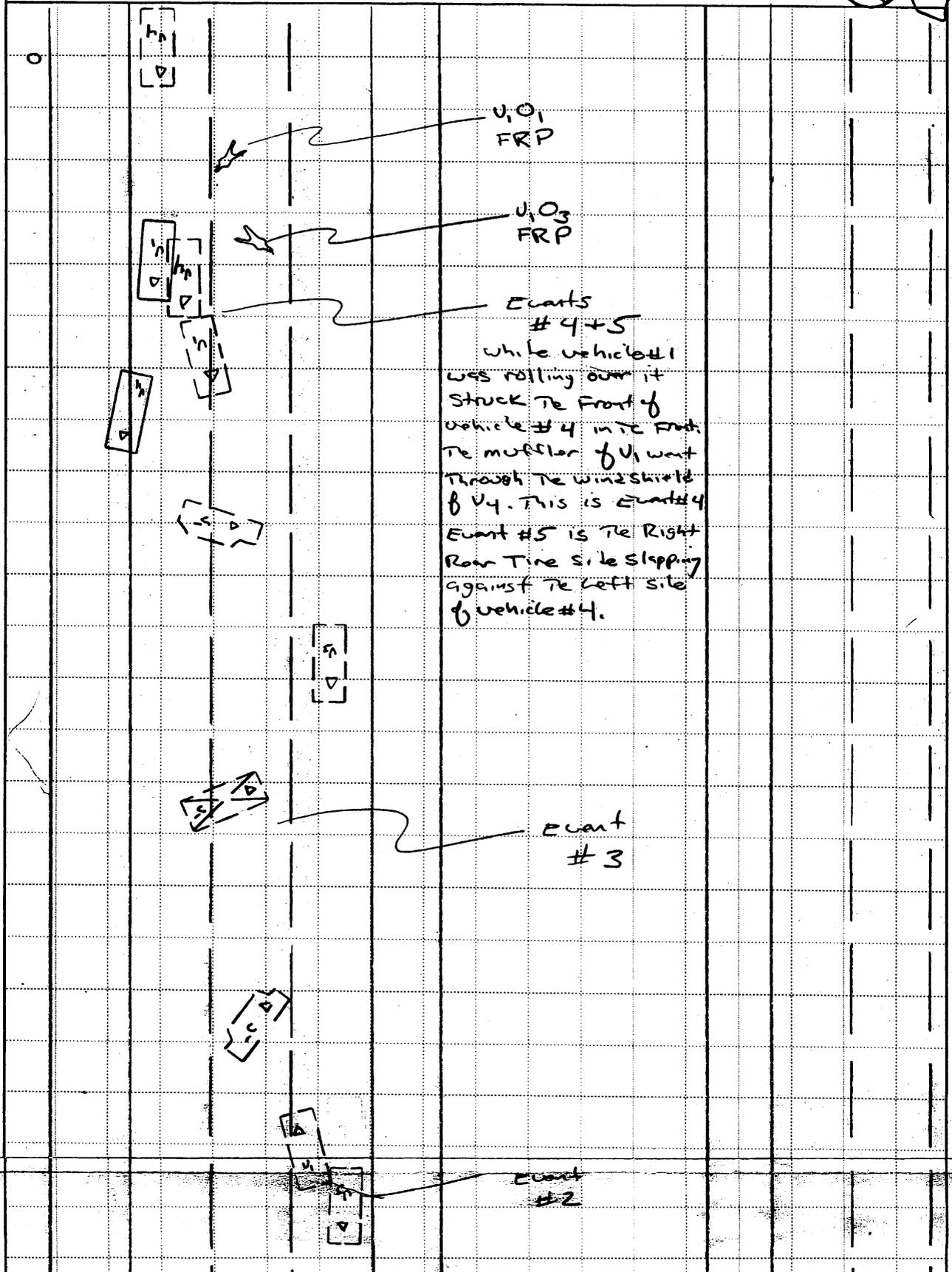
PSU No. 72

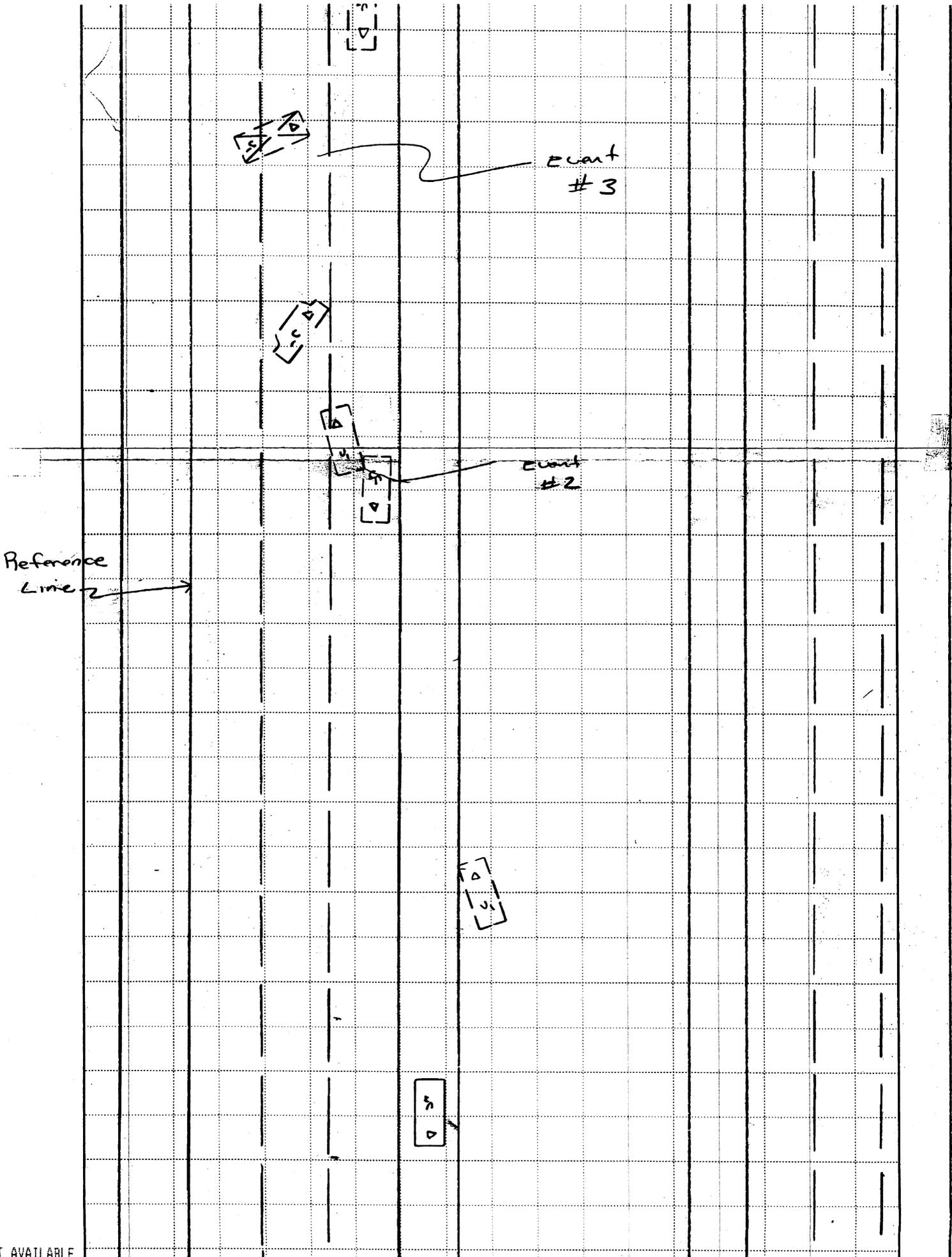
Case Number - Stratum 048B

Indicate  
North



Event  
#6  
V4  
Fire







A  
V2

A  
V2

A  
V2

A  
V2  
A  
V2

Exam #1

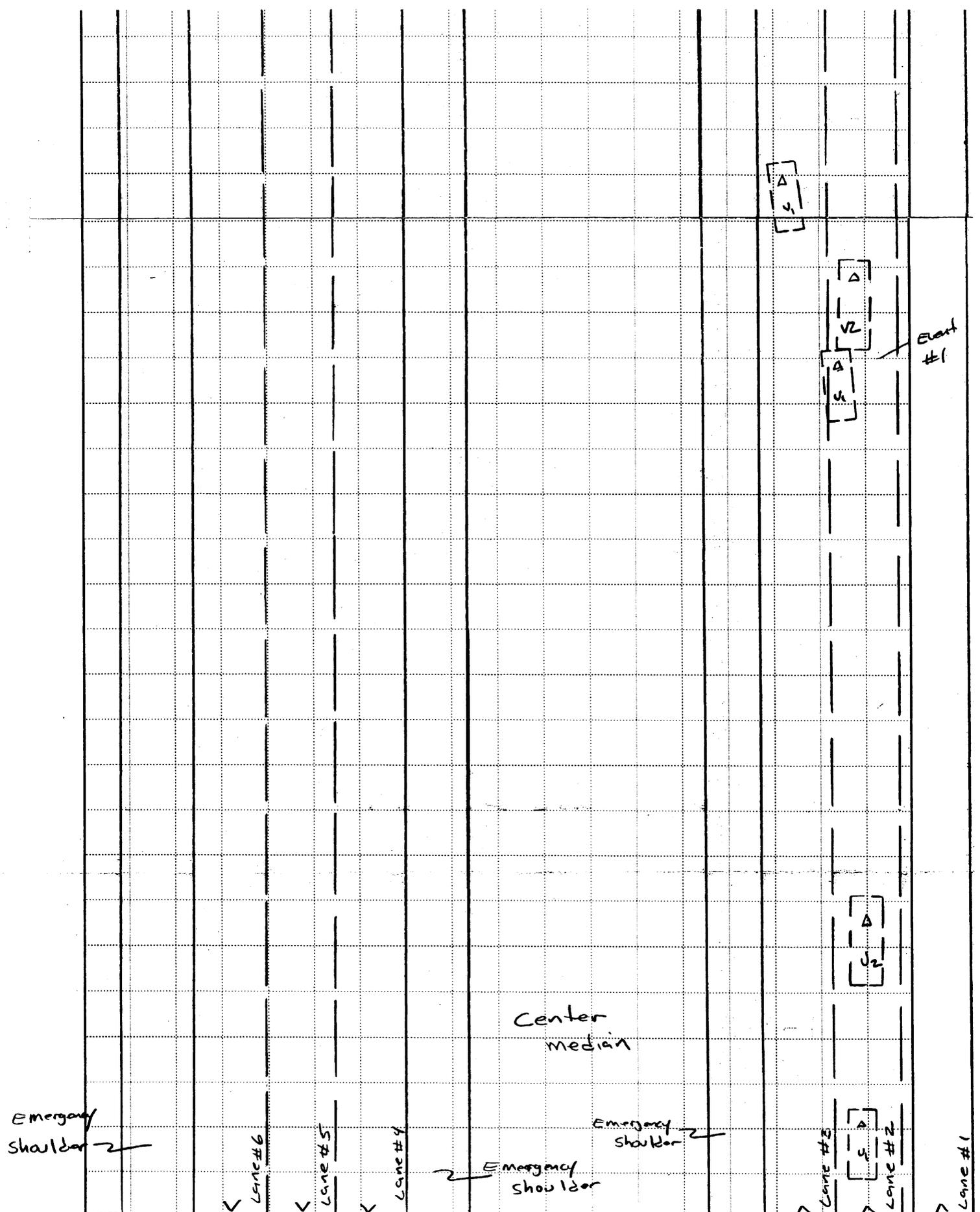
$\Delta$   
4

$\Delta$   
V2  
 $\Delta$   
4

Event #1

$\Delta$   
V2

Center  
median





# ACCIDENT COLLISION MEASUREMENT TABLE

BEST AVAILABLE

NATIONAL ACCIDENT SAMPLING SYSTEM  
CRASHWORTHINESS DATA SYSTEM

Primary Sampling Unit Number 72

Case Number - Stratum 048B

### ACCIDENT COLLISION DIAGRAM

Document the physical plant:

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

Document vehicle dynamics including:

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

CRASH DATA

	VEH. #1	VEH. #2	VEH. #3	VEH. #4
Heading Angle	_____	_____	_____	_____
Surface Type	<u>B.t</u>	<u>B.t</u>	<u>B.t</u>	<u>B.t</u>
Surface Condition	<u>Dry</u>	<u>Dry</u>	<u>Dry</u>	<u>Dry</u>
Coefficient of Friction	_____	_____	_____	_____
Grade (v/h) Measurement (between impact and final rest)	<u>0/122</u>	<u>0/122</u>	<u>0/122</u>	<u>0/122</u>
Grade (v/h) Measurement (at location of rollover initiation)	<u>0/122</u>	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>

Heading Angles Broken Down Per Event

Event #1	Event #2	Event #3	Event #4
$V_1 = 60$ $V_2 = 70^\circ$	$V_1 = 55^\circ$ $V_3 = 250^\circ$	$V_1 = 50$ $V_4 = 250$	
		Note Event #3 is a rollover + Event #6 is a Fire.	

Reference Point: Light Pole [Redacted]

Reference line: White Fog Line of S/B Lines of [Redacted]

Item	Distance and Direction from Reference Point	Distance and Direction from Reference Line
<u>All Measurements Taken From PAR</u>		
<u>Reference Point</u>	<u>N/A</u>	<u>4.5 N</u>
<u>Beg. of Y&amp;W Mark <math>V_1</math></u>	<u>153.0m W</u>	<u>N/A S</u>
<u><math>V_1</math> Exits Center Median</u>	<u>77.4m W</u>	<u>18.4m S</u>
<u>FRP <math>V_4</math> Front Tire</u>	<u>18.3m W</u>	<u>.46m S</u>
<u>FRP <math>V_4</math> Rear Tire</u>	<u>15.8m W</u>	<u>.97m S</u>
<u>FRP <math>V_1</math> Front Tire</u>	<u>10.8m W</u>	<u>2.1m S</u>
<u>FRP <math>V_1</math> Rear Tire</u>	<u>8.5m W</u>	<u>2.1m S</u>
<u>Head of <math>V_1 O_1</math></u>	<u>3.9m W</u>	<u>5.2m S</u>
<u>(L) Foot of <math>V_1 O_1</math></u>	<u>5.4m W</u>	<u>4.8m S</u>
<u>(R) Foot of <math>V_1 O_3</math></u>	<u>5.3m W</u>	<u>8.7m S</u>
<u>Head of <math>V_1 O_3</math></u>	<u>6.9m W</u>	<u>9.3m S</u>





# ACCIDENT FORM

1. Primary Sampling Unit Number 72  
2. Case Number - Stratum 048B

## IDENTIFICATION

3. Number of General Vehicle Forms Submitted 04  
4. Date of Accident (Month, Day, Year) [REDACTED] 9 5  
5. Time of Accident 2205  
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 1  
9.  SS18 Unsafe Driver Actions 0  
10.  SS19 \_\_\_\_\_ 0

## NUMBER OF EVENTS

11. Number of Recorded Events in This Accident 06  
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>01</u>	15. <u>F</u>	16. <u>02</u>	17. <u>03</u>	18. <u>B</u>
19. <u>0 2</u>	20. <u>01</u>	21. <u>01</u>	22. <u>R</u>	23. <u>03</u>	24. <u>02</u>	25. <u>R</u>
26. <u>0 3</u>	27. <u>01</u>	28. <u>01</u>	29. <u>T</u>	30. <u>31</u>	31. <u>00</u>	32. <u>N</u>
33. <u>0 4</u>	34. <u>01</u>	35. <u>01</u>	36. <u>U</u>	37. <u>04</u>	38. <u>03</u>	39. <u>F</u>
40. <u>0 5</u>	41. <u>04</u>	42. <u>03</u>	43. <u>R</u>	44. <u>04</u>	45. <u>03</u>	46. <u>X</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 (≤ 4,500 kgs GVWR)<br>(16) Utility station wagon (≤ 4,500 kgs GVWR)<br>(19) Unknown utility type<br>(20) Minivan (≤ 4,500 kgs GVWR)<br>(21) Large van (≤ 4,500 kgs GVWR)<br>(24) Van Based school bus (≤ 4,500 kgs GVWR)<br>(28) Other van type (≤ 4,500 kgs GVWR)<br>(29) Unknown van type (≤ 4,500 kgs GVWR)<br>(30) Compact pickup truck (≤ 4,500 kgs GVWR) | (31) Large pickup truck (≤ 4,500 kgs GVWR)<br>(38) Other pickup truck (≤ 4,500 kgs GVWR)<br>(39) Unknown pickup truck type (≤ 4,500 kgs GVWR)<br>(45) Other light truck (≤ 4,500 kgs GVWR)<br>(48) Unknown light truck type (≤ 4,500 kgs GVWR)<br>(49) Unknown light vehicle type<br>(50) School bus (excludes van based)(> 4,500 kgs GVWR)<br>(58) Other bus (> 4,500 kgs GVWR)<br>(59) Unknown bus type<br>(60) Truck (> 4,500 kgs GVWR)<br>(67) Tractor without trailer<br>(68) Tractor-trailer(s)<br>(78) Unknown medium/heavy truck type<br>(79) Unknown light/medium/heavy truck type<br>(80) Motored cycle<br>(90) Other vehicle<br>(99) Unknown |
|--|---|

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

- |   |  |   |   |
|---|--|---|---|
| CDS APPLICABLE<br>AND OTHER<br>VEHICLES | (O) Not a motor vehicle<br>(N) Noncollision<br>(F) Front | (R) Right side<br>(L) Left side<br>(B) Back | (T) Top<br>(U) Undercarriage<br>(9) Unknown |
|---|--|---|---|

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

### CODES FOR VEHICLE NUMBER OR OBJECT CONTACTED

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

National Accident Sampling System-Crashworthiness Data System: Accident Form

**ACCIDENT EVENTS SUPPLEMENT**

1. Primary Sampling Unit Number 72

2. Case Number—Stratum Q 48B

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
47. <u>0 6</u>	48. <u>04</u>	49. <u>03</u>	50. <u>N</u>	51. <u>33</u>	52. <u>00</u>	53. <u>N</u>
54. <u>0 7</u>	55. _____	56. _____	57. _____	58. _____	59. _____	60. _____
61. <u>0 8</u>	62. _____	63. _____	64. _____	65. _____	66. _____	67. _____
68. <u>0 9</u>	69. _____	70. _____	71. _____	72. _____	73. _____	74. _____
75. <u>1 0</u>	76. _____	77. _____	78. _____	79. _____	80. _____	81. _____
82. <u>1 1</u>	83. _____	84. _____	85. _____	86. _____	87. _____	88. _____
89. <u>1 2</u>	90. _____	91. _____	92. _____	93. _____	94. _____	95. _____
96. <u>1 3</u>	97. _____	98. _____	99. _____	100. _____	101. _____	102. _____
103. <u>1 4</u>	104. _____	105. _____	106. _____	107. _____	108. _____	109. _____
110. <u>1 5</u>	111. _____	112. _____	113. _____	114. _____	115. _____	116. _____
117. <u>1 6</u>	118. _____	119. _____	120. _____	121. _____	122. _____	123. _____
124. <u>1 7</u>	125. _____	126. _____	127. _____	128. _____	129. _____	130. _____
131. <u>1 8</u>	132. _____	133. _____	134. _____	135. _____	136. _____	137. _____
138. <u>1 9</u>	139. _____	140. _____	141. _____	142. _____	143. _____	144. _____
145. <u>2 0</u>	146. _____	147. _____	148. _____	149. _____	150. _____	151. _____



OCCUPANT RELATED

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

AIR BAG RELATED

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

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

VEHICLE WEIGHT ITEMS

- 43. Vehicle Curb Weight 1,060  
 Code weight to nearest 10 kilograms.  
 (045) Less than 450 kilograms  
 (610) 6,100 kilograms or more  
 (999) Unknown  
2,325 lbs X .4536 = 1,055 kgs  
 Source: \_\_\_\_\_

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

ROLLOVER DATA

- 45. Rollover 04  
 (00) No rollover (no overturning)  
*Rollover (primarily about the longitudinal axis)*  
 (01-16) Code the number of quarter turns  
 (17) Rollover, 17 or more quarter turns (specify): \_\_\_\_\_  
 (98) Rollover--end-over-end (i.e., primarily about the lateral axis)  
 (99) Rollover (overturn), details unknown
- 46. Rollover Initiation Type ok 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 03  
 (Note: Applicable codes on back of page)
- 49. Location on Vehicle Where Initial Principal Tripping Force Is Applied 2  
 (0) No rollover  
 (1) Wheels/tires  
 (2) Side plane  
 (3) End plane  
 (4) Undercarriage  
 (5) Other location on vehicle (specify): \_\_\_\_\_  
 (6) Non-contact rollover forces (specify): \_\_\_\_\_  
 (8) Rollover--end-over-end  
 (9) Unknown
- 50. Direction of Initial Roll 2  
 (0) No rollover  
 (1) Roll right - primarily about the longitudinal axis  
 (2) Roll left - primarily about the longitudinal axis  
 (8) Rollover--end-over-end  
 (9) Unknown roll direction

## CODES FOR ROLLOVER INITIATION OBJECT CONTACTED

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

**Noncollision**

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

**Collision With Fixed Object**

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

(45) Breakaway pole or post (any diameter)

**Nonbreakaway Pole or Post**

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

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

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

(69) Unknown fixed object

**Collision with Nonfixed Object**

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

(89) Unknown nonfixed object

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

(99) Unknown event or object



### EXTERIOR VEHICLE FORM

1. Primary Sampling Unit Number <u>72</u>	3. Vehicle Number <u>01</u>
2. Case Number - Stratum <u>048B</u>	

#### VEHICLE IDENTIFICATION

VIN J N I H T I I S 7 E T XXXXXXXXXX Model Year 84  
 Vehicle Make (specify): Nissan Vehicle Model (specify): Sentra

#### LOCATOR

Locate the end of the damage with respect to the vehicle longitudinal center line 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
01	13 cm @ center	13 cm @ center	43 cm @ center
04	30 cm @ center	Bumper Corner to Bumper	UNK
03	Front Bumper to Rear Bumper Roof side Rail to Rail	Front Bumper to Rear Bumper Roof side Rail to Rail	UNK

#### 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).

Researcher no longer w/ NASS!

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								
01	Front	62	2	62	←			N/A			→ +44
04	Back	47	←					N/A			→ +54
03	TOP	unk	←					N/A			→ 0
<div style="border: 2px solid black; border-radius: 50%; padding: 10px; width: fit-content; margin: auto;"> <p style="font-size: 1.1em;">Note: Due to the severe condition of U<sub>1</sub>, Researcher was unable to set-up a string line or contour gauge.</p> </div>											

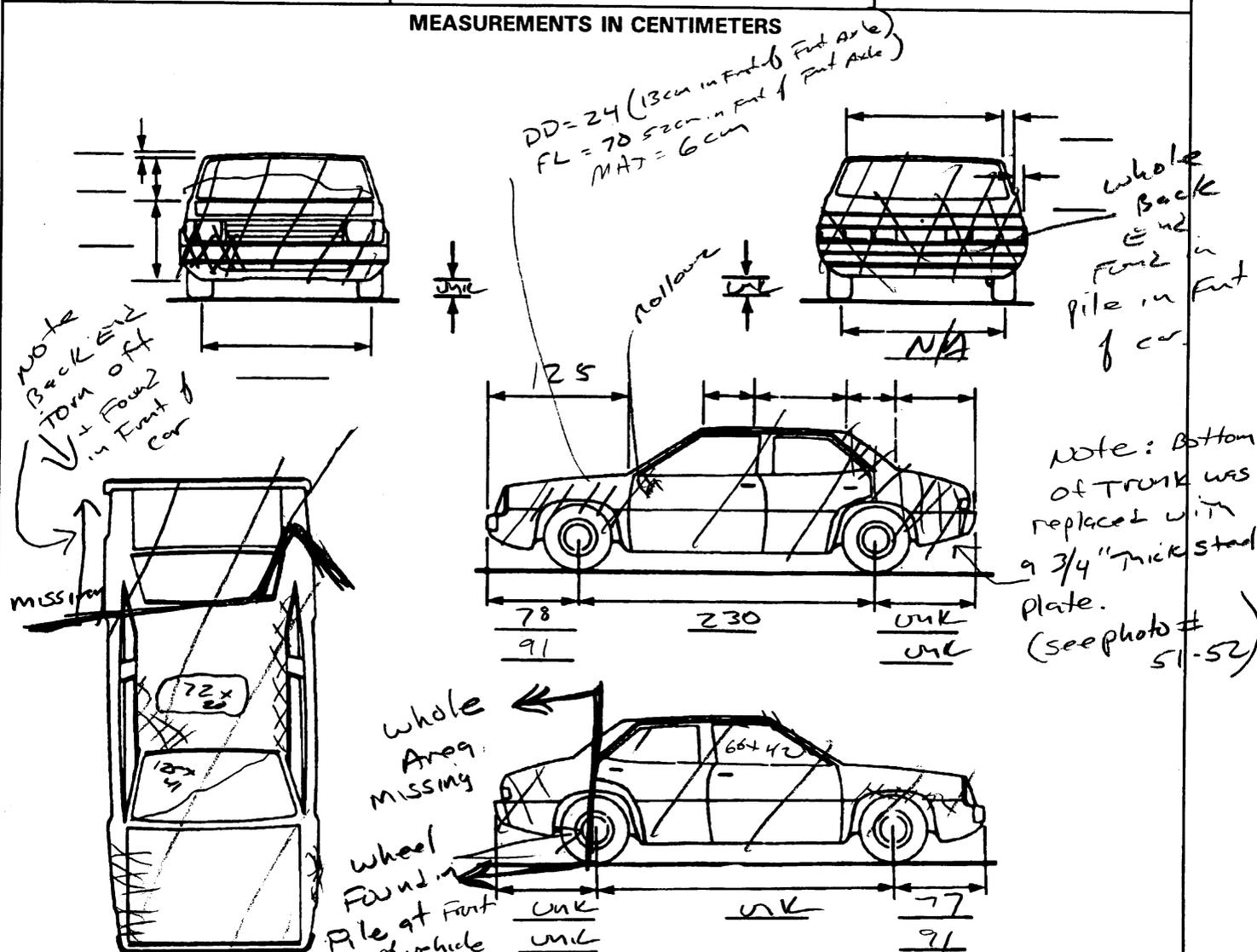
# ORIGINAL SPECIFICATIONS WORK SHEET

Wheelbase	<u>97.2</u>	inches	x 2.54	=	<u>247</u> cm
Overall Length	<u>173.4</u>	inches	x 2.54	=	<u>440</u> cm
Maximum Width	<u>65.6</u>	inches	x 2.54	=	<u>167</u> cm
Curb Weight	<u>2,325</u>	pounds	x .4536	=	<u>1,055</u> kg
Average Track <i>58.5-55.5</i>	<u>56.0</u>	inches	x 2.54	=	<u>142</u> cm
Front Overhang	_____	inches	x 2.54	=	<u>91</u> cm
Rear Overhang	_____	inches	x 2.54	=	<u>102</u> cm
Undeformed End Width	_____	inches	x 2.54	=	_____ cm
Engine Size: cyl./displ.	<u>1974</u>	cc	x .001	=	<u>1.9</u> L
	_____	CID	x .0164	=	_____ L

### VEHICLE DAMAGE SKETCH

<p><b>TIRE—WHEEL DAMAGE</b></p> <p>a. Rotation physically restricted</p> <p>RF <u>2</u> LF <u>2</u> RR <u>9</u> LR <u>1</u></p> <p>b. Tire deflated</p> <p>RF <u>2</u> LF <u>1</u> RR <u>1</u> LR <u>1</u></p> <p>(1) Yes (2) No (8) NA (9) Unk.</p>	<p><b>ORIGINAL SPECIFICATIONS</b></p> <p>Wheelbase <u>247</u> cm Overall Length <u>440</u> cm Maximum Width <u>167</u> cm Curb Weight <u>1055</u> kg Average Track <u>142</u> cm Front Overhang <u>91</u> cm Rear Overhang <u>102</u> cm Undeformed End Width <u>159</u> cm Engine Size: cyl./displ. <u>1.9L 4cyl L</u></p>	<p><b>WHEEL STEER ANGLES</b> (For locked front wheels or displaced rear axles only)</p> <p>RF ± _____ ° LF ± _____ ° RR ± _____ ° LR <u>± 30</u> °</p> <p>Within ± 5 degrees</p>
<p><b>TYPE OF TRANSMISSION</b></p> <p><input checked="" type="checkbox"/> Manual    <input type="checkbox"/> Automatic</p> <p>END SHIFT ≥ 10 CM</p> <p><input checked="" type="checkbox"/> Yes    <input type="checkbox"/> No</p>		<p><b>DRIVE WHEELS</b></p> <p><input checked="" type="checkbox"/> FWD    <input type="checkbox"/> RWD    <input type="checkbox"/> 4WD</p>
		<p>Approximate Cargo Weight <u>0</u> kg</p>

**MEASUREMENTS IN CENTIMETERS**



**NOTES:** Sketch new perimeter and cross hatch direct damage and single hatch induced damage on all views. Annotate observations which might be useful in reconstructing the accident (e.g., grass in tire bead, direction of striations, scuff on sidewalls, etc.). If pulling trailer, sketch type of trailer and damage received on the back of this page.

Annotate any damage caused by extrication such as component removal by torching, prying, or hydraulic shears.



**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>04</u>	5. <u>04</u>	6. <u>99</u>	7. <u>9</u>	8. <u>9</u>	9. <u>9</u>	10. <u>9</u>	11. <u>99</u>

Second Highest Delta "V"

12. <u>03</u>	13. <u>31</u>	14. <u>99</u>	15. <u>9</u>	16. <u>9</u>	17. <u>9</u>	18. <u>9</u>	19. <u>99</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
-----	-----	-----	-----	-----	-----	-----	-----
-----	-----	-----	-----	-----	-----	-----	-----

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) 999  
 \_\_\_\_\_ Code to the nearest centimeter  
 (250) 250 centimeters or more  
 (999) Unknown

28. Original Wheelbase 247  
 \_\_\_\_\_ Code to the nearest centimeter  
 (650) 650 centimeters or more  
 (999) Unknown  
97.2 inches X 2.54 = 247 centimeters

29. Original Average Track Width 142  
 \_\_\_\_\_ Code to the nearest centimeter  
 (185) 185 centimeters or more  
 (999) Unknown  
56.0 inches X 2.54 = 142 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 3
- 36. Location of Fuel Tank-2 Filler Cap 0  
 (0) No fuel tank  
 (1) On back plane  
 (2) Aft of center of the rear wheels (rear axle) on left side plane  
 (3) Aft of center of the rear wheels (rear axle) on right side plane  
 (4) Forward of center of the rear wheels (rear axle) on left side plane  
 (5) Forward of center of the rear wheels (rear axle) on right side plane  
 (6) Over the center of the rear wheels (rear axle) on left side plane  
 (7) Over the center of the rear wheels (rear axle) on right side plane  
 (8) Other (specify): \_\_\_\_\_  
 (9) Unknown

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

**FIRE OCCURRENCE**

- 33. Fire Occurrence 0  
 (0) No fire  
  
 Yes, fire occurred  
 (1) Minor  
 (2) Major  
 (9) Unknown
  
- 34. Origin of Fire 6  
 (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 4
- 40. Location of Fuel Tank-2 0  
 (0) No fuel tank  
 (1) Aft of center of the rear wheels (rear axle) centered  
 (2) Aft of center of the rear wheels (rear axle) left side  
 (3) Aft of center of the rear wheels (rear axle) right side  
 (4) Forward of center of the rear wheels (rear axle) centered  
 (5) Forward of center of the rear wheels (rear axle) left side  
 (6) Forward of center of the rear wheels (rear axle) right side  
 (7) Over center of the rear wheels (rear axle)  
 (8) Other (specify): \_\_\_\_\_  
 (9) Unknown

- 41. Damage to Fuel Tank-1 9
- 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

MOST of Gas Tank is missing Filler Cap + APPROX location of Tank was found

43. Leakage Location of Fuel System-1 9  
0

44. Leakage Location of Fuel System-2  
 (0) No fuel tank  
 (1) No fuel leakage

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

45. Fuel Type-1 01

46. Fuel Type-2 00

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

*Electric Powered or Electric/Solar Powered Vehicles*  
 (10) Lead Acid Battery  
 (11) Nickel-Iron Battery  
 (12) Nickel-Cadmium Battery  
 (13) Sodium Metal Chloride Battery  
 (14) Sodium Sulfur Battery  
 (18) Other (Specify): \_\_\_\_\_

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

(99) Unknown fuel type

47. Is This Vehicle Equipped With More Than Two Fuel Tanks? 0  
 (0) No (one or two tanks only)

*Yes - More Than Two Tanks*  
 (1) Yes -- no damage to any tank or filler cap and no fuel system leakage  
 (2) Yes -- no damage to any tank or filler cap but there is fuel system leakage (specify leakage location): \_\_\_\_\_  
 (3) Yes -- damage to an additional tank or filler cap and there is fuel system leakage (specify the following):  
 Type of tank \_\_\_\_\_  
 Tank location \_\_\_\_\_  
 Filler cap location \_\_\_\_\_  
 Tank damage \_\_\_\_\_  
 Location of leakage \_\_\_\_\_  
 Type of fuel \_\_\_\_\_  
 (9) Unknown if more than two tanks

**COMMENTS**

Most of Gas Tank  
was missing see  
Photos # 47-52 for  
what was missing

\*\*\* STOP: IF THE CDS APPLICABLE VEHICLE WAS NOT TOWED \*\*\*  
 (GV10=0)  
 DO NOT COMPLETE THE INTERIOR VEHICLE FORM.



# INTERIOR VEHICLE FORM

1. Primary Sampling Unit Number 72  
 2. Case Number - Stratum 048B  
 3. Vehicle Number 01

## INTEGRITY

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

Yes, Integrity Was Lost Through

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

### Door, Tailgate or Hatch Opening

5. LF 2 6. RF 2 7. LR 3 8. RR 2 9. TG/H 0

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

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

10. LF 2 11. RF 5 12. LR 0 13. RR 5 14. TG/H 0

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

Door, Tailgate or Hatch Came Open During Collision

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

## GLAZING

Type of Window/Windshield Glazing

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

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

### Window Precrash Glazing Status

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

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

### Glazing Damage from Impact Forces

31. WS 3 32. LF 1 33. RF 6 34. LR 1 35. RR 1  
 36. BL 6 37. Roof 0 38. Other 6

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

### Glazing Damage from Occupant Contact

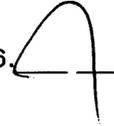
39. WS 1 40. LF 1 41. RF 1 42. LR 1 43. RR 1  
 44. BL 1 45. Roof 0 46. Other 1

- (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



### OCCUPANT AREA INTRUSION

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

	Location of Intrusion	Intruding Component	Magnitude of Intrusion	Dominant Crush Direction
1st	47. <u>97</u>	48. <u>97</u>	49. <u>7</u>	50. <u>7</u>
2nd	51. _____	52. _____	53. _____	54. _____
3rd	55. _____	56. 	57. _____	58. _____
4th	59. _____	60. _____	61. _____	62. _____
5th	63. _____	64. _____	65. _____	66. _____
6th	67. _____	68. _____	69. _____	70. _____
7th	71. _____	72. _____	73. _____	74. _____
8th	75. _____	76. _____	77. _____	78. _____
9th	79. _____	80. _____	81. _____	82. _____
10th	83. _____	84. _____	85. _____	86. _____

#### INTRUDING COMPONENT

##### *Interior Components*

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

##### *Exterior Components*

- (30) Hood
- (31) Outside surface of this vehicle (specify): \_\_\_\_\_
- (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

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

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

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

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

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

- (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

10

-

10

=

0

10

-

10

=

0

-

=

-

=

T

B

**STEERING COLUMN**

**INSTRUMENT PANEL**

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

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

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

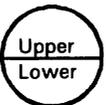
90. Steering Rim/Spoke Deformation 00  
 \_\_\_\_\_ Code actual measured  
 deformation to the nearest centimeter  
 (00) No steering rim deformation  
 (01-14) Actual measured value in centimeters  
 (15) 15 centimeters or more  
 (98) Observed deformation cannot be measured  
 (99) Unknown

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 219,000  
 \_\_\_\_\_ 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  
135,822 miles X 1.6093 = 216,578 kilometers  
 Source: odometer

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

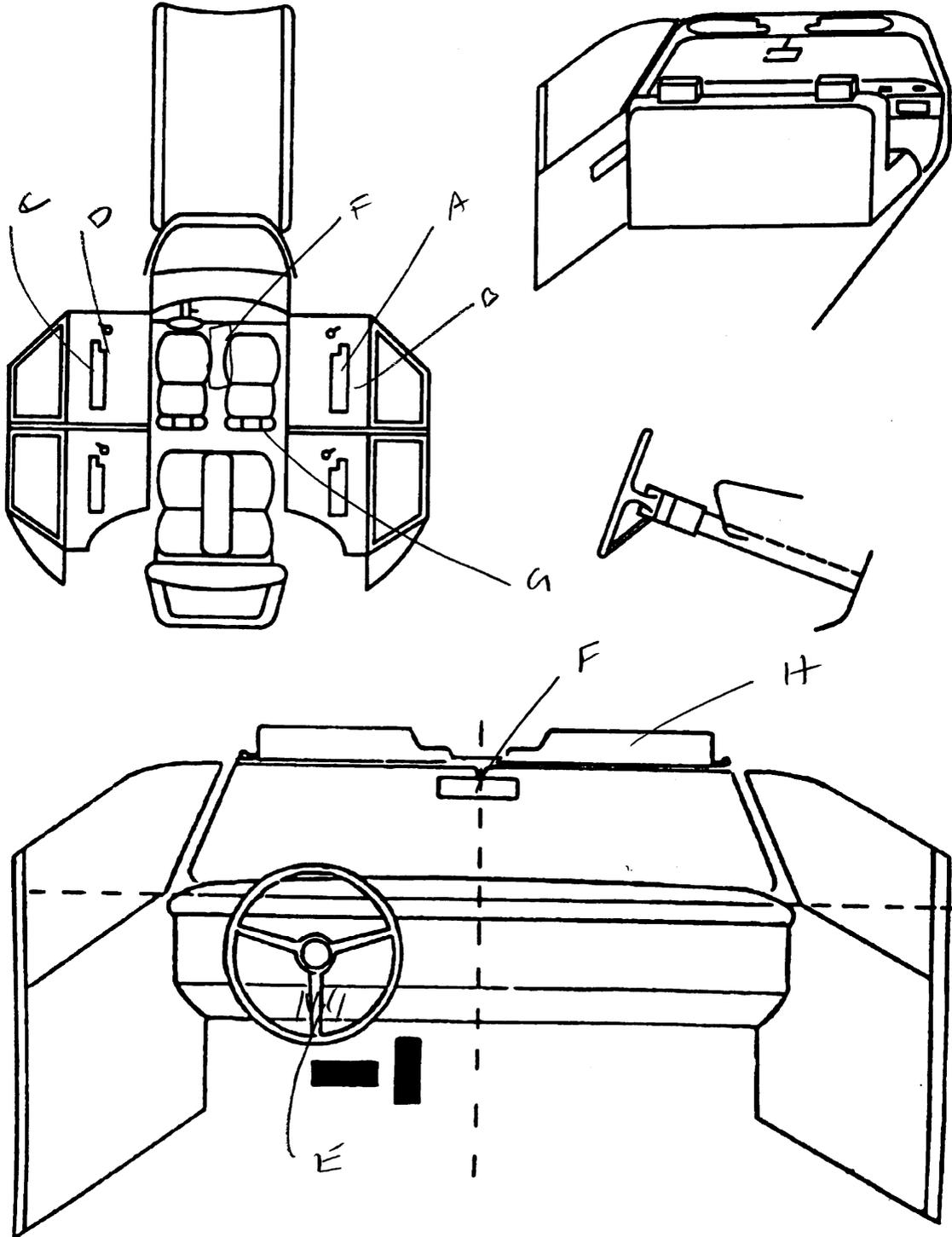
95. Knee Bolsters Deformed from Occupant Contact? 0  
 (0) No knee bolster  
 (1) No deformation  
 (2) Yes - deformation  
 (9) Unknown

96. Did Glove Compartment Door Open During Collision(s)? 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	102	02	(R) side	Fouled on engine w/ Blood + dented	1
B	101	02	(R) side	Dented + Plastic 100'	1
C	052	01	(L) side	Knocked off	1
D	051	01	(L) side	Dented	1
E	010	01	Legs	Cracked plastic	2
F	002	01/02?	Head?	missing	3
G	165	02	Head	cracked plastic	2
H	003	02	Head	Dented	3
I					
J					
K					
L					
M					
N					

**FRONT**

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

**CODES FOR INTERIOR COMPONENTS**

**LEFT SIDE**

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

**INTERIOR**

- (151) Seat, back support
  - (152) Belt restraint webbing/buckle
  - (153) Belt restraint B-pillar or door frame attachment point
  - (154) Other restraint system component (specify): \_\_\_\_\_
  - (155) Head restraint system
  - (160) Other occupants (specify): \_\_\_\_\_
  - (161) Interior loose objects
  - (162) Child safety seat (specify): \_\_\_\_\_
  - (163) Other interior object (specify): \_\_\_\_\_
- AIR BAG**
- (170) Air bag-driver side
  - (175) Air bag compartment cover-driver side
  - (180) Air bag-passenger side
  - (185) Air bag compartment cover-passenger side
  - (190) Other air bag (specify) \_\_\_\_\_
  - (195) Other air bag compartment cover (specify) \_\_\_\_\_

**ROOF**

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

**FLOOR**

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

**REAR**

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

**CONFIDENCE LEVEL OF CONTACT POINT**

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

## MANUAL RESTRAINTS

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

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

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

		Left	Center	Right
<b>F I R S T</b>	Availability	4	0	4
	Evidence of usage	N	0	N
	Used in this crash?	00	0	00
	Proper Use	0	0	0
	Failure Modes	0	0	0
	Anchorage Adjustment	1	0	1
<b>S E C O N D</b>	Availability	3	3	3
	Evidence of usage	N	N	N
	Used in this crash?	00	00	00
	Proper Use	0	0	0
	Failure Modes	0	0	0
	Anchorage Adjustment	0	0	0
<b>O T H E R</b>	Availability			
	Evidence of usage			
	Used in this crash?			
	Proper Use			
	Failure Modes			
	Anchorage Adjustment			

**Manual (Active) Belt System Availability**

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

*Integral Belt Partially Destroyed*

- (6) Shoulder belt (lap belt destroyed/removed)
- (7) Lap belt (shoulder belt destroyed/removed)
- (8) Other belt (specify): \_\_\_\_\_

- (9) Unknown

**Manual (Active) Belt System Use**

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

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

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

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

*Belt Used Improperly*

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

**Manual (Active) Belt Failure Modes During Accident**

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

**Shoulder Belt Upper Anchorage Adjustment**

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

*Adjustable shoulder Belt Upper Anchorage*

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

### AUTOMATIC RESTRAINTS

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

#### AIR BAGS

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

**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

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

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

**Frontal 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

**Air Bag(s) Deployment, Other Than First Seat Frontal (This Occupant Position)**

- (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

#### AUTOMATIC BELTS

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

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

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

*Non-functional*

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

**Automatic (Passive) Belt System Use**

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

**Automatic (Passive) Belt System Type**

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

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

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

*Automatic Belt Used Improperly*

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

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

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

## FIRST SEAT FRONTAL AIR BAGS

NOTES: Encode the applicable data *for the driver and first seat passenger* in the vehicle. The attribute for the variable may be found below. Restraint systems should be assessed during the vehicle inspection then coded on the Occupant Assessment Form.

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

**Type of Air Bag**

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

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

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

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

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

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

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

*Yes - Air Bag Damage*

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

**Source of Air Bag Damage**

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

**Was The Air Bag Tethered?**

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

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

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

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

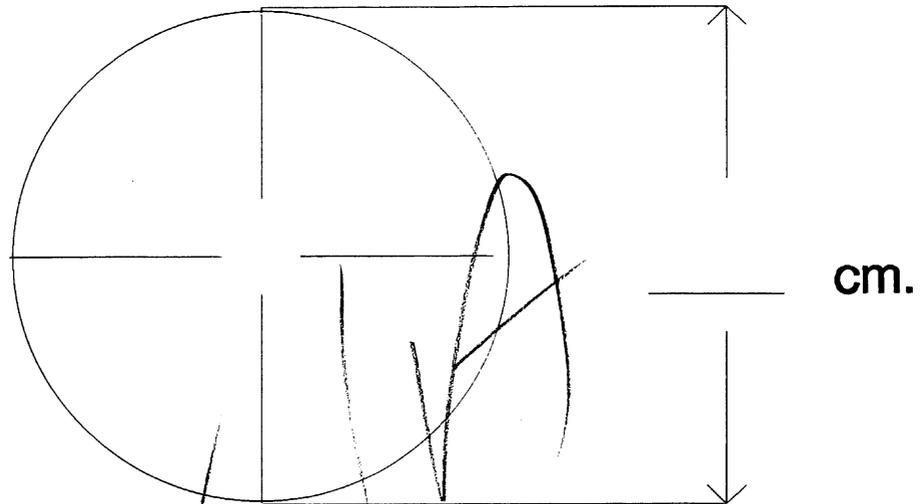
- (0) Not equipped/not available
- (1) No
- (2) Yes (specify): \_\_\_\_\_
- (3) Deployed, unknown if other occupant contact to air bag
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

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

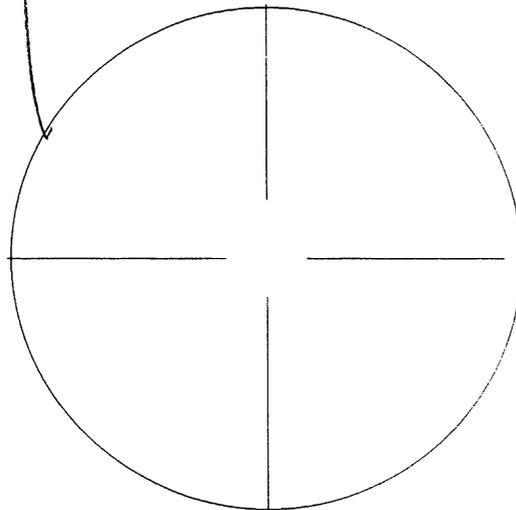
- (0) Not equipped/not available
- (1) No
- (2) Eyeglasses/sunglasses
- (3) Contact lenses
- (4) Deployed, unknown if eyewear worn
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

**DRIVER AIR BAG DAMAGE AND CONTACT SKETCHES**

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



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



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

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

a. Upper Flap

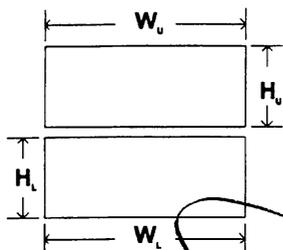
b. Lower Flap

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

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

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

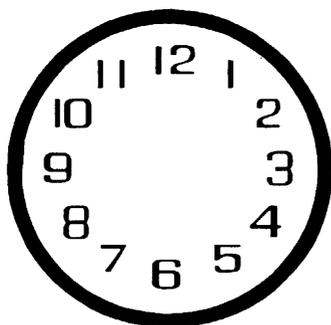
height ( $H_l$ ) \_\_\_\_\_



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

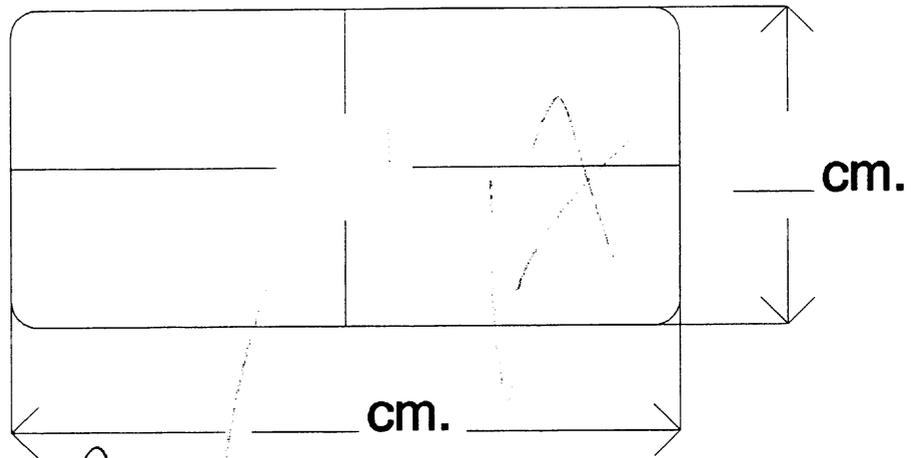
**5. SKETCH OF OTHER TYPE OF AIR BAG VENT  
PORTS**

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

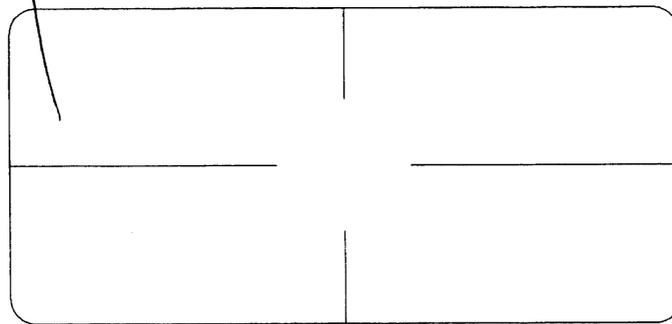


**PASSENGER AIR BAG DAMAGE AND CONTACT SKETCHES**

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



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



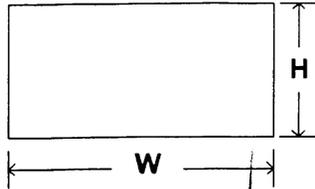
**PASSENGER AIR BAG SKETCHES (Cont'd)**

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

a. Flap

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

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



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

a. Upper Flap

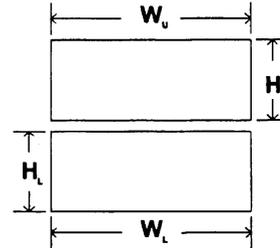
b. Lower Flap

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

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

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

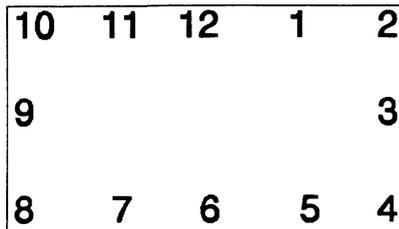
height ( $H_l$ ) \_\_\_\_\_



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

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

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

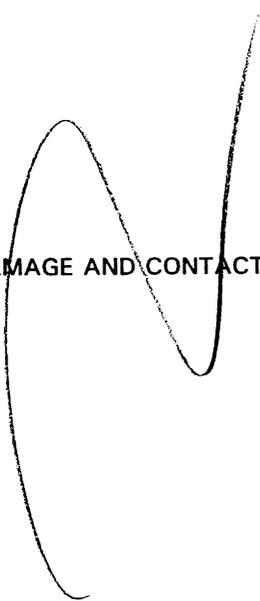


**"OTHER" AIR BAG DAMAGE AND CONTACT SKETCHES**

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



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

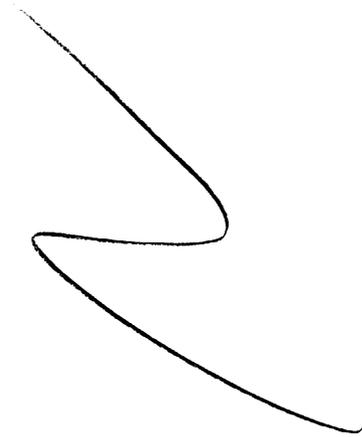


**"OTHER" AIR BAG SKETCHES (Cont'd)**

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



4. SKETCH AIR BAG VENT PORTS



### HEAD RESTRAINTS/SEAT EVALUATION

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

*occupant contact*

		Left	Center	Right
<b>FIRST</b>	Head Restraint Type/Damage	4	0	4
	Seat Type	01	00	01
	Seat Performance	9	0	9
	Seat Orientation	1	0	1
	Seat Track Position	6	0	6
	Seat Back Incline Pre/Post Impact	99	0	99
<b>SECOND</b>	Head Restraint Type/Damage	2	0	2
	Seat Type	03	03	03
	Seat Performance	9	9	9 ←
	Seat Orientation	1	1	1
	Seat Track Position	1	1	1
	Seat Back Incline Pre/Post Impact	01	01	01
<b>THIRD</b>	Head Restraint Type/Damage			
	Seat Type			
	Seat Performance			
	Seat Orientation			<i>unknown seat</i>
	Seat Track Position			<i>performance, seat</i>
	Seat Back Incline Pre/Post Impact			<i>Found in vehicle</i>
<b>OTHER</b>	Head Restraint Type/Damage			<i>by damaged vehicle</i>
	Seat Type			
	Seat Performance			
	Seat Orientation			
	Seat Track Position			
	Seat Back Incline Pre/Post Impact			

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

## HEAD RESTRAINTS/SEAT EVALUATION

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

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

**Seat Type (this Occupant Position)**

- (00) Occupant not seated or no seat
- (01) Bucket
- (02) Bucket with folding back
- (03) Bench
- (04) Bench with separate back cushions
- (05) Bench with folding back(s)
- (06) Split bench with separate back cushions
- (07) Split bench with folding back(s)
- (08) Pedestal (i.e., column supported)
- (09) Other seat type (specify): \_\_\_\_\_
- (10) Box mounted seat (i.e., van type)
- (99) Unknown

**Seat Performance (this Occupant Position)**

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

**Seat Orientation (this Occupant Position)**

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

**Seat Track Adjusted Position Prior To Impact**

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

**Seat Back Incline Prior and Post Impact**

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

*Upright prior to impact*

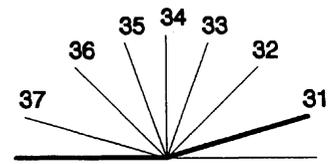
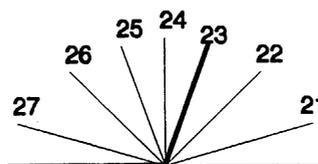
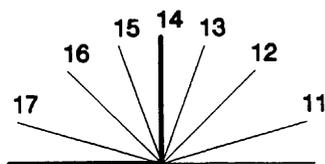
- (11) Moved to completely rearward position
- (12) Moved to rearward midrange position
- (13) Moved to slightly rearward position
- (14) Retained pre-impact position
- (15) Moved to slightly forward position
- (16) Moved to forward midrange position
- (17) Moved to completely forward position

*Slightly reclined prior to impact*

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

*Completely reclined prior to impact*

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



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

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

## CHILD SAFETY SEAT FIELD ASSESSMENT

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

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

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

- 4. Child Safety Seat Shield Usage**
- 5. Child Safety Seat Tether Usage**  
 Note: Options Below Are Used for Variables 3-5.
- (00) No child safety seat
  - Not Designed with Harness/Shield/Tether
  - (01) After market harness/shield/tether added, not used
  - (02) After market harness/shield/tether used
  - (03) Child safety seat used, but no after market harness/shield/tether added
  - (09) Unknown if harness/shield/tether added or used
  - Designed With Harness/Shield/Tether
  - (11) Harness/shield/tether not used
  - (12) Harness/shield/tether used
  - (19) Unknown if harness/shield/tether used
  - Unknown If Designed With Harness/Shield/Tether
  - (21) Harness/shield/tether not used
  - (22) Harness/shield/tether used
  - (29) Unknown if harness/shield/tether used
  - (99) Unknown if child safety seat used
- 6. Child Safety Seat Make/Model**  
 (Specify make/model and occupant number)
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

**EJECTION/ENTRAPMENT DATA**

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

**EJECTION** No [ ] Yes [  ]

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

PAR states that U1, O1, + U1, O3 were completely ejected from vehicle. Due to the catastrophic condition of the vehicle, Researcher was unable to determine where the occupants were ejected from.

Occupant Number	01	03	02			
Ejection	1	1	1			02
(Note on Vehicle Interior Sketch) Ejection Area	9	9				21
Ejection Medium	9	9				11
Medium Status	9	9				

**Ejection**

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

**Ejection Area**

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

(7) Roof

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

(9) Unknown

**Ejection Medium**

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

(5) Integral structure

(8) Other medium (specify):

(9) Unknown

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

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

**ENTRAPMENT** No [  ] Yes [ ]

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

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

(Note in vehicle interior diagram)



# OCCUPANT ASSESSMENT FORM

1. Primary Sampling Unit Number 72  
 2. Case Number - Stratum 048 B  
 3. Vehicle Number 01  
 4. Occupant Number 01

## OCCUPANT'S CHARACTERISTICS

5. Occupant's Age 26  
 Code actual age at time of accident.  
 (00) Less than one year old (specify by month):  
 \_\_\_\_\_  
 (97) 97 years and older  
 (99) Unknown

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

7. Occupant's Height 180  
 Code actual height to the nearest centimeter.  
 (999) Unknown  
71 inches X 2.54 = 180.34 centimeters 084  
999

8. Occupant's Weight 186  
 Code actual weight to the nearest kilogram.  
 (999) Unknown  
186 pounds X .4536 = 84.37 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) No ejection
- (1) Complete ejection
- (2) Partial ejection
- (3) Ejection, unknown degree
- (9) Unknown

1  
Per  
PAR

13. Ejection Area

- (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

9

~

14. Ejection Medium

- (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

9

15. Medium Status (Immediately Prior To Impact)

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

9

16. Entrapment

- (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

0

17. Occupant Mobility

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

5

**BELT SYSTEM FUNCTION**

18. Manual (Active) Belt System Availability 4  
 (0) None available  
 (1) Belt removed/destroyed  
 (2) Shoulder belt  
 (3) Lap belt  
 (4) Lap and shoulder belt  
 (5) Belt available—type unknown  
*Integral Belt Partially Destroyed*  
 (6) Shoulder belt (lap belt destroyed/removed)  
 (7) Lap belt (shoulder belt destroyed/removed)  
 (8) Other belt (specify):  
 (9) Unknown
19. Manual (Active) Belt System Use 00  
 (00) None used, not available, or belt removed/destroyed  
 (01) Inoperative (specify):  
 (02) Shoulder belt  
 (03) Lap belt  
 (04) Lap and shoulder belt  
 (05) Belt used—type unknown  
 (08) Other belt used (specify):  
 (12) Shoulder belt used with child safety seat  
 (13) Lap belt used with child safety seat  
 (14) Lap and shoulder belt used with child safety seat  
 (15) Belt used with child safety seat—type unknown  
 (18) Other belt used with child safety seat (specify):  
 (99) Unknown if belt used
20. Proper Use of Manual (Active) Belts 0  
 (0) None used or not available  
 (1) Belt used properly  
 (2) Belt used properly with child safety seat  
*Belt Used Improperly*  
 (3) Shoulder belt worn under arm  
 (4) Shoulder belt worn behind back or seat  
 (5) Belt worn around more than one person  
 (6) Lap belt worn on abdomen  
 (7) Lap belt or lap and shoulder belt used improperly with child safety seat (specify):  
 (8) Other improper use of manual belt system (specify):  
 (9) Unknown
21. Manual (Active) Belt Failure Modes During Accident 0  
 (0) No manual belt used or not available  
 (1) No manual belt failure(s)  
 (2) Torn webbing (stretched webbing not included)  
 (3) Broken buckle or latchplate  
 (4) Upper anchorage separated  
 (5) Other anchorage separated (specify):  
 (6) Broken retractor  
 (7) Combination of above (specify):  
 (8) Other manual belt failure (specify):  
 (9) Unknown

22. Shoulder Belt Upper Anchorage Adjustment 1  
 (0) No shoulder belt  
 (1) No upper anchorage adjustment for shoulder belt  
*Adjustable shoulder Belt Upper Anchorage*  
 (2) In full up position  
 (3) In mid position  
 (4) In full down position  
 (5) Position unknown  
 (9) Unknown if position has adjustable upper anchorage adjustment
23. Automatic (Passive) Belt System Availability/Function 0  
 (0) Not equipped/not available  
 (1) 2 point automatic belts  
 (2) 3 point automatic belts  
 (3) Automatic belts - type unknown  
*Non-functional*  
 (4) Automatic belts destroyed or rendered inoperative  
 (9) Unknown
24. Automatic (Passive) Belt System Use 0  
 (0) Not equipped/not available/destroyed or rendered inoperative  
 (1) Automatic belt in use  
 (2) Automatic belt not in use (manually disconnected, motorized track inoperative) (specify):  
 (3) Automatic belt use unknown  
 (9) Unknown
25. Automatic (Passive) Belt System Type 0  
 (0) Not equipped/not available  
 (1) Non-motorized system  
 (2) Motorized system  
 (9) Unknown
26. Proper Use of Automatic (Passive) Belt System 0  
 (0) Not equipped/not available/not used  
 (1) Automatic belt used properly  
 (2) Automatic belt used properly with child safety seat  
*Automatic Belt Used Improperly*  
 (3) Automatic shoulder belt worn under arm  
 (4) Automatic shoulder belt worn behind back  
 (5) Automatic belt worn around more than one person  
 (6) Lap portion of automatic belt worn on abdomen  
 (7) Automatic lap and shoulder belt or automatic shoulder belt used improperly with child safety seat (specify):  
 (8) Other improper use of automatic belt system (specify):  
 (9) Unknown
27. Automatic (Passive) Belt Failure Modes During Accident 0  
 (0) Not equipped/not available/not in use  
 (1) No automatic belt failure(s)  
 (2) Torn webbing (stretched webbing not included)  
 (3) Broken buckle or latchplate  
 (4) Upper anchorage separated  
 (5) Other anchorage separated (specify):  
 (6) Broken retractor  
 (7) Combination of above (specify):  
 (8) Other automatic belt failure (specify):  
 (9) Unknown

POLICE REPORTED RESTRAINT USE	AIR BAG SYSTEM FUNCTION
<p>28. Police Reported Belt Use <span style="float: right;">○</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>(9) <u>Police indicated "unknown"</u></p>	<p>30. Frontal Air Bag System Availability/Function (This Occupant Position) <span style="float: right;">○</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>(3) <u>Air bag not reinstalled</u></p> <p>(9) Unknown</p>
<p>29. Police Reported Air Bag Availability/Function <span style="float: right;"> </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;">○</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 type="checkbox"/> Not equipped/not available/destroyed or rendered inoperative</p> <p><input checked="" type="checkbox"/> Vehicle inspection</p> <p><input type="checkbox"/> Official injury data</p> <p><input checked="" type="checkbox"/> Driver/occupant interview</p> <p><input checked="" type="checkbox"/> Other (specify): <u>PAR</u></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;">○</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>(3) <u>Air bag not reinstalled</u></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;">○</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;">○</span></p> <p>(0) Not equipped/not available</p> <p>(1) No</p> <p>(2) Yes (specify):</p> <p>(9) <u>Unknown</u></p>

**FIRST SEAT FRONTAL AIR BAG SYSTEM EVALUATION**

35. Had Vehicle Been in Previous Accident(s)?    
 (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) 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) Not equipped/not available   
 (1) No prior maintenance   
 (2) Yes, prior maintenance (specify): \_\_\_\_\_   
 (9) Unknown

38. Air Bag Deployment Accident Event Sequence Number    
 (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) 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) 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) 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) 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) Not equipped/not available   
 (01) Not damaged   
  
*Yes - Air Bag Damage*   
 (02) Ruptured   
 (03) Cut   
 (04) Torn   
 (05) Holed   
 (06) Burned   
 (07) Abraded   
 (88) Other damage (specify): \_\_\_\_\_   
 (95) Damaged, details unknown   
 (96) Deployed, unknown if damaged   
 (97) Not deployed   
 (98) Unknown if deployed   
 (99) Unknown

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

**HEAD RESTRAINT AND SEAT EVALUATION**

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

49. Head Restraint Type/Damage by Occupant at This Occupant Position 4  
 (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

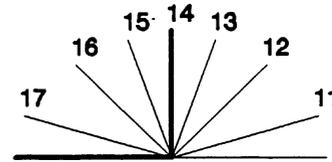
**HEAD RESTRAINT AND SEAT EVALUATION *continued***

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

99

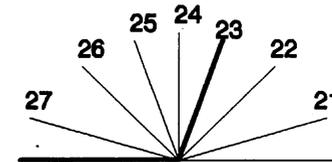
*Upright prior to impact*

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



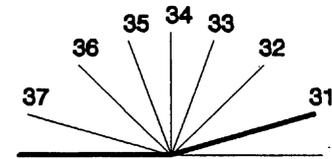
*Slightly reclined prior to impact*

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



*Completely reclined prior to impact*

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



(99) Unknown

54. Seat Performance (this Occupant Position)

9

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

**CHILD SAFETY SEAT**

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

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

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

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

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

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

(99) Unknown if child safety seat used

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

Note: Options below applicable to Variables OA58-OA60.  
 (00) No child safety seat

*Not Designed With Harness/Shield/Tether*  
 (01) After market harness/shield/tether added, not used  
 (02) After market harness/shield/tether used  
 (03) Child safety seat used, but no after market harness/shield/tether added  
 (09) Unknown if harness/shield/tether added or used

*Designed With Harness/Shield/Tether*  
 (11) Harness/shield/tether not used  
 (12) Harness/shield/tether used  
 (19) Unknown if harness/shield/tether used

*Unknown If Designed With Harness/Shield/Tether*  
 (21) Harness/shield/tether not used  
 (22) Harness/shield/tether used  
 (29) Unknown if harness/shield/tether used

(99) Unknown if child safety seat used

**INJURY CONSEQUENCES**

61. Injury Severity (Police Rating) 4

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

62. Treatment - Mortality 1

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

*Nonfatal*

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

63. Type Of Medical Facility (for Initial Treatment) 0

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

64. Hospital Stay 00

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

65. Working Days Lost 62

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

**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 01  
 \_\_\_\_\_ 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 96

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 25  
 \_\_\_\_\_ 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 01  
 (at Medical Facility)  
 (00) Not injured  
 (01) Injured - not treated at medical facility  
 (02) No GCS Score at medical facility  
 (03-15) Code the actual value of the initial GCS Score recorded at medical facility.  
 (97) Injured, details unknown  
 (99) Unknown if injured

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

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

**BELT USE DETERMINATION**

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



# OCCUPANT INJURY FORM

1. Primary Sampling Unit Number	<u>72</u>	3. Vehicle Number	<u>01</u>
2. Case Number - Stratum	<u>048B</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>1</u>	6. <u>1</u>	7. <u>4</u>	8. <u>02</u>	9. <u>12</u>	10. <u>6</u>	11. <u>8</u>	12. <u>551</u>	13. <u>3</u>	14. <u>1</u>	15. <u>00</u>
2nd	16. <u>1</u>	17. <u>1</u>	18. <u>4</u>	19. <u>02</u>	20. <u>12</u>	21. <u>6</u>	22. <u>8</u>	23. <u>551</u>	24. <u>3</u>	25. <u>1</u>	26. <u>00</u>
3rd	27. <u>1</u>	28. <u>1</u>	29. <u>4</u>	30. <u>06</u>	31. <u>88</u>	32. <u>4</u>	33. <u>1</u>	34. <u>551</u>	35. <u>3</u>	36. <u>1</u>	37. <u>00</u>
4th	38. <u>1</u>	39. <u>1</u>	40. <u>4</u>	41. <u>06</u>	42. <u>88</u>	43. <u>4</u>	44. <u>2</u>	45. <u>551</u>	46. <u>3</u>	47. <u>1</u>	48. <u>00</u>
5th	49. <u>1</u>	50. <u>4</u>	51. <u>4</u>	52. <u>14</u>	53. <u>06</u>	54. <u>3</u>	55. <u>1</u>	56. <u>551</u>	57. <u>3</u>	58. <u>1</u>	59. <u>00</u>
6th	60. <u>1</u>	61. <u>4</u>	62. <u>5</u>	63. <u>02</u>	64. <u>20</u>	65. <u>2</u>	66. <u>1</u>	67. <u>551</u>	68. <u>3</u>	69. <u>1</u>	70. <u>00</u>
7th	71. <u>1</u>	72. <u>5</u>	73. <u>4</u>	74. <u>18</u>	75. <u>24</u>	76. <u>3</u>	77. <u>1</u>	78. <u>551</u>	79. <u>3</u>	80. <u>1</u>	81. <u>00</u>
8th	82. <u>1</u>	83. <u>6</u>	84. <u>5</u>	85. <u>02</u>	86. <u>06</u>	87. <u>3</u>	88. <u>6</u>	89. <u>551</u>	90. <u>3</u>	91. <u>1</u>	92. <u>00</u>
9th	93. <u>1</u>	94. <u>7</u>	95. <u>5</u>	96. <u>28</u>	97. <u>04</u>	98. <u>3</u>	99. <u>1</u>	100. <u>551</u>	101. <u>3</u>	102. <u>1</u>	103. <u>00</u>
10th	104. <u>1</u>	105. <u>7</u>	106. <u>5</u>	107. <u>32</u>	108. <u>04</u>	109. <u>3</u>	110. <u>1</u>	111. <u>551</u>	112. <u>3</u>	113. <u>1</u>	114. <u>00</u>

## OCCUPANT INJURY DATA

	Source of Injury Data	A.I.S. - 90					Aspect	Injury Source	Injury Source Confidence Level	Direct/Indirect Injury	Occupant Area Intrusion Number
		Body Region	Type of Anatomic Structure	Specific Anatomic Structure	Level of Injury	A.I.S. Severity					
11th	<u>1</u>	<u>7</u>	<u>5</u>	<u>30</u>	<u>00</u>	<u>2</u>	<u>1</u>	<u>551</u>	<u>3</u>	<u>1</u>	<u>00</u>
12th	<u>1</u>	<u>1</u>	<u>5</u>	<u>02</u>	<u>06</u>	<u>4</u>	<u>8</u>	<u>551</u>	<u>3</u>	<u>1</u>	<u>00</u>
13th	<u>1</u>	<u>1</u>	<u>5</u>	<u>04</u>	<u>04</u>	<u>3</u>	<u>2</u>	<u>551</u>	<u>3</u>	<u>1</u>	<u>00</u>
14th	<u>1</u>	<u>1</u>	<u>5</u>	<u>04</u>	<u>02</u>	<u>2</u>	<u>6</u>	<u>551</u>	<u>3</u>	<u>1</u>	<u>00</u>
15th	<u>1</u>	<u>2</u>	<u>5</u>	<u>06</u>	<u>10</u>	<u>2</u>	<u>1</u>	<u>551</u>	<u>3</u>	<u>1</u>	<u>00</u>
16th	<u>1</u>	<u>2</u>	<u>5</u>	<u>06</u>	<u>10</u>	<u>2</u>	<u>2</u>	<u>551</u>	<u>3</u>	<u>1</u>	<u>00</u>
17th	<u>1</u>	<u>8</u>	<u>9</u>	<u>02</u>	<u>02</u>	<u>1</u>	<u>1</u>	<u>602</u>	<u>1</u>	<u>3</u>	<u>00</u>
18th	<u>1</u>	<u>2</u>	<u>9</u>	<u>02</u>	<u>02</u>	<u>1</u>	<u>0</u>	<u>697</u>	<u>9</u>	<u>7</u>	<u>99</u>
19th	<u>1</u>	<u>4</u>	<u>9</u>	<u>02</u>	<u>02</u>	<u>1</u>	<u>1</u>	<u>551</u>	<u>2</u>	<u>1</u>	<u>00</u>
20th	<u>1</u>	<u>5</u>	<u>9</u>	<u>02</u>	<u>02</u>	<u>1</u>	<u>1</u>	<u>551</u>	<u>2</u>	<u>1</u>	<u>00</u>
21st	<u>1</u>	<u>8</u>	<u>9</u>	<u>02</u>	<u>02</u>	<u>1</u>	<u>3</u>	<u>551</u>	<u>3</u>	<u>1</u>	<u>00</u>
22nd	<u>1</u>	<u>7</u>	<u>9</u>	<u>02</u>	<u>02</u>	<u>1</u>	<u>3</u>	<u>551</u>	<u>3</u>	<u>1</u>	<u>00</u>
23rd	<u>1</u>	<u>2</u>	<u>9</u>	<u>74</u>	<u>02</u>	<u>1</u>	<u>1</u>	<u>551</u>	<u>3</u>	<u>1</u>	<u>00</u>
24th	<u>1</u>	<u>2</u>	<u>9</u>	<u>74</u>	<u>02</u>	<u>1</u>	<u>1</u>	<u>551</u>	<u>3</u>	<u>1</u>	<u>00</u>
25th	<u>1</u>	<u>2</u>	<u>9</u>	<u>06</u>	<u>02</u>	<u>1</u>	<u>2</u>	<u>551</u>	<u>3</u>	<u>1</u>	<u>00</u>

**OCCUPANT INJURY CLASSIFICATION**

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

**SOURCE OF INJURY DATA**

**INJURY SOURCE**

**DIRECT/INDIRECT INJURY**

OFFICIAL RECORDS

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

UNOFFICIAL RECORDS

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

**CONFIDENCE LEVEL**

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

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

## INJURY SOURCES

### FRONT

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

### LEFT SIDE

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

### RIGHT SIDE

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

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

### INTERIOR

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

### AIR BAG

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

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

### ROOF

- (201) Front header
- (202) Rear header
- (203) Roof left side rail
- (204) Roof right side rail
- (205) Roof or convertible top
- (251) Floor (including toe pan)
- (252) Floor or console mounted transmission lever, including console
- (253) Parking brake handle
- (254) Foot controls including parking brake

### REAR

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

### ADAPTIVE (ASSISTIVE) DRIVING EQUIPMENT

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

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

### EXTERIOR of OCCUPANT'S VEHICLE

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

### EXTERIOR OF OTHER MOTOR VEHICLE

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

### OTHER VEHICLE OR OBJECT IN THE ENVIRONMENT

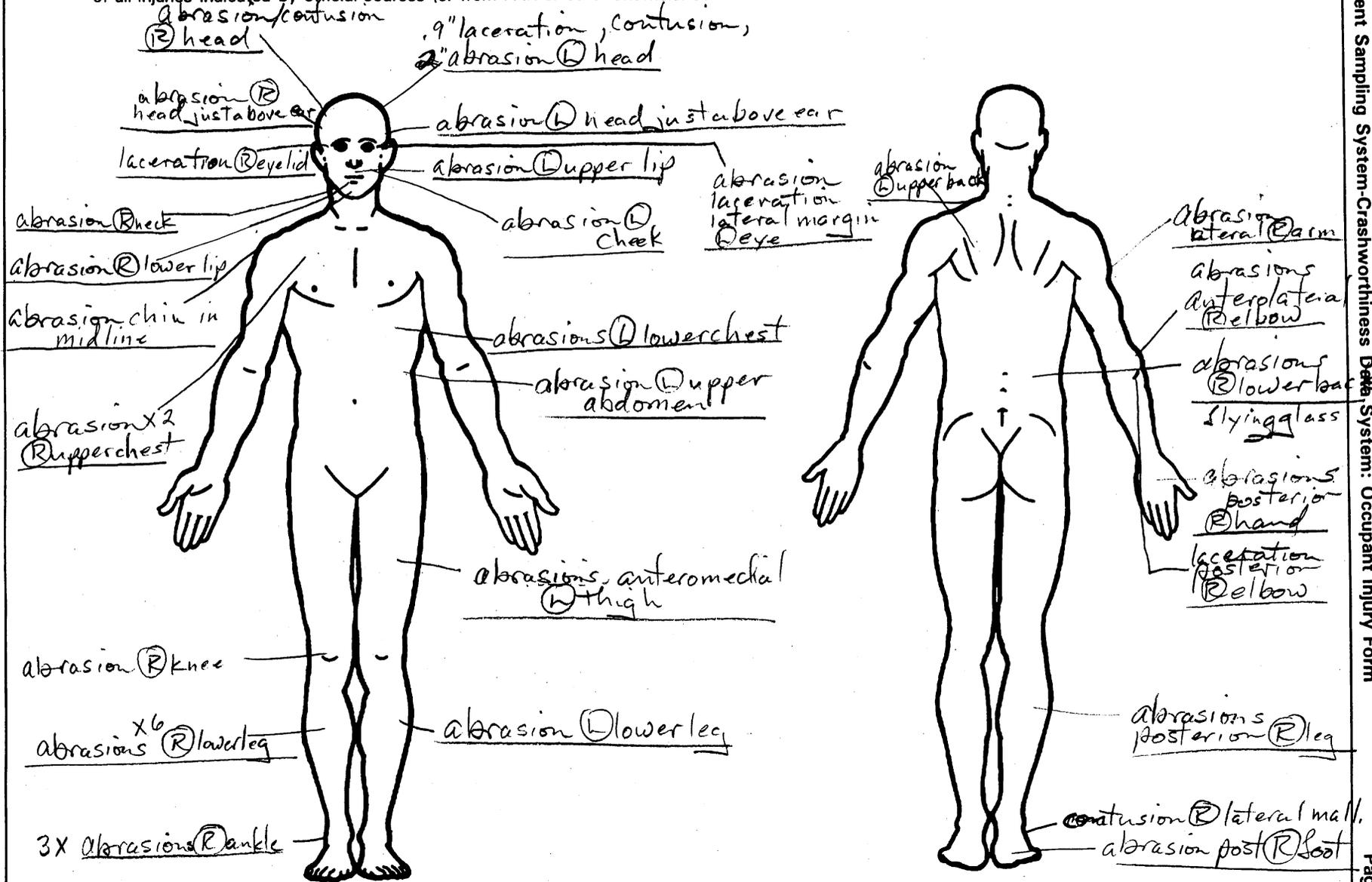
- (551) Ground
- (598) Other vehicle or object (specify): \_\_\_\_\_
- (599) Unknown vehicle or object

### NONCONTACT INJURY

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

# OFFICIAL INJURY DATA – SOFT TISSUE INJURIES

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



# OFFICIAL INJURY DATA — SKELETAL INJURIES

Restrained?

- No  
 Yes

Blood Alcohol Level (mg/dl)

BAL = 138

Glasgow Coma Scale Score

GCSS 1

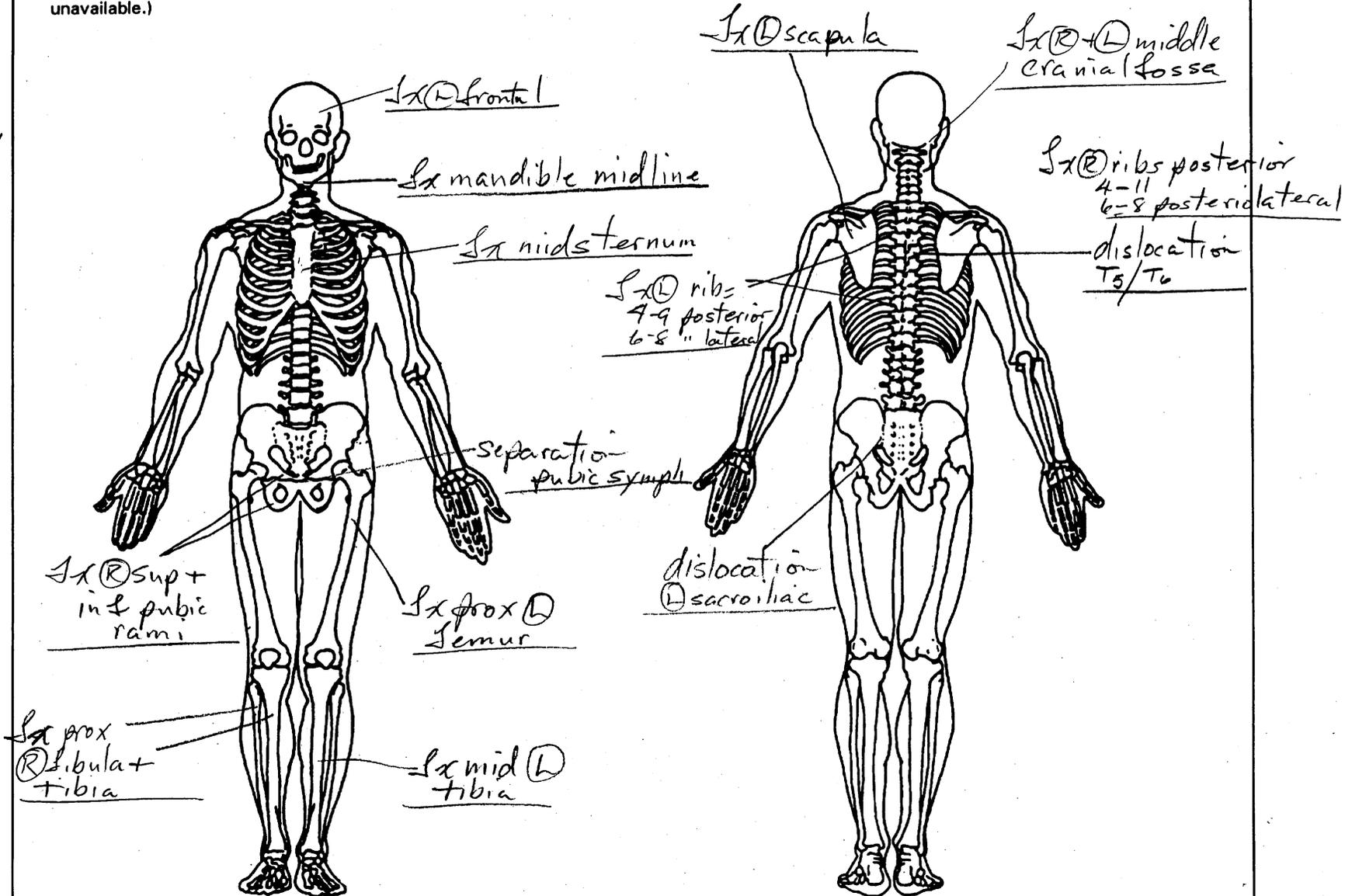
Units of Blood Given

Units = 0

Arterial Blood Gases

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

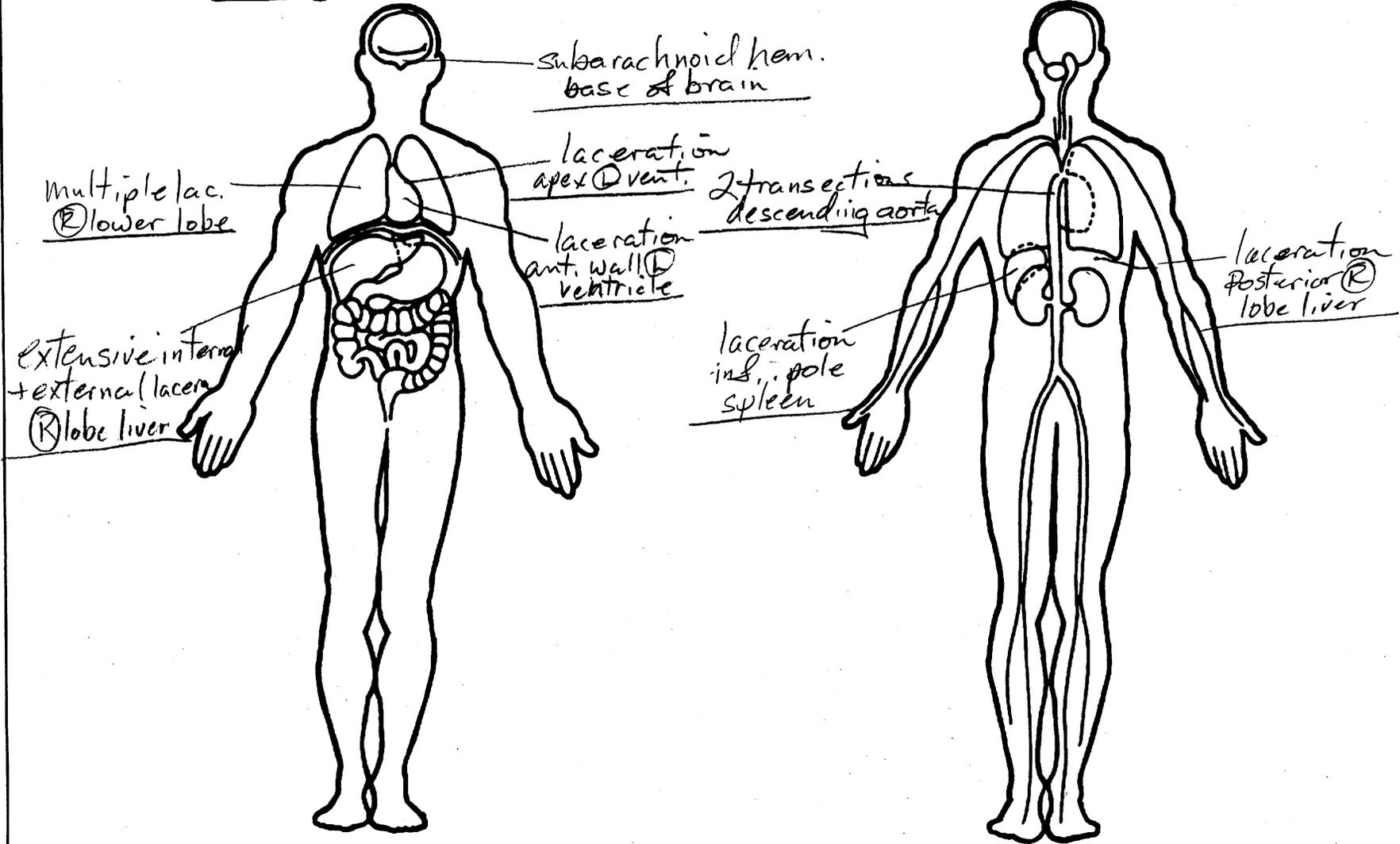
Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



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.)

Intraventricular hem pneumocephalus  
 (B)





# OCCUPANT ASSESSMENT FORM

1. Primary Sampling Unit Number 72  
 2. Case Number - Stratum 048B  
 3. Vehicle Number 01  
 4. Occupant Number 02

## OCCUPANT'S CHARACTERISTICS

5. Occupant's Age 30  
 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) 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 \_\_\_\_\_

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

- 13. Ejection Area
- (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) 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) No ejection
- (1) Open
- (2) Closed
- (3) Integral structure
- (9) Unknown

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

Left scene of  
 per PAR → Accident

## BELT SYSTEM FUNCTION

18. Manual (Active) Belt System Availability 4

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

*Integral Belt Partially Destroyed*

- (6) Shoulder belt (lap belt destroyed/removed)
- (7) Lap belt (shoulder belt destroyed/removed)
- (8) Other belt (specify): \_\_\_\_\_

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

19. Manual (Active) Belt System Use 00

- (00) None used, not available, or belt removed/destroyed

(01) Inoperative (specify): \_\_\_\_\_

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

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

20. Proper Use of Manual (Active) Belts 0

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

*Belt Used Improperly*

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

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

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

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

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

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

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

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

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

22. Shoulder Belt Upper Anchorage Adjustment 1

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

*Adjustable shoulder Belt Upper Anchorage*

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

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

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

*Non-functional*

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

24. Automatic (Passive) Belt System Use 0

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

25. Automatic (Passive) Belt System Type 0

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

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

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

*Automatic Belt Used Improperly*

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

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

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

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

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

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

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

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

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

POLICE REPORTED RESTRAINT USE	AIR BAG SYSTEM FUNCTION
<p>28. Police Reported Belt Use <span style="float: right;">0</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):  (9) <u>Police indicated "unknown"</u></p> <p>29. Police Reported Air Bag Availability/Function <span style="float: right;">1</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>30. Frontal Air Bag System Availability/Function (This Occupant Position) <span style="float: right;">0</span></p> <p>(0) Not equipped/not available  (1) Air bag</p> <p><i>Non-functional</i>  (2) Air bag disconnected (specify):  (3) Air bag not reinstalled  (9) Unknown</p> <p>31. Frontal Air Bag System Deployment (This Occupant Position) <span style="float: right;">0</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 type="checkbox"/> Not equipped/not available/destroyed or rendered inoperative  <input checked="" type="checkbox"/> Vehicle inspection  <input type="checkbox"/> Official injury data  <input type="checkbox"/> Driver/occupant interview  <input checked="" type="checkbox"/> Other (specify): <u>PAR</u>  <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;">0</span></p> <p>(0) Not equipped/not available  (1) Air bag</p> <p><i>Non-functional</i>  (2) Air bag disconnected (specify):  (3) Air bag not reinstalled  (9) Unknown</p> <p><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;">0</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;">0</span></p> <p>(0) Not equipped/not available  (1) No  (2) Yes (specify):  (9) Unknown</p>

**FIRST SEAT FRONTAL AIR BAG SYSTEM EVALUATION**

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

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

38. Air Bag Deployment Accident Event Sequence Number

- (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) 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) 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) 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) 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) Not equipped/not available
- (01) Not damaged
- Yes - Air Bag Damage*
- (02) Ruptured
- (03) Cut
- (04) Torn
- (05) Holed
- (06) Burned
- (07) Abraded
- (88) Other damage (specify): \_\_\_\_\_
- (95) Damaged, details unknown
- (96) Deployed, unknown if damaged
- (97) Not deployed
- (98) Unknown if deployed
- (99) Unknown

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

**HEAD RESTRAINT AND SEAT EVALUATION**

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

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

46. Did The Air Bag Have Vent Ports? 0
- (0) Not equipped/not available
  - (1) No
  - (2) Yes (specify number of vent ports): \_\_\_\_\_
  - (3) Deployed, unknown if vent ports present
  - (7) Not deployed
  - (8) Unknown if deployed
  - (9) Unknown

47. Was the Air Bag in this Occupant's Position Contacted by Another Occupant? 0
- (0) Not equipped/not available
  - (1) No
  - (2) Yes (specify): \_\_\_\_\_
  - (3) Deployed, unknown if other occupant contact to air bag
  - (7) Not deployed
  - (8) Unknown if deployed
  - (9) Unknown

48. Was This Occupant Wearing Eye-wear? 0
- (0) Not equipped/not available
  - (1) No
  - (2) Eyeglasses/sunglasses
  - (3) Contact lenses
  - (4) Deployed, unknown if eyewear worn
  - (7) Not deployed
  - (8) Unknown if deployed
  - (9) Unknown

49. Head Restraint Type/Damage by Occupant at This Occupant Position 4
- (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

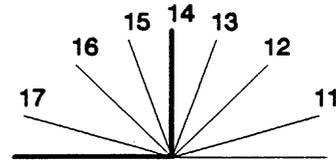
52. Seat Track Adjusted Position Prior To Impact 6
- (0) Occupant not seated or no seat
  - (1) Non-adjustable seat track
- Adjustable Seat Track*
- (2) Seat at forward most track position
  - (3) Seat between forward most and middle track positions
  - (4) Seat at middle track position
  - (5) Seat 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 99  
 (00) Occupant not seated or no seat  
 (01) Not adjustable

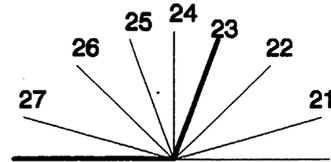
*Upright prior to impact*

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



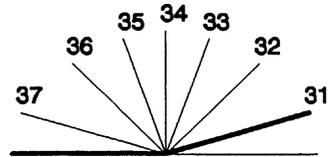
*Slightly reclined prior to impact*

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



*Completely reclined prior to impact*

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



(99) Unknown

54. Seat Performance (this Occupant Position) 9

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

## CHILD SAFETY SEAT

55. Child Safety Seat Make/Model 000

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

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

56. Type of Child Safety Seat 0

(0) No child safety seat  
 (1) Infant seat  
 (2) Toddler seat  
 (3) Convertible seat  
 (4) Booster seat - with shield  
 (5) Booster seat - without shield  
 (7) Other type child safety seat (specify):

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

57. Child Safety Seat Orientation 00

(00) No child safety seat

*Designed for Rear Facing for This Age/Weight*

(01) Rear facing  
 (02) Forward facing  
 (08) Other orientation (specify):

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

*Designed For Forward Facing for This Age/Weight*

(11) Rear facing  
 (12) Forward facing  
 (18) Other orientation (specify):

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

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

(21) Rear facing  
 (22) Forward facing  
 (28) Other orientation (specify):

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

(99) Unknown if child safety seat used

58. Child Safety Seat Harness Usage 0059. Child Safety Seat Shield Usage 0060. 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) 2

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

64. Hospital Stay 99

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

65. Working Days Lost 99

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

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

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

## 66. Time to Death

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

00

## 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

97

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 (at Medical Facility)

47

- (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?

9

- (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>97

- (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

PSU NUMBER	<u>72</u>
CASE NUMBER	<u>D48B</u>
VEHICLE NUMBER	<u>01</u>
OCCUPANT NUMBER	<u>02</u>

# OCCUPANT INJURY FORM

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

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



# OCCUPANT ASSESSMENT FORM

1. Primary Sampling Unit Number 72  
 2. Case Number - Stratum 048B  
 3. Vehicle Number 01  
 4. Occupant Number 03

## OCCUPANT'S CHARACTERISTICS

5. Occupant's Age 99  
 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 163  
999  
 Code actual height to the nearest  
 centimeter.  
 (999) Unknown  
64 inches X 2.54 = 162.56 centimeters 073

8. Occupant's Weight 999  
999  
 Code actual weight to the nearest  
 kilogram.  
 (999)Unknown  
161 pounds X .4536 = 73.02 kilograms

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

## OCCUPANT'S SEATING

10. Occupant's Seat Position 21  
*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**

<p>12. Ejection <u>1</u></p> <ul style="list-style-type: none"> <li>(0) No ejection</li> <li>(1) Complete ejection</li> <li>(2) Partial ejection</li> <li>(3) Ejection, unknown degree</li> <li>(9) Unknown</li> </ul>	<p>15. Medium Status (Immediately Prior To Impact) <u>9</u></p> <ul style="list-style-type: none"> <li>(0) No ejection</li> <li>(1) Open</li> <li>(2) Closed</li> <li>(3) Integral structure</li> <li>(9) Unknown</li> </ul>
<p>13. Ejection Area <u>9</u></p> <ul style="list-style-type: none"> <li>(0) No ejection</li> <li>(1) Windshield</li> <li>(2) Left front</li> <li>(3) Right front</li> <li>(4) Left rear</li> <li>(5) Right rear</li> <li>(6) Rear</li> <li>(7) Roof</li> <li>(8) Other area (e.g., back of pickup, etc.) (specify): _____</li> <li>(9) Unknown</li> </ul>	<p>16. Entrapment <u>0</u></p> <ul style="list-style-type: none"> <li>(0) Not entrapped/exit not inhibited</li> <li>(1) Entrapped/pinned - mechanically restrained</li> <li>(2) Could not exit vehicle due to jammed doors, fire, etc. (specify): _____</li> <li>(9) Unknown</li> </ul>
<p>14. Ejection Medium <u>9</u></p> <ul style="list-style-type: none"> <li>(0) No ejection</li> <li>(1) Door/hatch/tailgate</li> <li>(2) Nonfixed roof structure</li> <li>(3) Fixed glazing</li> <li>(4) Nonfixed glazing (specify): _____</li> <li>(5) Integral structure</li> <li>(8) Other medium (specify): _____</li> <li>(9) Unknown</li> </ul>	<p>17. Occupant Mobility <u>5</u></p> <ul style="list-style-type: none"> <li>(0) Occupant fatal before removed from vehicle</li> <li>(1) Removed from vehicle while unconscious or disoriented</li> <li>(2) Removed from vehicle due to injuries</li> <li>(3) Exited vehicle with some assistance</li> <li>(4) Exited vehicle under own power</li> <li>(5) Occupant fully ejected</li> <li>(9) Unknown</li> </ul>

## BELT SYSTEM FUNCTION

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

POLICE REPORTED RESTRAINT USE	AIR BAG SYSTEM FUNCTION
<p>28. Police Reported Belt Use <span style="float: right;">0</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): _____                      (9) <u>Police indicated "unknown"</u></p> <p>29. Police Reported Air Bag Availability/Function <span style="float: right;">1</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> <hr/> <p>Check the Primary Source Used In Determining Belt Use.</p> <p><input type="checkbox"/> Not equipped/not available/destroyed or rendered inoperative  <input checked="" type="checkbox"/> Vehicle inspection  <input type="checkbox"/> Official injury data  <input type="checkbox"/> Driver/occupant interview  <input checked="" type="checkbox"/> Other (specify): <u>PAR</u>  <input type="checkbox"/> <u>Unknown if belt used</u></p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>30. Frontal Air Bag System Availability/Function (This Occupant Position) <span style="float: right;">0</span></p> <p>(0) Not equipped/not available                      (1) Air bag</p> <p><i>Non-functional</i>                      (2) Air bag disconnected (specify): _____                      (3) Air bag not reinstalled                      (9) Unknown</p> <p>31. Frontal Air Bag System Deployment (This Occupant Position) <span style="float: right;">0</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>32. Other Than First Seat Frontal Air Bag Availability/Function (This Occupant Position) <span style="float: right;">0</span></p> <p>(0) Not equipped/not available                      (1) Air bag</p> <p><i>Non-functional</i>                      (2) Air bag disconnected (specify): _____                      (3) Air bag not reinstalled                      (9) Unknown  <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;">0</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;">0</span></p> <p>(0) Not equipped/not available                      (1) No                      (2) Yes (specify): _____                      (9) <u>Unknown</u></p>

## FIRST SEAT FRONTAL AIR BAG SYSTEM EVALUATION

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

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

\_\_\_\_\_

(9) Unknown

38. Air Bag Deployment Accident Event Sequence Number 

- (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) 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) 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) 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) 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) 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 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

**HEAD RESTRAINT AND SEAT EVALUATION**

49. Head Restraint Type/Damage by Occupant. at This Occupant Position 2  
 (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) 03  
 (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 1  
 (0) Occupant not seated or no seat  
 (1) Non-adjustable seat track  
  
*Adjustable Seat Track*  
 (2) Seat at forward most track position  
 (3) Seat between forward most and middle track positions  
 (4) Seat at middle track position  
 (5) Seat between middle and rear most track positions  
 (6) Seat at rear most track position  
 (9) Unknown

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

53. Seat Back Incline Prior and Post Impact 01

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

*Upright prior to impact*

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

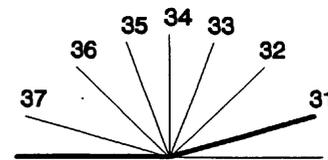
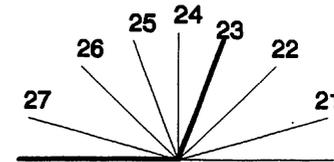
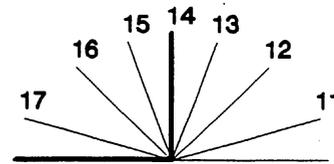
*Slightly reclined prior to impact*

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

*Completely reclined prior to impact*

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

(99) Unknown



54. Seat Performance (this Occupant Position) 9

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

## CHILD SAFETY SEAT

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

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

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

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

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

*Designed for Rear Facing for This Age/Weight*

(01) Rear facing  
 (02) Forward facing  
 (08) Other orientation (specify):

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

*Designed For Forward Facing for This Age/Weight*

(11) Rear facing  
 (12) Forward facing  
 (18) Other orientation (specify):

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

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

(21) Rear facing  
 (22) Forward facing  
 (28) Other orientation (specify):

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

(99) Unknown if child safety seat used

58. Child Safety Seat Harness Usage 00

59. Child Safety Seat Shield Usage 00

60. Child Safety Seat Tether Usage 00

Note: Options below applicable to  
 Variables OA58-OA60.

(00) No child safety seat

*Not Designed With Harness/Shield/Tether*

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

*Designed With Harness/Shield/Tether*

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

*Unknown If Designed With Harness/Shield/Tether*

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

(99) Unknown if child safety seat used

**INJURY CONSEQUENCES**

61. Injury Severity (Police Rating) 4

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

62. Treatment - Mortality 1

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

*Nonfatal*

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

63. Type Of Medical Facility (for Initial Treatment) 6

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

64. Hospital Stay 00

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

65. Working Days Lost 62

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

**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 01  
 \_\_\_\_\_ 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 08

68. 2nd Medically Reported Cause of Death \_\_\_\_\_

69. 3rd Medically Reported Cause of Death \_\_\_\_\_  
 \_\_\_\_\_ 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 32  
 \_\_\_\_\_ 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 01  
 (at Medical Facility)  
 (00) Not injured  
 (01) Injured - not treated at medical facility  
 (02) No GCS Score at medical facility  
 (03-15) Code the actual value of the initial GCS Score recorded at medical facility.  
 (97) Injured, details unknown  
 (99) Unknown if injured

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

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

**BELT USE DETERMINATION**

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

# OCCUPANT INJURY FORM

NATIONAL ACCIDENT SAMPLING SYSTEM  
CRASHWORTHINESS DATA SYSTEM

1. Primary Sampling Unit Number <u>72</u>	3. Vehicle Number <u>01</u>
2. Case Number - Stratum <u>048B</u>	4. Occupant Number <u>03</u>

## INJURY DATA

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

	Source of Injury Data	A.I.S. - 90						Injury Source	Injury 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>1</u>	6. <u>1</u>	7. <u>4</u>	8. <u>06</u>	9. <u>84</u>	10. <u>3</u>	11. <u>1</u>	12. <u>551</u>	13. <u>3</u>	14. <u>1</u>	15. <u>00</u>
2nd	16. <u>1</u>	17. <u>1</u>	18. <u>4</u>	19. <u>06</u>	20. <u>84</u>	21. <u>3</u>	22. <u>2</u>	23. <u>551</u>	24. <u>3</u>	25. <u>1</u>	26. <u>00</u>
3rd	27. <u>1</u>	28. <u>1</u>	29. <u>4</u>	30. <u>06</u>	31. <u>78</u>	32. <u>4</u>	33. <u>1</u>	34. <u>551</u>	35. <u>3</u>	36. <u>1</u>	37. <u>00</u>
4th	38. <u>1</u>	39. <u>1</u>	40. <u>4</u>	41. <u>06</u>	42. <u>78</u>	43. <u>4</u>	44. <u>1</u>	45. <u>551</u>	46. <u>3</u>	47. <u>1</u>	48. <u>00</u>
5th	49. <u>1</u>	50. <u>1</u>	51. <u>5</u>	52. <u>02</u>	53. <u>06</u>	54. <u>4</u>	55. <u>1</u>	56. <u>551</u>	57. <u>3</u>	58. <u>1</u>	59. <u>00</u>
6th	60. <u>1</u>	61. <u>1</u>	62. <u>5</u>	63. <u>04</u>	64. <u>02</u>	65. <u>2</u>	66. <u>5</u>	67. <u>551</u>	68. <u>3</u>	69. <u>1</u>	70. <u>00</u>
7th	71. <u>1</u>	72. <u>2</u>	73. <u>5</u>	74. <u>06</u>	75. <u>02</u>	76. <u>1</u>	77. <u>2</u>	78. <u>551</u>	79. <u>3</u>	80. <u>1</u>	81. <u>00</u>
8th	82. <u>1</u>	83. <u>4</u>	84. <u>2</u>	85. <u>02</u>	86. <u>18</u>	87. <u>6</u>	88. <u>4</u>	89. <u>551</u>	90. <u>3</u>	91. <u>1</u>	92. <u>00</u>
9th	93. <u>1</u>	94. <u>4</u>	95. <u>2</u>	96. <u>02</u>	97. <u>18</u>	98. <u>6</u>	99. <u>4</u>	100. <u>551</u>	101. <u>3</u>	102. <u>1</u>	103. <u>00</u>
10th	104. <u>1</u>	105. <u>4</u>	106. <u>4</u>	107. <u>14</u>	108. <u>30</u>	109. <u>3</u>	110. <u>1</u>	111. <u>551</u>	112. <u>3</u>	113. <u>1</u>	114. <u>00</u>

## OCCUPANT INJURY DATA

	Source of Injury Data	A.I.S. - 90					Aspect	Injury Source	Injury Source Confidence Level	Direct/Indirect Injury	Occupant Area Intrusion Number
		Body Region	Type of Anatomic Structure	Specific Anatomic Structure	Level of Injury	A.I.S. Severity					
11th	<u>1</u>	<u>4</u>	<u>4</u>	<u>10</u>	<u>14</u>	<u>6</u>	<u>4</u>	<u>551</u>	<u>3</u>	<u>1</u>	<u>00</u>
12th	<u>1</u>	<u>5</u>	<u>4</u>	<u>18</u>	<u>26</u>	<u>4</u>	<u>1</u>	<u>551</u>	<u>3</u>	<u>1</u>	<u>00</u>
13th	<u>1</u>	<u>5</u>	<u>4</u>	<u>42</u>	<u>10</u>	<u>2</u>	<u>2</u>	<u>551</u>	<u>3</u>	<u>1</u>	<u>00</u>
14th	<u>1</u>	<u>1</u>	<u>9</u>	<u>02</u>	<u>02</u>	<u>1</u>	<u>1</u>	<u>551</u>	<u>3</u>	<u>1</u>	<u>00</u>
15th	<u>1</u>	<u>1</u>	<u>9</u>	<u>02</u>	<u>02</u>	<u>1</u>	<u>2</u>	<u>551</u>	<u>3</u>	<u>1</u>	<u>00</u>
16th	<u>1</u>	<u>1</u>	<u>9</u>	<u>04</u>	<u>02</u>	<u>1</u>	<u>2</u>	<u>551</u>	<u>3</u>	<u>1</u>	<u>00</u>
17th	<u>1</u>	<u>1</u>	<u>9</u>	<u>04</u>	<u>02</u>	<u>1</u>	<u>1</u>	<u>551</u>	<u>3</u>	<u>1</u>	<u>00</u>
18th	<u>1</u>	<u>1</u>	<u>9</u>	<u>06</u>	<u>02</u>	<u>1</u>	<u>2</u>	<u>551</u>	<u>3</u>	<u>1</u>	<u>00</u>
19th	<u>1</u>	<u>2</u>	<u>9</u>	<u>02</u>	<u>02</u>	<u>1</u>	<u>0</u>	<u>551</u>	<u>3</u>	<u>1</u>	<u>00</u>
20th	<u>1</u>	<u>2</u>	<u>9</u>	<u>06</u>	<u>02</u>	<u>1</u>	<u>1</u>	<u>551</u>	<u>3</u>	<u>1</u>	<u>00</u>
21st	<u>1</u>	<u>2</u>	<u>9</u>	<u>76</u>	<u>02</u>	<u>1</u>	<u>1</u>	<u>602</u>	<u>2</u>	<u>3</u>	<u>00</u>
22nd	<u>1</u>	<u>2</u>	<u>9</u>	<u>76</u>	<u>02</u>	<u>1</u>	<u>2</u>	<u>602</u>	<u>2</u>	<u>3</u>	<u>00</u>
23rd	<u>1</u>	<u>4</u>	<u>9</u>	<u>02</u>	<u>02</u>	<u>1</u>	<u>3</u>	<u>551</u>	<u>3</u>	<u>1</u>	<u>00</u>
24th	<u>1</u>	<u>5</u>	<u>9</u>	<u>02</u>	<u>02</u>	<u>1</u>	<u>2</u>	<u>551</u>	<u>3</u>	<u>1</u>	<u>00</u>
25th	<u>1</u>	<u>8</u>	<u>9</u>	<u>02</u>	<u>02</u>	<u>1</u>	<u>3</u>	<u>551</u>	<u>3</u>	<u>1</u>	<u>00</u>

72-048B

V103

## National Accident Sampling System-Crashworthiness Data System: Occupant Injury Form

## OCCUPANT INJURY DATA 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					
26	1	4	5	02	52	4	3	551	3	1	00
27	1	4	5	08	04	2	4	551	3	1	00
28	1	6	5	04	04	2	7	551	3	1	00
29	1	8	5	16	05	2	1	551	3	1	00
30	1	8	5	34	20	2	1	551	3	1	00
31	1	8	5	34	20	2	2	551	3	1	00
31	1	8	5	26	04	3	1	551	3	1	00
31	1	8	5	28	00	3	6	551	3	1	00
32	1	8	5	18	14	3	2	551	3	1	00
—	—	—	—	—	—	—	—	—	—	—	—
—	—	—	—	—	—	—	—	—	—	—	—
—	—	—	—	—	—	—	—	—	—	—	—
—	—	—	—	—	—	—	—	—	—	—	—
—	—	—	—	—	—	—	—	—	—	—	—
—	—	—	—	—	—	—	—	—	—	—	—



## INJURY SOURCES

### FRONT

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

### LEFT SIDE

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

### RIGHT SIDE

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

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

### INTERIOR

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

### AIR BAG

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

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

### ROOF

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

### FLOOR

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

### REAR

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

### ADAPTIVE (ASSISTIVE) DRIVING EQUIPMENT

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

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

### EXTERIOR of OCCUPANT'S VEHICLE

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

### EXTERIOR OF OTHER MOTOR VEHICLE

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

### OTHER VEHICLE OR OBJECT IN THE ENVIRONMENT

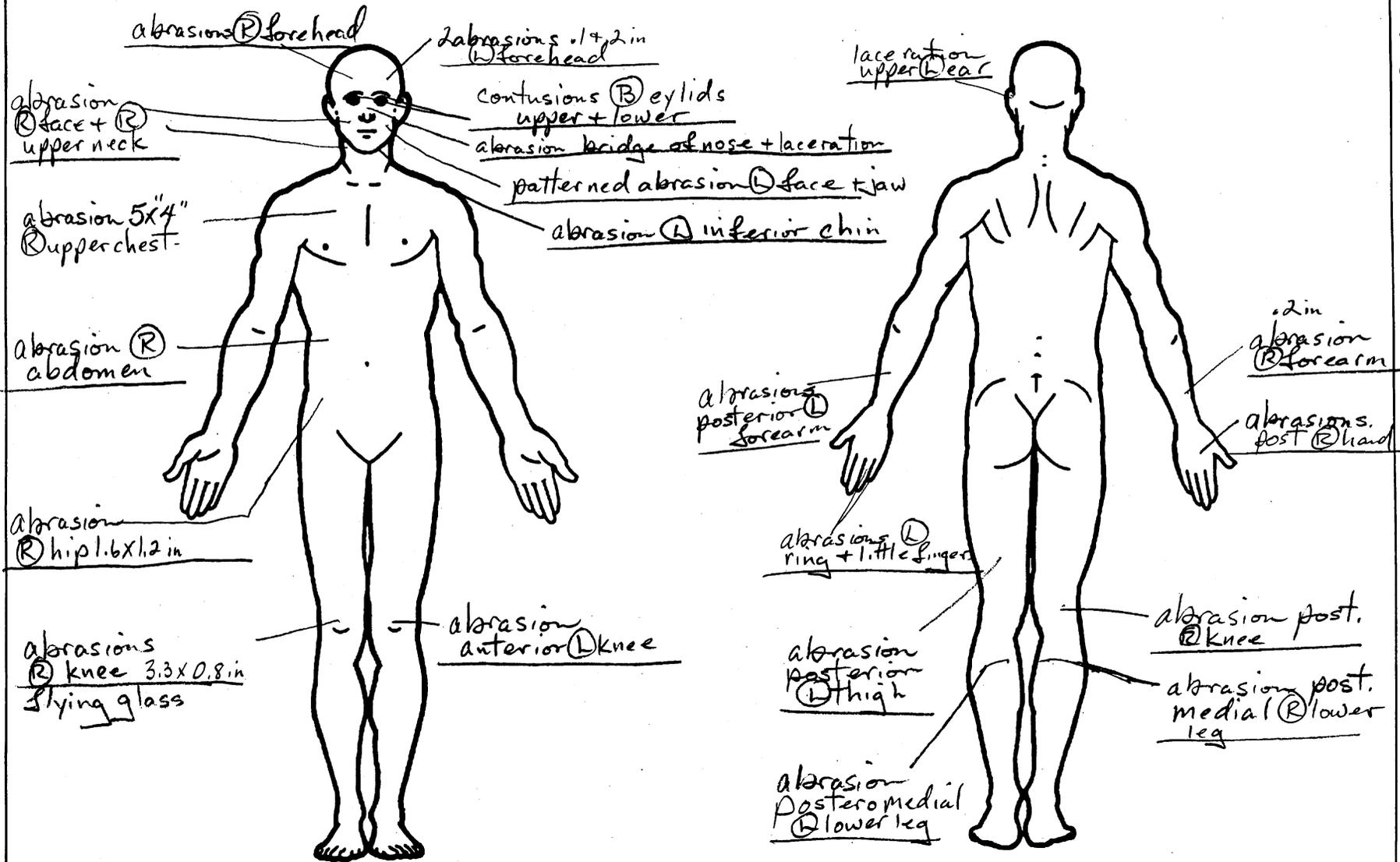
- (551) Ground
- (598) Other vehicle or object (specify): \_\_\_\_\_
- (599) Unknown vehicle or object

### NONCONTACT INJURY

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

# OFFICIAL INJURY DATA — SOFT TISSUE INJURIES

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



# OFFICIAL INJURY DATA — SKELETAL INJURIES

Restrained?

- No  
 Yes

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.)

Blood Alcohol Level (mg/dl)

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

Glasgow Coma Scale Score

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

Units of Blood Given

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

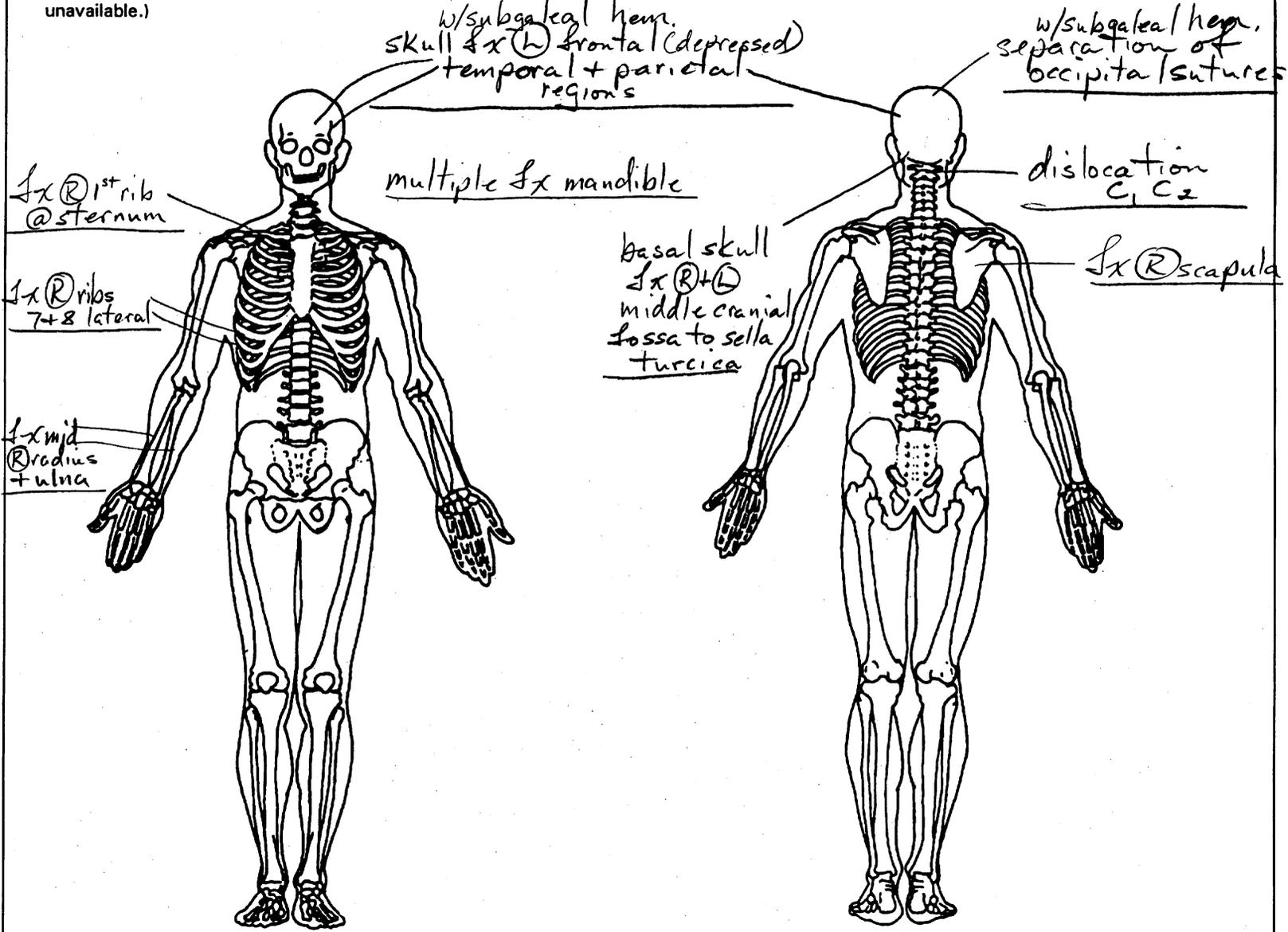
Arterial Blood Gases

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

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

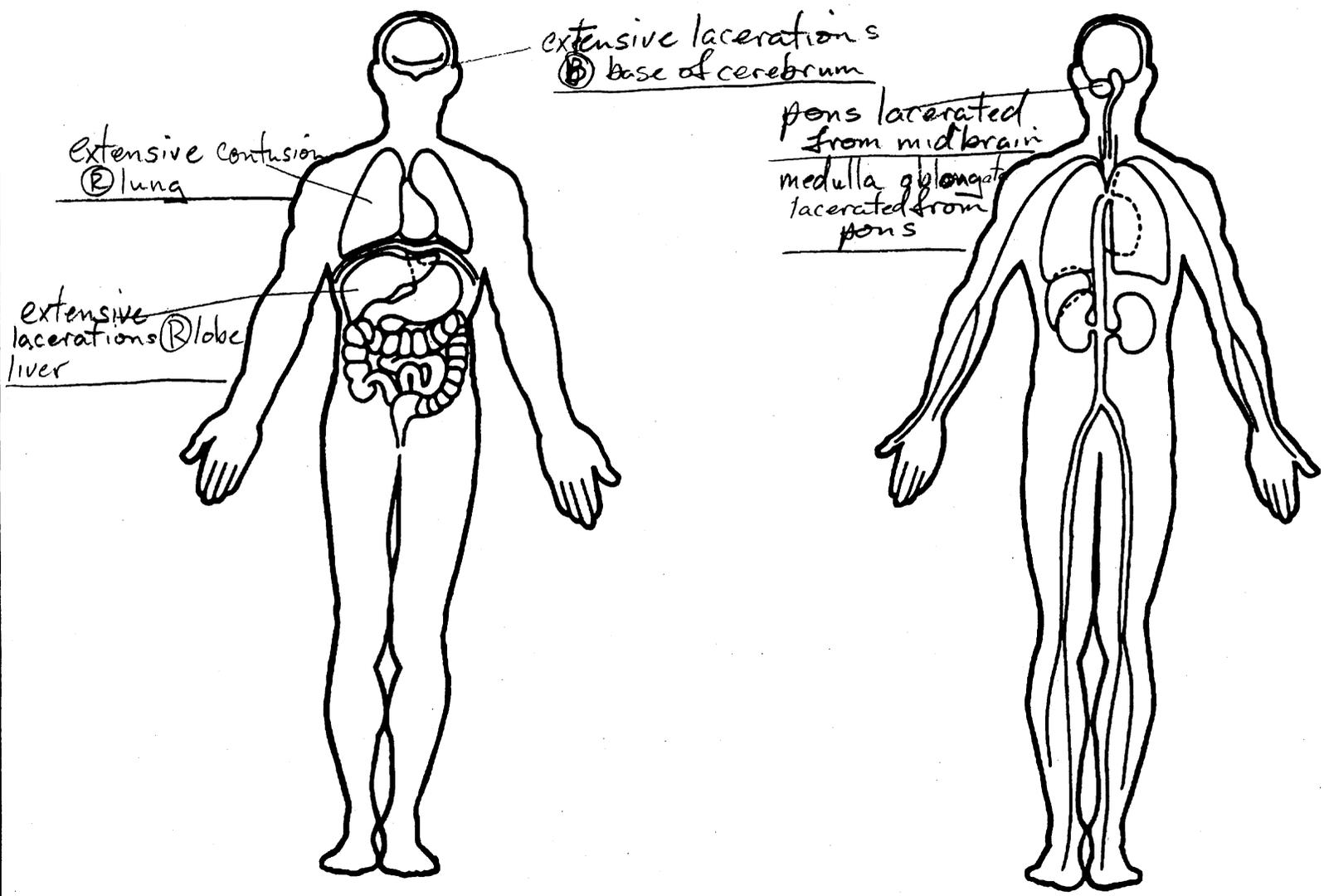
PCO<sub>2</sub> = \_\_\_\_\_

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



OFFICIAL INJURY DATA – INTERNAL INJURIES

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



**PRECRASH ENVIRONMENTAL DATA**

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

*Non-Interchange junctions*

- (2) Intersection related
- (3) Driveway, alley access related
- (4) Other junction (specify) \_\_\_\_\_

(5) \_\_\_\_\_  
Unknown type of junction

(9) Unknown

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

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

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

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

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

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

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

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

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

*Regulatory*

- (2) Stop sign
- (3) Yield sign
- (4) School zone sign
- (5) Other regulatory sign (specify): \_\_\_\_\_

- (6) Warning sign (not RR crossing)
- (7) Unknown sign
- (8) Miscellaneous/other controls including RR controls (specify): \_\_\_\_\_

(9) Unknown

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

OCCUPANT RELATED

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

AIR BAG RELATED

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

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

VEHICLE WEIGHT ITEMS

- 43. Vehicle Curb Weight 1,520  
 Code weight to nearest 10 kilograms.  
 (045) Less than 450 kilograms  
 (610) 6,100 kilograms or more  
 (999) Unknown  
3,354 lbs X .4536 = 1,521 kgs

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

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

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

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 \_\_\_\_\_

PSU NUMBER

72

CASE NUMBER

048B

VEHICLE NUMBER

02

# EXTERIOR VEHICLE FORM

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

ENTIRE FORM

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

PSU NUMBER

72

CASE NUMBER

0488

VEHICLE NUMBER

02

# INTERIOR VEHICLE FORM

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

ENTIRE FORM

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

PSU NUMBER	<u>72</u>
CASE NUMBER	<u>0488</u>
VEHICLE NUMBER	<u>02</u>
OCCUPANT NUMBER	<u>01</u>

# OCCUPANT ASSESSMENT FORM

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

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

PSU NUMBER	<u>72</u>
CASE NUMBER	<u>048B</u>
VEHICLE NUMBER	<u>02</u>
OCCUPANT NUMBER	<u>01</u>

# OCCUPANT INJURY FORM

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

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

PRECRASH ENVIRONMENTAL DATA

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

0

Non-Interchange junctions

(2) Intersection related  
(3) Driveway, alley access related  
(4) Other junction (specify)

\_\_\_\_\_

(5) Unknown type of junction  
(9) Unknown

20. Trafficway Flow

1

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

21. Number Of Travel Lanes

3

(1) One  
(2) Two  
(3) Three  
(4) Four  
(5) Five  
(6) Six  
(7) Seven or more  
(9) Unknown

22. Roadway Alignment

1

(1) Straight  
(2) Curve right  
(3) Curve left  
(9) Unknown

23. Roadway Profile

4

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

24. Roadway Surface Type

2

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

25. Roadway Surface Condition

1

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

26. Light Conditions

3

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

27. Atmospheric Conditions

0

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

28. Traffic Control Device

0

(0) No traffic control(s)  
(1) Traffic control signal (not RR crossing)

Regulatory

(2) Stop sign  
(3) Yield sign  
(4) School zone sign  
(5) Other regulatory sign (specify): \_\_\_\_\_

(6) Warning sign (not RR crossing)  
(7) Unknown sign  
(8) Miscellaneous/other controls including RR controls (specify): \_\_\_\_\_

(9) Unknown

29. Traffic Control Device Functioning

0

(0) No traffic control device  
(1) Traffic control device not functioning (specify): \_\_\_\_\_  
(2) Traffic control device functioning properly  
(9) Unknown

OCCUPANT RELATED

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

AIR BAG RELATED

- 40. Is this an AOPS Vehicle? 4  
 (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 9  
 (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 1,220  
 Code weight to nearest 10 kilograms.  
 (045) Less than 450 kilograms  
 (610) 6,100 kilograms or more  
 (999) Unknown  
2,690 lbs X .4536 = 1,220 kgs

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

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

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

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 \_\_\_\_\_

PSU NUMBER  
CASE NUMBER  
VEHICLE NUMBER

72

048B

03

# EXTERIOR VEHICLE FORM

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

ENTIRE FORM

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

PSU NUMBER

72

CASE NUMBER

0488

VEHICLE NUMBER

03

# INTERIOR VEHICLE FORM

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

ENTIRE FORM

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

PSU NUMBER	<u>72</u>
CASE NUMBER	<u>048B</u>
VEHICLE NUMBER	<u>03</u>
OCCUPANT NUMBER	<u>01</u>

# OCCUPANT ASSESSMENT FORM

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

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

PSU NUMBER	<u>72</u>
CASE NUMBER	<u>D488</u>
VEHICLE NUMBER	<u>D3</u>
OCCUPANT NUMBER	<u>D1</u>

# OCCUPANT INJURY FORM

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

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

**PRECRASH ENVIRONMENTAL DATA**

- 19. Relation To Interchange Or Junction 6
  - (0) Non-interchange area and non-junction
  - (1) Interchange area related

*Non-Interchange junctions*

- (2) Intersection related
- (3) Driveway, alley access related
- (4) Other junction (specify) \_\_\_\_\_

(5) Unknown type of junction

(9) Unknown

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

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

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

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

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

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

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

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

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

*Regulatory*

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

(9) Unknown

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

OCCUPANT RELATED

- 37. Driver Presence in Vehicle 1  
 (0) Driver not present  
 (1) Driver present  
 (9) Unknown
- 38. Number of Occupants This Vehicle 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? 1  
 (0) No (includes unknown)  
 (1) Yes - researcher determined  
 (2) VIN determined air bag system  
 (3) VIN determined automatic (passive) belts  
 (4) VIN determined air bag and automatic (passive) belts
- 41. Air Bag(s) Deployment, First Seat Frontal 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 1,240  
 Code weight to nearest 10 kilograms.  
 (045) Less than 450 kilograms  
 (610) 6,100 kilograms or more  
 (999) Unknown  
2,733 lbs X .4536 = 1,240 kgs

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

- 44. Vehicle Cargo Weight 0.000  
 Code weight to nearest 10 kilograms.  
 (000) Less than 5 kilograms  
 (450) 4,500 kilograms or more  
 (999) Unknown  
 \_\_\_\_\_ lbs X .4536 = \_\_\_\_\_ kgs

Source: Inspector

ROLLOVER DATA

- 45. Rollover 00  
 (00) No rollover (no overturning)  
 Rollover (primarily about the longitudinal axis)  
 (01-16) Code 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 \_\_\_\_\_



### EXTERIOR VEHICLE FORM

1. Primary Sampling Unit Number <u>72</u>	3. Vehicle Number <u>04</u>
2. Case Number - Stratum <u>048D</u>	

#### VEHICLE IDENTIFICATION

VIN LHGCB756XLA XXXXXXXXXX Model Year 90  
 Vehicle Make (specify): Honda Vehicle Model (specify): Accord

#### LOCATOR

Locate the end of the damage with respect to the vehicle longitudinal center line 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
01	Bumper Corner to Bumper Corner	Bumper Corner to Bumper Corner	C-1
02	30 cm Front of Rear Axle	30 cm Front of Rear Axle	68 cm Behind Rear Axle

#### 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).

153  
153  
306

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								
01	Front Bumper	153	42	153	42	24	17	14	7	10	0
01	Free space		9		9	4	0	0	4	9	
01	Rear bumper				32	20	17	14	3	1	
				↑	Continues 210 cm on (C) Front Door						
02	Left side	130	14	130	← N/A →						-23/

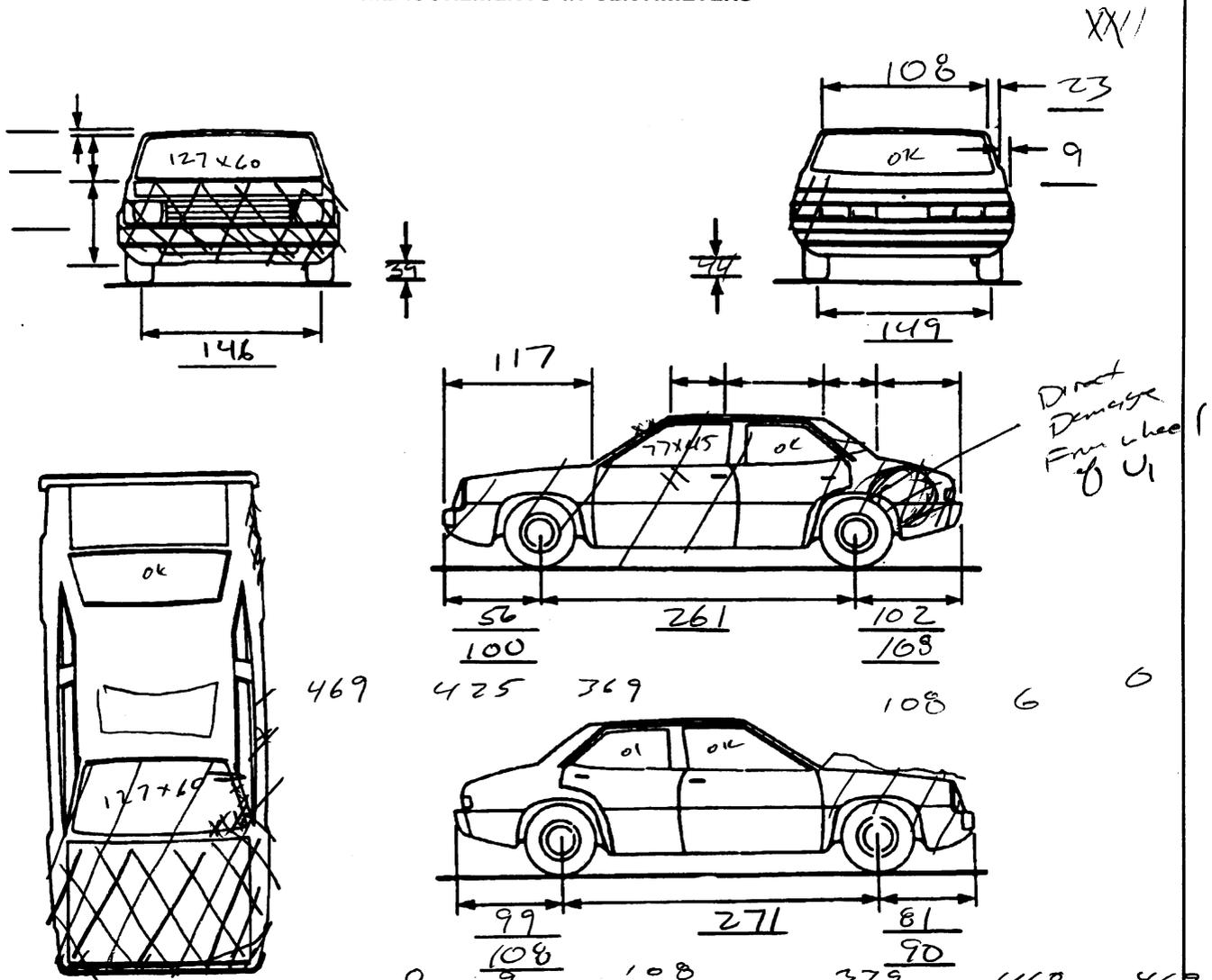
# ORIGINAL SPECIFICATIONS WORK SHEET

Wheelbase	<u>107.1</u>	inches	x 2.54	=	<u>272</u>	cm
Overall Length	<u>184.8</u>	inches	x 2.54	=	<u>469</u>	cm
Maximum Width	<u>67.9</u>	inches	x 2.54	=	<u>172</u>	cm
Curb Weight	<u>2,733</u>	pounds	x .4536	=	<u>1,240</u>	kg
Average Track <small>58.1 - 58.3</small>	<u>58.2</u>	inches	x 2.54	=	<u>148</u>	cm
Front Overhang	_____	inches	x 2.54	=	<u>87</u>	cm
Rear Overhang	_____	inches	x 2.54	=	<u>108</u>	cm
Undeformed End Width	_____	inches	x 2.54	=	_____	cm
Engine Size: cyl./displ.	_____	cc	x .001	=	_____	L
	_____	CID	x .0164	=	_____	L

### VEHICLE DAMAGE SKETCH

<p><b>TIRE—WHEEL DAMAGE</b></p> <p>a. Rotation physically restricted</p> <p>RF <u>2</u> LF <u>1</u> RR <u>2</u> LR <u>2</u></p> <p>b. Tire deflated</p> <p>RF <u>2</u> LF <u>2</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>272</u> cm</p> <p>Overall Length <u>469</u> cm</p> <p>Maximum Width <u>172</u> cm</p> <p>Curb Weight <u>1240</u> kg</p> <p>Average Track <u>148</u> cm</p> <p>Front Overhang <u>87</u> cm</p> <p>Rear Overhang <u>108</u> cm</p> <p>Undeformed End Width <u>165</u> cm</p> <p>Engine Size: cyl./displ. <u>2.2L</u> L</p>	<p><b>WHEEL STEER ANGLES</b> (For locked front wheels or displaced rear axles only)</p> <p>RF ± <u>    </u> ° LF ± <u>30</u> ° RR ± <u>    </u> ° LR ± <u>    </u> °</p> <p>Within ± 5 degrees</p>
<p><b>TYPE OF TRANSMISSION</b></p> <p><input checked="" type="checkbox"/> Manual    <input 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 checked="" type="checkbox"/> FWD    <input type="checkbox"/> RWD    <input type="checkbox"/> 4WD</p> <p>Approximate Cargo Weight <u>    </u> kg</p>	

### MEASUREMENTS IN CENTIMETERS



**NOTES:** Sketch new perimeter and cross hatch direct damage and single hatch induced damage on all views. Annotate observations which might be useful in reconstructing the accident (e.g., grass in tire bead, direction of striations, scuff on sidewalls, etc.). If pulling trailer, sketch type of trailer and damage received on the back of this page.

Annotate any damage caused by extrication such as component removal by torching, prying, or hydraulic shears.



**COLLISION DEFORMATION CLASSIFICATION**

HIGHEST DELTA "V"

Accident Event Sequence Number	Object Contacted	(1) (2) Direction of Force	(3) Deformation Location	(4) Longitudinal or Lateral Location	(5) Vertical or Lateral Location	(6) Type of Damage Distribution	(7) Deformation Extent
4. <u>04</u>	5. <u>01</u>	6. <u>11</u>	7. <u>F</u>	8. <u>D</u>	9. <u>E</u>	10. <u>W</u>	11. <u>06</u>

Second Highest Delta "V"

12. <u>05</u>	13. <del>01</del>	14. <u>09</u>	15. <u>L</u>	16. <u>Z</u>	17. <u>E</u>	18. <u>W</u>	19. <u>02</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>165</u>	<u>033</u>	<u>020</u>	<u>017</u>	<u>014</u>	<u>003</u>	<u>001</u>	<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.)  
Code to the nearest centimeter  
(250) 250 centimeters or more  
(998) No highest severity end plane impact  
(999) Unknown  
165

27. Direct Damage Width  
(For highest severity impact)  
Code to the nearest centimeter  
(250) 250 centimeters or more  
(999) Unknown  
153

28. Original Wheelbase  
Code to the nearest centimeter  
(650) 650 centimeters or more  
(999) Unknown  
107.1 inches X 2.54 = 272 centimeters  
272

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

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

**FIRE OCCURRENCE**

- 33. Fire Occurrence 1
  - (0) No fire
  - Yes, fire occurred
  - (1) Minor
  - (2) Major
  - (9) Unknown
  
- 34. Origin of Fire 4
  - (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 - Battery
  - (5) Cargo/trunk compartment
  - (6) Instrument panel
  - (7) Passenger compartment area
  - (8) Other location (specify): \_\_\_\_\_
  - (9) Unknown

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

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

*no photos*





# INTERIOR VEHICLE FORM

1. Primary Sampling Unit Number 72  
 2. Case Number - Stratum 048B  
 3. Vehicle Number 04

## GLAZING

Type of Window/Windshield Glazing  
 15. WS 1 16. LF 2 17. RF 2 18. LR 2 19. RR 2  
 20. BL 2 21. Roof 2 22. Other 2

## INTEGRITY

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

Yes, Integrity Was Lost Through  
 (01) Windshield  
 (02) Door (side)  
 (03) Door/hatch (back door)  
 (04) Roof  
 (05) Roof glass  
 (06) Side window  
 (07) Rear window (backlight)  
 (08) Roof and roof glass  
 (09) Windshield and door (side)  
 (10) Windshield and roof  
 (11) Side and rear window (side window and backlight)  
 (12) Windshield and side window  
 (13) Door and side window  
 (98) Other combination of above (specify):  
 \_\_\_\_\_  
 (99) Unknown

(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

Door, Tailgate or Hatch Opening  
 5. LF 3 6. RF 1 7. LR 1 8. RR 1 9. TG/H 0

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

Window Precrash Glazing Status  
 23. WS 1 24. LF 2 25. RF 2 26. LR 2 27. RR 2  
 28. BL 1 29. Roof 3 30. Other 1

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

Damage/Failure Associated with Door, Tailgate or Hatch Opening in Collision. If IV05-IV09 ≠ 2, Then code 0  
 10. LF 0 11. RF 0 12. LR 0 13. RR 0 14. TG/H 0

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

Glazing Damage from Impact Forces  
 31. WS 3 32. LF 6 33. RF 1 34. LR 1 35. RR 1  
 36. BL 1 37. Roof 1 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

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 Damage from Occupant Contact  
 39. WS 9 40. LF 1 41. RF 1 42. LR 1 43. RR 1  
 44. BL 1 45. Roof 1 46. Other 1

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



### OCCUPANT AREA INTRUSION

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

	Location of Intrusion	Intruding Component	Magnitude of Intrusion	Dominant Crush Direction
1st	47. <u>11</u>	48. <u>32</u>	49. <u>95</u>	50. <u>2</u>
2nd	51. <u>11</u>	52. <u>15</u>	53. <u>95</u>	54. <u>2</u>
3rd	55. _____	56. _____	57. _____	58. _____
4th	59. _____	60. _____	61. _____	62. _____
5th	63. _____	64. _____	65. _____	66. _____
6th	67. _____	68. _____	69. _____	70. _____
7th	71. _____	72. _____	73. _____	74. _____
8th	75. _____	76. _____	77. _____	78. _____
9th	79. _____	80. _____	81. _____	82. _____
10th	83. _____	84. _____	85. _____	86. _____

#### INTRUDING COMPONENT

##### Interior Components

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

##### Exterior Components

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

#### LOCATION OF INTRUSION

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

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

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

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

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

- (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

T

12

-

12

=

0

B

12

-

12

=

0

-

=

-

=

**STEERING COLUMN**

**INSTRUMENT PANEL**

87. Steering Column Type 2

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

88. Tilt Steering Column Adjustment 1

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

89. Telescoping Steering Column Adjustment 0

- (0) No telescoping steering column
- (1) Full back
- (2) Between full back and midpoint
- (3) Midpoint
- (4) Between midpoint and full forward
- (5) Full forward
- (9) Unknown

90. Steering Rim/Spoke Deformation 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

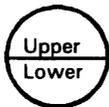
*Quarter Sections*

- (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 097,000

- \_\_\_\_\_ 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
- 29,154 miles X 1.6093 = 46,918 kilometers

Source: Odometer

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)? 2

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

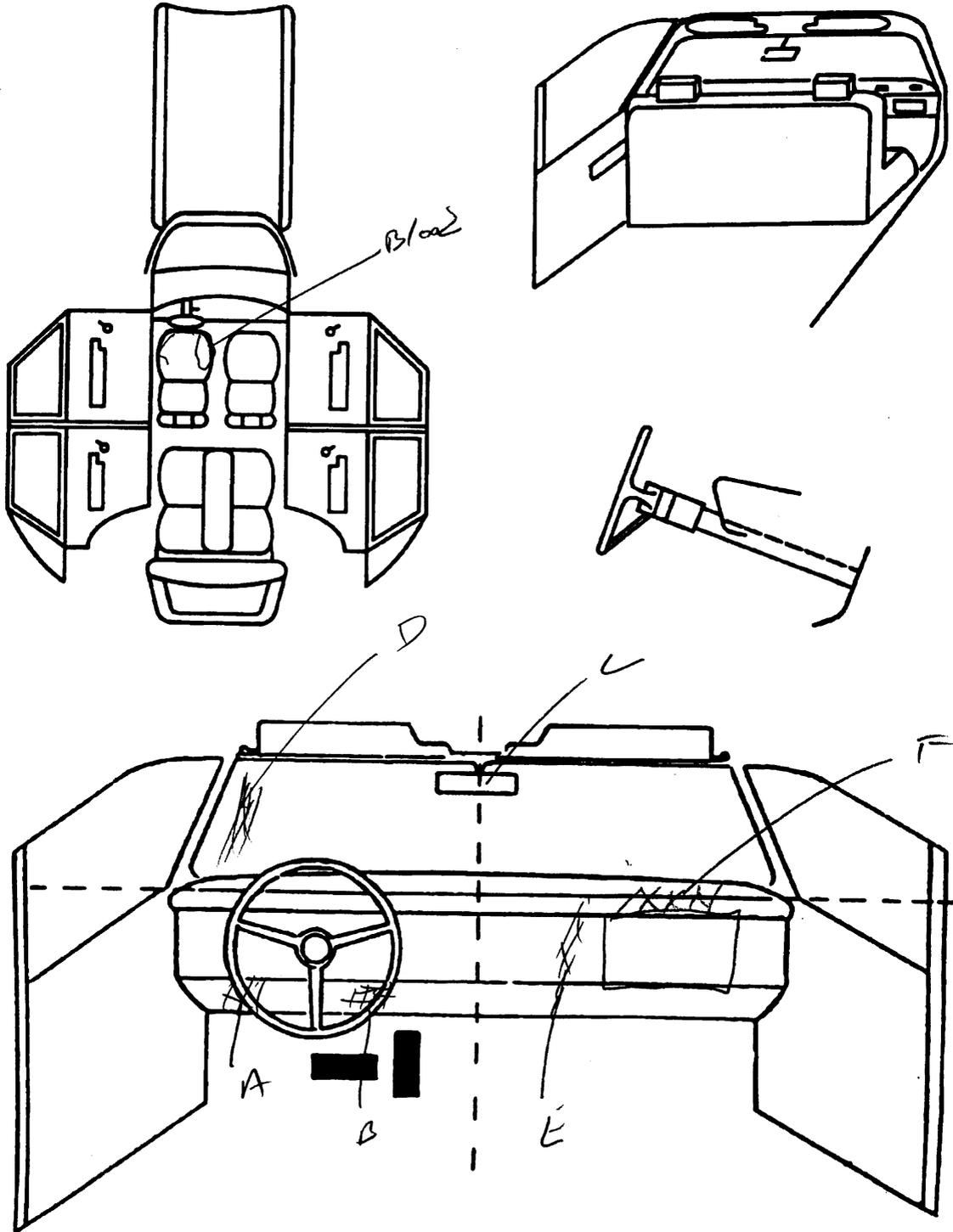
97. Adaptive (Assistive) Driving Equipment 0

- (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	010	01	① knee	Dented	1
B	010	01	② knee	Dented + Scuff	1
C	002	01	Head	KO'D	3
D	001	01	Head	Blood (Part of windshield found on seat #13)	1
E	011	02	① side	Pulled out	2
F	012	02	chest	Dented	1
G					
H					
I					
J					
K					
L					
M					
N					

**FRONT**

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

**CODES FOR INTERIOR COMPONENTS**

**LEFT SIDE**

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

**INTERIOR**

- (151) Seat, back support
  - (152) Belt restraint webbing/buckle
  - (153) Belt restraint B-pillar or door frame attachment point
  - (154) Other restraint system component (specify): \_\_\_\_\_
  - (155) Head restraint system
  - (160) Other occupants (specify): \_\_\_\_\_
  - (161) Interior loose objects
  - (162) Child safety seat (specify): \_\_\_\_\_
  - (163) Other interior object (specify): \_\_\_\_\_
- AIR BAG**
- (170) Air bag-driver side
  - (175) Air bag compartment cover-driver side
  - (180) Air bag-passenger side
  - (185) Air bag compartment cover-passenger side
  - (190) Other air bag (specify)
  - (195) Other air bag compartment cover (specify)
- ROOF**
- (201) Front header
  - (202) Rear header
  - (203) Roof left side rail
  - (204) Roof right side rail
  - (205) Roof or convertible top
- FLOOR**
- (251) Floor (including toe pan)
  - (252) Floor or console mounted transmission lever, including console
  - (253) Parking brake handle
  - (254) Foot controls including parking brake

**REAR**

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

**CONFIDENCE LEVEL OF CONTACT POINT**

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

# MANUAL RESTRAINTS

**NOTES:** Encode the applicable data for each seat position in the vehicle. The attribute for the variable may be found below. Restraint systems should be assessed during the vehicle inspection then coded on the Occupant Assessment Form. If a Child safety seat is present, encode the data on the back of this page. If the vehicle has automatic restraints available, encode the appropriate data on the back of the previous page.

		Left	Center	Right
<b>FIRST</b>	Availability	3	0	3
	Evidence of usage	2	0	2
	Used in this crash?	00	0	00
	Proper Use	0	0	0
	Failure Modes	0	0	0
	Anchorage Adjustment	1	0	1
<b>SECOND</b>	Availability	4	3	4
	Evidence of usage	2	2	2
	Used in this crash?	00	00	00
	Proper Use	0	0	0
	Failure Modes	0	0	0
	Anchorage Adjustment	0	0	0
<b>OTHER</b>	Availability			
	Evidence of usage			
	Used in this crash?			
	Proper Use			
	Failure Modes			
	Anchorage Adjustment			

**Manual (Active) Belt System Availability**

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

*Integral Belt Partially Destroyed*

- (6) Shoulder belt (lap belt destroyed/removed)
- (7) Lap belt (shoulder belt destroyed/removed)
- (8) Other belt (specify): \_\_\_\_\_
- (9) Unknown

**Manual (Active) Belt System Use**

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

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

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

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

*Belt Used Improperly*

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

**Manual (Active) Belt Failure Modes During Accident**

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

**Shoulder Belt Upper Anchorage Adjustment**

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

*Adjustable shoulder Belt Upper Anchorage*

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

**AUTOMATIC RESTRAINTS**

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

**AIR BAGS**

		Left Front	Right Front	Other
F I R S T	Availability/Function	0	0	0
	Deployment	0	0	0
	Failure	0	0	0

**Air Bag System Availability/Function**

- (0) Not equipped/not available
- (1) Air bag

*Non-functional*

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

- (3) Air bag not reinstalled
- (9) Unknown

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

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

**Frontal 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

**Air Bag(s) Deployment, *Other* Than First Seat Frontal (This Occupant Position)**

- (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

**AUTOMATIC BELTS**

		Left	Right
F I R S T	Availability/Function	1	1
	Use	1	1
	Type	1	1
	Proper Use	1	1
	Failure Modes	1	1

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

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

*Non-functional*

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

**Automatic (Passive) Belt System Use**

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

**Automatic (Passive) Belt System Type**

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

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

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

*Automatic Belt Used Improperly*

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

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

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

## FIRST SEAT FRONTAL AIR BAGS

**NOTES:** Encode the applicable data for *the driver and first seat passenger* in the vehicle. The attribute for the variable may be found below. Restraint systems should be assessed during the vehicle inspection then coded on the Occupant Assessment Form.

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

**Type of Air Bag**

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

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

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

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

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

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

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

*Yes - Air Bag Damage*

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

**Source of Air Bag Damage**

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

**Was The Air Bag Tethered?**

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

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

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

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

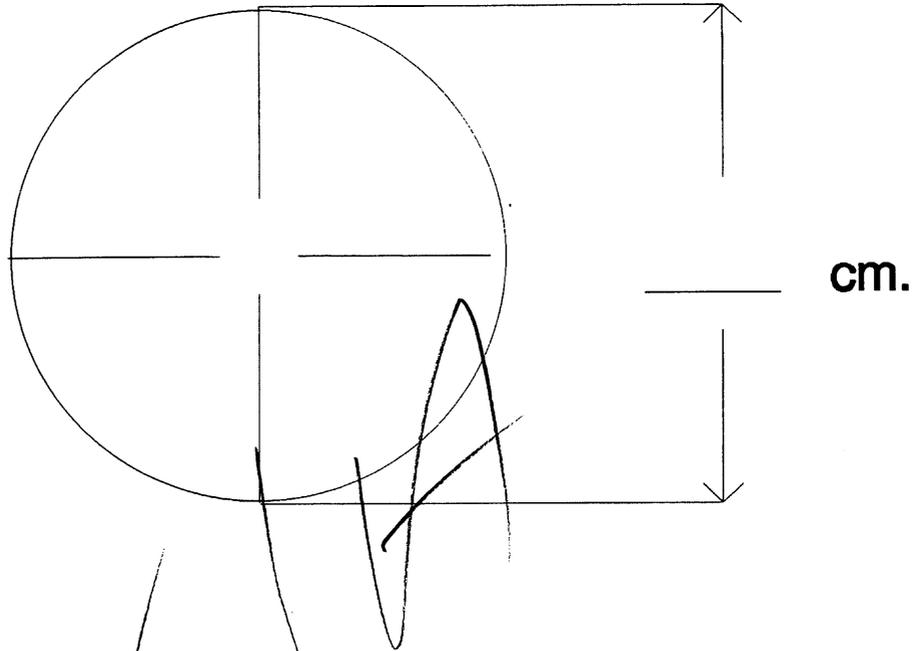
- (0) Not equipped/not available
- (1) No
- (2) Yes (specify): \_\_\_\_\_
- (3) Deployed, unknown if other occupant contact to air bag
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

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

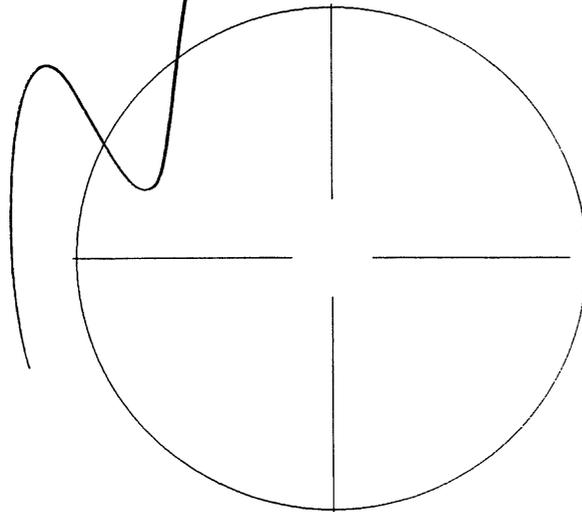
- (0) Not equipped/not available
- (1) No
- (2) Eyeglasses/sunglasses
- (3) Contact lenses
- (4) Deployed, unknown if eyewear worn
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

**DRIVER AIR BAG DAMAGE AND CONTACT SKETCHES**

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



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



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

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

a. Upper Flap

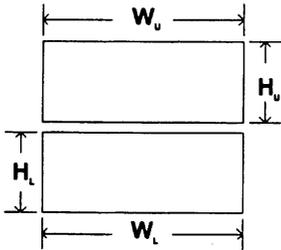
b. Lower Flap

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

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

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

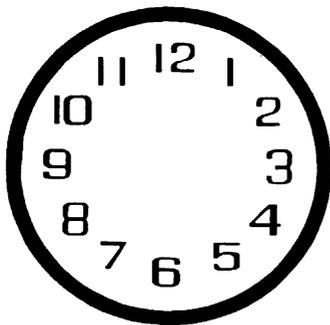
height ( $H_l$ ) \_\_\_\_\_



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

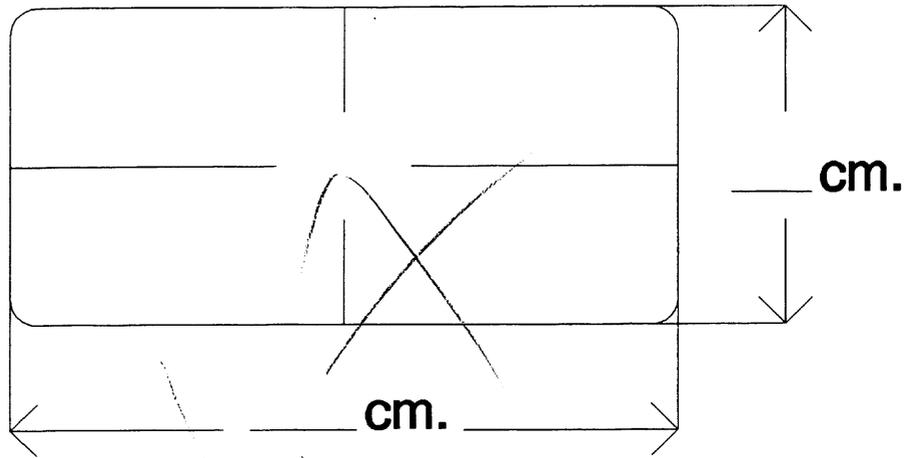
**5. SKETCH OF OTHER TYPE OF AIR BAG VENT PORTS**

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

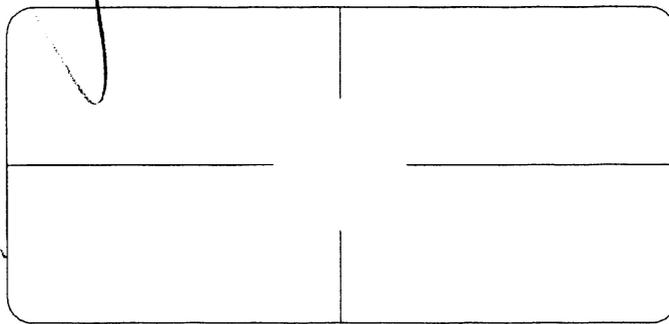


**PASSENGER AIR BAG DAMAGE AND CONTACT SKETCHES**

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



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



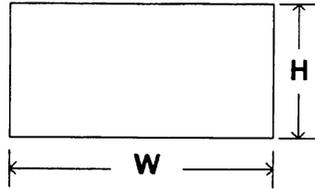
**PASSENGER AIR BAG SKETCHES (Cont'd)**

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

a. Flap

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

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



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

a. Upper Flap

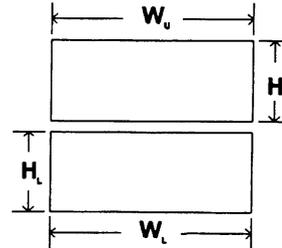
b. Lower Flap

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

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

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

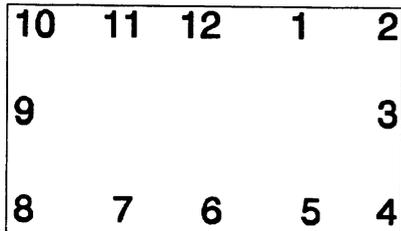
height ( $H_L$ ) \_\_\_\_\_



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

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

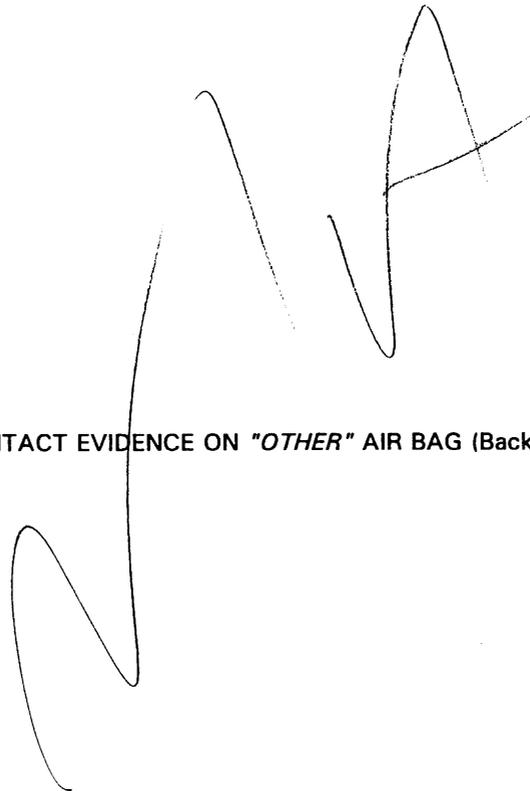
**7. SKETCH LOCATION OF RECTANGULAR AIR BAG VENT PORTS**



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

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

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



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

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

4. SKETCH AIR BAG VENT PORTS

### HEAD RESTRAINTS/SEAT EVALUATION

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

		Left	Center	Right
<b>F I R S T</b>	Head Restraint Type/Damage	3	0	3
	Seat Type	01	00	01
	Seat Performance	1	0	1
	Seat Orientation	1	0	1
	Seat Track Position	5	0	6
	Seat Back Incline Pre/Post Impact	23	0	23
<b>S E C O N D</b>	Head Restraint Type/Damage	1	0	1
	Seat Type	03	03	03
	Seat Performance	1	1	1
	Seat Orientation	1	1	1
	Seat Track Position	1	1	1
	Seat Back Incline Pre/Post Impact	01	01	01
<b>T H I R D</b>	Head Restraint Type/Damage			
	Seat Type			
	Seat Performance			
	Seat Orientation			
	Seat Track Position			
	Seat Back Incline Pre/Post Impact			
<b>O T H E R</b>	Head Restraint Type/Damage			
	Seat Type			
	Seat Performance			
	Seat Orientation			
	Seat Track Position			
	Seat Back Incline Pre/Post Impact			

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

## HEAD RESTRAINTS/SEAT EVALUATION

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

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

**Seat Type (this Occupant Position)**

- (00) Occupant not seated or no seat
- (01) Bucket
- (02) Bucket with folding back
- (03) Bench
- (04) Bench with separate back cushions
- (05) Bench with folding back(s)
- (06) Split bench with separate back cushions
- (07) Split bench with folding back(s)
- (08) Pedestal (i.e., column supported)
- (09) Other seat type (specify): \_\_\_\_\_
- (10) Box mounted seat (i.e., van type)
- (99) Unknown

**Seat Performance (this Occupant Position)**

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

**Seat Orientation (this Occupant Position)**

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

**Seat Track Adjusted Position Prior To Impact**

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

**Seat Back Incline Prior and Post Impact**

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

*Upright prior to impact*

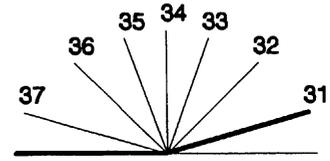
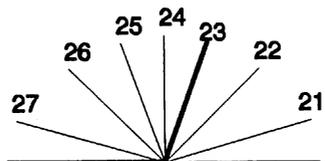
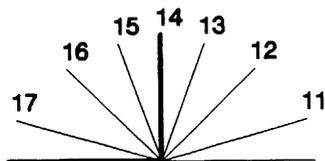
- (11) Moved to completely rearward position
- (12) Moved to rearward midrange position
- (13) Moved to slightly rearward position
- (14) Retained pre-impact position
- (15) Moved to slightly forward position
- (16) Moved to forward midrange position
- (17) Moved to completely forward position

*Slightly reclined prior to impact*

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

*Completely reclined prior to impact*

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



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

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

## CHILD SAFETY SEAT FIELD ASSESSMENT

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

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

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

4. Child Safety Seat Shield Usage
  
5. Child Safety Seat Tether Usage
 

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

  - (00) No child safety seat
  - Not Designed with Harness/Shield/Tether
    - (01) After market harness/shield/tether added, not used
    - (02) After market harness/shield/tether used
    - (03) Child safety seat used, but no after market harness/shield/tether added
    - (09) Unknown if harness/shield/tether added or used
  - Designed With Harness/Shield/Tether
    - (11) Harness/shield/tether not used
    - (12) Harness/shield/tether used
    - (19) Unknown if harness/shield/tether used
  - Unknown If Designed With Harness/Shield/Tether
    - (21) Harness/shield/tether not used
    - (22) Harness/shield/tether used
    - (29) Unknown if harness/shield/tether used
  - (99) Unknown if child safety seat used
  
6. Child Safety Seat Make/Model
 

(Specify make/model and occupant number)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**EJECTION/ENTRAPMENT DATA**

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

**EJECTION** No [  ] Yes [  ]

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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

**Ejection**

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

**Ejection Area**

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

(7) Roof

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

- (9) Unknown

**Ejection Medium**

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

(5) Integral structure

- (8) Other medium (specify):

- (9) Unknown

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

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

**ENTRAPMENT** No [  ] Yes [  ]

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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

(Note in vehicle interior diagram)



# OCCUPANT ASSESSMENT FORM

1. Primary Sampling Unit Number 72  
 2. Case Number - Stratum 048B  
 3. Vehicle Number 04  
 4. Occupant Number 01

## OCCUPANT'S CHARACTERISTICS

5. Occupant's Age 45  
 Code actual age at time of accident.  
 (00) Less than one year old (specify by month):  
 \_\_\_\_\_  
 (97) 97 years and older  
 (99) Unknown

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

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

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

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

## OCCUPANT'S SEATING

10. Occupant's Seat Position 11  
*Front Seat*  
 (11) Left side  
 (12) Middle  
 (13) Right side  
 (14) Other (specify): \_\_\_\_\_  
 (15) On or in the lap of another occupant

*Second Seat*  
 (21) Left side  
 (22) Middle  
 (23) Right side  
 (24) Other (specify): \_\_\_\_\_  
 (25) On or in the lap of another occupant

*Third Seat*  
 (31) Left side  
 (32) Middle  
 (33) Right side  
 (34) Other (specify): \_\_\_\_\_  
 (35) On or in the lap of another occupant

*Fourth Seat*  
 (41) Left side  
 (42) Middle  
 (43) Right side  
 (44) Other (specify): \_\_\_\_\_  
 (45) On or in the lap of another occupant

(97) In or on unenclosed area  
 (98) Other seat (specify): \_\_\_\_\_  
 (99) Unknown

11. Occupant's Posture 9  
 (0) Normal posture

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

**EJECTION/ENTRAPMENT**

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

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

14. Ejection Medium 6
- (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) 6
- (0) No ejection
  - (1) Open
  - (2) Closed
  - (3) Integral structure
  - (9) Unknown

16. Entrapment \_\_\_\_\_
- (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 disoriented
  - (2) Removed from vehicle due to injuries
  - (3) Exited vehicle with some assistance
  - (4) Exited vehicle under own power
  - (5) Occupant fully ejected
  - (9) Unknown

## BELT SYSTEM FUNCTION

18. Manual (Active) Belt System Availability 3

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

*Integral Belt Partially Destroyed*

- (6) Shoulder belt (lap belt destroyed/removed)
- (7) Lap belt (shoulder belt destroyed/removed)
- (8) Other belt (specify):

(9) Unknown

19. Manual (Active) Belt System Use 00

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

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

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

20. Proper Use of Manual (Active) Belts 0

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

*Belt Used Improperly*

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

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

(9) Unknown

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

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

(6) Broken retractor

(7) Combination of above (specify):

(8) Other manual belt failure (specify):

(9) Unknown

22. Shoulder Belt Upper Anchorage Adjustment 0

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

*Adjustable shoulder Belt Upper Anchorage*

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

23. Automatic (Passive) Belt System Availability/Function 1

- (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 1

- (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 1

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

26. Proper Use of Automatic (Passive) Belt System 1

- (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 1

- (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; font-size: 2em;">5</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>(9) <u>Police indicated "unknown"</u></p> <p>29. Police Reported Air Bag Availability/Function <span style="float: right; font-size: 2em;">1</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>30. Frontal Air Bag System Availability/Function (This Occupant Position) <span style="float: right; font-size: 2em;">0</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>(3) Air bag not reinstalled</p> <p>(9) Unknown</p> <p>31. Frontal Air Bag System Deployment (This Occupant Position) <span style="float: right; font-size: 2em;">0</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>32. Other Than First Seat Frontal Air Bag Availability/Function (This Occupant Position) <span style="float: right; font-size: 2em;">0</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>(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; font-size: 2em;">0</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; font-size: 2em;">0</span></p> <p>(0) Not equipped/not available</p> <p>(1) No</p> <p>(2) Yes (specify): _____</p> <p>(9) Unknown</p>
<p>Check the Primary Source Used In Determining Belt Use.</p> <p><input type="checkbox"/> Not equipped/not available/destroyed or rendered inoperative</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><input type="checkbox"/> Unknown if belt used</p> <p>_____</p> <p>_____</p> <p>_____</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 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

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

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

53. Seat Back Incline Prior and Post Impact 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

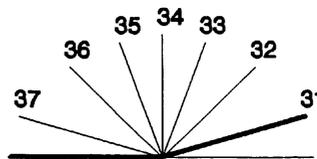
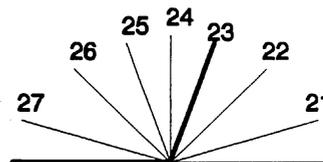
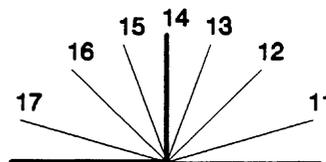
*Slightly reclined prior to impact*

- (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 24

64. Hospital Stay 99

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

65. Working Days Lost 99

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

**STOP WORK HERE**

**VARIABLES 66-74**

**TO BE CODED BY THE ZONE CENTER**

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

Code number of hours from time of accident to time of death up through 24 hours. If time of death is greater than 24 hours, code number of days. (Note: 1 day = 31, 2 days = 32, ... n days = 30 + n up through 30 days = 60)

- (00) Not fatal  
(96) Fatal - ruled disease  
(99) Unknown

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

Code the Occupant Injury from line number(s) for the medically reported injury(s) which reportedly contributed to this occupant's death

- (00) Not fatal or no additional causes  
(96) Mode of death given but specific injuries are not linked to cause of death. (specify):

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

(99) Unknown

70. Number of Recorded Injuries for This Occupant 09

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 03  
(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? 2

- (1) No - blood not given  
(2) Yes - blood given

(specify units): 6  
(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>72</u>	3. Vehicle Number <u>04</u>
2. Case Number - Stratum <u>048B</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 Source Confidence Level	Direct/Indirect Injury	Occupant Area Intrusion Number
		Body Region	Type of Anatomic Structure	Specific Anatomic Structure	Level of Injury	A.I.S. Severity					
1st	5. <u>2</u>	6. <u>1</u>	7. <u>4</u>	8. <u>06</u>	9. <u>36</u>	10. <u>5</u>	11. <u>2</u>	12. <u>513</u>	13. <u>1</u>	14. <u>1</u>	15. <u>01</u>
2nd	16. <u>2</u>	17. <u>1</u>	18. <u>4</u>	19. <u>06</u>	20. <u>06</u>	21. <u>3</u>	22. <u>2</u>	23. <u>513</u>	24. <u>1</u>	25. <u>1</u>	26. <u>01</u>
3rd	27. <u>2</u>	28. <u>1</u>	29. <u>4</u>	30. <u>06</u>	31. <u>84</u>	32. <u>3</u>	33. <u>2</u>	34. <u>513</u>	35. <u>1</u>	36. <u>1</u>	37. <u>01</u>
4th	38. <u>2</u>	39. <u>1</u>	40. <u>5</u>	41. <u>02</u>	42. <u>02</u>	43. <u>3</u>	44. <u>8</u>	45. <u>513</u>	46. <u>1</u>	47. <u>1</u>	48. <u>01</u>
5th	49. <u>2</u>	50. <u>1</u>	51. <u>5</u>	52. <u>04</u>	53. <u>04</u>	54. <u>3</u>	55. <u>2</u>	56. <u>513</u>	57. <u>1</u>	58. <u>1</u>	59. <u>01</u>
6th	60. <u>2</u>	61. <u>1</u>	62. <u>6</u>	63. <u>08</u>	64. <u>22</u>	65. <u>5</u>	66. <u>0</u>	67. <u>513</u>	68. <u>1</u>	69. <u>1</u>	70. <u>01</u>
7th	71. <u>2</u>	72. <u>1</u>	73. <u>5</u>	74. <u>04</u>	75. <u>04</u>	76. <u>3</u>	77. <u>5</u>	78. <u>513</u>	79. <u>1</u>	80. <u>1</u>	81. <u>01</u>
8th	82. <u>2</u>	83. <u>2</u>	84. <u>5</u>	85. <u>12</u>	86. <u>04</u>	87. <u>3</u>	88. <u>2</u>	89. <u>513</u>	90. <u>1</u>	91. <u>1</u>	92. <u>01</u>
9th	93. <u>2</u>	94. <u>2</u>	95. <u>5</u>	96. <u>06</u>	97. <u>04</u>	98. <u>1</u>	99. <u>2</u>	100. <u>513</u>	101. <u>1</u>	102. <u>1</u>	103. <u>01</u>
10th	104. _____	105. _____	106. _____	107. _____	108. _____	109. _____	110. _____	111. _____	112. _____	113. _____	114. _____



**OCCUPANT INJURY CLASSIFICATION**

Body Region	Specific Anatomic Structure	Level of Injury	Aspect
(1) Head		Specific injuries are assigned consecutive two-digit numbers beginning with 02.	(1) Right
(2) Face			(2) Left
(3) Neck	<u>Vessels, Nerves, Organs.</u> <u>Bones, Joints</u> are assigned consecutive two digit numbers beginning with 02.	To the extent possible, within the organizational framework of the AIS, 00 is assigned to an injury NFS as to severity or where only one injury is given in the dictionary for that anatomic structure. 99 is assigned to any injury NFS as to lesion or severity.	(3) Bilateral
(4) Thorax			(4) Central
(5) Abdomen			(5) Anterior
(6) Spine			(6) Posterior
(7) Upper Extremity			(7) Superior
(8) Lower Extremity			(8) Inferior
(9) Unspecified			(9) Unknown
	The exceptions to this rule apply to:		(0) Whole region
<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 CONFIDENCE LEVEL	DIRECT/INDIRECT INJURY
<p><u>OFFICIAL RECORDS</u></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><u>UNOFFICIAL RECORDS</u></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): muffler of other vehicle
- (514) Unknown exterior of other motor vehicle

### OTHER VEHICLE OR OBJECT IN THE ENVIRONMENT

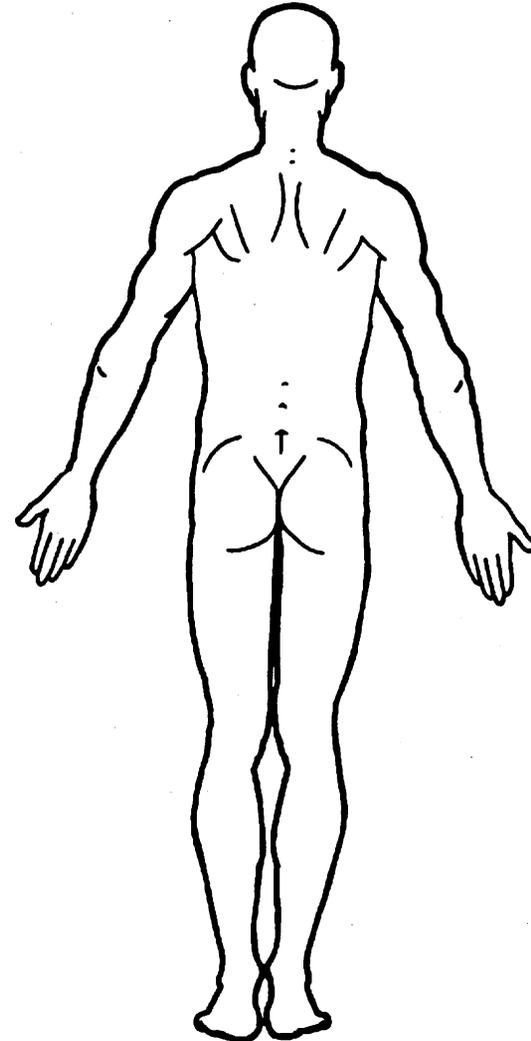
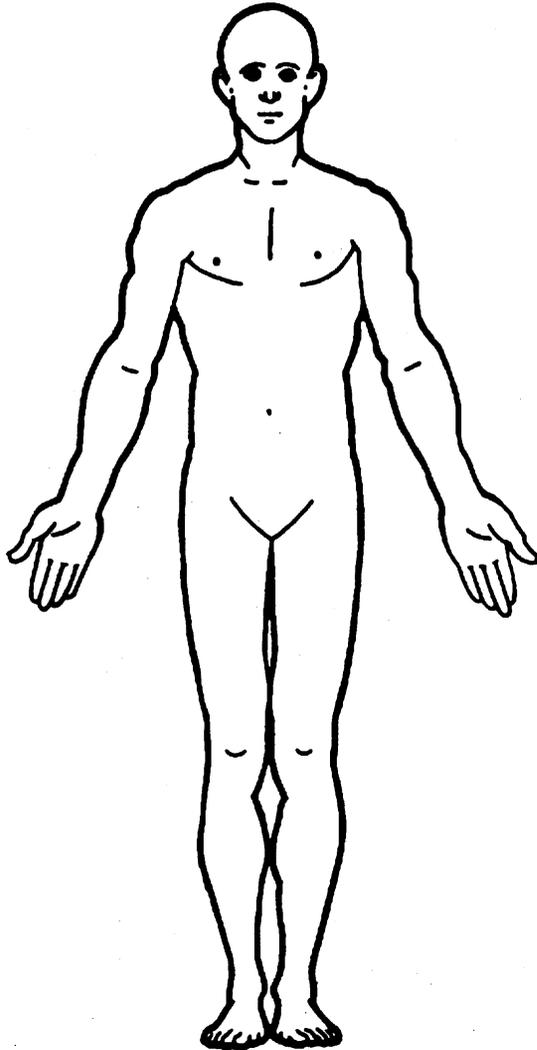
- (551) Ground
- (598) Other vehicle or object (specify): \_\_\_\_\_
- (599) Unknown vehicle or object

### NONCONTACT INJURY

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

## OFFICIAL INJURY DATA — SOFT TISSUE INJURIES

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



# OFFICIAL INJURY DATA — SKELETAL INJURIES

Restrained?

- No
- Yes

Blood Alcohol Level (mg/dl)

BAL = 0

Glasgow Coma Scale Score

GCSS = 4

Units of Blood Given

Units = 6

Arterial Blood Gases

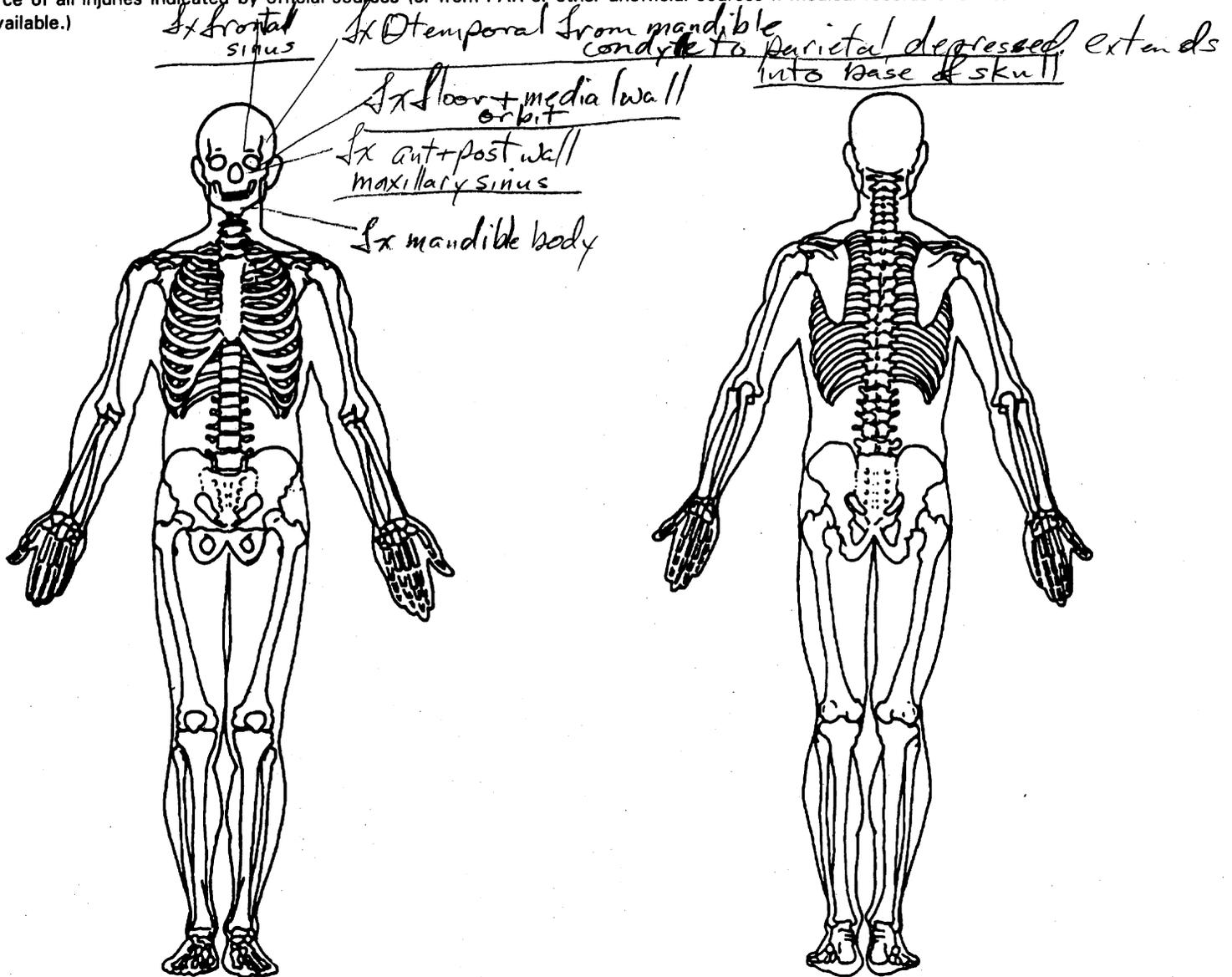
pH = 7.334

PO<sub>2</sub> = 263.2

PCO<sub>2</sub> = 35.2

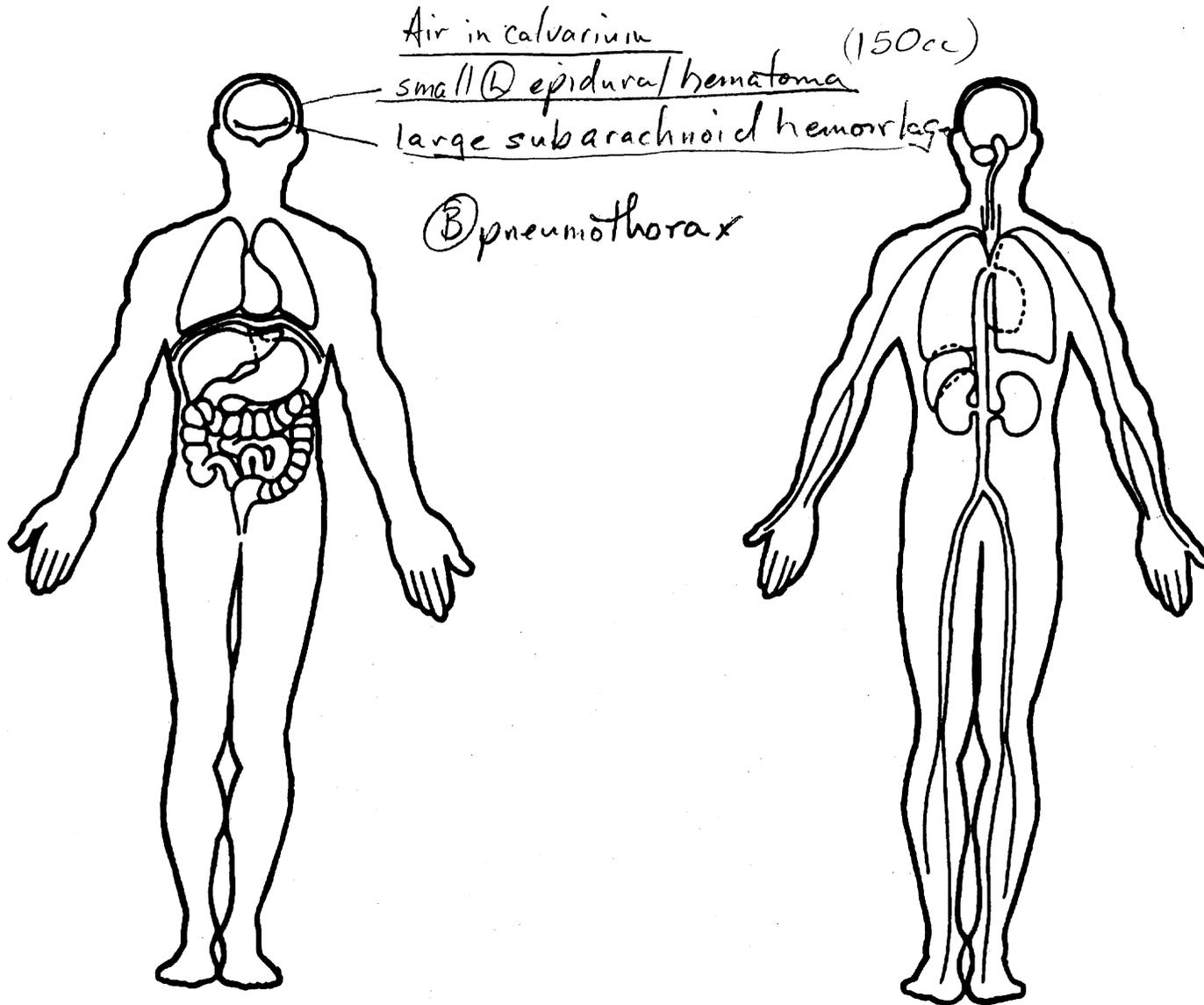
HCO<sub>3</sub> = 19

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



# OFFICIAL INJURY DATA – INTERNAL INJURIES

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





# OCCUPANT ASSESSMENT FORM

1. Primary Sampling Unit Number 72  
 2. Case Number - Stratum 048B  
 3. Vehicle Number 04  
 4. Occupant Number 02

## OCCUPANT'S CHARACTERISTICS

5. Occupant's Age 37  
 Code actual age at time of accident.  
 (00) Less than one year old (specify by month):  
 \_\_\_\_\_  
 (97) 97 years and older  
 (99) Unknown

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

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

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

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

## 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 disoriented
- (2) Removed from vehicle due to injuries
- (3) Exited vehicle with some assistance
- (4) Exited vehicle under own power
- (5) Occupant fully ejected
- (9) Unknown

## BELT SYSTEM FUNCTION

18. Manual (Active) Belt System Availability 3
- (0) None available  
 (1) Belt removed/destroyed  
 (2) Shoulder belt  
 (3) Lap belt  
 (4) Lap and shoulder belt  
 (5) Belt available—type unknown
- Integral Belt Partially Destroyed*  
 (6) Shoulder belt (lap belt destroyed/removed)  
 (7) Lap belt (shoulder belt destroyed/removed)  
 (8) Other belt (specify): \_\_\_\_\_
- (9) Unknown \_\_\_\_\_
19. Manual (Active) Belt System Use 00
- (00) None used, not available, or belt removed/destroyed  
 (01) Inoperative (specify): \_\_\_\_\_
- (02) Shoulder belt \_\_\_\_\_  
 (03) Lap belt \_\_\_\_\_  
 (04) Lap and shoulder belt \_\_\_\_\_  
 (05) Belt used—type unknown \_\_\_\_\_  
 (08) Other belt used (specify): \_\_\_\_\_
- (12) Shoulder belt used with child safety seat  
 (13) Lap belt used with child safety seat  
 (14) Lap and shoulder belt used with child safety seat  
 (15) Belt used with child safety seat—type unknown  
 (18) Other belt used with child safety seat (specify): \_\_\_\_\_  
 (99) Unknown if belt used \_\_\_\_\_
20. Proper Use of Manual (Active) Belts 0
- (0) None used or not available  
 (1) Belt used properly  
 (2) Belt used properly with child safety seat
- Belt Used Improperly*  
 (3) Shoulder belt worn under arm  
 (4) Shoulder belt worn behind back or seat  
 (5) Belt worn around more than one person  
 (6) Lap belt worn on abdomen  
 (7) Lap belt or lap and shoulder belt used improperly with child safety seat (specify): \_\_\_\_\_
- (8) Other improper use of manual belt system (specify): \_\_\_\_\_
- (9) Unknown \_\_\_\_\_
21. Manual (Active) Belt Failure Modes During Accident 0
- (0) No manual belt used or not available  
 (1) No manual belt failure(s)  
 (2) Torn webbing (stretched webbing not included)  
 (3) Broken buckle or latchplate  
 (4) Upper anchorage separated  
 (5) Other anchorage separated (specify): \_\_\_\_\_
- (6) Broken retractor \_\_\_\_\_  
 (7) Combination of above (specify): \_\_\_\_\_  
 (8) Other manual belt failure (specify): \_\_\_\_\_  
 (9) Unknown \_\_\_\_\_
22. Shoulder Belt Upper Anchorage Adjustment 0
- (0) No shoulder belt  
 (1) No upper anchorage adjustment for shoulder belt
- Adjustable shoulder Belt Upper Anchorage*  
 (2) In full up position  
 (3) In mid position  
 (4) In full down position  
 (5) Position unknown  
 (9) Unknown if position has adjustable upper anchorage adjustment \_\_\_\_\_
23. Automatic (Passive) Belt System Availability/Function 1
- (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 1
- (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 1
- (0) Not equipped/not available  
 (1) Non-motorized system  
 (2) Motorized system  
 (9) Unknown \_\_\_\_\_
26. Proper Use of Automatic (Passive) Belt System 1
- (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 1
- (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 <u>5</u></p> <ul style="list-style-type: none"> <li>(0) None used</li> <li>(1) Police did not indicate belt use</li> <li>(2) Shoulder belt</li> <li>(3) Lap belt</li> <li>(4) Lap and shoulder belt</li> <li>(5) Belt used, type not specified</li> <li>(6) Child safety seat</li> <li>(7) Automatic belt</li> <li>(8) Other type belt, (specify): _____</li> <li>(9) Police indicated "unknown" _____</li> </ul> <p>29. Police Reported Air Bag Availability/Function <u>1</u></p> <ul style="list-style-type: none"> <li>(0) No air bag available</li> <li>(1) Police did not indicate air bag availability/function</li> <li>(2) Deployed</li> <li>(3) Not deployed</li> <li>(4) Unknown if deployed</li> <li>(9) Police indicated "unknown"</li> </ul>	<p>30. Frontal Air Bag System Availability/Function (This Occupant Position) <u>0</u></p> <ul style="list-style-type: none"> <li>(0) Not equipped/not available</li> <li>(1) Air bag</li> </ul> <p><i>Non-functional</i></p> <ul style="list-style-type: none"> <li>(2) Air bag disconnected (specify): _____</li> <li>(3) Air bag not reinstalled _____</li> <li>(9) Unknown</li> </ul> <p>31. Frontal Air Bag System Deployment (This Occupant Position) <u>0</u></p> <ul style="list-style-type: none"> <li>(0) Not equipped/not available</li> <li>(1) Deployed during accident (as a result of impact)</li> <li>(2) Deployed inadvertently just prior to accident</li> <li>(3) Deployed, details unknown</li> <li>(4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)</li> <li>(5) Unknown if deployed</li> <li>(7) Nondeployed</li> <li>(9) Unknown</li> </ul>
<p>Check the Primary Source Used In Determining Belt Use.</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Not equipped/not available/destroyed or rendered inoperative</li> <li><input checked="" type="checkbox"/> Vehicle inspection</li> <li><input type="checkbox"/> Official injury data</li> <li><input type="checkbox"/> Driver/occupant interview</li> <li><input type="checkbox"/> Other (specify): _____</li> <li><input type="checkbox"/> Unknown if belt used _____</li> </ul>	<p>32. Other Than First Seat Frontal Air Bag Availability/Function (This Occupant Position) <u>0</u></p> <ul style="list-style-type: none"> <li>(0) Not equipped/not available</li> <li>(1) Air bag</li> </ul> <p><i>Non-functional</i></p> <ul style="list-style-type: none"> <li>(2) Air bag disconnected (specify): _____</li> <li>(3) Air bag not reinstalled _____</li> <li>(9) Unknown</li> </ul> <p><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) <u>0</u></p> <ul style="list-style-type: none"> <li>(0) Not equipped with an "other" air bag</li> <li>(1) Deployed during accident (as a result of impact)</li> <li>(2) Deployed inadvertently just prior to accident</li> <li>(3) Deployed, details unknown</li> <li>(4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)</li> <li>(5) Unknown if deployed</li> <li>(7) Nondeployed</li> <li>(9) Unknown</li> </ul> <p>34. Are There Indications of Air Bag System Failure? (This Occupant Position) <u>0</u></p> <ul style="list-style-type: none"> <li>(0) Not equipped/not available</li> <li>(1) No</li> <li>(2) Yes (specify): _____</li> <li>(9) Unknown _____</li> </ul>

**FIRST SEAT FRONTAL AIR BAG SYSTEM EVALUATION**

35. Had Vehicle Been in Previous Accident(s)?    
 (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) 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) Not equipped/not available   
 (1) No prior maintenance   
 (2) Yes, prior maintenance (specify): \_\_\_\_\_   
 (9) Unknown

38. Air Bag Deployment Accident Event Sequence Number    
 (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) 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) 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) 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) 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) Not equipped/not available   
 (01) Not damaged   
 Yes - Air Bag Damage   
 (02) Ruptured   
 (03) Cut   
 (04) Torn   
 (05) Holed   
 (06) Burned   
 (07) Abraded   
 (88) Other damage (specify): \_\_\_\_\_   
 (95) Damaged, details unknown   
 (96) Deployed, unknown if damaged   
 (97) Not deployed   
 (98) Unknown if deployed   
 (99) Unknown

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

**HEAD RESTRAINT AND SEAT EVALUATION**

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

45. Was The Air Bag Tethered? 0  
 (0) Not equipped/not available  
 (1) No  
 (2) Yes (specify number of tether straps):  
 \_\_\_\_\_  
 (3) Deployed, unknown if tethered  
 (7) Not deployed  
 (8) Unknown if deployed  
 (9) Unknown

46. Did The Air Bag Have Vent Ports? 0  
 (0) Not equipped/not available  
 (1) No  
 (2) Yes (specify number of vent ports):  
 \_\_\_\_\_  
 (3) Deployed, unknown if vent ports present  
 (7) Not deployed  
 (8) Unknown if deployed  
 (9) Unknown

47. Was the Air Bag in this Occupant's Position Contacted by Another Occupant? 0  
 (0) Not equipped/not available  
 (1) No  
 (2) Yes (specify):  
 \_\_\_\_\_  
 (3) Deployed, unknown if other occupant contact to air bag  
 (7) Not deployed  
 (8) Unknown if deployed  
 (9) Unknown

48. Was This Occupant Wearing Eye-wear? 0  
 (0) Not equipped/not available  
 (1) No  
 (2) Eyeglasses/sunglasses  
 (3) Contact lenses  
 (4) Deployed, unknown if eyewear worn  
 (7) Not deployed  
 (8) Unknown if deployed  
 (9) Unknown

49. Head Restraint Type/Damage by Occupant at This Occupant Position. 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*

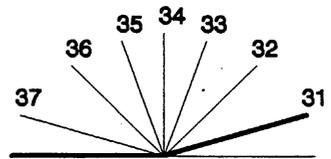
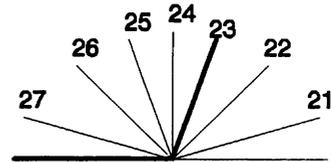
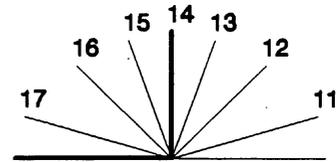
- (11) Moved to completely rearward position
- (12) Moved to rearward midrange position
- (13) Moved to slightly rearward position
- (14) Retained pre-impact position
- (15) Moved to slightly forward position
- (16) Moved to forward midrange position
- (17) Moved to completely forward position

*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) 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 0

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

\_\_\_\_\_

*Nonfatal*

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

63. Type Of Medical Facility (for Initial Treatment) 0

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

\_\_\_\_\_

(9) Unknown

64. Hospital Stay 00

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

65. Working Days Lost 99

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

**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 97  
 \_\_\_\_\_ 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 97  
 (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? 9  
 (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> 97  
 (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 J  
 (0) Not equipped/not available/destroyed or rendered inoperative  
 (1) Vehicle inspection  
 (2) Official injury data  
 (3) Driver/occupant interview  
 (8) Other (specify): \_\_\_\_\_  
 (9) Unknown if belt used

PSU NUMBER	<u>72</u>
CASE NUMBER	<u>0488</u>
VEHICLE NUMBER	<u>04</u>
OCCUPANT NUMBER	<u>02</u>

# OCCUPANT INJURY FORM

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

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



B. E.

# CRASHPC PROGRAM SUMMARY

(All Measurements in Metric)

Identifying Title <u>72</u> Primary Sampling Unit	<u>048B</u> Case No.-Stratum	<u>04</u> Accident Event Sequence No.	<u>[REDACTED]</u> <u>95</u> Date (Month, day, Year) of Run
---	---------------------------------	--	---

CRASHPC Vehicle Identification			
Vehicle 1	<u>1990</u>	<u>Honda</u>	<u>Accord</u>
Vehicle 2			
	Year	Make	Model
			<u>04</u> NASS Veh. No.

## GENERAL INFORMATION

VEHICLE 1		VEHICLE 2	
Size	<u>3</u>	Size	<u>11</u>
Weight	<u>79</u>	Weight	
$\frac{1240}{\text{Curb}} + \frac{80}{\text{Occupant(s)}} + \frac{6}{\text{Cargo}} = 1399$ kg		$\frac{\quad}{\text{Curb}} + \frac{\quad}{\text{Occupant(s)}} + \frac{\quad}{\text{Cargo}} = \quad$ kg	
CDC	<u>11 F D E W 7</u>	CDC	
PDOF (-180 to +180)	<u>0020</u> °	PDOF (-180 to +180)	<u>±</u> °
Stiffness	<u>9</u>	Stiffness	

## SCENE INFORMATION

Rest and Impact Positions  No, Go To Damage Information  Yes

VEHICLE 1		VEHICLE 2	
Rest Position	X <u>      </u> m Y <u>      </u> m PSI <u>      </u> °	Rest Position	X <u>      </u> m Y <u>      </u> m PSI <u>      </u> °
Impact Position	X <u>      </u> m Y <u>      </u> m PSI <u>      </u> °	Impact Position	X <u>      </u> m Y <u>      </u> m PSI <u>      </u> °
Slip Angle (-180 to +180)	<u>      </u> °	Slip Angle (-180 to +180)	<u>      </u> °

## VEHICLE MOTION

Sustained Contact  No  Yes

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

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

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

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

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

Trajectory Data  No  Yes  
 If No, Go To Damage Information

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

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

Terrain Boundary  No  Yes

\_\_\_\_\_

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

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

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

**DAMAGE INFORMATION**

VEHICLE 1		VEHICLE 2	
Damage Length	L <u>165</u> cm	Damage Length	L _____ cm
Crush Depths	C <sub>1</sub> <u>033</u> cm	Crush Depths	C <sub>1</sub> _____ cm
	C <sub>2</sub> <u>020</u> cm		C <sub>2</sub> _____ cm
	C <sub>3</sub> <u>017</u> cm		C <sub>3</sub> _____ cm
	C <sub>4</sub> <u>014</u> cm		C <sub>4</sub> _____ cm
	C <sub>5</sub> <u>003</u> cm		C <sub>5</sub> _____ cm
	C <sub>6</sub> <u>001</u> cm		C <sub>6</sub> _____ cm
Damage Offset	D ± <u>000</u> cm	Damage Offset	D ± _____ cm

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

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

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

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

SUMMARY OF CRASHPC RESULTS USING DAMAGE

---

CRASH3 RECONSTRUCTION

	SPEED CHANGE (DAMAGE)
VEHICLE #1	
TOTAL	26 KPH ( 16 MPH)
LONGITUDINAL	-24 KPH ( -15 MPH)
LATITUDINAL	9 KPH ( 5 MPH)
PDOF ANGLE	-20 DEGREES
ENERGY DISSIPATED =	39458 JOULES ( 29099 FT-LB)

VEHICLE #2	
TOTAL	0 KPH ( 0 MPH)
LONGITUDINAL	0 KPH ( 0 MPH)
LATITUDINAL	0 KPH ( 0 MPH)
PDOF ANGLE	0 DEGREES
ENERGY DISSIPATED =	0 JOULES ( 0 FT-LB)

DAMAGE DATA

-----

	VEHICLE #1	VEHICLE #2
SIZE CATEGORY	3	11
STIFFNESS CATEGORY	9	0
VEHICLE WEIGHT	1399 KGS ( 3084 LBS)	***** KGS (2204586 LBS) *
CDC	11FDEW7	BARRIER
PDOF ANGLE	-20 DEGREES	0 DEGREES *
CRUSH LENGTH	165 CM. ( 65 IN.)	0 CM. ( 0 IN.) *
C1	33 CM. ( 13 IN.)	0 CM. ( 0 IN.) *
C2	20 CM. ( 8 IN.)	0 CM. ( 0 IN.) *
C3	17 CM. ( 7 IN.)	0 CM. ( 0 IN.) *
C4	14 CM. ( 6 IN.)	0 CM. ( 0 IN.) *
C5	3 CM. ( 1 IN.)	0 CM. ( 0 IN.) *
C6	1 CM. ( 0 IN.)	0 CM. ( 0 IN.) *
D	0 CM. ( 0 IN.)	0 CM. ( 0 IN.) *
D'	-29 CM. ( -11 IN.)	0 CM. ( 0 IN.) *

(\* INDICATES DEFAULT VALUE)

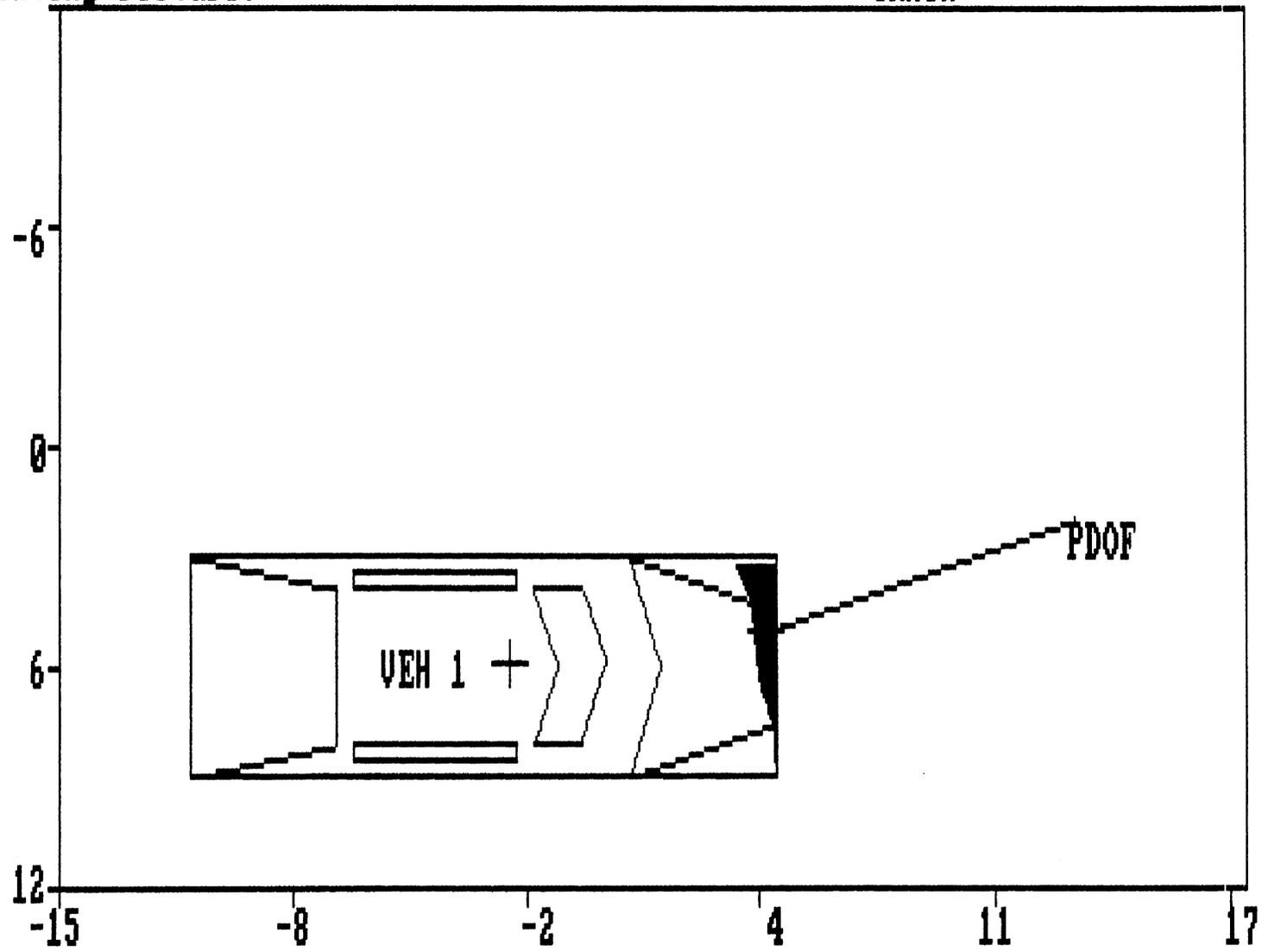
DIMENSIONS AND INERTIAL PROPERTIES

-----

	VEHICLE #1	VEHICLE #2
CG TO FRONT AXLE	130 CM. ( 51 IN.)	127 CM. ( 50 IN.)
CG TO REAR AXLE	141 CM. ( 56 IN.)	127 CM. ( 50 IN.)
TRACK	150 CM. ( 59 IN.)	127 CM. ( 50 IN.)
CG TO FRONT OF VEH	228 CM. ( 90 IN.)	127 CM. ( 50 IN.)
CG TO REAR OF VEH	-270 CM. (-106 IN.)	-127 CM. ( -50 IN.)
CG TO SIDE OF VEH	92 CM. ( 36 IN.)	127 CM. ( 50 IN.)
MOMENT OF INERTIA	12091 KGS ( 26656 LBS)	***** KGS (***** LBS)
VEHICLE MASS	4 KGS ( 8 LBS)	2600 KGS ( 5732 LBS)

Printing Picture:

CRASH



DAMAGE DESCRIPTION

final

72048B00000011 [REDACTED] 958.0400000000000422050010006 [REDACTED] 95 [REDACTED] 95 [REDACTED] 95 [REDACTED] 95001837000  
00200000000367413 0506  
72048B00010012 [REDACTED] 958.0410000000000101F0203E  
72048B00020012 [REDACTED] 958.0410000000000101R0302R  
72048B00030012 [REDACTED] 958.0410000000000101T3100N  
72048B00040012 [REDACTED] 958.0410000000000101U0403F  
72048B00050012 [REDACTED] 958.0410000000000403L79000  
72048B00060012 [REDACTED] 958.0410000000000403N3300N  
72048B01000021 B.04 000000000843504204JN1HT11S7ET [REDACTED] 01999089197006060890  
1312213000991551991232  
72048B01000022 B.04 000000000103030001060000407103220005025000006999 999 99  
99999999099982  
72048B01000031 B.04 00000000040499999999033199999999  
99899924714201000301040909001000  
72048B01000041 B.04 00000000098223202505012222202122221012161160611111101  
72048B01000042 B.04 000000000979777  
210000021910010  
72048B01010051 B.04 000000000261180084111919990540000100000010000000000 00  
000000000004011699900000000000041000620196000025011011  
72048B01010161 B.04 0000000001140212685513100  
72048B01010261 B.04 0000000001140212685513100  
72048B01010361 B.04 0000000001140688415513100  
72048B01010461 B.04 0000000001140688425513100  
72048B01010561 B.04 0000000001441406315513100  
72048B01010661 B.04 0000000001450220215513100  
72048B01010761 B.04 0000000001541824315513100  
72048B01010861 B.04 0000000001650206365513100  
72048B01010961 B.04 0000000001752804315513100  
72048B01011061 B.04 0000000001753204315513100  
72048B01011161 B.04 0000000001753000215513100  
72048B01011261 B.04 0000000001150206485513100  
72048B01011361 B.04 0000000001150404325513100  
72048B01011461 B.04 0000000001150402265513100  
72048B01011561 B.04 0000000001250610215513100  
72048B01011661 B.04 0000000001250610225513100  
72048B01011761 B.04 0000000001890202116021300  
72048B01011861 B.04 0000000001290202106979799  
72048B01011961 B.04 0000000001490202115512100  
72048B01012061 B.04 0000000001590202115512100  
72048B01012161 B.04 0000000001890202135513100  
72048B01012261 B.04 0000000001790202135513100  
72048B01012361 B.04 0000000001297402115513100  
72048B01012461 B.04 0000000001297402115513100  
72048B01012561 B.04 0000000001290602125513100

72048B01020051 8.04 0000000003019999992139000004400001000000100000000000 00  
00000000000404169990000000000003329999000000097979971  
72048B01030051 8.04 0000000009919999992219199905300000000000100000000000 00  
00000000000203110190000000000041000620199000097979971  
72048B02000021 8.04 000000000932102004163WH54T3PD30646900999089099006043690  
1312213000990153011132  
72048B02000022 8.04 000000000102003001529990000000000907006000000999 999 99  
99999999099990  
72048B03000021 8.04 0000000009412018031ZVLT20A2R513210300999089099006049390  
1314213000990162991198  
72048B03000022 8.04 000000000102004901229990000000000025005500000999 999 99  
99999999099990  
72048B04000021 8.04 0000000009037032041H6CB756XLA [REDACTED] 1999089099006065790  
1314213000990162991198  
72048B04000022 8.04 000000000102021001240000000000000025005000006999 999 99  
99999999002603  
72048B04000031 8.04 00000000040111FDEW06057909LZEW02165033020017014003001  
000 16515327214801014201040101001000  
72048B04000041 8.04 00000000012311100000012222222122221313611111191111111  
72048B04000042 8.04 000000000113252111552  
210000004710020  
72048B04010051 8.04 000000000451999999111900000930000011111510000000000 00  
000000000003011523100000000000033124990000000009032191  
72048B04010161 8.04 0000000002140636525131101  
72048B04010261 8.04 0000000002140606325131101  
72048B04010361 8.04 0000000002140684325131101  
72048B04010461 8.04 0000000002150202385131101  
72048B04010561 8.04 0000000002150404325131101  
72048B04010661 8.04 0000000002160822505131101  
72048B04010761 8.04 0000000002150404355131101  
72048B04010861 8.04 0000000002251204325131101  
72048B04010961 8.04 0000000002250604125131101  
72048B04020051 8.04 000000000371999999213900000930000011111510000000000 00  
000000000003011623100000000000020000990000000097979971



INTERIOR VEHICLE Vehicle: 1

11

INTRA ERRORS

OCC0531 2 \*\*\*\*\* THIS CASE SHOWS A DOOR OR HATCH OR GATE OPENING \*\*\*\*\*  
CC0532 \*\*\*\*\* CHECK YOUR DATA AND IF CORRECT, NOTIFY YOUR ZONE \*\*\*\*\*  
CC0533 DOOR LEFT FRONT IV05 equals 2 or IV06 equals 2 or IV07 equals 2  
CC0534 or IV08 equals 2 or IV09 equals 2.

CC0551 2 \*\*\*\*\* THIS CASE SHOWS CATASTROPHIC INTRUSION \*\*\*\*\*  
CC0552 \*\*\*\*\* CHECK YOUR DATA AND IF CORRECT, NOTIFY YOUR ZONE \*\*\*\*\*  
CC0553 MAGNITUDE INTRUSION IV49(n) equals 7.

0

EXTERIOR VEHICLE Vehicle: 4

11

INTRA ERRORS

OEE1211 2 \*\*\*\*\* THIS IS A SPECIAL INTEREST CASE FOR NHTSA \*\*\*\*\*  
EE1212 \*\*\*\*\* THIS CASE SHOWS A VEHICLE FIRE. \*\*\*\*\*  
EE1213 FIRE OCCURRENCE EV33 equals 1 or 2.

0

INTERIOR VEHICLE Vehicle: 4

11

INTRA ERRORS

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

011

INTER ERRORS

OAG0681 2 If VEHICLE NUMBER AC13(n) = VEHICLE NUMBER GV03(p) and VEHICLE  
AG0682 CLASS AC14(n) = 01-49 and DAMAGE AREA AC15(n) = F and OBJECT  
AG0683 CONTACTED AC16(n) = VEHICLE NUMBER GV03(q) and  
AG0684 CONTACTED CLASS AC17(n) = 01-49 and CONTACTED AREA AC18(n) = B  
AG0685 and REAR OVER/UNDERRIDE GV52(q) does not = 0, then FRONT  
AG0686 OVER/UNDERRIDE GV51(p) should not = 0. GV=01

01

PSU72  
CASE 048B  
CURRENT VERSION: 8.04

ERROR SUMMARY SCREEN

95

FORM NAME	NUMBER OF DOLLAR SIGNS	NUMBER OF LEVEL 1 ERRORS	NUMBER OF LEVEL 2 ERRORS	VERSION NUMBER CONSISTENT
Accident	0	0	0	Y
General Vehicle	0	0	0	Y
Vehicle Exterior	0	0	1	Y
Vehicle Interior	0	0	3	Y
Occupant Assessment	0	0	0	Y
Occupant Injury	0	0	0	Y
Total Inter Errors		0	1	
Total Case Errors	0	0	5	

0







PSU 72-048B (1995) #1



PSU 72-048B (1995) #2



PSU 72-048B (1995) #3



PSU 72-048B (1995) #4



PSU 72-048B (1995) #5



PSU 72-048B (1995) #6



PSU 72-048B (1995) #7



PSU 72-048B (1995) #8



PSU 72-048B (1995) #9



PSU 72-048B (1995) #10



**PSU 72-048B (1995) #11**



PSU 72-0488 (1995) #12



PSU 72-0488 (1995) #13



PSU 72-0488 (1995) #14



PSU 72-048B (1995) #15



**PSU 72-048B (1995) #16**  
**Best Available**



**PSU 72-0488 (1995) #17**  
**Best Available**



**PSU 72-048B (1995) #18**  
**Best Available**



PSU 72-048B (1995) #19



PSU 72-046B (1995) #20



**PSU 72-048B (1995) #21**  
**Best Available**



**PSU 72-048B (1995) #22**



PSU 72-046B (1995) #23



PSU 72-048B (1995) #24



**PSU 72-048B (1995) #25**  
**Best Available**



PSU 72-048B (1995) #26



**PSU 72-0486 (1995) #27**



PSU 72-048B (1995) #28



**PSU 72-048B (1995) #29**  
**Best Available**



**PSU 72-048B (1995) #30**  
**Best Available**



**PSU 72-048B (1995) #31**  
**Best Available**



**PSU 72-048B (1995) #32**



**PSU 72-046B (1995) #33**



PSU 72-048B (1995) #34



**PSU 72-048B (1995) #35**



**PSU 72-048B (1995) #36**



**PSU 72-048B (1995) #37**



PSU 72-048B (1995) #38



PSU 72-048B (1995) #39



**PSU 72-048B (1995) #40**



PSU 72-048B (1995) #41



**PSU 72-048B (1995) #42**



**PSU 72-048B (1995) #43  
Best Available**



**PSU 72-048B (1995) #44**  
**Best Available**



PSU 72-048B (1995) #45



**PSU 72-048B (1995) #46**



**PSU 72-048B (1995) #47**



**PSU 72-048B (1995) #48**



**PSU 72-048B (1995) #49**



**FSU 72-048B (1995) #50**



**PSU 72-048B (1995) #51**



PSU 72-048B (1995) #52



**PSU 72-048B (1995) #53**  
**Best Available**



**PSU 72-048B (1995) #54**  
**Best Available**



**PSU 72-048B (1995) #55**  
**Best Available**



**PSU 72-048B (1995) #56  
Best Available**



**PSU 72-048B (1995) #57**  
**Best Available**



PSU 72-048B (1995) #58



**PSU 72-048B (1995) #59**



**PSU 72-048B (1995) #60**  
**Best Available**



**PSU 72-048B (1995) #61**  
**Best Available**



**PSU 72-048B (1995) #62**  
**Best Available**



**PSU 72-048B (1995) #63  
Best Available**



**PSU 72-048B (1995) #64  
Best Available**



**PSU 72-048B (1995) #65**  
**Best Available**



**PSU 72-048B (1995) #66**  
**Best Available**



**PSU 72-048B (1995) #67**  
**Best Available**



**PSU 72-048B (1985) #68**  
**Best Available**



**PSU 72-048B (1995) #69  
Best Available**



PSU 72-048B (1995) #70



**PSU 72-048B (1995) #71**  
**Best Available**



**PSU 72-048B (1995) # 72**  
**Best Available**



**PSU 72-046B (1995) #73**



**PSU 72-048B (1995) #74**



**PSU 72-048B (1995) #75**



PSU 72-048B (1995) #76



**PSU 72-048B (1995) #77**



PSU 72-048B (1995) #78



**PSU 72-046B (1995) #79**  
**Best Available**



**PSU 72-048B (1995) #80**  
**Best Available**



**PSU 72-046B (1995) #81**  
**Best Available**



**PSU 72-048B (1995) #82**  
**Best Available**



**PSU 72-048B (1995) #83**



**PSU 72-048B (1995) #64**  
**Best Available**



**PSU 72-048B (1995) #85**  
**Best Available**



**PSU 72-046B (1995) #86**  
**Best Available**



PSU 72-048B (1995) #87



PSU 72-048B (1995) #88



**PSU 72-048B (1995) #89**



**PSU 72-048B (1995) #90  
Best Available**



**PSU 72-048B (1995) #91**  
**Best Available**



PSU 72-046B (1995) #92



PSU 72-048B (1995) #93



**PSU 72-048B (1995) #94**  
**Best Available**



**PSU 72-048B (1995) #95**



**PSU 72-046B (1995) #96**  
**Best Available**



**PSU 72-048B (1995) #97**  
**Best Available**



**PSU 72-0486 (1995) #98**



**PSU 72-048B (1995) #99**  
**Best Available**



**PSU 72-0488 (1995) #100**



**PSU 72-048B (1995) #101**  
**Best Available**



**PSU 72-048B (1995) #102**  
**Best Available**



**PSU 72-048B (1995) #103**



PSU 72-048B (1995) #104



**PSU 72-048B (1995) #105**  
**Best Available**



**PSU 72-048B (1995) #106**  
**Best Available**



**PSU 72-046B (1995) #107**  
**Best Available**



**PSU 72-048B (1995) #108**  
**Best Available**



**PSU 72-048B (1995) #109**  
**Best Available**



**PSU 72-048B (1995) #110**  
**Best Available**



**PSU 72-048B (1995) #111**  
**Best Available**



**PSU 72-048B (1995) #112**  
**Best Available**



**PSU 72-048B (1995) #113**  
**Best Available**



**PSU 72-046B (1995) #114**  
**Best Available**



**PSU 72-048B (1995) #115**  
**Best Available**



PSU 72-048B (1995) #118



**PSU 72-048B (1995) #117**  
**Best Available**



**PSU 72-048B (1995) #118**  
**Best Available**



**PSU 72-048B (1995) #119**  
**Best Available**



**PSU 72-046B (1995) #120**  
**Best Available**



**PSU 72-046B (1995) #121**  
**Best Available**



**PSU 72-048B (1995) #122**  
**Best Available**



PSU 72-048B (1995) #123



**PSU 72-0486 (1995) #124**  
**Best Available**



**PSU 72-048B (1995) #125**  
**Best Available**



**PSU 72-048B (1995) #126**  
**Best Available**



**PSU 72-048B (1995) #127**



**PSU 72-048B (1995) #128**



**PSU 72-046B (1995) #129**  
**Best Available**



**PSU 72-048B (1995) #130**  
**Best Available**



**PSU 72-048B (1995) #131**  
**Best Available**



**PSU 72-046B (1995) #132**  
**Best Available**



**PSU 72-048B (1995) #133**  
**Best Available**



PSU 72-048B (1995) #134



**PSU 72-048B (1995) #135**  
**Best Available**



**PSU 72-048B (1995) #136**  
**Best Available**



**PSU 72-048B (1995) #137**  
**Best Available**



**PSU 72-048B (1995) #138**  
**Best Available**



PSU 72-048B (1995) #139



PSU 72-048B (1995) #140



**PSU 72-048B (1995) #141**



PSU 72-048B (1995) #142



PSU 72-048B (1995) #143



PSJ 72-048B (1995) #144



**PSU 72-048B (1995) #145**  
**Best Available**



PSU 72-048B (1995) #148  
Best Available



**PSU 72-048B (1995) #147**  
**Best Available**



**PSU 72-048B (1995) #148**  
**Best Available**



**PSU 72-048B (1995) #149**  
**Best Available**



PSU 72-048B (1995) #150



PSU 72-0488 (1995) #151



**PSU 72-048B (1995) #152**



PSU 72-048B (1995) #153



**PSU 72-048B (1995) #154**  
**Best Available**