



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

U.S. Department
of Transportation

**National Highway
Traffic Safety
Administration**

Dear Crash Data Researchers/Users:

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

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

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

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



CASE SUMMARY

PSU 81 CASE NO. 038K TYPE OF ACCIDENT Car/Lt. Truck - Turn into Path

A. DESCRIPTION OF THE ACCIDENT SEQUENCE AND ACCIDENT PECULIARITIES

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

Vehicle #2 was northbound in the inside lane of a two way, four lane, undivided roadway. Vehicle #1 was westbound exiting a parking lot to turn southbound. As vehicle #1 crossed the northbound lanes, vehicle #2 struck the left side of vehicle #1. On impact vehicle #1 rotated CCW to a final rest facing southbound in the inside southbound lane. Vehicle #2 continued northbound for a short distance, then stopped. Both vehicles were towed due to damage.

B. VEHICLE PROFILE(S)

Vehicle No.	Class of Vehicle	Year/Make/Model	Most Severe Damage Based on Vehicle Inspection		Component Failure
			Damage Plane	Severity Description	
1	Intermediate	1991 Ford Taurus 4 door	Left	Severe	None
2	Pickup	1983 Ford F-250	Front	Severe	None

DO NOT SANITIZE THIS FORM

C. PERSON PROFILE(S)

Vehicle No.	Person Role	Seat Position	Restraint Use	Most Severe Injury (TO BE COMPLETED BY ZONE CENTER)			
				Body Region	Injury Type	AIS	Injury Source
1	Driver	Front Left	Lap&Shoulder Air Bag	<i>ribs</i>	<i>fractured</i>	<i>5</i>	<i>④ FRONT DOOR</i>
1	Passenger	Front Right	Lap&Shoulder	<i>facial</i>	<i>abrasions</i>	<i>1</i>	<i>OTHER OCCUPANT (DRIVER)</i>
2	Driver	Front Left	Lap&Shoulder	-----	Not Injured	-----	-----
2	Passenger	Front Right	Lap&Shoulder	"	"		
2	Passenger			"	"		

Body Region

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

Brain

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

Injury Type

Abrasion
Amputation
Avulsion
Burn
Concussion
Contusion
Crush
Detachment, separation

Dislocation

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

Abbreviated Injury Scale

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

DO NOT SANITIZE THIS FORM



ACCIDENT COLLISION DIAGRAM

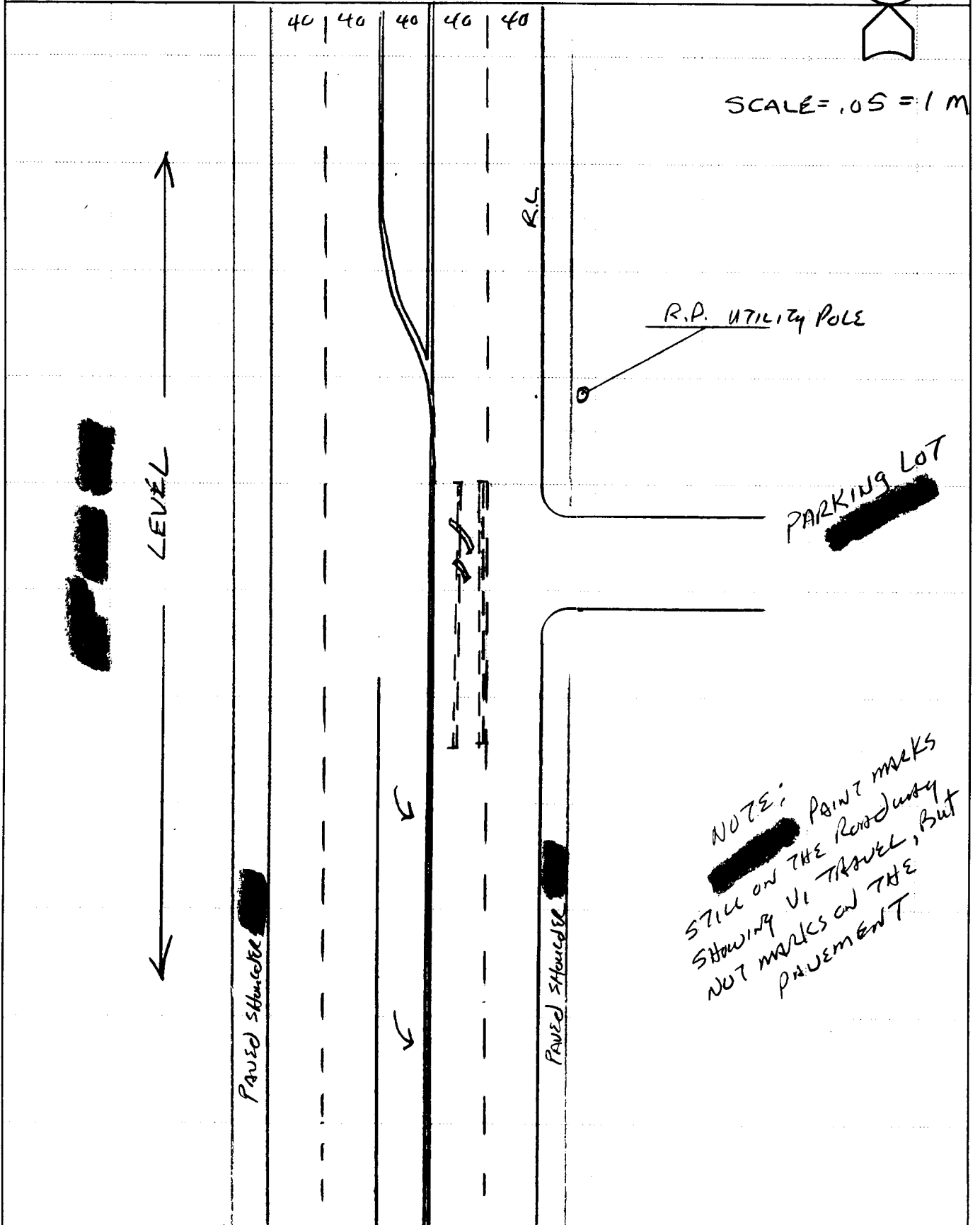
PSU No. 81

Case Number - Stratum 038K

Indicate
North



SCALE = .05 = 1 M





ACCIDENT COLLISION DIAGRAM

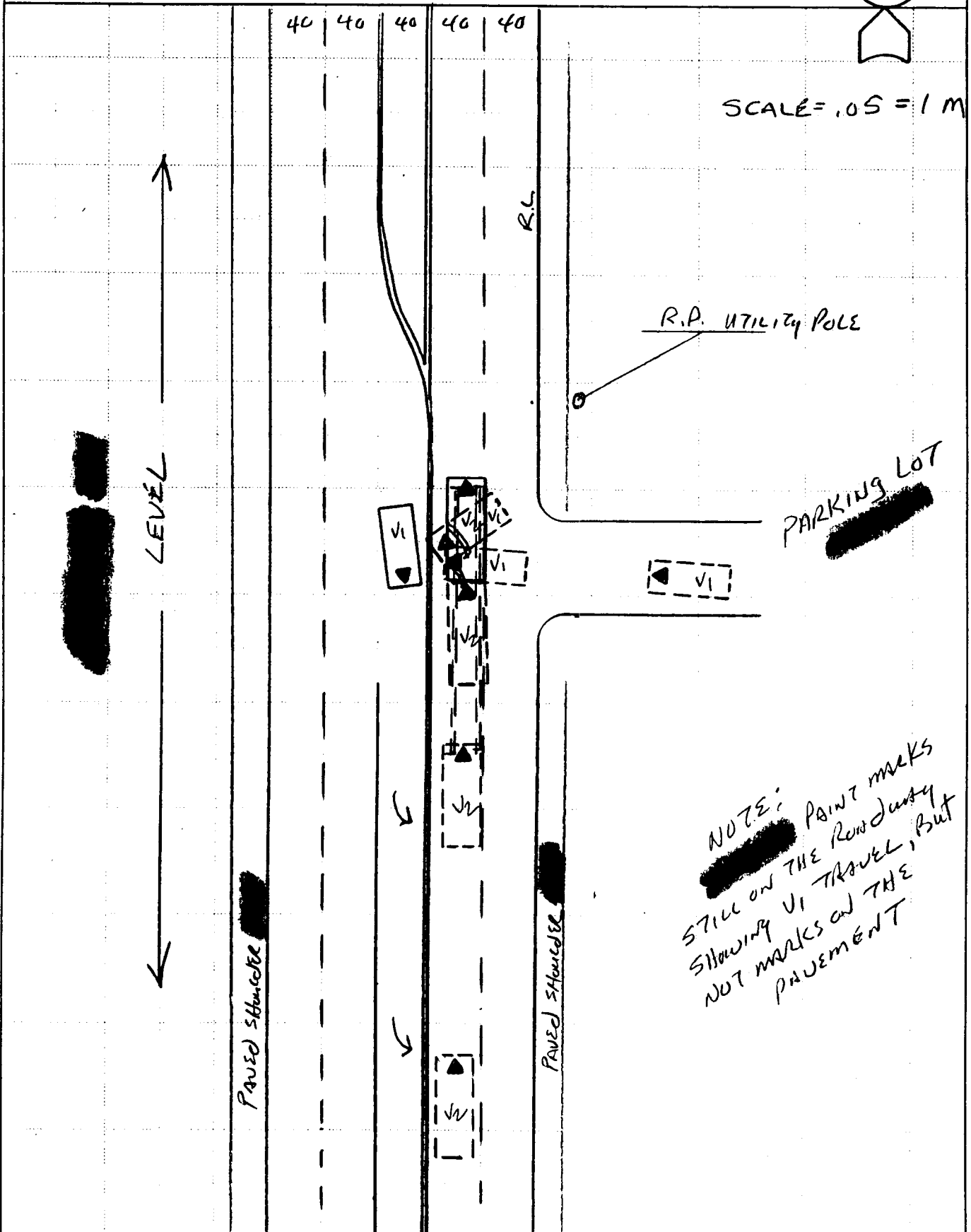
PSU No. 81

Case Number-Stratum 038K

Indicate
North



SCALE = .05 = 1 M





ACCIDENT COLLISION MEASUREMENT TABLE

Primary Sampling Unit Number 81

Case Number—Stratum 038K

ACCIDENT COLLISION DIAGRAM		CRASH DATA
<p>LEVEL I PHYSICAL EVIDENCE ABSENT</p> <p>To be accomplished when there is no physical evidence present at the scene:</p> <ul style="list-style-type: none"> • approximate vehicle orientation at impact and final rest • applicable road/roadway delineation (e.g., curbs/edge lines, lane markings, median markings, pavement markings, etc.) • applicable traffic controls (e.g., speed limit) • north arrow placed on diagram • sketch required 	<p>LEVEL II (Cont'd) physical evidence is present:</p> <ul style="list-style-type: none"> • document reference point and reference line relative to physical features present at the scene • scale documentation of all accident induced physical evidence • scaled documentation of all roadside objects contacted • roadway surface type and condition of applicable roadways • grade measurements for all applicable roadways and at location of rollover initiation • scaled representations of the vehicle(s) at pre-impact, impact, and final rest based upon either: <ul style="list-style-type: none"> a) physical evidence, or b) reconstructed accident dynamics 	<p>VEH. #1 VEH. #2 VEH. #3</p> <p>Heading Angle <u>270° 360°</u></p> <p>Surface Type <u>-Bituminous-</u></p> <p>Surface Condition <u>-Dry-</u></p> <p>Grade (v/h) Measurement (between impact and final rest) <u>-LEVEL-</u></p> <p>Grade (v/h) Measurement (at location of rollover initiation) <u>_____</u></p>
<p>LEVEL II PHYSICAL EVIDENCE PRESENT</p> <p>In addition to the level I tasks noted above, the following must be accomplished when</p>		

Reference Point: UTILITY POLE EAST OF THE RL Reference line: EAST FOG LINE

Item	Distance and Direction from Reference Point	Distance and Direction from Reference Line
RP	94 m N of THE DRIVEWAY	30 E
RL	30 W	∅
VEH #2 SKID MARKS		
BEGIN LF	267 S	63 W
" RF	264 S	45 W
END LF	63 S	60 W
" RF	63 S	45 W
VEH #1 SKIDS FROM IMPACT		
ROTATION BEGIN LF	136 S	56 W
" RF	118 S	51 W
END LF	127 S	61 W
" RF	97 S	63 W



ACCIDENT FORM

1. Primary Sampling Unit Number 81

2. Case Number - Stratum 038 K

SPECIAL STUDIES - INDICATORS

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

6. ___ SS14 Fatal AOPS 0

7. ___ SS15 Administrative Use 0

8. ___ SS16 _____ 0

9. ___ SS17 _____ 0

10. ___ SS18 _____ 0

IDENTIFICATION

3. Number of General Vehicle Forms Submitted 02

4. Date of Accident (Month,Day,Year) / / 93

5. Time of Accident 1915

Code reported military time of accident.

NOTE: Midnight = 2400
Unknown = 9999

NUMBER OF EVENTS

11. Number of Recorded Events in This Accident 01

Code the number of events which occurred in this accident.

ACCIDENT EVENTS

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

Accident Event Sequence Number	Vehicle Number	Class Of Vehicle	General Area of Damage	Vehicle Number or Object Contacted	Class Of Vehicle	General Area of Damage
12. <u>01</u>	13. <u>01</u>	14. <u>03</u>	15. <u>L</u>	16. <u>02</u>	17. <u>15</u>	18. <u>F</u>
19. <u>02</u>	20. _____	21. _____	22. _____	23. _____	24. _____	25. _____
26. <u>03</u>	27. _____	28. _____	29. _____	30. _____	31. _____	32. _____
33. <u>04</u>	34. _____	35. _____	36. _____	37. _____	38. _____	39. _____
40. <u>05</u>	41. _____	42. _____	43. _____	44. _____	45. _____	46. _____

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

CODES FOR CLASS OF VEHICLE

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

CODES FOR GENERAL AREA OF DAMAGE (GAD)

CDS APPLICABLE AND OTHER VEHICLES

TDC APPLICABLE VEHICLES

- | | |
|--|--|
| <ul style="list-style-type: none"> (O) Not a motor vehicle (N) Noncollision (F) Front (R) Right side (L) Left side (B) Back (T) Top (U) Undercarriage (9) Unknown | <ul style="list-style-type: none"> (O) Not a motor vehicle (N) Noncollision (F) Front (R) Right side (L) Left side (B) Back of unit with cargo area (rear of trailer or straight truck) (D) Back (rear of tractor) (C) Rear of cab (V) Front of cargo area (T) Top (U) Undercarriage (9) Unknown |
|--|--|

CODES FOR VEHICLE NUMBER OR OBJECT CONTACTED

(01-30) — Vehicle Number

Noncollision

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

- (35) Noncollision injury
- (38) Other noncollision (specify): _____

- (39) Noncollision — details unknown

Collision With Fixed Object

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

Nonbreakaway Pole or Post

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

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

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

Collision with Nonfixed Object

- (71) Motor vehicle not in-transport
- (72) Pedestrian
- (73) Cyclist or cycle
- (74) Other nonmotorist or conveyance
- (75) Vehicle occupant
- (76) Animal
- (77) Train
- (78) Trailer, disconnected in transport
- (88) Other nonfixed object (specify): _____

- (89) Unknown nonfixed object

- (98) Other event (specify): _____

- (99) Unknown event or object

OTHER DATA

56. Driver's Zip Code

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

57. Driver's Race/Ethnic Origin

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

58. Vehicle Special Use (This Trip)

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

ROLLOVER DATA

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

59. Rollover Initiation Type

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

60. Location of Rollover Initiation

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

61. Rollover Initiation Object Contacted

00

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

0

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

63. Direction of Initial Roll

0

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

PRECRASH DATA

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

10

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

CODES FOR ROLLOVER INITIATION OBJECT CONTACTED

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

Noncollision

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

Collision With Fixed Object

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

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

Nonbreakaway Pole or Post

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

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

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

-
- (69) Unknown fixed object

Collision with Nonfixed Object

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

-
- (89) Unknown nonfixed object

- (98) Other event (specify):

-
- (99) Unknown event or object

ORIGINAL SPECIFICATIONS WORK SHEET

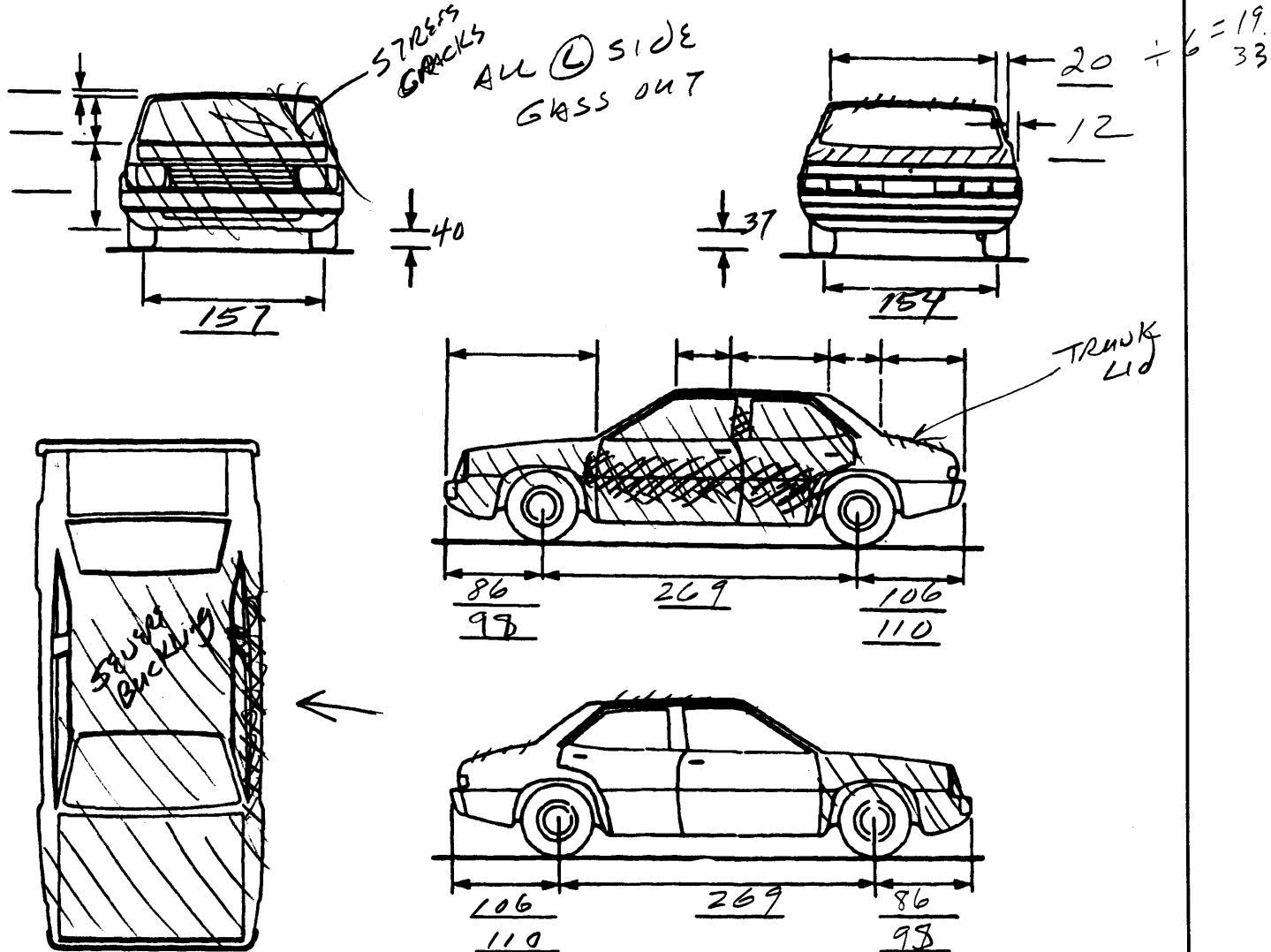
Wheelbase	___ <u>106.</u> ___	inches	x 2.54	=	___ <u>269</u> ___	cm
Overall Length	___ <u>188.4</u> ___	inches	x 2.54	=	___ <u>479</u> ___	cm
Maximum Width	___ <u>70.8</u> ___	inches	x 2.54	=	___ <u>180</u> ___	cm
Curb Weight	___ <u>3,049</u> ___	pounds	x .4536	=	___ <u>1,383</u> ___	kg
Average Track	___ ___ . ___	inches	x 2.54	=	___ <u>155</u> ___	cm
Front Overhang	___ ___ . ___	inches	x 2.54	=	___ <u>97</u> ___	cm
Rear Overhang	___ ___ . ___	inches	x 2.54	=	___ <u>110</u> ___	cm
Undeformed End Width	___ ___ . ___	inches	x 2.54	=	___ ___ . ___	cm
Engine Size: cyl./displ.	___ <u>V-6</u> ___	cc	x .001	=	___ <u>3.0</u> ___	L
	___ ___ . ___	CID	x .0164	=	___ . ___	L

61.6-157
 60.5-154

VEHICLE DAMAGE SKETCH

<p>TIRE—WHEEL DAMAGE</p> <p>a. Rotation physically restricted</p> <p>RF <u>Z</u> LF <u>Z</u> RR <u>Z</u> LR <u>Z</u></p> <p>b. Tire deflated</p> <p>RF <u>Z</u> LF <u>Z</u> RR <u>Z</u> LR <u>Z</u></p> <p>(1) Yes (2) No (8) NA (9) Unk.</p>	<p>ORIGINAL SPECIFICATIONS</p> <p>Wheelbase <u>269</u> cm Overall Length <u>479</u> cm Maximum Width <u>180</u> cm Curb Weight <u>1383</u> kg Average Track <u>155</u> cm Front Overhang <u>97</u> cm Rear Overhang <u>110</u> cm Undeformed End Width _____ cm Engine Size: cyl./displ. <u>V6 3.0</u> L</p>	<p>WHEEL STEER ANGLES (For locked front wheels or displaced rear axles only)</p> <p>RF ± _____ ° LF ± _____ ° RR ± _____ ° LR ± _____ °</p> <p>Within ± 5 degrees</p> <hr/> <p>DRIVE WHEELS</p> <p><input checked="" type="checkbox"/> FWD <input type="checkbox"/> RWD <input type="checkbox"/> 4WD</p> <hr/> <p>Approximate Cargo Weight <u>Ø</u> kg</p>
<p>TYPE OF TRANSMISSION</p> <p><input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic</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.



INTERIOR VEHICLE FORM

1. Primary Sampling Unit Number 81

2. Case Number - Stratum 038K

3. Vehicle Number 0L

INTEGRITY

4. Passenger Compartment Integrity 06

(00) No integrity loss

Yes, Integrity Was Lost Through

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

(99) Unknown

Door, Tailgate or Hatch Opening

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

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

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

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

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

Door, Tailgate or Hatch Came Open During Collision

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

(9) Unknown

GLAZING

Glazing Damage from Impact Forces

15. WS 2 16. LF 6 17. RF 0 18. LR 6 19. RR 0
20. BL 0 21. Roof 8 22. Other 0

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

Glazing Damage from Occupant Contact

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

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

If No Glazing Damage *And* No Occupant Contact or No Glazing, Then Code IV31 Through IV46 As 0

Type of Window/Windshield Glazing

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

- (0) No glazing contact and no damage, or no glazing
- (1) AS-1 - Laminated
- (2) AS-2 - Tempered
- (3) AS-3 - Tempered-tinted
- (4) AS-14 - Glass/Plastic
- (8) Other (specify):
- (9) Unknown

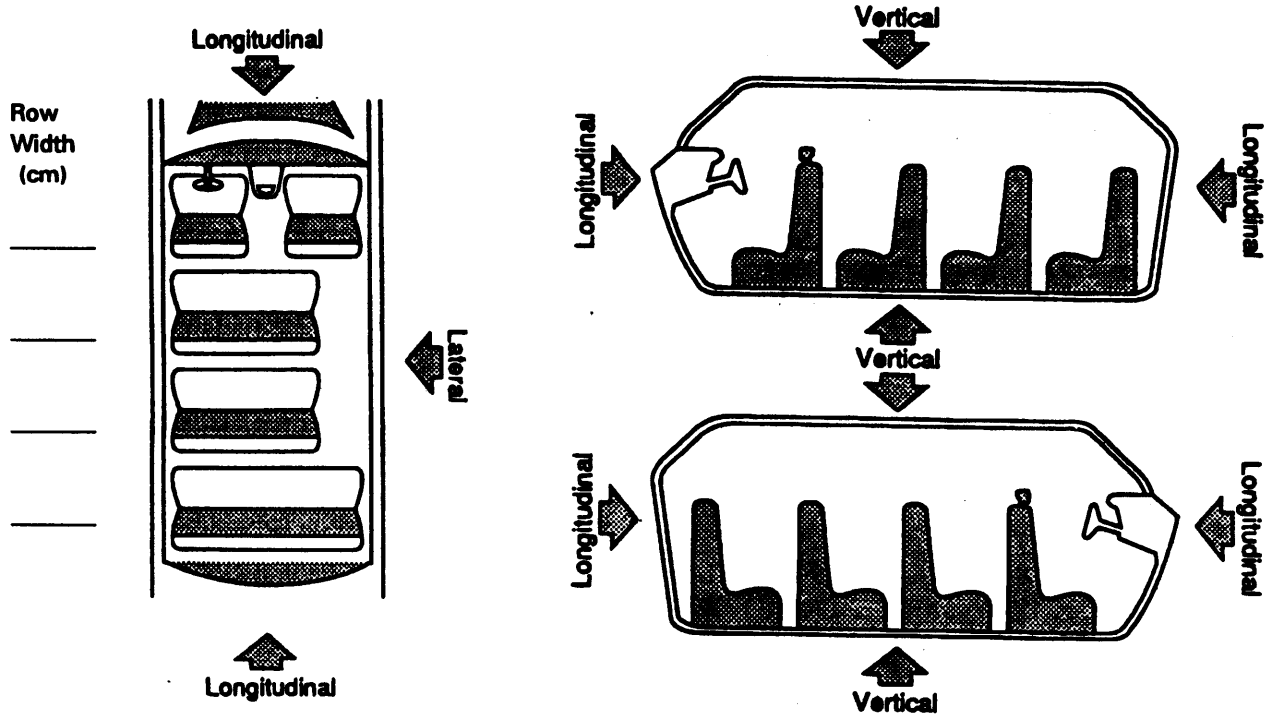
Window Precrash Glazing Status

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

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

INTRUSION WORKSHEET

Note: Sketch intruded areas



LOCATION OF INTRUSION	INTRUDED COMPONENT	(All Measurements Are In Centimeters)			DOMINANT CRUSH DIRECTION
		COMPARISON VALUE	INTRUDED VALUE	INTRUSION	
11	Door Panel	63	46	17	LAT
11	B pillar	68	32	36	"
11	Roof Rail SIDE RAIL	55	42	13	"
21	Door Panel	90	45	25	"
		-		=	
		-		=	
		-		=	
		-		=	
		-		=	
		-		=	
		-		=	
		-		=	
		-		=	
		-		=	
		-		=	

3
1
~~1~~
2

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>07</u>	49. <u>4</u>	50. <u>3</u>
2nd	51. <u>21</u>	52. <u>10</u>	53. <u>3</u>	54. <u>3</u>
3rd	55. <u>11</u>	56. <u>10</u>	57. <u>3</u>	58. <u>3</u>
4th	59. <u>11</u>	60. <u>13</u>	61. <u>2</u>	62. <u>3</u>
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) Door panel (side)
- (12) Roof (or convertible top)
- (13) Roof side rail
- (14) Windshield
- (15) Windshield header
- (16) Window frame
- (17) Floor pan (includes sill)
- (18) Backlight header
- (19) Front seat back
- (20) Second seat back
- (21) Third seat back
- (22) Fourth seat back
- (23) Fifth seat back
- (24) Seat cushion
- (25) Back door/panel (e.g., tailgate)
- (26) Other interior component (specify): _____

- (27) Side panel - forward of the A (A2)-pillar
- (28) Side panel - rear of the A (A2)-pillar

Exterior Components

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

LOCATION OF INTRUSION

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

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

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

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

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

- (99) Unknown

MAGNITUDE OF INTRUSION

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

DOMINANT CRUSH DIRECTION

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

STEERING RIM SPOKE DEFORMATION

(All Measurements Are in Centimeters)

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

	—		=	
--	---	--	---	--

	—		=	
--	---	--	---	--

	—		=	
--	---	--	---	--

	—		=	
--	---	--	---	--

--	--	--	--	--

STEERING COLUMN

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

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

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

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

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

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

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

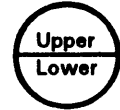
Quarter Sections

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



Half Sections

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



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

INSTRUMENT PANEL

94. Odometer Reading 319,000

_____ 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

19803 miles X 1.6093 = 31869 kilometers

Source: _____

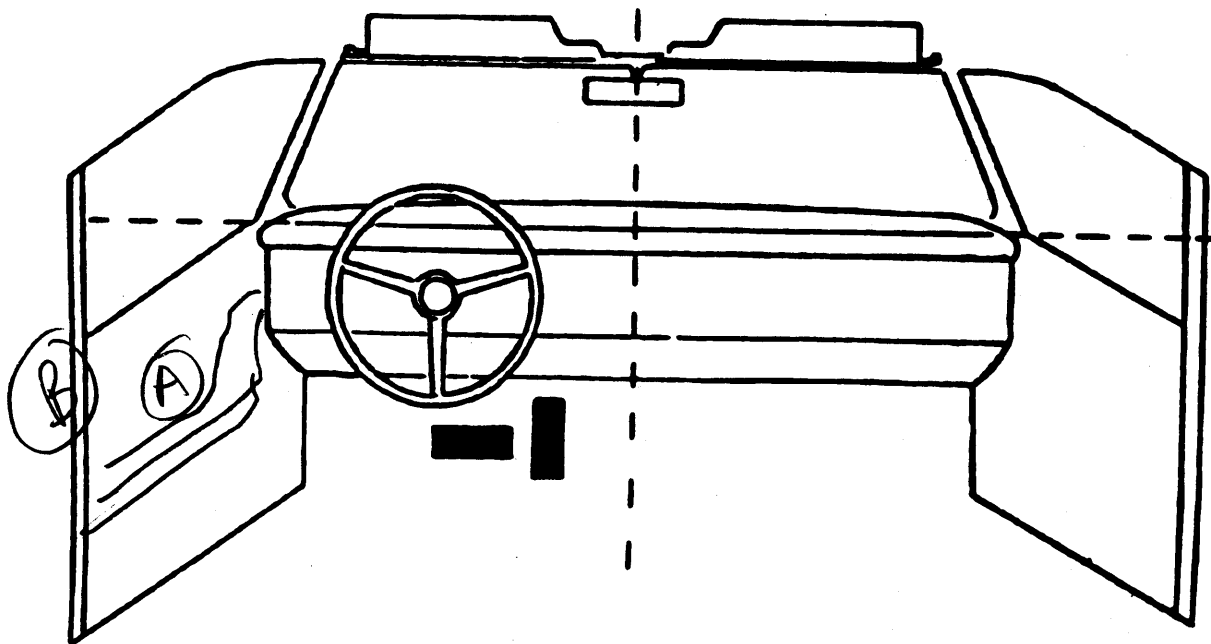
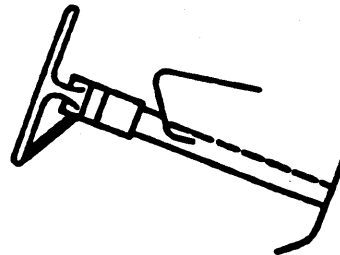
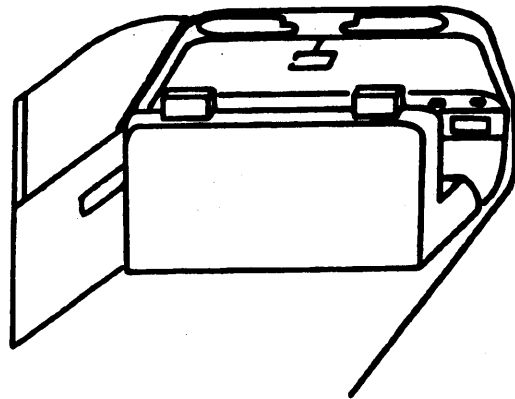
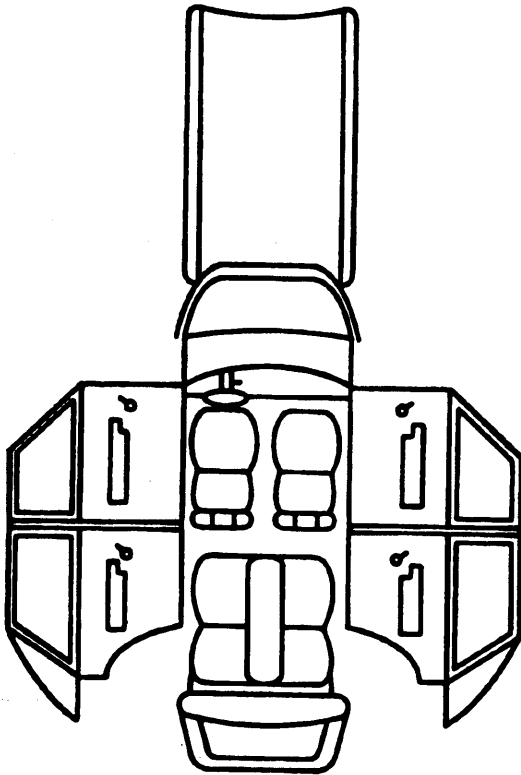
95. Instrument Panel Damage from Occupant Contact? 0
 (0) No
 (1) Yes
 (9) Unknown

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

97. Did Glove Compartment Door Open During Collision(s)? 0
 (0) No
 (1) Yes
 (8) Not present
 (9) Unknown

VEHICLE INTERIOR SKETCHES

Note area of ejection/entrapment



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

POINTS OF OCCUPANT CONTACT

Contact	Interior Component Contacted	Occupant No. If Known	Body Region If Known	Supporting Physical Evidence	Confidence Level of Contact Point
A	20	1	L-SIDE	} INTRUSION " "	2
B	23	1	L-SIDE		2
C					
D				NO PHYSICAL EVIDENCE	
E					
F					
G					
H					
I					
J					
K					
L					
M					
N					

CODES FOR INTERIOR COMPONENTS

FRONT

- (01) Windshield
- (02) Mirror
- (03) Sunvisor
- (04) Steering wheel rim
- (05) Steering wheel hub/spoke
- (06) Steering wheel (combination of codes 04 and 05)
- (07) Steering column, transmission selector lever, other attachment
- (08) Add on equipment (e.g., CB, tape deck, air conditioner)
- (09) Left instrument panel and below
- (10) Center instrument panel and below
- (11) Right instrument panel and below
- (12) Glove compartment door
- (13) Knee bolster
- (14) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, mirror, or steering assembly (driver side only)
- (15) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, or mirror (passenger side only)
- (16) Driver side air bag compartment cover
- (17) Passenger side air bag compartment cover
- (18) Windshield reinforced by exterior object (specify): _____
- (19) Other front object (specify): _____

- (23) Left B-pillar
- (24) Other left pillar (specify): _____
- (25) Left side window glass or frame
- (26) Left side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.
- (27) Other left side object (specify): _____
- (28) Left side window sill

RIGHT SIDE

- (30) Right side interior surface, excluding hardware or armrests
- (31) Right side hardware or armrest
- (32) Right A (A1/A2)-pillar
- (33) Right B-pillar
- (34) Other right pillar (specify): _____
- (35) Right side window glass or frame
- (36) Right side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B pillar, or roof side rail.
- (37) Other right side object (specify): _____
- (38) Right side window sill

INTERIOR

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

- (46) Other occupants (specify): _____
- (47) Interior loose objects
- (48) Child safety seat (specify): _____
- (49) Other interior object (specify): _____

ROOF

- (50) Front header
- (51) Rear header
- (52) Roof left side rail
- (53) Roof right side rail
- (54) Roof or convertible top

FLOOR

- (56) Floor (including toe pan)
- (57) Floor or console mounted transmission lever, including console
- (58) Parking brake handle
- (59) Foot controls including parking brake

REAR

- (60) Backlight (rear window)
- (61) Backlight storage rack, door, etc.
- (62) Other rear object (specify): _____

LEFT SIDE

- (20) Left side interior surface, excluding hardware or armrests
- (21) Left side hardware or armrest
- (22) Left A (A1/A2)-pillar

CONFIDENCE LEVEL OF CONTACT POINT

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

AUTOMATIC RESTRAINTS

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

AIR BAGS

		Left	Right
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

Air Bag System Deployment

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

Did Air Bag System Fail?

- (0) Not equipped/not available
- (1) No
- (2) Yes (specify): _____
- (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

MANUAL RESTRAINTS

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

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

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

		Left	Center	Right
FIRST	Availability	4	3	4
	Use	04	00	04
	Failure Modes	1	0	1
SECOND	Availability	4	3	4
	Use	00	00	00
	Failure Modes	0	0	0
THIRD	Availability			
	Use			
	Failure Modes			
OTHER	Availability			
	Use			
	Failure Modes			

Manual (Active) Belt System Availability

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

Integral Belt Partially Destroyed

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

(8) Other belt (specify): _____

(9) Unknown _____

Manual (Active) Belt System Use

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

(08) Other belt used (specify):

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

Manual (Active) Belt Failure Modes During Accident

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

CHILD SAFETY SEAT FIELD ASSESSMENT

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

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)

HEAD RESTRAINTS/SEAT EVALUATION

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

		Left	Center	Right
FIRST	Head Restraint Type/Damage	3	0	3
	Seat Type	06	06	06
	Seat Performance	6	1	1
	Seat Orientation	1	1	1
SECOND	Head Restraint Type/Damage	0	0	0
	Seat Type	03	03	03
	Seat Performance	1	1	1
	Seat Orientation	1	1	1
THIRD	Head Restraint Type/Damage			
	Seat Type			
	Seat Performance			
	Seat Orientation			
OTHER	Head Restraint Type/Damage			
	Seat Type			
	Seat Performance			
	Seat Orientation			

Head Restraint Type/Damage by Occupant at This Occupant Position

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

Seat Type (this Occupant Position)

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

Seat Performance (this Occupant Position)

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

Seat Orientation (this Occupant Position)

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

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

EJECTION/ENTRAPMENT DATA

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

EJECTION No [] Yes []

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

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

Ejection

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

Ejection Area

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

(7) Roof

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

(9) Unknown

Ejection Medium

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

(5) Integral structure

(8) Other medium (specify):

(9) Unknown

Medium Status (Immediately Prior to Impact)

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

ENTRAPMENT No [] Yes []

Describe entrapment mechanism: _____

Component(s): _____

(Note in vehicle interior diagram)

HEAD RESTRAINT AND SEAT EVALUATION

25. 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

26. Seat Type (this Occupant Position) 06

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

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

(99) Unknown

27. Seat Performance (this Occupant Position) 6

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

(7) Combination of above (specify):

(8) Other (specify):

(9) Unknown



OCCUPANT INJURY FORM

NATIONAL ACCIDENT SAMPLING SYSTEM
CRASHWORTHINESS DATA SYSTEM

1. Primary Sampling Unit Number <u>81</u>	3. Vehicle Number <u>01</u>
2. Case Number - Stratum <u>038K</u>	4. Occupant Number <u>01</u>

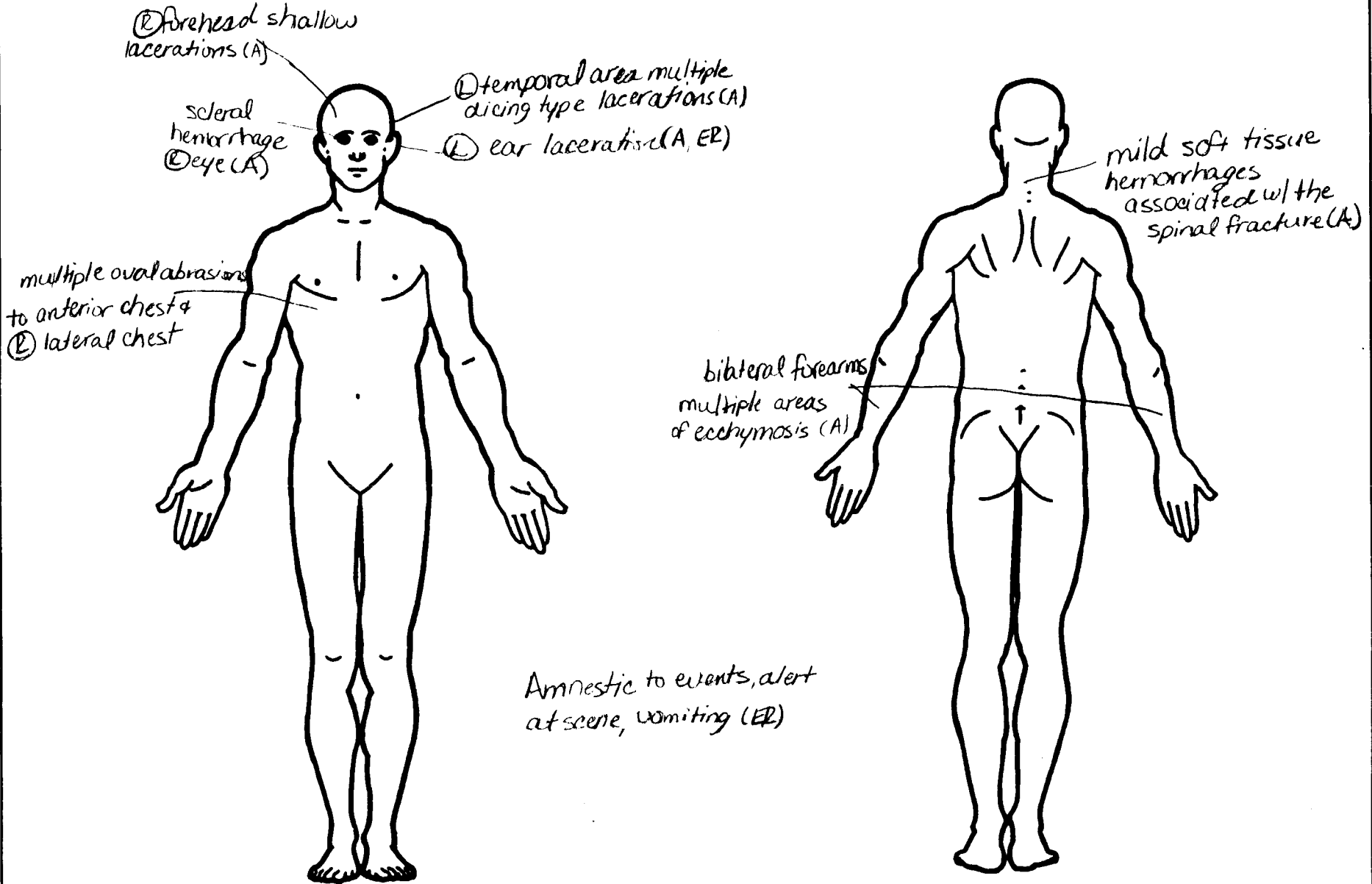
INJURY DATA

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.

	O.I.C.-A.I.S							Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion Number
	Source of Injury Data	Body Region	Type of Anatomic Structure	Specific Anatomic Structure	Level of Injury	A.I.S. Severity	Aspect				
1st	5. <u>1</u>	6. <u>7</u>	7. <u>9</u>	8. <u>04</u>	9. <u>02</u>	10. <u>1</u>	11. <u>2</u>	12. <u>20</u>	13. <u>2</u>	14. <u>1</u>	15. <u>03</u>
2nd	16. <u>1</u>	17. <u>2</u>	18. <u>9</u>	19. <u>06</u>	20. <u>02</u>	21. <u>1</u>	22. <u>7</u>	23. <u>91</u>	24. <u>2</u>	25. <u>3</u>	26. <u>00</u>
3rd	27. <u>1</u>	28. <u>1</u>	29. <u>9</u>	30. <u>06</u>	31. <u>02</u>	32. <u>1</u>	33. <u>2</u>	34. <u>91</u>	35. <u>1</u>	36. <u>3</u>	37. <u>00</u>
4th	38. <u>1</u>	39. <u>8</u>	40. <u>5</u>	41. <u>18</u>	42. <u>08</u>	43. <u>3</u>	44. <u>2</u>	45. <u>21</u>	46. <u>1</u>	47. <u>1</u>	48. <u>03</u>
5th	49. <u>1</u>	50. <u>4</u>	51. <u>9</u>	52. <u>02</u>	53. <u>02</u>	54. <u>1</u>	55. <u>1</u>	56. <u>41</u>	57. <u>2</u>	58. <u>1</u>	59. <u>00</u>
6th	60. <u>1</u>	61. <u>4</u>	62. <u>4</u>	63. <u>14</u>	64. <u>06</u>	65. <u>3</u>	66. <u>2</u>	67. <u>20</u>	68. <u>1</u>	69. <u>1</u>	70. <u>03</u>
7th	71. <u>1</u>	72. <u>4</u>	73. <u>5</u>	74. <u>02</u>	75. <u>42</u>	76. <u>5</u>	77. <u>3</u>	78. <u>20</u>	79. <u>1</u>	80. <u>1</u>	81. <u>03</u>
8th	82. <u>1</u>	83. <u>5</u>	84. <u>4</u>	85. <u>18</u>	86. <u>22</u>	87. <u>2</u>	88. <u>1</u>	89. <u>20</u>	90. <u>2</u>	91. <u>1</u>	92. <u>03</u>
9th	93. <u>1</u>	94. <u>5</u>	95. <u>4</u>	96. <u>42</u>	97. <u>22</u>	98. <u>2</u>	99. <u>2</u>	100. <u>20</u>	101. <u>2</u>	102. <u>1</u>	103. <u>03</u>
10th	104. <u>1</u>	105. <u>7</u>	106. <u>9</u>	107. <u>04</u>	108. <u>02</u>	109. <u>1</u>	110. <u>1</u>	111. <u>06</u>	112. <u>3</u>	113. <u>1</u>	114. <u>00</u>

OFFICIAL INJURY DATA — SOFT TISSUE INJURIES

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



SOURCE OF INJURY DATA

OFFICIAL

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

UNOFFICIAL

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

INJURY SOURCE

FRONT

- (01) Windshield
- (02) Mirror
- (03) Sunvisor
- (04) Steering wheel rim
- (05) Steering wheel hub/spoke
- (06) Steering wheel (combination of codes 04 and 05)
- (07) Steering column, transmission selector lever, other attachment
- (08) Add on equipment (e.g., CB, tape deck, air conditioner)
- (09) Left instrument panel and below
- (10) Center instrument panel and below
- (11) Right instrument panel and below
- (12) Glove compartment door
- (13) Knee bolster
- (14) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, mirror, or steering assembly (driver side only)
- (15) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, or mirror (passenger side only)
- (16) Driver side air bag compartment cover
- (17) Passenger side air bag compartment cover
- (18) Windshield reinforced by exterior object (specify): _____
- (19) Other front object (specify): _____

LEFT SIDE

- (20) Left side interior surface, excluding hardware or armrests
- (21) Left side hardware or armrest
- (22) Left A (A1/A2)-pillar
- (23) Left B-pillar
- (24) Other left pillar (specify): _____

- (25) Left side window glass or frame
- (26) Left side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.
- (27) Other left side object (specify): _____

- (28) Left side window sill

RIGHT SIDE

- (30) Right side interior surface, excluding hardware or armrests
- (31) Right side hardware or armrest
- (32) Right A (A1/A2)-pillar
- (33) Right B-pillar
- (34) Other right pillar (specify): _____

- (35) Right side window glass or frame
- (36) Right side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.
- (37) Other right side object (specify): _____

- (38) Right side window sill

INTERIOR

- (40) Seat, back support
- (41) Belt restraint webbing/buckle
- (42) Belt restraint B-pillar or door frame attachment point
- (43) Other restraint system component (specify): _____
- (44) Head restraint system
- (45) Air bag (use codes "16" and "17" for injuries sustained from air bag compartment covers)
- (46) Other occupants (specify): _____
- (47) Interior loose objects
- (48) Child safety seat (specify): _____
- (49) Other interior object (specify): _____

ROOF

- (50) Front header
- (51) Rear header
- (52) Roof left side rail
- (53) Roof right side rail
- (54) Roof or convertible top

FLOOR

- (56) Floor (including toe pan)
- (57) Floor or console mounted transmission lever, including console
- (58) Parking brake handle
- (59) Foot controls including parking brake

REAR

- (60) Backlight (rear window)

- (61) Backlight storage rack, door, etc.
- (62) Other rear object (specify): _____

EXTERIOR OF OCCUPANT'S VEHICLE

- (65) Hood
- (66) Outside hardware (e.g., outside mirror, antenna)
- (67) Other exterior surface or tires (specify): _____
- (68) Unknown exterior objects

EXTERIOR OF OTHER MOTOR VEHICLE

- (70) Front bumper
- (71) Hood edge
- (72) Other front of vehicle (specify): _____

- (73) Hood
- (74) Hood ornament
- (75) Windshield, roof rail, A-pillar
- (76) Side surface
- (77) Side mirrors
- (78) Other side protrusions (specify) _____

- (79) Rear surface
- (80) Undercarriage
- (81) Tires and wheels
- (82) Other exterior of other motor vehicle (specify): _____

- (83) Unknown exterior of other motor vehicle

OTHER VEHICLE OR OBJECT IN THE ENVIRONMENT

- (84) Ground
- (85) Other vehicle or object (specify) _____
- (86) Unknown vehicle or object

NONCONTACT INJURY

- (90) Fire in vehicle
- (91) Flying glass
- (92) Other noncontact injury source (specify): _____
- (93) Air bag exhaust gases
- (97) Injured, unknown source

INJURY SOURCE CONFIDENCE LEVEL

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

DIRECT/INDIRECT INJURY

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

OCCUPANT INJURY CLASSIFICATION

Body Region

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

Type of Anatomic Structure

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

Specific Anatomic Structure

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

Head - LOC

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

Spine

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

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

Level of Injury

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

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

Abbreviated Injury Scale

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

Aspect

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

OFFICIAL INJURY DATA — SKELETAL INJURIES

Restrained?

— No ?
 — Yes .

Blood Alcohol Level (mg/dl)

BAL = 0
 (A)

Glasgow Coma Scale Score

GCSS = ?

Units of Blood Given

Units = 0

Arterial Blood Gases

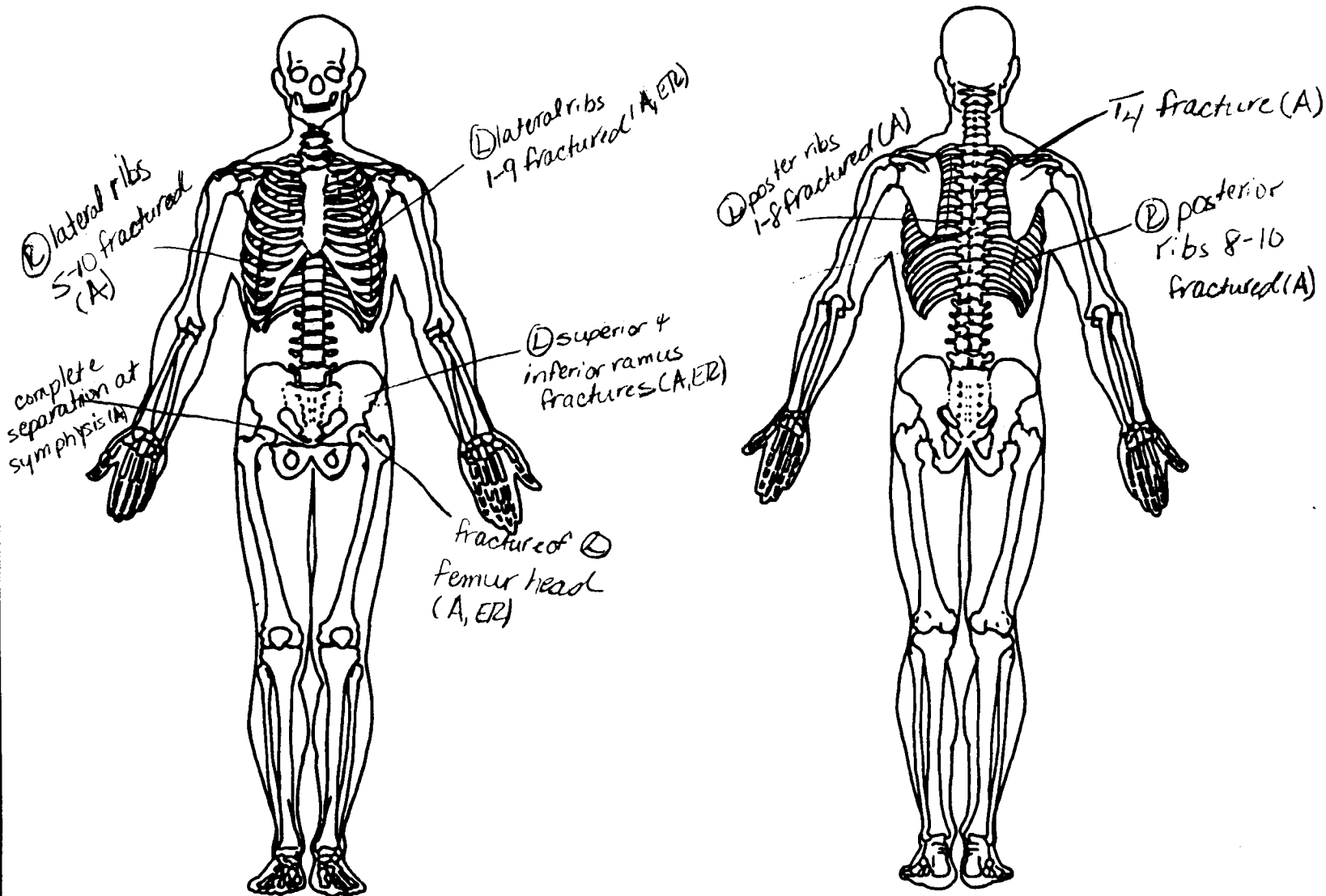
pH = 7.25

PO₂ = 194

PCO₂ = 38

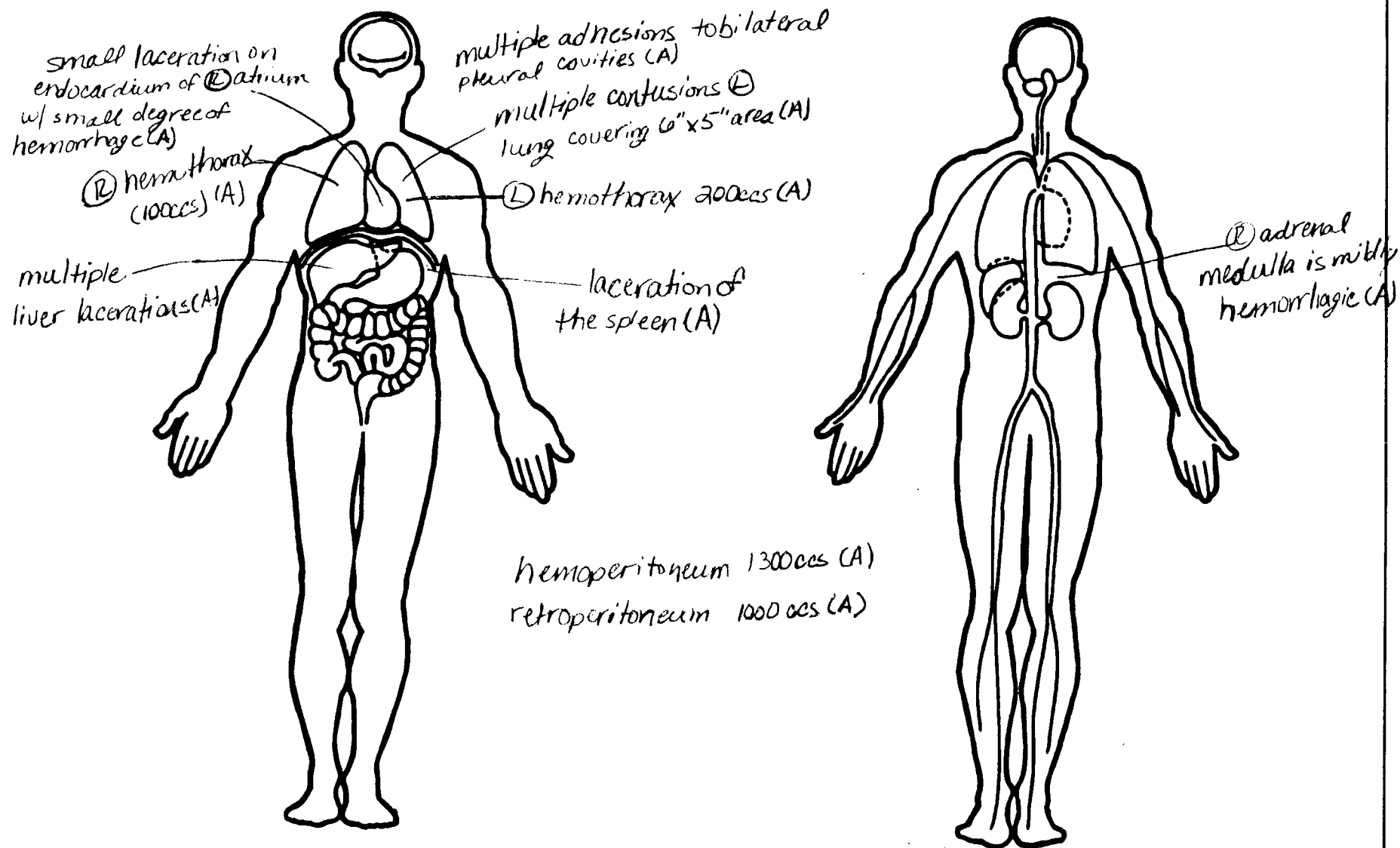
HCO₃ = ?

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.)



HEAD RESTRAINT AND SEAT EVALUATION

25. 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

26. Seat Type (this Occupant Position)

06

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

27. Seat Performance (this Occupant Position)

1

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



OCCUPANT INJURY FORM

NATIONAL ACCIDENT SAMPLING SYSTEM
CRASHWORTHINESS DATA SYSTEM

1. Primary Sampling Unit Number <u>81</u>	3. Vehicle Number <u>01</u>
2. Case Number - Stratum <u>038K</u>	4. Occupant Number <u>02</u>

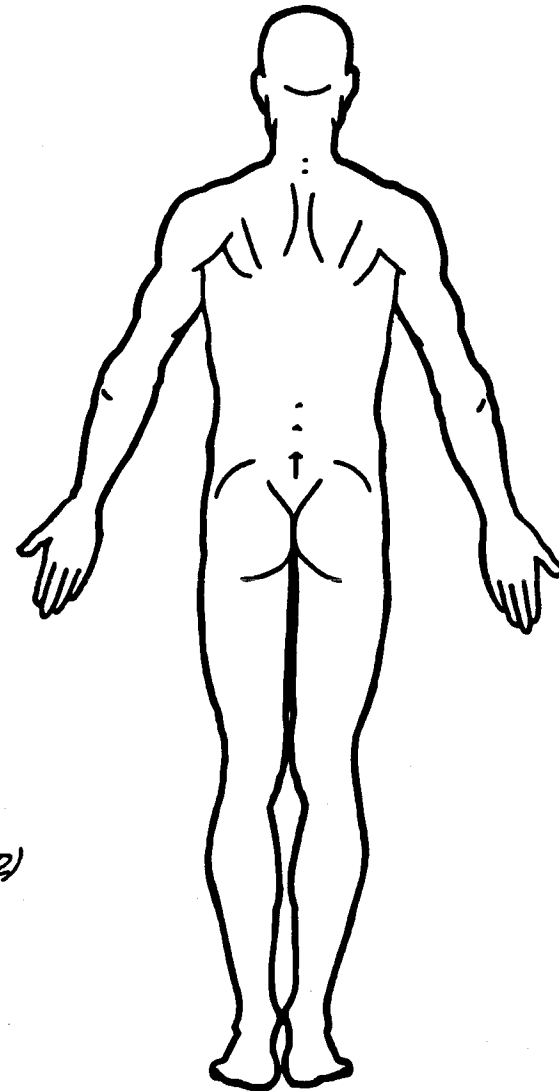
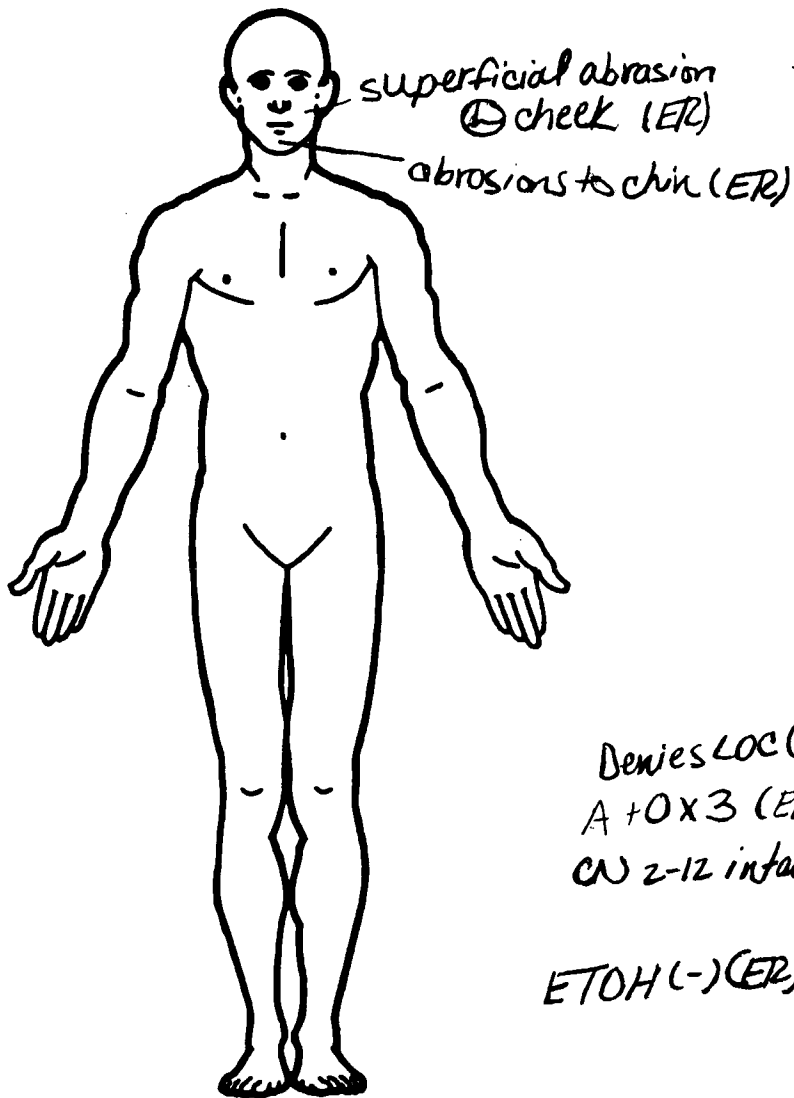
INJURY DATA.

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

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

OFFICIAL INJURY DATA — SOFT TISSUE INJURIES

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



SOURCE OF INJURY DATA

OFFICIAL

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

UNOFFICIAL

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

INJURY SOURCE

FRONT

- (01) Windshield
- (02) Mirror
- (03) Sunvisor
- (04) Steering wheel rim
- (05) Steering wheel hub/spoke
- (06) Steering wheel (combination of codes 04 and 05)
- (07) Steering column, transmission selector lever, other attachment
- (08) Add on equipment (e.g., CB, tape deck, air conditioner)
- (09) Left instrument panel and below
- (10) Center instrument panel and below
- (11) Right instrument panel and below
- (12) Glove compartment door
- (13) Knee bolster
- (14) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, mirror, or steering assembly (driver side only)
- (15) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, or mirror (passenger side only)
- (16) Driver side air bag compartment cover
- (17) Passenger side air bag compartment cover
- (18) Windshield reinforced by exterior object (specify): _____
- (19) Other front object (specify): _____

LEFT SIDE

- (20) Left side interior surface, excluding hardware or armrests
- (21) Left side hardware or armrest
- (22) Left A (A1/A2)-pillar
- (23) Left B-pillar
- (24) Other left pillar (specify): _____

- (25) Left side window glass or frame
- (26) Left side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.
- (27) Other left side object (specify): _____
- (28) Left side window sill

RIGHT SIDE

- (30) Right side interior surface, excluding hardware or armrests
- (31) Right side hardware or armrest
- (32) Right A (A1/A2)-pillar
- (33) Right B-pillar
- (34) Other right pillar (specify): _____

- (35) Right side window glass or frame
- (36) Right side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.
- (37) Other right side object (specify): _____
- (38) Right side window sill

INTERIOR

- (40) Seat, back support
- (41) Belt restraint webbing/buckle
- (42) Belt restraint B-pillar or door frame attachment point
- (43) Other restraint system component (specify): _____
- (44) Head restraint system
- (45) Air bag (use codes "16" and "17" for injuries sustained from air bag compartment covers)
- (46) Other occupants (specify): DRIVER
- (47) Interior loose objects
- (48) Child safety seat (specify): _____
- (49) Other interior object (specify): _____

ROOF

- (50) Front header
- (51) Rear header
- (52) Roof left side rail
- (53) Roof right side rail
- (54) Roof or convertible top

FLOOR

- (56) Floor (including toe pan)
- (57) Floor or console mounted transmission lever, including console
- (58) Parking brake handle
- (59) Foot controls including parking brake

REAR

- (60) Backlight (rear window)

- (61) Backlight storage rack, door, etc.
- (62) Other rear object (specify): _____

EXTERIOR of OCCUPANT'S VEHICLE

- (65) Hood
- (66) Outside hardware (e.g., outside mirror, antenna)
- (67) Other exterior surface or tires (specify): _____
- (68) Unknown exterior objects

EXTERIOR OF OTHER MOTOR VEHICLE

- (70) Front bumper
- (71) Hood edge
- (72) Other front of vehicle (specify): _____

- (73) Hood
- (74) Hood ornament
- (75) Windshield, roof rail, A-pillar
- (76) Side surface
- (77) Side mirrors
- (78) Other side protrusions (specify): _____

- (79) Rear surface
- (80) Undercarriage
- (81) Tires and wheels
- (82) Other exterior of other motor vehicle (specify): _____

- (83) Unknown exterior of other motor vehicle

OTHER VEHICLE OR OBJECT IN THE ENVIRONMENT

- (84) Ground
- (85) Other vehicle or object (specify): _____
- (86) Unknown vehicle or object

NONCONTACT INJURY

- (90) Fire in vehicle
- (91) Flying glass
- (92) Other noncontact injury source (specify): _____
- (93) Air bag exhaust gases
- (97) Injured, unknown source

INJURY SOURCE CONFIDENCE LEVEL

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

DIRECT/INDIRECT INJURY

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

OCCUPANT INJURY CLASSIFICATION

Body Region

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

Type of Anatomic Structure

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

Specific Anatomic Structure

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

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

Spine

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

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

Level of Injury

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

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

Abbreviated Injury Scale

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

Aspect

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

OFFICIAL INJURY DATA — SKELETAL INJURIES

Restrained?

No

Yes
(ER)

Blood Alcohol Level (mg/dl)

BAL = 0
(ER)

Glasgow Coma Scale Score

GCSS = 15
(ER)

Units of Blood Given

Units = 0

Arterial Blood Gases

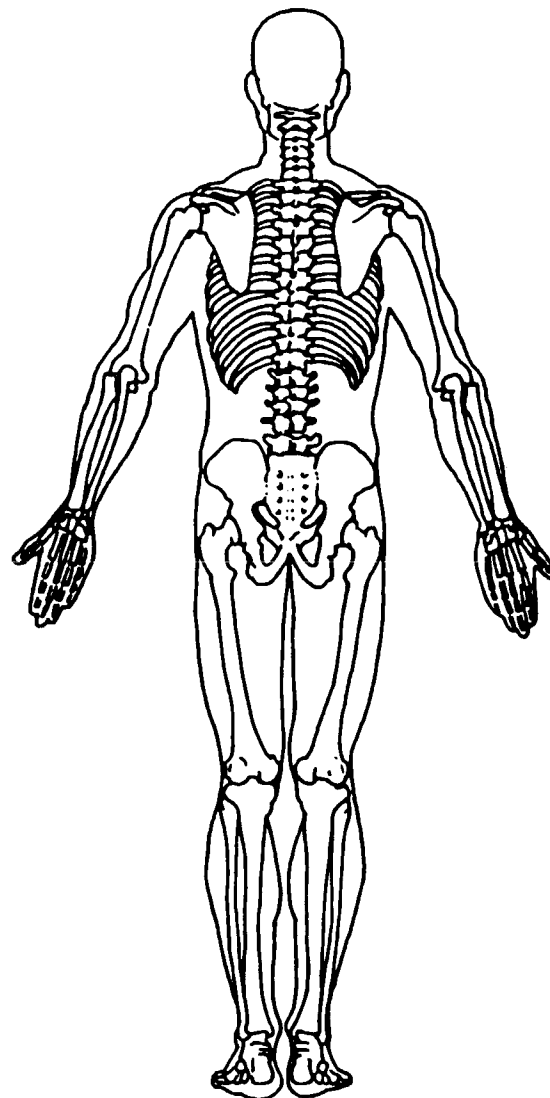
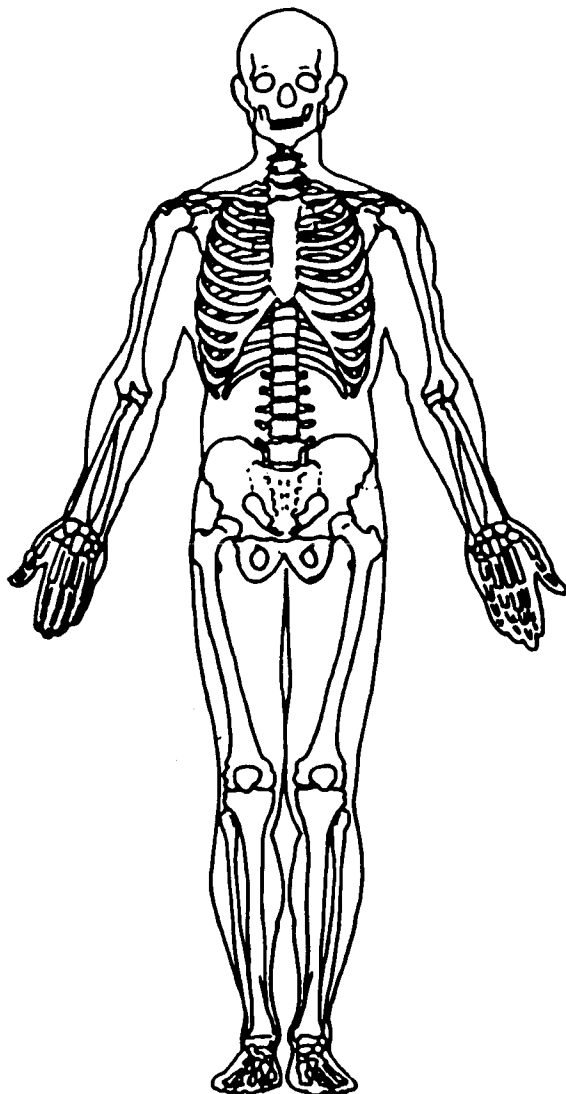
pH =

PO₂ =

PCO₂ =

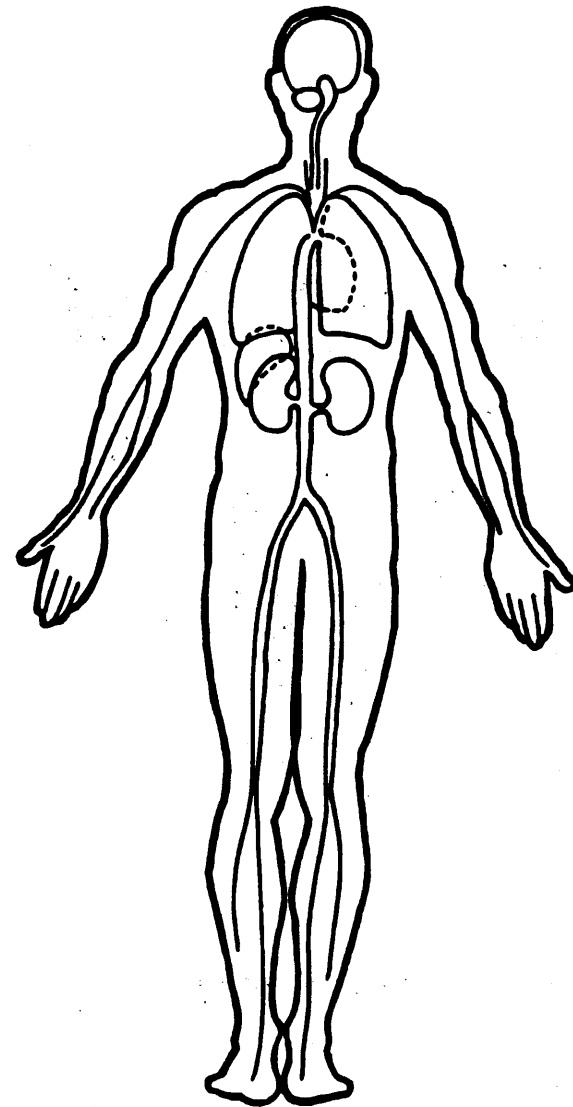
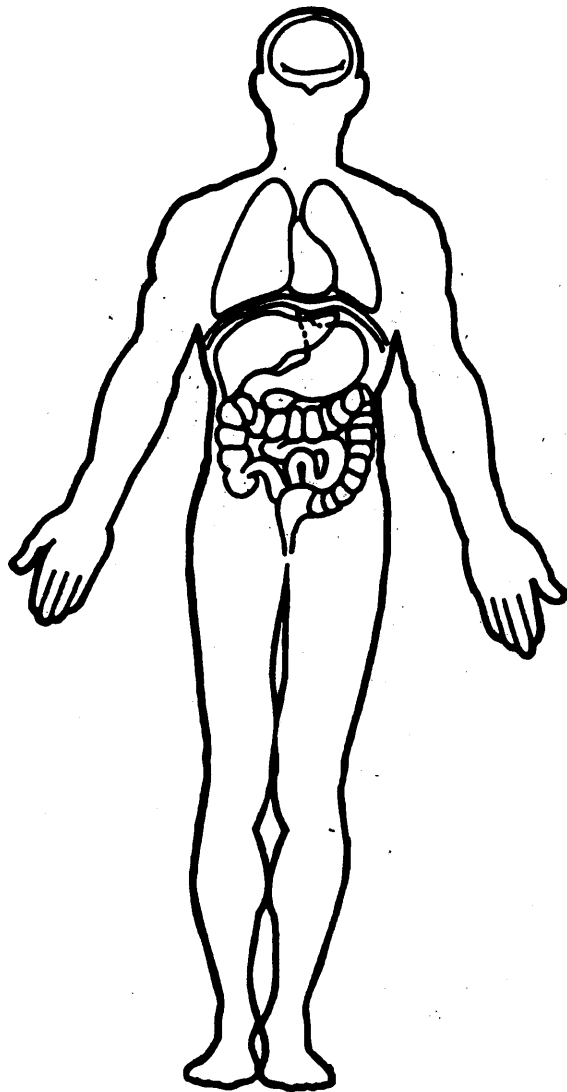
HCO₃ =

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



OFFICIAL INJURY DATA – INTERNAL INJURIES

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



OCCUPANT RELATED

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

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

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

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

VEHICLE WEIGHT ITEMS

- 19. Vehicle Curb Weight 1,800
 _____ Code weight to nearest 10 kilograms.
 (045) Less than 450 kilograms
 (610) 6,100 kilograms or more
 (999) Unknown

_____ lbs X .4536 = 1,801 kgs

Source: _____

- 20. Vehicle Cargo Weight 0,180
 _____ Code weight to nearest 10 kilograms. *DAMAGE*
 (000) Less than 5 kilograms
 (450) 4,500 kilograms or more
 (999) Unknown

_____ lbs X .4536 = 181 kgs

OVERRIDE/UNDERRIDE (THIS VEHICLE)

- 25. Front Override/Underride (this Vehicle) 0
- 26. Rear Override/Underride (this Vehicle) 0
 (0) No override/underride, or not an end-to-end impact

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

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

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

RECONSTRUCTION DATA

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

 (9) Unknown

HEADING ANGLE AT IMPACT FOR HIGHEST DELTA V

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

- 27. Heading Angle For This Vehicle 000
- 28. Heading Angle For Other Vehicle 270

OTHER DATA

56. Driver's Zip Code

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

57. Driver's Race/Ethnic Origin

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

58. Vehicle Special Use (This Trip)

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

ROLLOVER DATA

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

59. Rollover Initiation Type

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

60. Location of Rollover Initiation

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

61. Rollover Initiation Object Contacted

00

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

0

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

63. Direction of Initial Roll

0

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

PRECRASH DATA

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

01

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

CODES FOR ROLLOVER INITIATION OBJECT CONTACTED

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

Noncollision

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

Collision With Fixed Object

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

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

Nonbreakaway Pole or Post

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

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

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

- (69) Unknown fixed object

Collision with Nonfixed Object

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

- (89) Unknown nonfixed object

- (98) Other event (specify): _____

- (99) Unknown event or object



EXTERIOR VEHICLE FORM

1. Primary Sampling Unit Number <u>81</u>	3. Vehicle Number <u>02</u>
2. Case Number - Stratum <u>038K</u>	

VEHICLE IDENTIFICATION

VIN 1FTHF25L3D XXXXXXXXXX Model Year 83

Vehicle Make (specify): Ford Vehicle Model (specify): F-250 PU

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
1	STARTS AT RF BUMPER CORNER	CORNER TO CORNER

CRUSH PROFILE IN CENTIMETERS

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

Measure and document on the vehicle diagram the location of maximum crush.

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. 36.4

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

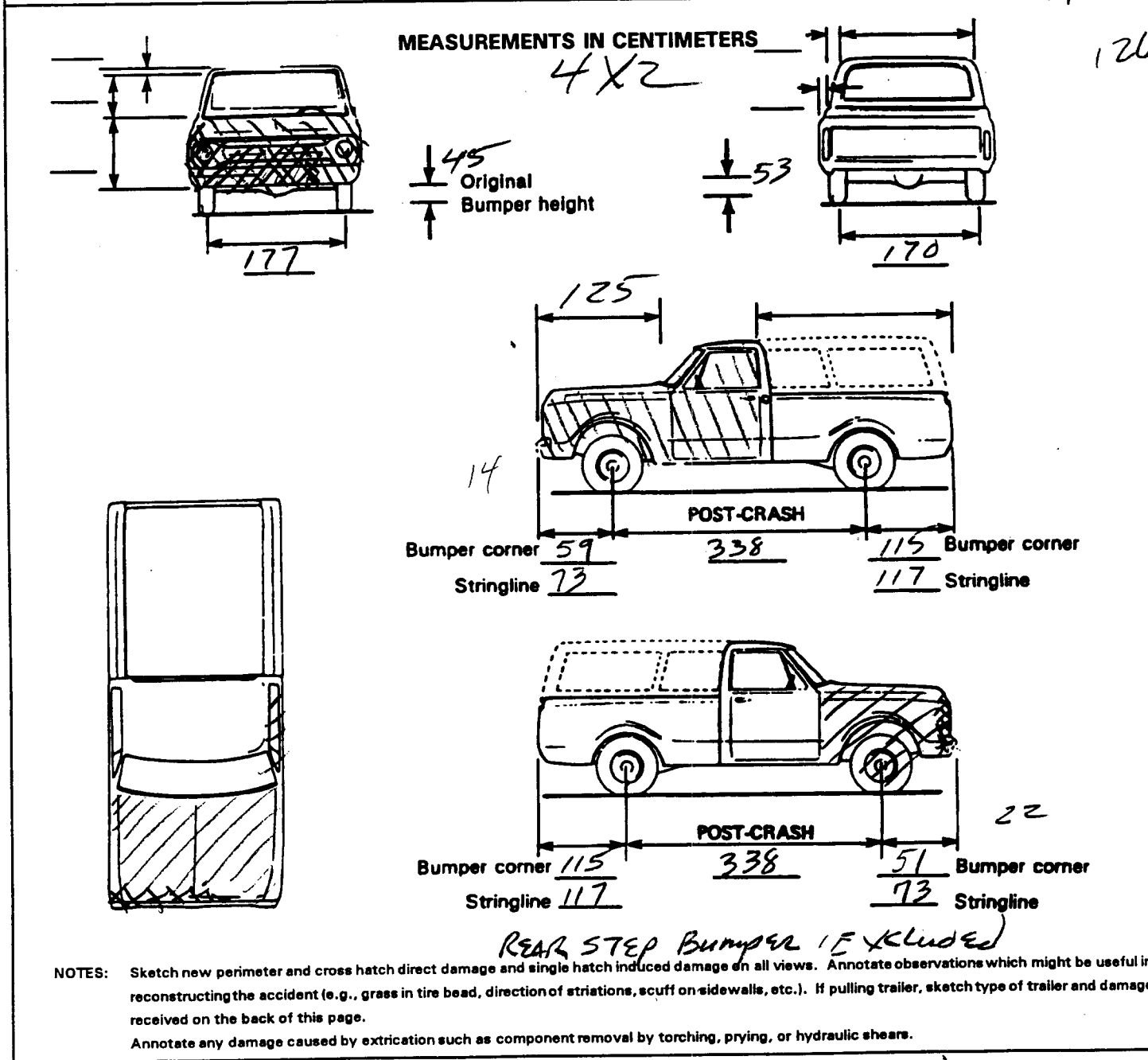
Specific Impact Number	Plane of Impact C-Measurements	Direct Damage		Field L	C ₁	C ₂	C ₃	C ₄	C ₅	C ₆	±D
		Width (CDC)	Max Crush								
1	FRONT BUMPER	143	2-6	182	14	4	4	3.5	3	22	+23.5
1	FREE SPACE	"		"	10	0	0	0	0	10	
1	FINAL	143	12	182	4	4	4	3.5	3	12	+23.5
FRONT BUMPER GUARDS EXCLUDED											

ORIGINAL SPECIFICATIONS WORK SHEET

Wheelbase	<u>133.</u>	inches	x 2.54	=	<u>338</u>	cm
Overall Length	<u>208.3</u>	inches	x 2.54	=	<u>529</u>	cm
Maximum Width	<u>77.2</u>	inches	x 2.54	=	<u>196</u>	cm
Curb Weight	<u>3,971</u>	pounds	x .4536	=	<u>1,801</u>	kg
Average Track	<u> </u>	inches	x 2.54	=	<u>174</u>	cm
Front Overhang	<u>28.6</u>	inches	x 2.54	=	<u>073</u>	cm
Rear Overhang	<u>46.7</u>	inches	x 2.54	=	<u>119</u>	cm
Undeformed End Width	<u> </u>	inches	x 2.54	=	<u>190</u>	cm
Engine Size: cyl./displ.	<u>V-8</u>	cc	x .001	=	<u> </u>	L
	<u> </u>	CID	x .0164	=	<u> </u>	L

VEHICLE DAMAGE SKETCH

<p>TIRE—WHEEL DAMAGE</p> <p>a. Rotation physically restricted</p> <p>RF <u>1</u> LF <u>2</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>ORIGINAL SPECIFICATIONS</p> <p>Wheelbase <u>338</u> cm</p> <p>Overall Length <u>529</u> cm</p> <p>Maximum Width <u>196</u> cm</p> <p>Curb Weight <u>1801</u> kg</p> <p>Average Track <u>173.5</u> cm</p> <p>Front Overhang <u>73</u> cm</p> <p>Rear Overhang <u>115</u> cm</p> <p>Undeformed End Width <u>190</u> cm</p> <p>Engine Size: cyl./displ. <u>V8-</u> L</p>	<p>WHEEL STEER ANGLES (For locked front wheels or displaced rear axles only)</p> <p>RF ± <u>0</u> ° LF ± <u>7</u> ° RR ± <u> </u> ° LR ± <u> </u> °</p> <p>Within ± 5 degrees</p> <hr/> <p>DRIVE WHEELS</p> <p><input type="checkbox"/> FWD <input checked="" type="checkbox"/> RWD <input type="checkbox"/> 4WD</p> <hr/> <p>Approximate Cargo Weight <u>400</u> kg <i>Canopy</i></p>
<p>TYPE OF TRANSMISSION</p> <p><input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic</p>		



53 57 170 508 582



INTERIOR VEHICLE FORM

1. Primary Sampling Unit Number 81

2. Case Number - Stratum 038K

3. Vehicle Number 02

INTEGRITY

4. Passenger Compartment Integrity 00

(00) No integrity loss

Yes, Integrity Was Lost Through

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

(99) Unknown

Door, Tailgate or Hatch Opening

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

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

(9) Unknown

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

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

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

Door, Tailgate or Hatch Came Open During Collision

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

(9) Unknown

GLAZING

Glazing Damage from Impact Forces

15. WS 0 16. LF 0 17. RF 0 18. LR 8 19. RR 8

20. BL 0 21. Roof 8 22. Other 0 CANOPY

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

Glazing Damage from Occupant Contact

23. WS 0 24. LF 0 25. RF 0 26. LR 0 27. RR 0

28. BL 0 29. Roof 0 30. Other 0

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

If No Glazing Damage *And* No Occupant Contact or No Glazing, Then Code IV31 Through IV46 As 0

Type of Window/Windshield Glazing

31. WS 0 32. LF 0 33. RF 0 34. LR 0 35. RR 0

36. BL 0 37. Roof 0 38. Other 0

- (0) No glazing contact and no damage, or no glazing
- (1) AS-1 - Laminated
- (2) AS-2 - Tempered
- (3) AS-3 - Tempered-tinted
- (4) AS-14 - Glass/Plastic
- (8) Other (specify):

(9) Unknown

Window Precrash Glazing Status

39. WS 0 40. LF 0 41. RF 0 42. LR 0 43. RR 0

44. BL 0 45. Roof 0 46. Other 0

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

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. _____	48. _____	49. _____	50. _____
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. _____

None

INTRUDING COMPONENT

Interior Components

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

- (27) Side panel - forward of the A (A2)-pillar
- (28) Side panel - rear of the A (A2)-pillar

Exterior Components

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

LOCATION OF INTRUSION

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

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

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

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

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

- (99) Unknown

MAGNITUDE OF INTRUSION

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

DOMINANT CRUSH DIRECTION

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

STEERING RIM SPOKE DEFORMATION

(All Measurements Are in Centimeters)

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

	—		=	
	—		=	
	—		=	
	—		=	
	—		=	

STEERING COLUMN

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

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

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

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

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

92. Steering Rim/Spoke Deformation 0 0
 Code actual measured deformation to the nearest centimeter
 (00) No steering rim deformation
 (01-14) Actual measured value in centimeters
 (15) 15 centimeters or more
 (98) Observed deformation cannot be measured
 (99) Unknown

93. Location of Steering Rim/Spoke Deformation 0 0
 (00) No steering rim deformation

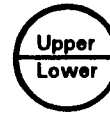
Quarter Sections

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



Half Sections

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



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

INSTRUMENT PANEL

94. Odometer Reading 180,000

_____ 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

111,682 miles x 1.6093 = 179,730 kilometers

Source: _____

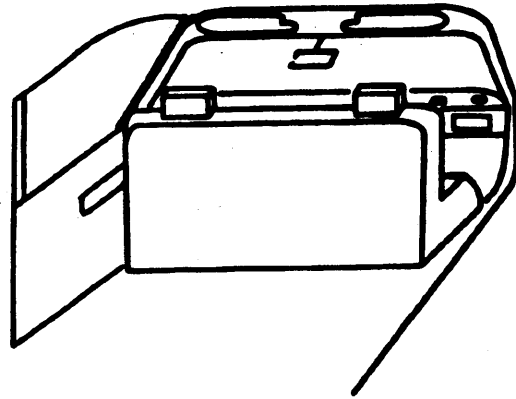
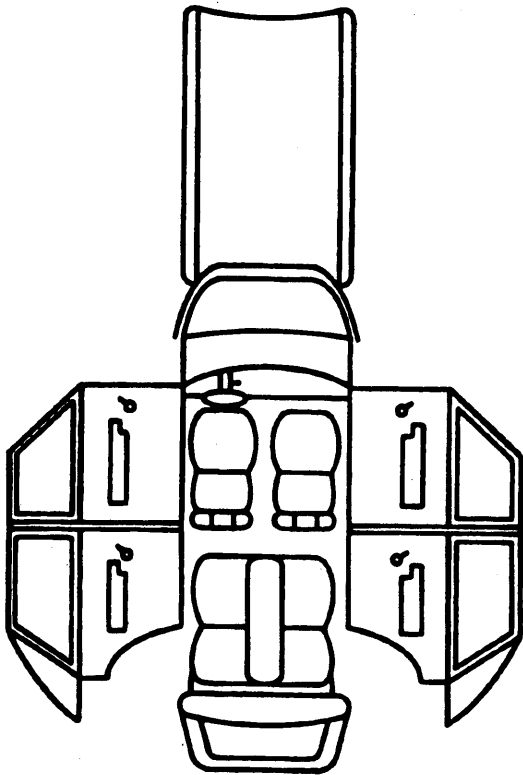
95. Instrument Panel Damage from Occupant Contact? 0
 (0) No
 (1) Yes
 (9) Unknown

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

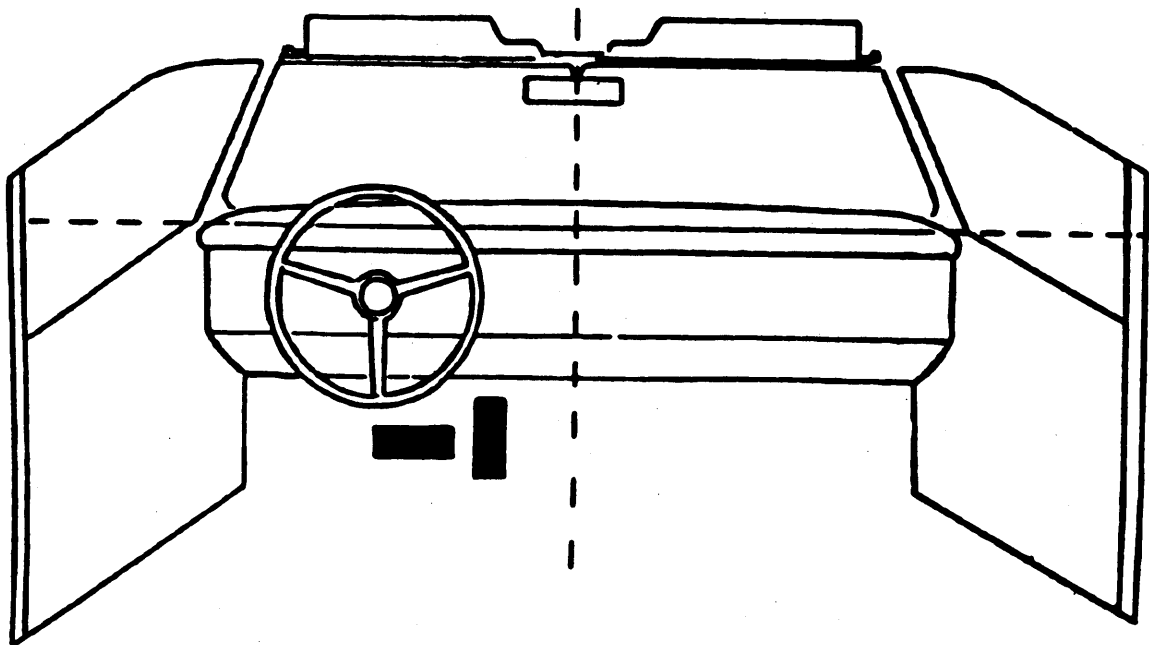
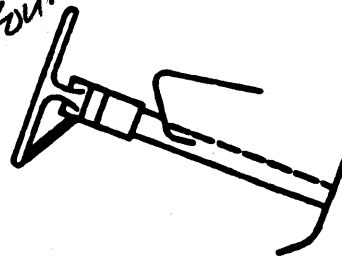
97. Did Glove Compartment Door Open During Collision(s)? 0
 (0) No
 (1) Yes
 (8) Not present
 (9) Unknown

VEHICLE INTERIOR SKETCHES

Note area of ejection/entrapment



None found



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					
B					
C					
D					
E					
F					
G					
H					
I					
J					
K					
L					
M					
N					

New

CODES FOR INTERIOR COMPONENTS

FRONT

- (01) Windshield
- (02) Mirror
- (03) Sunvisor
- (04) Steering wheel rim
- (05) Steering wheel hub/spoke
- (06) Steering wheel (combination of codes 04 and 05)
- (07) Steering column, transmission selector lever, other attachment
- (08) Add on equipment (e.g., CB, tape deck, air conditioner)
- (09) Left instrument panel and below
- (10) Center instrument panel and below
- (11) Right instrument panel and below
- (12) Glove compartment door
- (13) Knee bolster
- (14) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, mirror, or steering assembly (driver side only)
- (15) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, or mirror (passenger side only)
- (16) Driver side air bag compartment cover
- (17) Passenger side air bag compartment cover
- (18) Windshield reinforced by exterior object (specify): _____
- (19) Other front object (specify): _____

- (23) Left B-pillar
 - (24) Other left pillar (specify): _____
 - (25) Left side window glass or frame
 - (26) Left side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.
 - (27) Other left side object (specify): _____
 - (28) Left side window sill
- RIGHT SIDE**
- (30) Right side interior surface, excluding hardware or armrests
 - (31) Right side hardware or armrest
 - (32) Right A (A1/A2)-pillar
 - (33) Right B-pillar
 - (34) Other right pillar (specify): _____
 - (35) Right side window glass or frame
 - (36) Right side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B pillar, or roof side rail.
 - (37) Other right side object (specify): _____
 - (38) Right side window sill

- (46) Other occupants (specify): _____
- (47) Interior loose objects
- (48) Child safety seat (specify): _____
- (49) Other interior object (specify): _____

ROOF

- (50) Front header
- (51) Rear header
- (52) Roof left side rail
- (53) Roof right side rail
- (54) Roof or convertible top

FLOOR

- (56) Floor (including toe pan)
- (57) Floor or console mounted transmission lever, including console
- (58) Parking brake handle
- (59) Foot controls including parking brake

REAR

- (60) Backlight (rear window)
- (61) Backlight storage rack, door, etc.
- (62) Other rear object (specify): _____

LEFT SIDE

- (20) Left side interior surface, excluding hardware or armrests
- (21) Left side hardware or armrest
- (22) Left A (A1/A2)-pillar

INTERIOR

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

CONFIDENCE LEVEL OF CONTACT POINT

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

AUTOMATIC RESTRAINTS

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

AIR BAGS

		Left	Right
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

Air Bag System Deployment

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

Did Air Bag System Fail?

- (0) Not equipped/not available
- (1) No
- (2) Yes (specify): _____
- (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

MANUAL RESTRAINTS

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

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

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

		Left	Center	Right
FIRST	Availability	4	3	4
	Use	04	03	04
	Failure Modes	1	1	1
SECOND	Availability			
	Use			
	Failure Modes			
THIRD	Availability			
	Use			
	Failure Modes			
OTHER	Availability			
	Use			
	Failure Modes			

Manual (Active) Belt System Availability

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

Integral Belt Partially Destroyed

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

(8) Other belt (specify): _____

(9) Unknown _____

Manual (Active) Belt System Use

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

(08) Other belt used (specify):

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

Manual (Active) Belt Failure Modes During Accident

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

CHILD SAFETY SEAT FIELD ASSESSMENT

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

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)

HEAD RESTRAINTS/SEAT EVALUATION

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

		Left	Center	Right
FIRST	Head Restraint Type/Damage	0	0	0
	Seat Type	05	05	05
	Seat Performance	1	1	1
	Seat Orientation	1	1	1
SECOND	Head Restraint Type/Damage			
	Seat Type			
	Seat Performance			
	Seat Orientation			
THIRD	Head Restraint Type/Damage			
	Seat Type			
	Seat Performance			
	Seat Orientation			
OTHER	Head Restraint Type/Damage			
	Seat Type			
	Seat Performance			
	Seat Orientation			

Head Restraint Type/Damage by Occupant at This Occupant Position

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

Seat Type (this Occupant Position)

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

Seat Performance (this Occupant Position)

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

Seat Orientation (this Occupant Position)

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

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

EJECTION/ENTRAPMENT DATA

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

EJECTION No [] Yes []

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

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

Ejection

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

Ejection Area

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

(7) Roof

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

(9) Unknown

Ejection Medium

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

(5) Integral structure

(8) Other medium (specify):

(9) Unknown

Medium Status (Immediately Prior to Impact)

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

ENTRAPMENT No [] Yes []

Describe entrapment mechanism: _____

Component(s): _____

(Note in vehicle interior diagram)

HEAD RESTRAINT AND SEAT EVALUATION

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

0

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

26. Seat Type (this Occupant Position)

05

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

27. Seat Performance (this Occupant Position)

1

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

- (7) Combination of above (specify): _____
- (8) Other (specify): _____
- (9) Unknown

PSU NUMBER	<u>81</u>
CASE NUMBER	<u>038K</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) _____

HEAD RESTRAINT AND SEAT EVALUATION

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

0

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

26. Seat Type (this Occupant Position)

05

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

27. Seat Performance (this Occupant Position)

1

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

(7) Combination of above (specify): _____

(8) Other (specify): _____

(9) Unknown

PSU NUMBER

81

CASE NUMBER

038K

VEHICLE NUMBER

02

OCCUPANT NUMBER

02

OCCUPANT INJURY FORM

THE FOLLOWING DATA IS NOT INCLUDED IN THIS CASE:

ENTIRE FORM

PAGE NUMBER (S) _____

HEAD RESTRAINT AND SEAT EVALUATION

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

0

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

26. Seat Type (this Occupant Position)

09

- (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):
BENCH SEAT FACING MIDDLE
- (10) Box mounted seat (i.e., van type)
- (99) Unknown

27. Seat Performance (this Occupant Position)

1

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

*THIS OCCUPANT
RIDING IN THE BACK
OF THE TRUCK
SEATED ON BENCH
FACING INWARD*

PSU NUMBER	<u>81</u>
CASE NUMBER	<u>038K</u>
VEHICLE NUMBER	<u>02</u>
OCCUPANT NUMBER	<u>03</u>

OCCUPANT INJURY FORM

THE FOLLOWING DATA IS NOT INCLUDED IN THIS CASE:

ENTIRE FORM

PAGE NUMBER (S) _____



CRASHPC PROGRAM SUMMARY

(All Measurements in Metric)

BEST AVAILABLE COPY

NATIONAL ACCIDENT SAMPLING SYSTEM
CRASHWORTHINESS DATA SYSTEM

Identifying Title <u>81</u> Primary Sampling Unit	<u>038K</u> Case No.-Stratum	<u>01</u> Accident Event Sequence No.	<u>[REDACTED] 93</u> Date (Month, day, year) of Run
---	---------------------------------	--	--

CRASHPC Vehicle Identification				
Vehicle 1	<u>91</u>	<u>Ford</u>	<u>TRUCKS 4 DR</u>	<u>1</u>
Vehicle 2	<u>83</u>	<u>Ford</u>	<u>F-250</u>	<u>2</u>
	Year	Make	Model	NASS Veh. No.

GENERAL INFORMATION

	VEHICLE 1	VEHICLE 2
Size	<u>3</u>	<u>6</u>
Weight	<u>1380</u> Curb + <u>186</u> Occupant(s) + <u>0</u> Cargo = <u>1566</u> kg	<u>1800</u> Curb + <u>153</u> Occupant(s) + <u>180</u> Cargo = <u>2133</u> kg
CDC	<u>10LYAW3</u>	<u>01FDEW1</u>
PDOF (-180 to +180)	<u>-60</u> °	<u>+30</u> °
Stiffness	<u>3</u>	<u>8</u>

SCENE INFORMATION

Rest and Impact Positions No, Go To Damage Information Yes

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

VEHICLE MOTION

Sustained Contact No Yes

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

National Accident Sampling System-Crashworthiness Data System: CRASHPC Program Summary

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 275 cm

Damage Length L 190 cm

Crush Depths
 C₁ 0 cm
 C₂ 7 cm
 C₃ 39 cm
 C₄ 34 cm
 C₆ 17 cm
 C₈ 0 cm

Crush Depths
 C₁ 4 cm
 C₂ 4 cm
 C₃ 4 cm
 C₄ 4 cm
 C₆ 3 cm
 C₈ 12 cm

Damage Offset D +009 cm

Damage Offset D +024 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.

TITLE
CRASH3 RECONSTRUCTION

GENERAL INFORMATION

VEHICLE #1	
SIZE	3
WEIGHT	1566.
CDC	10LYAW3
PDOF	-60.00
STIFFNESS	3
CANCEL	ACCEPT

VEHICLE #2	
SIZE	6
WEIGHT	2133.
CDC	01FDEW1
PDOF	30.00
STIFFNESS	8
CANCEL	ACCEPT

METRIC INPUT

DAMAGE INFORMATION

VEHICLE #1	
DAMAGE LENGTH	275.0
CRUSH DEPTHS	
C1	.000
C2	7.000
C3	39.00
C4	34.00
C5	17.00
C6	.000
DAMAGE OFFSET	9.000
CANCEL	ACCEPT

VEHICLE #2	
DAMAGE LENGTH	190.0
CRUSH DEPTHS	
C1	4.000
C2	4.000
C3	4.000
C4	4.000
C5	3.000
C6	12.00
DAMAGE OFFSET	24.00
CANCEL	ACCEPT

METRIC INPUT

INPUT CALCULATE TRAJECTORY OUTPUT GRAPHICS EXIT

SUMMARY OF CRASHPC RESULTS USING DAMAGE

CRASH3 RECONSTRUCTION

SPEED CHANGE
(DAMAGE)

VEHICLE #1

TOTAL 29 KPH (18 MPH)
 LONGITUDINAL -14 KPH (-9 MPH)
 LATITUDINAL 25 KPH (16 MPH)
 PDOF ANGLE -60 DEGREES
 ENERGY DISSIPATED = 65373 JOULES (48210 FT-LB)

VEHICLE #2

TOTAL 21 KPH (13 MPH)
 LONGITUDINAL -18 KPH (-11 MPH)
 LATITUDINAL -11 KPH (-7 MPH)
 PDOF ANGLE 30 DEGREES
 ENERGY DISSIPATED = 36965 JOULES (27261 FT-LB)

PRESS ANY KEY TO CONTINUE

INPUT CALCULATE TRAJECTORY OUTPUT GRAPHICS EXIT

DAMAGE DATA

	VEHICLE #1	VEHICLE #2
SIZE CATEGORY	3	6
STIFFNESS CATEGORY	3	8
VEHICLE WEIGHT	1566 KGS (3452 LBS)	2133 KGS (4702 LBS)
CDC	10LYAW3	01FDEW1
PDOF ANGLE	-60 DEGREES	30 DEGREES
CRUSH LENGTH	275 CM. (108 IN.)	190 CM. (75 IN.)
C1	0 CM. (0 IN.)	4 CM. (2 IN.)
C2	7 CM. (3 IN.)	4 CM. (2 IN.)
C3	39 CM. (15 IN.)	4 CM. (2 IN.)
C4	34 CM. (13 IN.)	4 CM. (2 IN.)
C5	17 CM. (7 IN.)	3 CM. (1 IN.)
C6	0 CM. (0 IN.)	12 CM. (5 IN.)
D	9 CM. (4 IN.)	24 CM. (9 IN.)
D'	16 CM. (6 IN.)	36 CM. (14 IN.)

(* INDICATES DEFAULT VALUE)
 PRESS ANY KEY TO CONTINUE

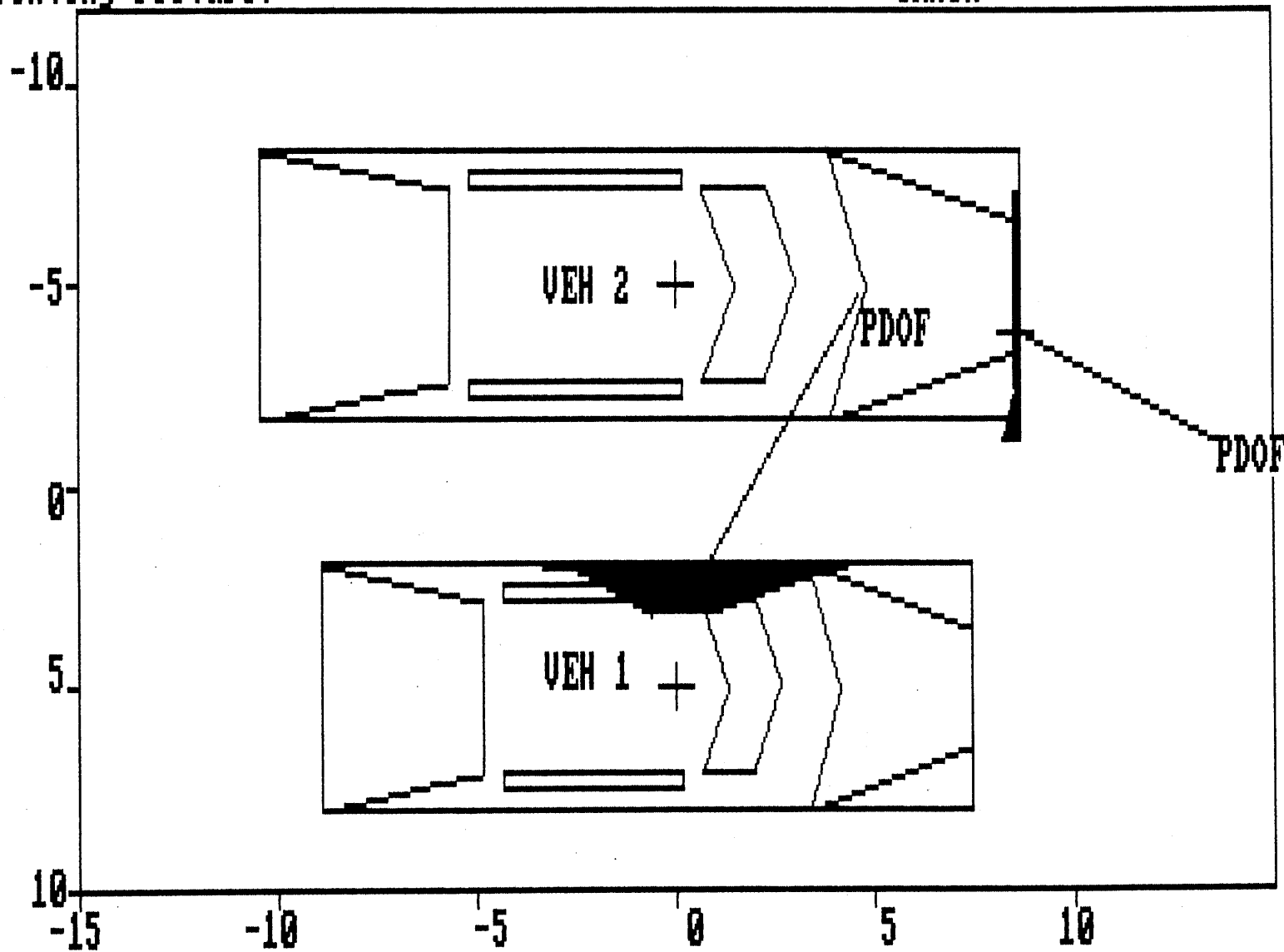
DIMENSIONS AND INERTIAL PROPERTIES

	VEHICLE #1	VEHICLE #2
CG TO FRONT AXLE	130 CM. (51 IN.)	153 CM. (60 IN.)
CG TO REAR AXLE	141 CM. (56 IN.)	165 CM. (65 IN.)
TRACK	150 CM. (59 IN.)	162 CM. (64 IN.)
CG TO FRONT OF VEH	228 CM. (90 IN.)	265 CM. (104 IN.)
CG TO REAR OF VEH	-270 CM. (-106 IN.)	-318 CM. (-125 IN.)
CG TO SIDE OF VEH	92 CM. (36 IN.)	101 CM. (40 IN.)
MOMENT OF INERTIA	13535 KGS. (29838 LBS)	23454 KGS (51707 LBS)
VEHICLE MASS	4 KGS (9 LBS)	6 KGS (12 LBS)

PRESS ANY KEY TO CONTINUE

Printing Picture:

CRASH



DAMAGE DESCRIPTION

1
INTRA ERRORS

OHH1281 2 ***** THIS VEHICLE IS INICATED AS HAVING AN AIRBAG.
***** HH1282 ***** CHECK YOUR DATA AND IF CORRECT, NOTIFY YOUR ZONE
***** HH1283 AIR BAG AVAILABILITY/FUNCTION DA21 equals 1-3.

HH1991 2 ***** THIS CASE SHOWS AN AIR BAG DIDN'T DEPLOY. *****
HH1992 ***** CHECK YOUR DATA AND IF CORRECT, NOTIFY YOUR ZONE *****
HH1993 ***** AND NHTSA HEADQUARTERS AT [REDACTED]. *****
HH1994 AIR BAG DEPLOYMENT DA22 equals 4.

1
INTRA ERRORS

OHH0071 2 Given OCCUPANT HEIGHT DA07 and OCCUPANT SEX DA06, OCCUP
ANT HH0072 WEIGHT DA08 is questionable. See Table A2.

1
INTER ERRORS

OGC0011 2 If MODEL YEAR GV04 does not equal 99, and ODOMETER READ
ING IV94 GC0012 does not equal 999, then IV94 should be less than or eq
ual to GC0013 65*(CURRENT YEAR - GV04 + 2). GV=01

1

PSUB1
CASE 038K

1993 ACCIDENT FORM

IDENTIFICATION

3. Number of General Vehicle Forms Submitted 02
4. Date of Accident (Month, Day, Year) [REDACTED] 93
5. Time of Accident (military time) 1915

SPECIAL STUDIES - INDICATORS

6. SS14 0 7. SS15 0 8. SS16 0 9. SS17 0 10. SS18 0

NUMBER OF EVENTS

11. Number of Recorded Events in This Accident 01
01

PSU81
CASE 038K

1993 ACCIDENT FORM

ACCIDENT EVENTS

Accident Sequence Number	Vehicle Number	Class of Vehicle	General Area of Damage	Veh. Num. or Obj. Cont.	Class of Vehicle	General Area of Damage
012. 01	013. 01	014. 03	015. L	016. 02	017. 15	018. F

011
INTRA ERRORS

01***** NO ERRORS *****
001

PSU81
CASE 038K
VEHICLE 01

1993 GENERAL VEHICLE FORM

VEHICLE IDENTIFICATION

4. Model Year	91	5. Make	12
6. Model	017	7. Body Type	04
8. VIN	1FACP50U9MG		

OFFICIAL RECORDS

9. Police Reported Disposition	1	10. Police Reported Travel Speed	999
11. Police Rep. Alcohol Presence	0	12. Alcohol Test Result for Driver	96

ACCIDENT RELATED

13. Speed Limit	064	14. Attempted Avoid. Maneuver	01
15. Accident Type	82		

OCCUPANT RELATED

16. Driver Presence in Vehicle	1	17. No. Occupants This Vehicle	02
18. No. Occupant Forms Submitted	02		

VEHICLE WEIGHT ITEMS

19. Vehicle Curb Weight	138	20. Vehicle Cargo Weight	000
-------------------------	-----	--------------------------	-----

RECONSTRUCTION DATA

21. Towed Trailing Unit	0	22. Trajectory Data Documented	0
23. Post Col. Cond. of Tree/Pole	0	24. Rollover	0

OVERRIDE/UNDERRIDE (this vehicle)

25. F 0	26. R 0
---------	---------

HEADING ANGLE AT IMPACT FOR HIGHEST DELTA V

27. Heading Angle This Vehicle	270	28. Heading Angle Other Vehicle	000
--------------------------------	-----	---------------------------------	-----

HEADING ANGLE AT IMPACT FOR HIGHEST DELTA V (Cont.)

29. Basis for Total Delta V	1
COMPUTER GENERATED DELTA V	
30. Total Delta V	029
31. Longitudinal Component of Delta V	-014
32. Lateral Component of Delta V	+025
33. Energy Absorption	0654
34. Confidence in Reconstruction Program Results	1
35. Type of Vehicle Inspection	1
36. Is this an AOPS vehicle?	1
37. Police Reported Drug Presence	0
38. Police Reported Drug Evaluation Classification	0
39. Other Drug Specimen Test Type for Driver	0

DRUG EVALUATION CLASSIFICATION / Other Test Results for Driver

	DEC Observation/ Perception Test Results		Specimen Test Results
Narcotic Drug	40.	0	41. 0
Depressant Drug	42.	0	43. 0
Stimulant Drug	44.	0	45. 0
Hallucinogen Drug	46.	0	47. 0
Cannabinoid Drug	48.	0	49. 0
Phencyclidine (PCP)	50.	0	51. 0
Inhalant Drug	52.	0	53. 0
Other Drug	54.	0	55. 0

OTHER DATA

56. Driver's Zip Code	98146	57. Driver's Race/Ethnic Origin	1
58. Vehicle Special Use	0		

ROLLOVER DATA

59. Rollover Initiation Type	0	60. Location of Rollover Initiation	0
61. Rollover Initiation Object Contacted	00	62. Location on Vehicle Where Initial Principal Tripping Force Applied	0
63. Direction of Initial Roll	0		

PRECRASH DATA

64. Pre-Event Movement (Prior to Recognition of Critical Event)	10	65. Initial Critical (Precrash) Event	15
66. Precrash Stability After 011	0	67. Precrash Directional Consequences	0

INTRA ERRORS

01***** NO ERRORS *****

COLLISION DEFORMATION CLASSIFICATION

HIGHEST DELTA "V"

Accident Sequence Number	Object Contacted	Direction of Force	Deform. Location	Specific Longitud. or lat. Location	Specific Vertical or Lateral Location	Type of Damage Distrib.	Deform. Extent
4. 01	5. 02	6. 10	7. .L	8. Y	9. A	10. W	11. 03

SECOND HIGHEST DELTA "V"

12.	13.	14.	15.	16.	17.	18.	19.
-----	-----	-----	-----	-----	-----	-----	-----

CRUSH PROFILE IN CENTIMETERS

HIGHEST DELTA "V"

20. L	21. C1	C2	C3	C4	C5	C6	22. +/-D
275	000	007	039	034	017	000	+009

SECOND HIGHEST DELTA "V"

23. L	24. C1	C2	C3	C4	C5	C6	25. +/-D
-------	--------	----	----	----	----	----	----------

26.	CDCs Documented but not coded	0
27.	Researchers Assess. Veh. Disp.	1
28.	Original Wheelbase	269

29.	Is this a Multi-staged Manufactured Vehicle and/or a Certified Altered Vehicle?	0
30.	Fire Occurrence	0
31.	Origin of Fire	0
32.	Type of Fuel Tank	1

011
INTRA ERRORS

01***** NO ERRORS *****
001

INTEGRITY

4. Passenger Compartment 06

Door, Tailgate or Hatch opening

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

Damage/Failure Associated with Door,
Tailgate or Hatch Opening in Collision

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

GLAZING

Glazing Damage from Impact Forces

15. WS 2 16. LF 6 17. RF 0 18. LR 6 19. RR 0
20. BL 0 21. Roof 8 22. Other 0

Glazing Damage from Occupant Contact

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

GLAZING (Cont.)

Type of Window/Windshield Glazing

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

Window Precrash Glazing Status

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

OCCUPANT AREA INTRUSION

Location of Intrusion	Intruding Component	Magnitude of Intrusion	Dominant Crush Direction
47. 11	48. 07	49. 4	50. 3
51. 21	52. 10	53. 3	54. 3
55. 11	56. 10	57. 3	58. 3
59. 11	60. 13	61. 2	62. 3
63. .	64.	65.	66.
67.	68.	69.	70.
71.	72.	73.	74.
75.	76.	77.	78.
79.	80.	81.	82.
83.	84.	85.	86.

STEERING COLUMN

87. Steering Column Type	2		
88. Blank		89. Blank	
90. Blank		91. Blank	
92. Steering Rim/Spoke Deform	00	93. Location of Rim/Spoke Deform	00

INSTRUMENT PANEL

94. Odometer Reading	319,000	95. Instrument Panel Damage	0
96. Knee Bolsters Deformed	0	97. Glove Door Open	0

011

INTRA ERRORS

01***** NO ERRORS *****

001

PSU81 1993 OCCUPANT ASSESSMENT FORM
CASE 038K
VEHICLE 01 OCCUPANT 01

OCCUPANT'S CHARACTERISTICS

5. Age 84 6. Sex 1 7. Height 183
8. Weight 095 9. Role 1

OCCUPANT'S SEATING

10. Seat Position 11 11. Posture 0

EJECTION/ENTRAPMENT

12. Ejection 0 13. Ejection Area 0 14. Ejection Medium 0
15. Medium Status 0 16. Entrapment 0

RESTRAINT SYSTEM EVALUATION

17. Belt System Availability	4	18. Belt System Use	04
19. Proper Use of Belt	1	20. Belt Failure Modes During Impact	1
21. Air Bag Availability	1	22. Air Bag Deployment	4
23. Are There Indications of Air Bag System Failure?	1	24. Police Reported Restraint Use	4

HEAD RESTRAINT AND SEAT EVALUATION

25. Head Restraint Type/Damage by Occupant at this Position	3
26. Seat Type	06
27. Seat Performance	6

CHILD SAFETY SEAT

28. Child/Safety Seat Make/Model	000
29. Type of Child Safety Seat	0
30. Orientation	00
31. Harness	00
32. Shield	00
33. Tether	00

INJURY CONSEQUENCES

34. Severity (Police Rating)	3
35. Treatment - Mortality	2
36. Type of Med. Facility (Initial)	1
37. Hospital Stay	00
38. Working Days Lost	62

CAUSE OF DEATH (Completed by Zone Center)

39. Time to Death	
40. Cause #1	
41. Cause #2	
42. Cause #3	
43. Number of Recorded Injuries	

AUTOMATIC BELT SYSTEM

44. Automatic (Passive) Belt System Availability/Function 0
45. Automatic (Passive) Belt System Use 0
46. Automatic (Passive) Belt System Type 0
47. Proper Use of Automatic (Passive) Belt System 0
48. Automatic (Passive) Belt System Failure Mode 0
49. Seat Orientation (this Occupant Position) 1

TRAUMA DATA (Completed by Zone Center)

50. Glasgow Coma Scale (GCS) Score
51. Was the Occupant Given Blood?
52. Arterial Blood Gases (ABG) - HCO3

011

INTRA ERRORS

OHH1281 2 ***** THIS VEHICLE IS INDICATED AS HAVING AN AIRBAG
. ***** HH1282 ***** CHECK YOUR DATA AND IF CORRECT, NOTIFY YOUR ZO
NE ***** HH1283 AIR BAG AVAILABILITY/FUNCTION DA21 equals 1-3.

HH1991 2 ***** THIS CASE SHOWS AN AIR BAG DIDN'T DEPLOY. *****
HH1992 ***** CHECK YOUR DATA AND IF CORRECT, NOTIFY YOUR ZONE *****
HH1993 ***** AND NHTSA HEADQUARTERS AT [REDACTED] *****
HH1994 AIR BAG DEPLOYMENT DA22 equals 4.

01

INJURY CONSEQUENCES

34. Severity (Police Rating)	1
35. Treatment - Mortality	4
36. Type of Med. Facility (Initial)	1
37. Hospital Stay	00
38. Working Days Lost	97

CAUSE OF DEATH (Completed by Zone Center)

39. Time to Death	
40. Cause #1	
41. Cause #2	
42. Cause #3	
43. Number of Recorded Injuries	

AUTOMATIC BELT SYSTEM

44. Automatic (Passive) Belt System Availability/Function	0
45. Automatic (Passive) Belt System Use	0
46. Automatic (Passive) Belt System Type	0
47. Proper Use of Automatic (Passive) Belt System	0
48. Automatic (Passive) Belt System Failure Mode	0
49. Seat Orientation (this Occupant Position)	1

TRAUMA DATA (Completed by Zone Center)

50. Glasgow Coma Scale (GCS) Score	
51. Was the Occupant Given Blood?	
52. Arterial Blood Gases (ABG) - HCO3	

011

INTRA ERRORS

01***** NO ERRORS *****

001

VEHICLE IDENTIFICATION

4. Model Year	83	5. Make	12
6. Model	481	7. Body Type	31
8. VIN	1FTHF25L3DF		

OFFICIAL RECORDS

9. Police Reported Disposition	1	10. Police Reported Travel Speed	999
11. Police Rep. Alcohol Presence	0	12. Alcohol Test Result for Driver	96

ACCIDENT RELATED

13. Speed Limit	064	14. Attempted Avoid. Maneuver	03
15. Accident Type	83		

OCCUPANT RELATED

16. Driver Presence in Vehicle	1	17. No. Occupants This Vehicle	03
18. No. Occupant Forms Submitted	03		

VEHICLE WEIGHT ITEMS

19. Vehicle Curb Weight	180	20. Vehicle Cargo Weight	018
-------------------------	-----	--------------------------	-----

RECONSTRUCTION DATA

21. Towed Trailing Unit	0	22. Trajectory Data Documented	0
23. Post Col. Cond. of Tree/Pole	0	24. Rollover	0

OVERRIDE/UNDERRIDE (this vehicle)

25. F 0	26. R 0
---------	---------

HEADING ANGLE AT IMPACT FOR HIGHEST DELTA V

27. Heading Angle This Vehicle	000	28. Heading Angle Other Vehicle	270
--------------------------------	-----	---------------------------------	-----

HEADING ANGLE AT IMPACT FOR HIGHEST DELTA V (Cont.)

29. Basis for Total Delta V	1
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COMPUTER GENERATED DELTA V

30. Total Delta V	021
31. Longitudinal Component of Delta V	-018
32. Lateral Component of Delta V	-011
33. Energy Absorption	0370
34. Confidence in Reconstruction Program Results	1
35. Type of Vehicle Inspection	1
36. Is this an AOPS vehicle?	0

37. Police Reported Drug Presence 0
 38. Police Reported Drug Evaluation Classification 0
 39. Other Drug Specimen Test Type for Driver 0

DRUG EVALUATION CLASSIFICATION / Other Test Results for Driver

	DEC Observation/ Perception Test Results		Specimen Test Results
Narcotic Drug	40.	0	41. 0
Depressant Drug	42.	0	43. 0
Stimulant Drug	44.	0	45. 0
Hallucinogen Drug	46.	0	47. 0
Cannabinoid Drug	48.	0	49. 0
Phencyclidine (PCP)	50.	0	51. 0
Inhalant Drug	52.	0	53. 0
Other Drug	54.	0	55. 0

OTHER DATA

56. Driver's Zip Code [REDACTED] 57. Driver's Race/Ethnic Origin 1
 58. Vehicle Special Use 0

ROLLOVER DATA

59. Rollover Initiation Type 0 60. Location of Rollover Initiation 0
 61. Rollover Initiation Object Contacted 00 62. Location on Vehicle Where Initial Principal Tripping Force Applied 0
 63. Direction of Initial Roll 0

PRECRASH DATA

64. Pre-Event Movement (Prior to Recognition of Critical Event) 01 65. Initial Critical (Precrash) Event 72
 66. Precrash Stability After 011 2 67. Precrash Directional Consequences 1

INTRA ERRORS

01***** NO ERRORS *****
 001

COLLISION DEFORMATION CLASSIFICATION

HIGHEST DELTA "V"

Accident Sequence Number	Object Contacted	Direction of Force	Deform. Location	Specific Longitud. or lat. Location	Specific Vertical or Lateral Location	Type of Damage Distrib.	Deform. Extent								
4.	01	5.	01	6.	01	7.	F	8.	D	9.	E	10.	W	11.	01

SECOND HIGHEST DELTA "V"

12.	13.	14.	15.	16.	17.	18.	19.
-----	-----	-----	-----	-----	-----	-----	-----

CRUSH PROFILE IN CENTIMETERS

HIGHEST DELTA "V"

20.	L	21.	C1	C2	C3	C4	C5	C6	22.	+/-D
	190		004	004	004	004	003	012		+024

SECOND HIGHEST DELTA "V"

23.	L	24.	C1	C2	C3	C4	C5	C6	25.	+/-D
-----	---	-----	----	----	----	----	----	----	-----	------

26.	CDCs Documented but not coded	0
27.	Researchers Assess. Veh. Disp.	1
28.	Original Wheelbase	338

29.	Is this a Multi-staged Manufactured Vehicle and/or a Certified Altered Vehicle?	0
30.	Fire Occurrence	0
31.	Origin of Fire	0
32.	Type of Fuel Tank	1

011
INTRA ERRORS

01***** NO ERRORS *****

001

INTEGRITY

4. Passenger Compartment 00

Door, Tailgate or Hatch opening

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

Damage/Failure Associated with Door,
Tailgate or Hatch Opening in Collision

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

GLAZING

Glazing Damage from Impact Forces

15. WS 0 16. LF 0 17. RF 0 18. LR 8 19. RR 8
20. BL 0 21. Roof 8 22. Other 0

Glazing Damage from Occupant Contact

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

GLAZING (Cont.)

Type of Window/Windshield Glazing

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

Window Precrash Glazing Status

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

OCCUPANT AREA INTRUSION

Location of Intrusion	Intruding Component	Magnitude of Intrusion	Dominant Crush Direction
47.	48.	49.	50.
51.	52.	53.	54.
55.	56.	57.	58.
59.	60.	61.	62.
63.	64.	65.	66.
67.	68.	69.	70.
71.	72.	73.	74.
75.	76.	77.	78.
79.	80.	81.	82.
83.	84.	85.	86.

STEERING COLUMN

87. Steering Column Type	1		
88. Blank		89. Blank	
90. Blank		91. Blank	
92. Steering Rim/Spoke Deform	00	93. Location of Rim/Spoke Deform	00

INSTRUMENT PANEL

94. Odometer Reading	180,000	95. Instrument Panel Damage	0
96. Knee Bolsters Deformed	8	97. Glove Door Open	0
011			

INTRA ERRORS

01***** NO ERRORS *****

001

FSU81 1993 OCCUPANT ASSESSMENT FORM
CASE 038K
VEHICLE 02 OCCUPANT 01

OCCUPANT'S CHARACTERISTICS

5. Age	44	6. Sex	1	7. Height	173
8. Weight	075	9. Role	1		

OCCUPANT'S SEATING

10. Seat Position	11	11. Posture	0
-------------------	----	-------------	---

EJECTION/ENTRAPMENT

12. Ejection	0	13. Ejection Area	0	14. Ejection Medium	0
15. Medium Status	0	16. Entrapment	0		

RESTRAINT SYSTEM EVALUATION

17. Belt System Availability	4	18. Belt System Use	04
19. Proper Use of Belt	1	20. Belt Failure Modes During Impact	1
21. Air Bag Availability	0	22. Air Bag Deployment	0
23. Are There Indications of Air Bag System Failure?	0	24. Police Reported Restraint Use	4

HEAD RESTRAINT AND SEAT EVALUATION

25. Head Restraint Type/Damage by Occupant at this Position	0
26. Seat Type	05
27. Seat Performance	1

CHILD SAFETY SEAT

28. Child/Safety Seat Make/Model	000
29. Type of Child Safety Seat	0
30. Orientation	00
31. Harness	00
32. Shield	00
33. Tether	00

INJURY CONSEQUENCES

34. Severity (Police Rating)	0
35. Treatment - Mortality	0
36. Type of Med. Facility (Initial)	0
37. Hospital Stay	00
38. Working Days Lost	00

CAUSE OF DEATH (Completed by Zone Center)

39. Time to Death	
40. Cause #1	
41. Cause #2	
42. Cause #3	
43. Number of Recorded Injuries	

AUTOMATIC BELT SYSTEM

44. Automatic (Passive) Belt System Availability/Function	0
45. Automatic (Passive) Belt System Use	0
46. Automatic (Passive) Belt System Type	0
47. Proper Use of Automatic (Passive) Belt System	0
48. Automatic (Passive) Belt System Failure Mode	0
49. Seat Orientation (this Occupant Position)	1

TRAUMA DATA (Completed by Zone Center)

50. Glasgow Coma Scale (GCS) Score
51. Was the Occupant Given Blood?
52. Arterial Blood Gases (ABG) - HCO3

011

INTRA ERRORS

01***** NO ERRORS *****

001

CASE 038K

VEHICLE 02 OCCUPANT 02

OCCUPANT'S CHARACTERISTICS

5. Age	09	6. Sex	1	7. Height	137
8. Weight	035	9. Role	2		

OCCUPANT'S SEATING

10. Seat Position	13	11. Posture	0
-------------------	----	-------------	---

EJECTION/ENTRAPMENT

12. Ejection	0	13. Ejection Area	0	14. Ejection Medium	0
15. Medium Status	0	16. Entrapment	0		

RESTRAINT SYSTEM EVALUATION

17. Belt System Availability	4	18. Belt System Use	04
19. Proper Use of Belt	1	20. Belt Failure Modes During Impact	1
21. Air Bag Availability	0	22. Air Bag Deployment	0
23. Are There Indications of Air Bag System Failure?	0	24. Police Reported Restraint Use	4

HEAD RESTRAINT AND SEAT EVALUATION

25. Head Restraint Type/Damage by Occupant at this Position	0
26. Seat Type	05
27. Seat Performance	1

CHILD SAFETY SEAT

28. Child/Safety Seat Make/Model	000
29. Type of Child Safety Seat	0
30. Orientation	00
31. Harness	00
32. Shield	00
33. Tether	00

INJURY CONSEQUENCES

34. Severity (Police Rating)	0
35. Treatment - Mortality	0
36. Type of Med. Facility (Initial)	0
37. Hospital Stay	00
38. Working Days Lost	97

CAUSE OF DEATH (Completed by Zone Center)

39. Time to Death	
40. Cause #1	
41. Cause #2	
42. Cause #3	
43. Number of Recorded Injuries	

AUTOMATIC BELT SYSTEM

44. Automatic (Passive) Belt System Availability/Function	0
45. Automatic (Passive) Belt System Use	0
46. Automatic (Passive) Belt System Type	0
47. Proper Use of Automatic (Passive) Belt System	0
48. Automatic (Passive) Belt System Failure Mode	0
49. Seat Orientation (this Occupant Position)	1

TRAUMA DATA (Completed by Zone Center)

50. Glasgow Coma Scale (GCS) Score	
51. Was the Occupant Given Blood?	
52. Arterial Blood Gases (ABG) - HCO3	

011

INTRA ERRORS

01***** NO ERRORS *****

001

OCCUPANT'S CHARACTERISTICS

5. Age 12 6. Sex 1 7. Height 170
8. Weight 043 9. Role 2

OCCUPANT'S SEATING

10. Seat Position 97 11. Posture 0

EJECTION/ENTRAPMENT

12. Ejection 0 13. Ejection Area 0 14. Ejection Medium 0
15. Medium Status 0 16. Entrapment 0

RESTRAINT SYSTEM EVALUATION

17. Belt System Availability 0 18. Belt System Use 00
19. Proper Use of Belt 0 20. Belt Failure Modes During Impact 0
21. Air Bag Availability 0 22. Air Bag Deployment 0
23. Are There Indications of Air Bag System Failure? 0 24. Police Reported Restraint Use 4

HEAD RESTRAINT AND SEAT EVALUATION

25. Head Restraint Type/Damage by Occupant at this Position 0
26. Seat Type 09
27. Seat Performance 1

CHILD SAFETY SEAT

28. Child/Safety Seat Make/Model 000
29. Type of Child Safety Seat 0
30. Orientation 00
31. Harness 00
32. Shield 00
33. Tether 00

INJURY CONSEQUENCES

34. Severity (Police Rating)	0
35. Treatment - Mortality	0
36. Type of Med. Facility (Initial)	0
37. Hospital Stay	00
38. Working Days Lost	97

CAUSE OF DEATH (Completed by Zone Center)

39. Time to Death	
40. Cause #1	
41. Cause #2	
42. Cause #3	
43. Number of Recorded Injuries	

AUTOMATIC BELT SYSTEM

44. Automatic (Passive) Belt System Availability/Function	0
45. Automatic (Passive) Belt System Use	0
46. Automatic (Passive) Belt System Type	0
47. Proper Use of Automatic (Passive) Belt System	0
48. Automatic (Passive) Belt System Failure Mode	0
49. Seat Orientation (this Occupant Position)	3

TRAUMA DATA (Completed by Zone Center)

50. Glasgow Coma Scale (GCS) Score	
51. Was the Occupant Given Blood?	
52. Arterial Blood Gases (ABG) - HCO3	
011	

INTRA ERRORS

OHH0071 Given OCCUPANT HEIGHT DA07 and OCCUPANT SEX DA06, OCC
 UPANT HH0072 HEIGHT DA08 is questionable. See Table A2.

01 INTER ERRORS

OGC0012 MODEL YEAR GV04 does not equal 99, and ODOMETER REA
 DING IV94 GC0012 does not equal 999, then IV94 should be less than or e
 qual to GC0013 65*(CURRENT YEAR - GV04 + 2). GV=01

CASE 038K

CURRENT VERSION: 6.01

FORM NAME	NUMBER OF DOLLAR SIGNS	NUMBER OF LEVEL 1 ERRORS	NUMBER OF LEVEL 2 ERRORS	VERSION NUMBER CONSISTENT
Accident	0	0	0	Y
General Vehicle	0	0	0	Y
Vehicle Exterior	0	0	0	Y
Vehicle Interior	0	0	0	Y
Occupant Assesment	0	0	3	Y
Occupant Interior	0	0	0	Y
Total Inter Errors		0	1	
Total Case Errors	0	0	4	

OCCUPANT ASSESSMENT Vehicle: 1 Occupant: 1

INTRA ERRORS

HH1281 2 ***** THIS VEHICLE IS INDICATED AS HAVING AN AIRBAG. *****

HH1282 ***** CHECK YOUR DATA AND IF CORRECT, NOTIFY YOUR ZONE *****
HH1283 AIR BAG AVAILABILITY/FUNCTION OA21 equals 1-3.

HH1991 2 ***** THIS CASE SHOWS AN AIR BAG DIDN'T DEPLOY. *****
HH1992 ***** CHECK YOUR DATA AND IF CORRECT, NOTIFY YOUR ZONE *****
HH1993 ***** AND NHTSA HEADQUARTERS AT [REDACTED] *****
HH1994 AIR BAG DEPLOYMENT OA22.equals 4.

OCCUPANT ASSESSMENT Vehicle: 2 Occupant: 3

INTRA ERRORS

HH0071 2 Given OCCUPANT HEIGHT OA07 and OCCUPANT SEX OA06, OCCUPANT
HH0072 WEIGHT OA08 is questionable. See Table A2.

INTER ERRORS

GC0011 2 If MODEL YEAR GV04 does not equal 99, and ODOMETER READING IV94
GC0012 does not equal 999, then IV94 should be less than or equal to
GC0013 65*(CURRENT YEAR - GV04 + 2). GV=01

EH0011 2 If TREATMENT OA35 equals 1, then 1st DEFORMATION EXTENT EV11
EH0012 should be greater than 03. GV=01 OA=01

PSU81
CASE 038K
CURRENT VERSION: 6.01

ERROR SUMMARY SCREEN

93

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



PSU 81-038K (1993) #1



PSU 81-038K (1993) #2



PSU 81-038K (1993) #3



PSU 81-038K (1993) #4



PSU 81-038K (1993) #5



PSU 81-038K (1993) #6



PSU 81-038K (1993) #7



PSU 81-038K (1993) #8
Best Available



PSU 81-038K (1993) #9



PSU 81-038K (1993) #10



PSU 81-038K (1993) #11



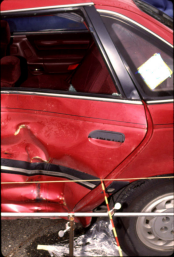
FSU 81-038K (1993) #12



PSU 81-038K (1993) #13



PSU 81-038K (1993) #14



PSU 81-038K (1993) #15



PSU 81-038K (1993) #16



PSU 81-038K (1993) #17



PSU 81-038K (1993) #18



PSU 81-038K (1993) #19



PSU 81-038K (1993) #20



PSU 81-038K (1993) #21



PSU 81-038K (1993) #22



PSU 81-038K (1993) #23



PSU 81-038K (1993) #24



PSU 81-038K (1993) #25



PSU 81-038K (1993) #26



PSU 81-038K (1993) #27



PSU 81-038K (1993) #28



PSU 81-038K (1933) #29



PSU 81-038K (1993) #30



PSU 81-039K (1993) #31



PSU 81-038K (1993) #32



PSU 81-038K (1993) #33



PSU 81-038K (1993) #34



PSU 81-038K (1993) #35



PSU 81-038K (1993) #36



PSU 81-038K (1993) #37



PSU 81-038K (1993) #38



PSU 81-038K (1993) #39



PSU 81-038K (1993) #40
Best Available



PSU 81-038K (1993) #41
Best Available



PSU 81-038K (1993) #42
Best Available



PSU 81-038K (1993) #43
Best Available



PSU 81-038K (1993) #44
Best Available



PSU B1-038K (1993) #45
Best Available



PSU 81-038K (1993) #46
Best Available



PSU 81-036K (1993) #47
Best Available



PSU 81-038K (1993) #48
Best Available



PSU 81-038K (1993) #49
Best Available



PSU 81-038K (1993) #50
Best Available



PSU 81-038K (1993) #51
Best Available



PSU 81-039K (1993) #52
Best Available



PSU 81-038K (1993) #53
Best Available



PSU 81-038K (1993) #54
Best Available



PSU 81-038K (1993) #55
Best Available



PSU 81-038K (1993) #56
Best Available



PSU 81-038K (1993) #57
Best Available



PSU 81-038K (1993) #58
Best Available