



U.S. Department  
of Transportation

**National Highway  
Traffic Safety  
Administration**

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

Dear Crash Data Researchers/Users:

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

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

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

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



## PEDESTRIAN CASE SUMMARY

PSU 90 CASE NO. 605P TYPE OF ACCIDENT CAR/PEDESTRIAN/CROSSING ROAD, STRAIGHT

### 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. Pedestrian injury mechanism and vehicle interaction is the focus, not pedestrian or driver culpability. Do not include any personal identifiers.)

Vehicle #1 was traveling East bound on the Freeway and Pedestrian #1 was crossing the Expressway in a Northerly direction. The Right side of vehicle #1 contacted Pedestrian #1 Left side. The Pedestrian rotated along the Right side of vehicle #1, and fell to the roadway. Vehicle #1 came to rest forward of Pedestrian #1 final resting position.

### B. PEDESTRIAN PROFILE

Pedestrian No.	Age	Sex	Treatment/ Mortality	Most Severe Injury (TO BE COMPLETED BY ZONE CENTER)			
				Body Region	Ana. Struc.	AIS	Injury Source
01	42	MALE	TREATED RELEASED	Lower Extremity	Skeletal	2	R.F. wheel

#### Body Region

Head  
Face  
Throat  
Chest  
Abdomen/Pelvis  
Spine  
Upper Extremity  
Lower Extremity  
External

#### Type of Anatomic Structure

Whole Area  
Vessels  
Nerves  
Organs  
Skeletal  
Head-LOC  
Skin-Burn  
Skin-Other

#### 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

### C. VEHICLE PROFILE

Vehicle No.	Class of Vehicle	Year/Make/Model	Most Severe Damage Based on Vehicle Inspection	
			Damage Plane	Damage Description
01	SUB COMPACT	1995 TOYOTA TERCEL	RIGHT SIDE	RIGHT outside mirror BROKEN OFF. DENTS, STRACHES TO RIGHT SIDE

DO NOT SANITIZE THIS FORM



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

# ACCIDENT COLLISION DIAGRAM

NATIONAL ACCIDENT SAMPLING SYSTEM  
CRASHWORTHINESS DATA SYSTEM

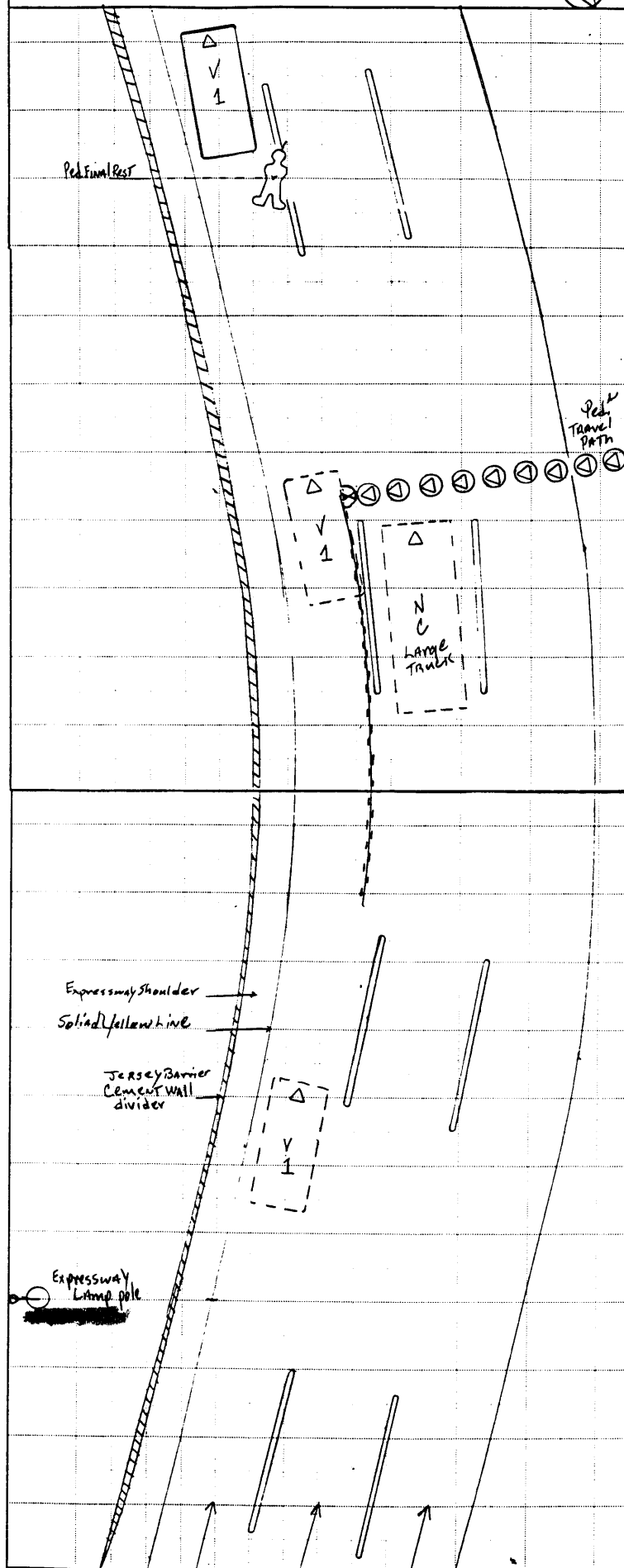
PSU No. 90

Case Number—Stratum 6054

Indicate  
North



BEST AVAILABLE COPY





# PEDESTRIAN ACCIDENT COLLISION MEASUREMENT TABLE

Primary Sampling Unit Number 9 0

Case Number-Stratum 6 0 5 P

PEDESTRIAN ACCIDENT COLLISION DATA COLLECTION		SCALED DIAGRAM
<ul style="list-style-type: none"> <li>document reference point and reference line relative to physical features</li> </ul>	Surface Type <u>Cement</u>	<ul style="list-style-type: none"> <li>north arrow placed on diagram</li> </ul>
<ul style="list-style-type: none"> <li>documentation of all accident induced physical evidence including (if applicable):               <ul style="list-style-type: none"> <li>a) vehicle skid marks</li> <li>b) pedestrian contacts with ground or object</li> <li>c) vehicle/pedestrian point of impact (POI)</li> <li>d) location of pedestrian separation point from vehicle</li> <li>f) final resting points (FRP) for pedestrian and vehicle</li> </ul> </li> </ul>	Surface Condition <u>Worn/only</u> Coefficient of Friction <u>.60</u> Grade (v/h) Measurement a) at impact <u>0</u> b) between impact and final rest <u>0</u>	<ul style="list-style-type: none"> <li>grade measurements for all applicable roadways</li> <li>scaled representations of the physical plant including:               <ul style="list-style-type: none"> <li>a) all road/roadway delineation (e.g., crosswalks, curb/edge lines, lane markings, medians, pavement markings, parked vehicles, poles, signs, etc.)</li> <li>b) all traffic controls (e.g., lights, signs)</li> </ul> </li> </ul>
<ul style="list-style-type: none"> <li>documentation of the physical plant including:               <ul style="list-style-type: none"> <li>a) all road/roadway delineation (e.g., crosswalks, curb/edge lines, lane markings, medians, pavement markings, parked vehicles, poles, signs, etc.)</li> <li>b) all traffic controls (e.g., lights, signs)</li> </ul> </li> </ul>	Pedestrian Travel Direction <u>North</u> Vehicle Travel Direction <u>EAST</u> Number of Travel Lanes <u>3</u>	<ul style="list-style-type: none"> <li>scaled representations of the vehicle and pedestrian at pre-impact, impact, and final rest based upon either:               <ul style="list-style-type: none"> <li>a) physical evidence, or</li> <li>b) reconstructed accident dynamics</li> </ul> </li> </ul>

Reference Point: [REDACTED]

Reference Line: (North)

Left Yellow Top Lane Line  
(#3 Lane) of 8/8 Travel Lanes

Item	Distance and Direction from Reference Point	Distance and Direction from Reference Line
Origin	5.35 m. E	0 m
Begin Right Front Skid	11.6 m N	3.3 m E
Approx. Ped Point of Impact	24.2 m N	3.6 m E
End Right Front Skid	29.0 m N	3.6 m E
Ped. Final Rest	35.4 m N	3.7 m E



## PEDESTRIAN ACCIDENT FORM

<div style="border-bottom: 1px solid black; padding-bottom: 5px;">1. Primary Sampling Unit Number <span style="float: right;"><u>90</u></span></div> <div style="border-bottom: 1px solid black; padding-bottom: 5px;">2. Case Number - Stratum <span style="float: right;"><u>605P</u></span></div> <div style="background-color: black; color: white; text-align: center; padding: 5px;"><b>IDENTIFICATION</b></div> <div style="border-bottom: 1px solid black; padding-bottom: 5px;">3. Number of General Vehicle Forms Submitted <span style="float: right;"><u>01</u></span></div> <div style="border-bottom: 1px solid black; padding-bottom: 5px;">4. Date of Accident (Month, Day, Year) <span style="float: right;"><u>          </u> / <u>9</u> / <u>5</u></span></div> <div style="border-bottom: 1px solid black; padding-bottom: 5px;">5. Time of Accident <span style="float: right;"><u>1435</u></span></div> <div style="padding: 5px;">Code reported military time of accident.</div> <div style="padding: 5px;">NOTE: Midnight = 2400 Unknown = 9999</div>	<div style="background-color: black; color: white; text-align: center; padding: 5px;"><b>SPECIAL STUDIES - INDICATORS</b></div> <div style="padding: 5px;">Check (✓) each special study (SS15-SS19 below) that has been completed; code 1 for the checked special studies and 0 for the special studies not checked.</div> <div style="border-bottom: 1px solid black; padding-bottom: 5px;">6. <u>    </u> SS15 Administrative Use <span style="float: right;"><u>0</u></span></div> <div style="border-bottom: 1px solid black; padding-bottom: 5px;">7. <u>✓</u> SS16 Pedestrian Crash Data Study <span style="float: right;"><u>1</u></span></div> <div style="border-bottom: 1px solid black; padding-bottom: 5px;">8. <u>    </u> SS17 Impact Fires <span style="float: right;"><u>0</u></span></div> <div style="border-bottom: 1px solid black; padding-bottom: 5px;">9. <u>    </u> SS18 <span style="float: right;"><u>0</u></span></div> <div style="border-bottom: 1px solid black; padding-bottom: 5px;">10. <u>    </u> SS19 <span style="float: right;"><u>0</u></span></div> <div style="background-color: black; color: white; text-align: center; padding: 5px;"><b>NUMBER OF EVENTS</b></div> <div style="border-bottom: 1px solid black; padding-bottom: 5px;">11. Number of Recorded Events in This Accident <span style="float: right;"><u>01</u></span></div>
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## PEDESTRIAN STUDY CRITERIA

**Pedestrian Definition:**

Any person who is on a trafficway or on a sidewalk or path contiguous with a trafficway, or on private property (e.g., parking lot). Note: Pedestrians include persons who are in contact with the ground, roadway, etc. and are pushing carts, wagons, etc. or holding on to a vehicle.

Persons in or on a nonmotorist conveyance are not pedestrians and are excluded from this study. A nonmotorist conveyance is defined as any human powered device by which a nonmotorist may move, or by which a pedestrian or nonmotorist may move another nonmotorist. A nonmotorist conveyance for purposes of this study includes the following: bicycles, baby carriages, roller skates/blades, push carts, scooters, wheelchairs, animals, etc. For example, persons on a bicycle/scooter, roller skating/blading, in a baby carriage/push cart/wheelchair or on a horse are excluded.

**Case Selection Criteria:**

A forward moving, late model year (VEH04 equals 90 to 95) CDS applicable vehicle (VEH07 equals 01 to 49) must strike a pedestrian.

The striking portion of the vehicle structure must be original equipment manufacturer (OEM) without previous damage and or parts removed in the impact area. For example, vehicles equipped with deer guards, winches, snow plows, etc. or previously damaged in the impact area are excluded.

The pedestrian may not be lying or sitting.

The pedestrian impact(s) are the vehicle's only impact(s). If multiple pedestrians are impacted, each pedestrian shall be a separate case.

The first point of contact between the late model year, CDS applicable vehicle and the pedestrian must be forward of the top of the A pillar.

## PEDESTRIAN ACCIDENT EVENTS

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>01</u>	15. <u>R</u>	16. <u>72</u>	17. <u>00</u>	18. <u>0</u>

### **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

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

#### **CDS APPLICABLE VEHICLES**

- (F) Front
- (R) Right side
- (L) Left side
- (U) Undercarriage
- (9) Unknown

### **CODES FOR VEHICLE NUMBER OR OBJECT CONTACTED**

Collision with Nonfixed Object

- (72) Pedestrian



# PEDESTRIAN ASSESSMENT FORM

1. Primary Sampling Unit Number

90

2. Case Number - Stratum

605P

3. Pedestrian Number

01

10. Pedestrian's Weight

Code actual weight to the nearest  
kilogram.  
(999) Unknown

999

\_\_\_\_\_ pounds X .4536 = \_\_\_\_\_ kilograms

## PEDESTRIAN'S CHARACTERISTICS

4. Pedestrian's Age

Code actual age at time of accident.

(00) Less than one year old (specify by month): \_\_\_\_\_

(97) 97 years and older

(99) Unknown

42

5. Pedestrian's Sex

(1) Male

(2) Female - not reported pregnant

(3) Female - pregnant-1st trimester (1st-3rd month)

(4) Female - pregnant-2nd trimester (4th-6th month)

(5) Female - pregnant-3rd trimester (7th-9th month)

(6) Female - pregnant-term unknown

(9) Unknown

1

6. Pedestrian's Overall Height

Code actual height to the nearest  
centimeter.

(999) Unknown

999

\_\_\_\_\_ inches X 2.54 = \_\_\_\_\_ centimeters

7. Pedestrian's Height - Ground to Knee

Code to the nearest  
centimeter.

(999) Unknown

99

\_\_\_\_\_ inches X 2.54 = \_\_\_\_\_ centimeters

8. Pedestrian's Height - Ground to Hip

Code to the nearest  
centimeter.

(999) Unknown

999

\_\_\_\_\_ inches X 2.54 = \_\_\_\_\_ centimeters

9. Pedestrian's Height - Ground to Shoulder

Code to the nearest  
centimeter.

(999) Unknown

999

\_\_\_\_\_ inches X 2.54 = \_\_\_\_\_ centimeters

## PEDESTRIAN'S PRE-AVOIDANCE ACTIONS

11. Pedestrian Attitude

(1) Standing

(2) Crouching

(3) Kneeling

(4) Bending at waist

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

(9) Unknown

1

12. Pedestrian Motion

(0) Not moving

(1) Walking slowly

(2) Walking rapidly

(3) Running or jogging

(4) Hopping

(5) Skipping

(6) Jumping

(7) Falling/stumbling or rising

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

(9) Unknown

1

13. Pedestrian's Action Relative to Vehicle

(00) Stopped

(01) Crossing road, straight

(02) Crossing road, diagonally

(03) Moving in road, with traffic

(04) Moving in road, against traffic

(05) Off road, approaching road

(06) Off road, going away from road

(07) Off road, moving parallel

(08) Off road, crossing driveway

(09) Off road, moving along driveway

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

(99) Unknown

02

14. Pedestrian's Body (Chest) Orientation  
Relative to Striking Vehicle Prior to  
Avoidance Actions

(1) Facing vehicle

(2) Facing away

(3) Left side to vehicle

(4) Right side to vehicle

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

(9) Unknown

1

**PEDESTRIAN'S AVOIDANCE ACTIONS**15. Pedestrian's First Avoidance Actions 00

- (00) No avoidance actions
- (01) Stopped
- (02) Accelerated pace
- (03) Ran away (along vehicle path)
- (04) Jumped
- (05) Turned toward vehicle
- (06) Turned away from vehicle
- (07) Dove or fell away

Used hand(s) to :

- (11) Vault corner of vehicle
- (12) Vault onto vehicle
- (13) Brace against vehicle
- (14) Crouched and braced hands against vehicle
- (98) Other (specify): \_\_\_\_\_
- (99) Unknown

**PEDESTRIAN'S ORIENTATION AT IMPACT**16. Pedestrian's Head Orientation at Initial Impact 1

- (1) To front
- (2) To left
- (3) To right
- (4) Up
- (5) Down
- (8) Other (specify): \_\_\_\_\_
- (9) Unknown

17. Pedestrian's Body (Chest) Orientation at Initial Impact 1

- (1) Facing vehicle
- (2) Facing away
- (3) Left side to vehicle
- (4) Right side to vehicle
- (8) Other (specify): \_\_\_\_\_
- (9) Unknown

18. Pedestrian's Arm Orientation at Initial Impact 10

- (01) At sides
- (02) Folded across chest
- (03) Hands clasped behind back
- (04) Hands on hips
- (05) Hands in pockets

One or both arms:

- (06) Extended upward
- (07) Extended to side
- (08) Extended forward bracing
- (09) Extended, holding object (briefcase, suitcase, etc.)
- (10) Holding object (young child, grocery bag, etc.) in arm(s)
- (11) Holding object (young child, grocery bag, etc.) on shoulder(s) or head
- (98) Other (specify): \_\_\_\_\_
- (99) Unknown

19. Pedestrian's Leg Orientation at Initial Impact 03

- (01) Together
- (02) Apart-laterally
- (03) Apart-right leg forward
- (04) Apart-left leg forward
- (05) Apart- forward leg unknown
- (06) Left foot off the ground
- (07) Right foot off the ground
- (08) Both feet off the ground
- (98) Other (specify): \_\_\_\_\_
- (99) Unknown

20. Vehicle/Pedestrian's Interaction 12

- (01) Carried by vehicle, wrapped position
- (02) Carried by vehicle, slid to windshield
- (03) Carried by vehicle, position unknown
- (04) Passed over vehicle top
- (05) Thrown straight forward
- (06) Thrown forward and left of vehicle
- (07) Thrown forward and right of vehicle
- (08) Knocked to pavement, forward
- (09) Knocked to pavement, left of vehicle
- (10) Knocked to pavement, right of vehicle
- (11) Knocked to pavement, run over or dragged by vehicle
- (12) Shunted to left (corner impacts only)
- (13) Shunted to right (corner impacts only)
- (14) Bumped or pushed aside
- (15) Snagged, rotated
- (16) Snagged, dragged by vehicle
- (17) Foot or legs run over
- (98) Other (specify): \_\_\_\_\_
- (99) Unknown



## OFFICIAL RECORDS

## INJURY CONSEQUENCES

21. Police Reported Alcohol Presence  
For Pedestrian

- (0) No alcohol present  
(1) Yes alcohol present  
(7) Not reported  
(9) Unknown

7  
1

22. Alcohol Test Result For Pedestrian  
Code actual value (decimal implied  
before first digit—0.xx)

- (95) Test refused  
(96) None given  
(97) AC (Alcohol Content)  
test performed, results unknown  
(99) Unknown if test given

9 9

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

23. Police Reported Other Drug Presence  
For Pedestrian

- (0) No other drug(s) present  
(1) Yes other drug(s) present  
(7) Not reported  
(9) Unknown

7

24. Other Drug Specimen Test Result  
For Pedestrian

- (0) No specimen test given  
(1) Drug not found in specimen  
(2) Drug found in specimen,  
(specify): \_\_\_\_\_  
(3) Specimen test given,  
results unknown or not obtained  
(9) Unknown

9

25. Injury Severity (Police Rating)

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

3

26. Treatment - Mortality

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

3

*Nonfatal*

- (3) Hospitalization  
(4) Transported and released  
(5) Treatment at scene - non-transported  
(6) Treatment later  
(8) Treatment - other (specify): \_\_\_\_\_  
(9) Unknown

27. Type Of Medical Facility  
(for Initial Treatment)

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

1

28. Hospital Stay

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

9 9

29. Working Days Lost

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

9 7

**STOP - VARIABLES 30 THROUGH 37 ARE COMPLETED BY THE ZONE CENTER**30. Glasgow Coma Scale (GCS) Score 02  
(at Medical Facility)

(00) Not injured

(01) Injured - not treated at medical facility

(02) No GCS Score at medical facility

(03-15) Code the actual value of the initial GCS Score recorded at medical facility.

(97) Injured, details unknown

(99) Unknown if injured

31. Was the Pedestrian Given Blood? 9

(1) No - blood not given

(2) Yes - blood given

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

(9) Unknown if blood given

32. Arterial Blood Gases (ABG) -  $\text{HCO}_3$  01

(00) Not injured

(01) Injured, ABGs not measured or reported

(02-50) Code the actual value of the  $\text{HCO}_3$ (96) ABGs reported,  $\text{HCO}_3$  unknown

(97) Injured, details unknown

(99) Unknown if injured

33. Time to Death 00

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

(00) Not fatal

(96) Fatal - ruled disease

(99) Unknown

34. 1st Medically Reported Cause of Death 0035. 2nd Medically Reported Cause of Death 0036. 3rd Medically Reported Cause of Death 00

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

(00) Not fatal or no additional causes

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

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

(99) Unknown

37. Number of Recorded Injuries for This Pedestrian 02

Code the actual number of injuries recorded for this pedestrian.

(00) No recorded injuries

(97) Injured, details unknown

(99) Unknown if injured

ARE ALL APPLICABLE MEDICAL RECORDS INCLUDED WITH INITIAL SUBMISSION?

NO [ ] YES [ ]

UPDATE CANDIDATE?

NO [ ] YES [ ]



U.S. Department of Transportation

National Highway Traffic Safety  
Administration

## PEDESTRIAN INJURY FORM

Form Approved  
O.M.B. No. 2127-0021NATIONAL ACCIDENT SAMPLING SYSTEM  
PEDESTRIAN CRASH DATA STUDY

1. Primary Sampling Unit Number	<u>90</u>	3. Pedestrian Number	<u>01</u>
2. Case Number - Stratum	<u>605P</u>	4. Blank	<u>X X</u>

## INJURY DATA

Record below the actual injuries sustained by this pedestrian in **CHRONOLOGICAL** order 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 twenty-five injuries have been documented, encode the balance on the Pedestrian Injury Supplement.

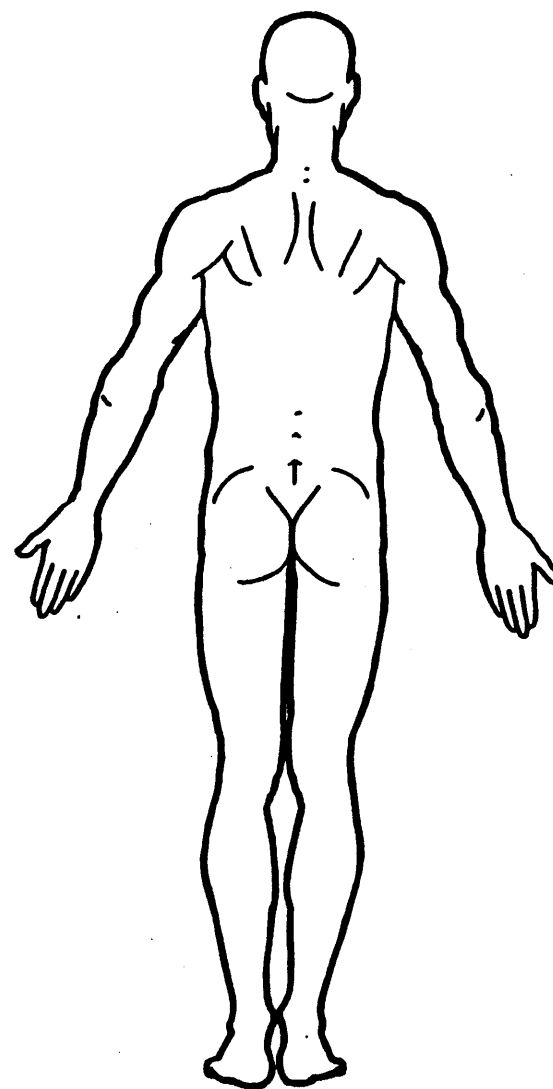
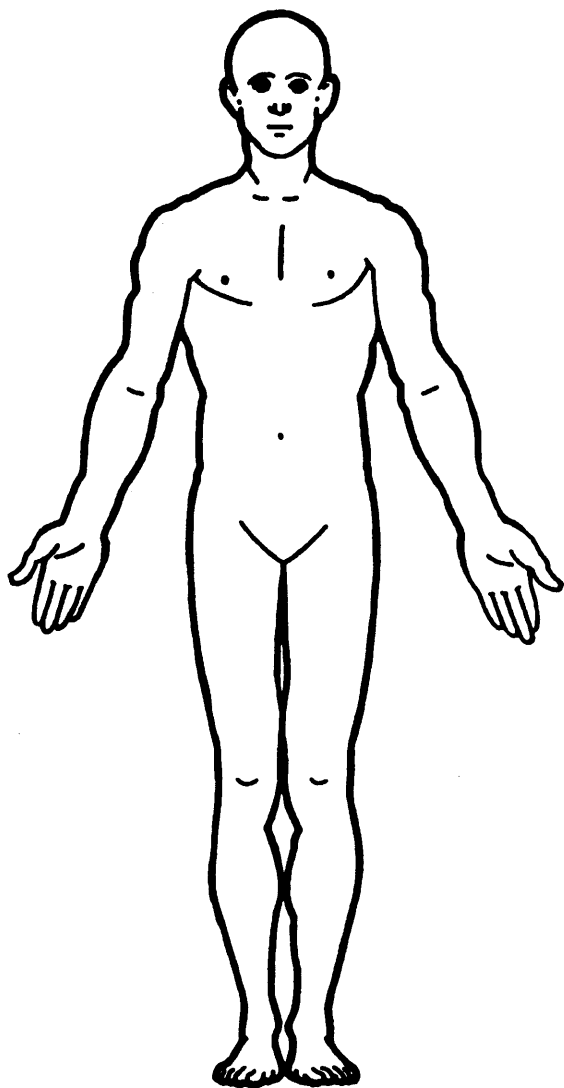
	Source of Injury Data	Body Region	Type of Anatomic Structure	Specific Anatomic Structure	Level of Injury	A.I.S. Severity	Aspect	Injury Source	Injury Confidence Level	Direct/ Indirect Injury	Striking Profile	Type Of Damage	Damage Depth
1st	5. <u>6</u>	6. <u>8</u>	7. <u>5</u>	8. <u>16</u>	9. <u>05</u>	10. <u>2</u>	11. <u>1</u>	12. <u>791</u>	13. <u>2</u>	14. <u>1</u>	15. <u>3</u>	16. <u>2</u>	17. <u>2</u>
2nd	18. <u>6</u>	19. <u>8</u>	20. <u>5</u>	21. <u>34</u>	22. <u>04</u>	23. <u>2</u>	24. <u>1</u>	25. <u>791</u>	26. <u>2</u>	27. <u>1</u>	28. <u>3</u>	29. <u>2</u>	30. <u>2</u>
3rd	31. <u>  </u>	32. <u>  </u>	33. <u>  </u>	34. <u>  </u>	35. <u>  </u>	36. <u>  </u>	37. <u>  </u>	38. <u>  </u>	39. <u>  </u>	40. <u>  </u>	41. <u>  </u>	42. <u>  </u>	43. <u>  </u>
4th	44. <u>  </u>	45. <u>  </u>	46. <u>  </u>	47. <u>  </u>	48. <u>  </u>	49. <u>  </u>	50. <u>  </u>	51. <u>  </u>	52. <u>  </u>	53. <u>  </u>	54. <u>  </u>	55. <u>  </u>	56. <u>  </u>
5th	57. <u>  </u>	58. <u>  </u>	59. <u>  </u>	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>
6th	70. <u>  </u>	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>	82. <u>  </u>
7th	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>	93. <u>  </u>	94. <u>  </u>	95. <u>  </u>
8th	96. <u>  </u>	97. <u>  </u>	98. <u>  </u>	99. <u>  </u>	100. <u>  </u>	101. <u>  </u>	102. <u>  </u>	103. <u>  </u>	104. <u>  </u>	105. <u>  </u>	106. <u>  </u>	107. <u>  </u>	108. <u>  </u>
9th	109. <u>  </u>	110. <u>  </u>	111. <u>  </u>	112. <u>  </u>	113. <u>  </u>	114. <u>  </u>	115. <u>  </u>	116. <u>  </u>	117. <u>  </u>	118. <u>  </u>	119. <u>  </u>	120. <u>  </u>	121. <u>  </u>
10th	122. <u>  </u>	123. <u>  </u>	124. <u>  </u>	125. <u>  </u>	126. <u>  </u>	127. <u>  </u>	128. <u>  </u>	129. <u>  </u>	130. <u>  </u>	131. <u>  </u>	132. <u>  </u>	133. <u>  </u>	134. <u>  </u>

## PEDESTRIAN INJURY DATA

[illegible]

## 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 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

**STRIKING PROFILE**

- (0) Injury not from vehicle contact
- (1) Flat-Narrow (< 15 centimeters)
- (2) Flat-Wide (≥ 15 centimeters)
- (3) Rounded (contoured)
- (4) Rounded edge
- (5) Sharp edge
- (8) Other (specify): \_\_\_\_\_

- (9) Unknown

**TYPE OF DAMAGE**

- (0) Injury not from vehicle contact
- (1) No damage/contact
- (2) Scratch (Scuff, Cloth Transfer, Smear)
- (3) Dent
- (4) Large deformation
- (5) Cracked, fractured, shattered
- (6) Separated from vehicle
- (7) Noncontact injury
- (8) Other specify: \_\_\_\_\_
- (9) Unknown

**DAMAGE DEPTH**

- (0) Injury not from vehicle contact
- (1) No residual damage
- (2) Surface only damage
- (3) Crush depth > 0 to 2 centimeters
- (4) Crush depth > 2 to 5 centimeters
- (5) Crush depth > 5 to 10 centimeters
- (8) Other specify: \_\_\_\_\_
- (9) Unknown

**PEDESTRIAN 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

**INJURY SOURCE**FRONT

- 700 Front bumper
- 701 Front lower valance/spoiler
- 702 Front grille
- 703 Hood edge and/or trim
- 704 Hood ornament (fixed)
- 705 Hood ornament (spring loaded)
- 706 Headlight
- 707 Retractable headlight door (Open/Closed)
- 708 Turn signal/parking lights
- 718 Other front or add on object (specify): \_\_\_\_\_
- 719 Unknown front object

Left Side Components

- 720 Front fender side surface
- 721 Front antenna
- 722 A1 pillar
- 723 A2 pillar
- 724 B pillar
- 725 C pillar
- 726 D pillar
- 728 Other pillar (specify): \_\_\_\_\_
- 729 Left side roof rail
- 730 Left side door surface
- 731 Left side door handle
- 732 Left side mirror fixed housing
- 733 Left side folding mirror
- 734 Left side glazing forward of B pillar
- 735 Left side glazing rearward of B pillar
- 736 Left side back fender or quarter panel
- 737 Rear antenna
- 738 Other left side object (specify): \_\_\_\_\_
- 739 Unknown left side component

Right Side Components

- 740 Front fender side surface
- 741 Front antenna
- 742 A1 pillar
- 743 A2 pillar

- 744 B pillar
- 745 C pillar
- 746 D pillar
- 748 Other pillar (specify): \_\_\_\_\_
- 749 Right side roof rail
- 750 Right side door surface
- 751 Right side door handle
- 752 Right side mirror fixed housing
- 753 Right side folding mirror
- 754 Right side glazing forward of B pillar
- 755 Right side glazing rearward of B pillar
- 756 Rear antenna
- 757 Rear fender or quarter panel
- 758 Other right side object (specify): \_\_\_\_\_
- 759 Unknown right side component

Back Components

- 760 Rear (back) bumper
- 761 Tailgate
- 762 Hatchback, vertical surface
- 768 Other back component (specify): \_\_\_\_\_
- 769 Unknown back component

Top Components

- 770 Hood surface
- 771 Hood surface reinforced by under hood component
- 772 Front fender top surface
- 773 Cowl area
- 774 Wiper blade & mountings
- 775 Windshield glazing
- 776 Front header
- 777 Roof surface
- 778 Backlight glazing
- 779 Rear header
- 780 Hatchback
- 781 Rear trunk lid
- 788 Other top component (specify): \_\_\_\_\_
- 789 Unknown top component

Wheels / tires

- 790 Left front wheel / tire
- 791 Right front wheel / tire
- 792 Left rear wheel / tire
- 793 Right rear wheel / tire
- 798 Other wheel / tire (specify): \_\_\_\_\_
- 799 Unknown wheel / tire

Undercarriage components

- 800 Front crossmember
- 801 Steering assembly/Front suspension
- 802 Oil pan
- 803 Exhaust system pipe
- 804 Transmission
- 805 Drive shaft
- 806 Catalytic converter
- 807 Muffler
- 808 Floor pan
- 809 Fuel tank
- 810 Rear suspension
- 818 Other undercarriage component (specify): \_\_\_\_\_
- 819 Unknown undercarriage component

Accessories

- 820 Air scoop, deflector
- 821 Cellular or CB radio antenna
- 822 Emergency lights or bar
- 823 Fog lights
- 824 Luggage, ski, or bike rack
- 825 Cargo (specify): \_\_\_\_\_
- 826 Spare tire
- 827 Spotlight
- 828 Other accessory (specify): \_\_\_\_\_

Other Object or Vehicle in Environment

- 947 Ground
- 948 Other object (specify): \_\_\_\_\_
- 949 Unknown object in environment
- 959 Unknown object on contacting vehicle
- 997 Noncontact injury source
- 999 Unknown injury source

# OFFICIAL INJURY DATA — SKELETAL INJURIES

Restrained?

☒ No  
☐ Yes

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

Blood Alcohol Level  
(mg/dl)

BAL = ?

Glasgow Coma  
Scale Score

GCSS = 15 EMS

Units of Blood  
Given

Units = ?

Arterial Blood Gases

Ph = ?

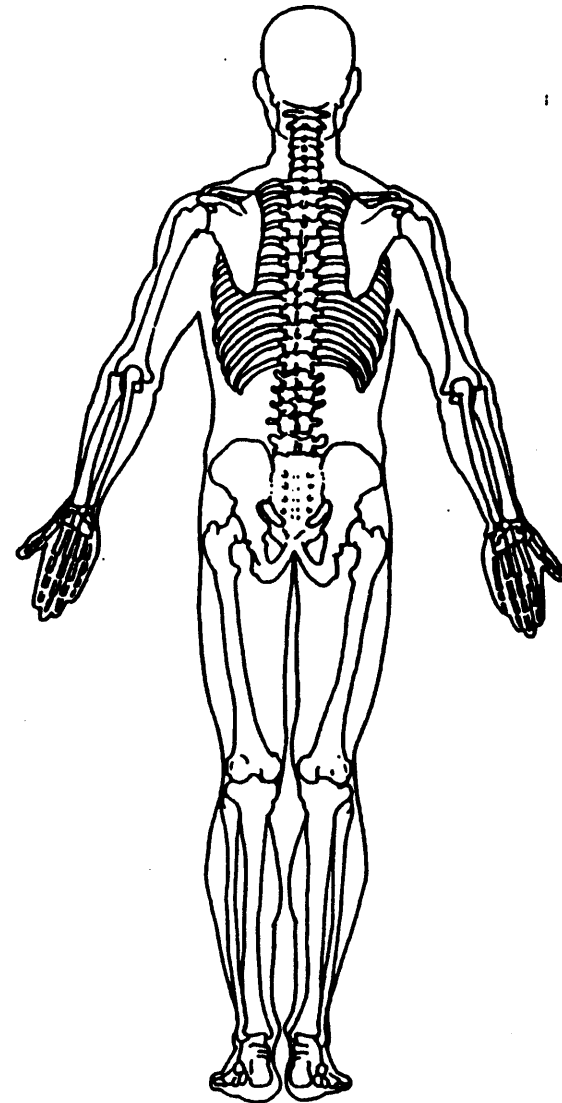
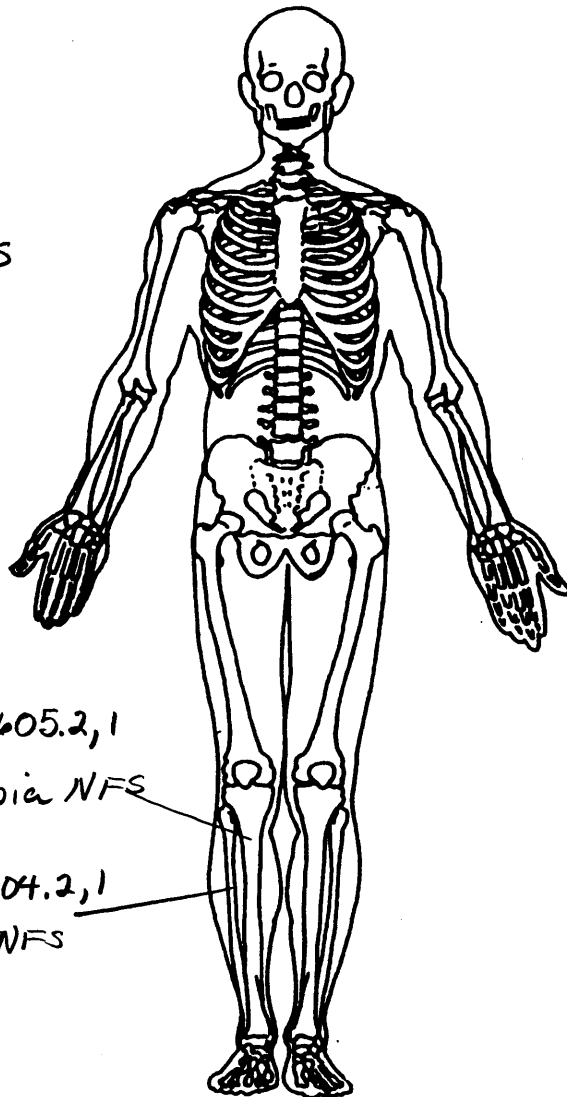
PO<sub>2</sub> = ?

PCO<sub>2</sub> = ?

HCO<sub>3</sub> = 6,85/605.2,1

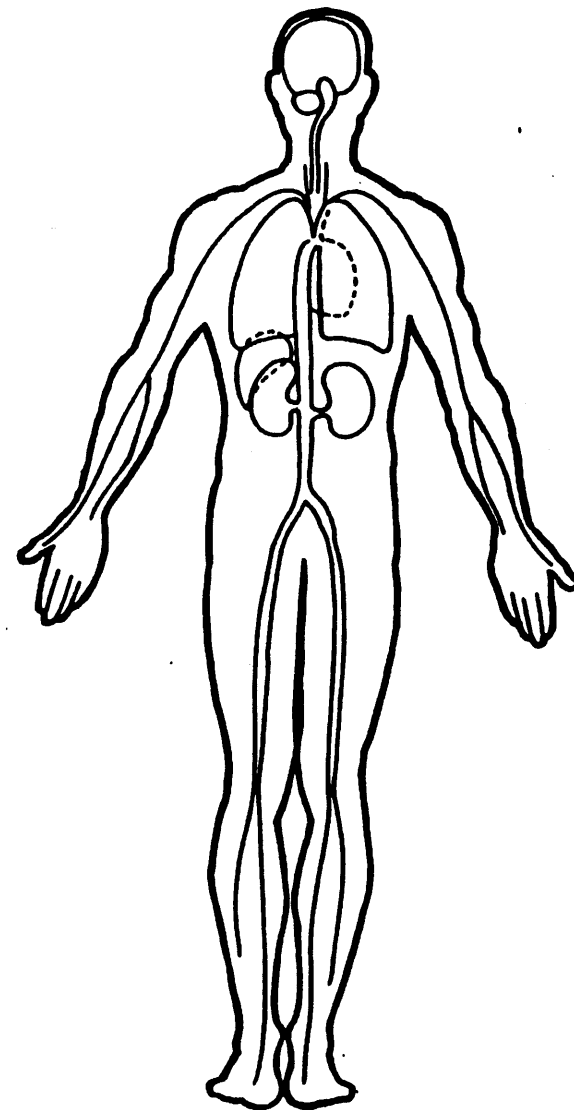
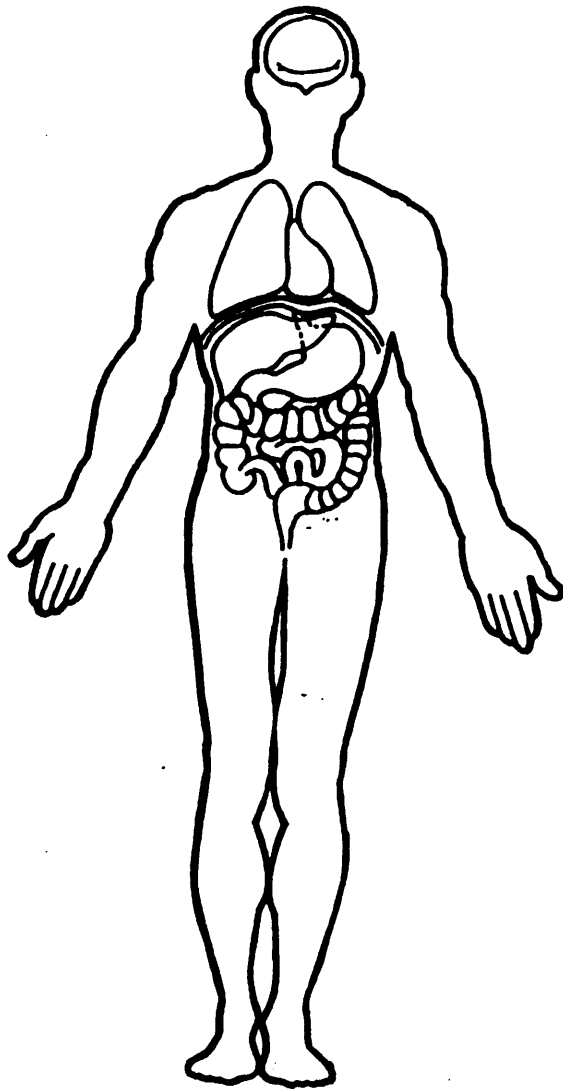
1x @ tibia NFS

6,853404.2,1  
1x @ fibula NFS



## 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.)







OFFICIAL RECORDS

1. Primary Sampling Unit Number 90  
2. Case Number - Stratum 605P  
3. Vehicle Number 01

VEHICLE IDENTIFICATION

4. Vehicle Model Year 95  
Code the last two digits of the model year  
(99) Unknown
5. Vehicle Make (specify): 49  
TOYOTA  
Applicable codes are found in your  
NASS PCDS Data Collection, Coding and  
Editing Manual.  
(99) Unknown
6. Vehicle Model (specify): 038  
TERCEL  
Applicable codes are found in your  
NASS PCDS Data Collection, Coding and  
Editing Manual.  
(99) Unknown
7. Body Type 02  
Note: Applicable codes may be found on  
the back of this page.
8. Vehicle Identification Number  
JT2EL56E857 [REDACTED]  
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17  
Left justify; Slash zeros and letter Z (0 and Z)  
No VIN—Code all zeros  
Unknown—Code all nines

9. Police Reported Travel Speed 999

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

\_\_\_ mph X 1.6093 = \_\_\_ kmph

10. Speed Limit 089

(000) No statutory limit  
Code posted or statutory speed limit  
in kmph  
(999) Unknown

55 mph X 1.6093 = 88.5 kmph

11. Police Reported Alcohol Presence For Driver 0

(0) No alcohol present  
(1) Yes alcohol present  
(7) Not reported  
(8) No driver present  
(9) Unknown

12. Alcohol Test Result For Driver 96

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

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

13. Police Reported Other Drug Presence  
For Driver 0

(0) No other drug(s) present  
(1) Yes other drug(s) present  
(7) Not reported  
(8) No driver present  
(9) Unknown

14. Other Drug Specimen Test Result  
For Driver 0

(0) No specimen test given  
(1) Drug not found in specimen  
(2) Drug found in specimen  
(specify): \_\_\_\_\_  
(3) Specimen test given, results  
unknown or not obtained  
(8) No driver present  
(9) Unknown

# CODES FOR BODY TYPE

## CDS APPLICABLE VEHICLES

### Automobiles

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

### Automobile Derivatives

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

### Utility Vehicles ( $\leq 4,500$ kgs GVWR)

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

### Van Based Light Trucks ( $\leq 4,500$ kgs GVWR)

- (20) Minivan (Chrysler Town and Country, Caravan, Grand Caravan, Voyager, Grand Voyager, Mini-Ram, Dodge/Plymouth Vista, Aerostar, Villager, Lumina APV, Trans Sport, Silhouette, Astro, Safari, Toyota Van, Toyota Minivan, Previa, Nissan Minivan, Quest, Mitsubishi Minivan, Vanagon/Camper.)
- (21) Large van (B150-B350, Sportsman, Royal, Maxiwagon, Ram, Tradesman, Voyager [83 and before], E150-E350, Econoline, Clubwagon, Chateau, G10-G30, Chevy Van, Beauville, Sport Van, G15-G35, Rally Van, Vandura.)
- (22) Step van or walk-in van ( $\leq 4,500$  kgs GVWR)
- (23) Van based motorhome ( $\leq 4,500$  kgs GVWR)
- (24) Van based school bus ( $\leq 4,500$  kgs GVWR)
- (25) Van based other bus ( $\leq 4,500$  kgs GVWR)
- (28) Other van type (Hi-Cube Van, Kary) (specify): \_\_\_\_\_
- (29) Unknown van type

### Light Conventional Trucks (Pickup style cab, $\leq 4,500$ kgs GVWR)

- (30) Compact pickup (D50, Colt P/U, Ram 50, Dakota, Arrow Pickup [foreign], Ranger, Courier, S-10, T-10, LUV, S-15, T-15, Sonoma, Datsun/Nissan Pickup, P'up, Mazda Pickup, Toyota Pickup, Mitsubishi Pickup)
- (31) Large Pickup (Jeep Pickup, Comanche, Ram Pickup, D100-D350, W100-W350, F100-F350, C10-C35, K10-K35, R10-R35, V10-V35, Silverado, Sierra, R100-R500.)

- (32) Pickup with slide-in camper
- (33) Convertible pickup
- (39) Unknown pickup style light conventional truck type

### Other Light Trucks ( $\leq 4,500$ kgs GVWR)

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

## OTHER VEHICLES

### Buses (Excludes Van Based)

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

### Medium/Heavy Trucks ( $> 4,500$ kgs GVWR)

- (60) Step van ( $> 4,500$  kgs GVWR)
- (61) Single unit straight truck ( $4,500$  kgs  $<$  GVWR  $\leq 8,850$  kgs)
- (62) Single unit straight truck ( $8,850$  kgs  $<$  GVWR  $\leq 12,000$  kgs)
- (63) Single unit straight truck ( $> 12,000$  kgs GVWR)
- (64) Single unit straight truck, GVWR unknown
- (65) Medium/heavy truck based motorhome
- (67) Truck-tractor with no cargo trailer
- (68) Truck-tractor pulling one trailer
- (69) Truck-tractor pulling two or more trailers
- (70) Truck-tractor (unknown if pulling trailer)
- (78) Unknown medium/heavy truck type
- (79) Unknown truck type (light/medium/heavy)

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

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

### Other Vehicles

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

## VEHICLE WEIGHT ITEMS

15. Vehicle Curb Weight 0.910  
 \_\_\_\_\_ Code weight to nearest  
 10 kilograms.

(045) Less than 450 kilograms

(610) 6,100 kilograms or more

(999) Unknown

2,005 lbs X .4536 = 0.909 kgs

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

16. Vehicle Cargo Weight 0.000  
 \_\_\_\_\_ Code weight to nearest  
 10 kilograms.

(000) Less than 5 kilograms

(450) 4,500 kilograms or more

(999) Unknown

\_\_\_\_\_, \_\_\_\_\_ lbs X .4536 = \_\_\_\_\_ kgs

## OTHER DATA

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

**STOP - VARIABLES 18 THROUGH 20  
 ARE COMPLETED BY THE ZONE CENTER**

## RECONSTRUCTION DATA

18. Impact Speed 047  
 \_\_\_\_\_ Nearest kmph

(NOTE: 000 means greater than .5 kmph)

(160) 159.5 kmph and above

(999) Unknown

19. Accuracy Range of Impact Speed Estimate 2  
 (0) No reconstruction  
 (1) Less than 2 kmph  
 (2) ≥ 2 kmph and ≤ 8 kmph  
 (3) ≥ 9 kmph and ≤ 16 kmph  
 (4) ≥ 17 kmph and ≤ 26 kmph  
 (9) Unknown

20. Data Source of Impact Speed 1  
 (0) No impact speed calculated  
 (1) Zone center calculation  
 (2) Police calculation  
 (3) Driver/witness/police estimates

## PRECRASH DATA

21. Driver's Attention to Driving 1  
 (Prior to Recognition of Critical Event)  
 (1) Full attention to driving  
 (2) Distracted by other occupant  
 (3) Distracted by moving object in vehicle  
 (4) Distracted by outside person, object, or event  
 (5) Talking on cellular phone or CB radio  
 Specify: \_\_\_\_\_  
 (6) Sleeping or dozing while driving  
 (8) Other (specify): \_\_\_\_\_  
 (9) Unknown

22. Pre-Event Vehicle Movement 01  
 (Prior to Recognition of Critical Event)  
 (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

## 23. Critical Precrash Event

80*This Vehicle Loss of Control Due To:*

- (01) Blow out or flat tire
- (02) Stalled engine
- (03) Disabling vehicle failure (e.g., wheel fell off) (specify): \_\_\_\_\_
- (04) Non-disabling vehicle problem (e.g., hood flew up) (specify): \_\_\_\_\_
- (05) Poor road conditions (puddle, pot hole, ice, etc.) (specify): \_\_\_\_\_
- (06) Traveling too fast for conditions
- (08) Other cause of control loss (specify): \_\_\_\_\_

## (09) Unknown cause of control loss

*This Vehicle Traveling*

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

*Other Motor Vehicle In Lane*

- (50) Stopped
- (51) Traveling in same direction with lower speed (i.e., lower steady speed or decelerating)
- (52) Traveling in same direction with higher speed
- (53) Traveling in opposite direction
- (54) In crossover
- (55) Backing
- (59) Unknown travel direction of other motor vehicle in lane

*Other Motor Vehicle Encroaching Into Lane*

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

*Pedestrian or Pedalcyclist, or Other Nonmotorist*

- (80) Pedestrian in roadway
- (81) Pedestrian approaching roadway
- (82) Pedestrian—unknown location

- (83) Pedalcyclist or other nonmotorist in roadway (specify): \_\_\_\_\_

- (84) Pedalcyclist or other nonmotorist approaching roadway (specify): \_\_\_\_\_

- (85) Pedalcyclist or other nonmotorist—unknown location (specify): \_\_\_\_\_

*Object or Animal*

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

- (99) Unknown

0302

## 24. Attempted Avoidance Maneuver

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

3

## 25. Precrash Stability After Avoidance Maneuver

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

2

## 26. Precrash Directional Consequences of Avoidance Maneuver (Corrective Action)

- (0) No driver present
- (1) No avoidance maneuver
- (2) Vehicle stayed in travel lane where avoidance maneuver was initiated
- (3) Vehicle stayed on roadway but left travel lane where avoidance maneuver was initiated
- (4) Vehicle stayed on roadway, not known if left travel lane where avoidance maneuver was initiated
- (5) Vehicle departed roadway
- (6) Avoidance maneuver initiated off roadway
- (9) Directional consequences unknown

2

## ENVIRONMENTAL DATA

## 27. Relation to Junction

- (0) Non-junction  
(1) Interchange area

*Non-Interchange*

- (2) Intersection  
(3) Intersection-related  
(4) Drive, alley access related  
(5) Other non-interchange (specify):  
  
(6) Unknown type of non-interchange  
(9) Unknown if interchange

## 28. Trafficway Flow

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

## 29. Number of Travel Lanes

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

## 30. Roadway Alignment

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

## 31. Roadway Profile

- (1) Level  
(2) Uphill Grade (> 2%)  
(3) Downhill Grade (> 2%)  
(4) Hillcrest  
(5) Sag  
(9) Unknown

## 32. Roadway Surface Type

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

## 33. Roadway Surface Condition

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

## 34. Traffic Control Device

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

*Regulatory or School Zone Sign (Not RR Crossing)*

- (2) Stop sign  
(3) Yield sign  
(4) School zone sign  
(5) Other sign (specify):  
55 MPH Speed Limit sign  
(6) Unknown sign  
(7) Warning sign (not RR crossing)  
(8) Miscellaneous/other controls including RR controls (specify):  
  
(9) Unknown

## 35. Traffic Control Device Functioning

- (0) No traffic control  
(1) Not Functioning  
(2) Functioning  
(9) Unknown

## 36. Light Conditions

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

## 37. Atmospheric Conditions

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



1. Primary Sampling Unit Number

90

3. Vehicle Number

01

2. Case Number - Stratum

605P

VEHICLE IDENTIFICATION

VIN 5T2E456E857 [REDACTED]

Model Year 95

Vehicle Make (specify):

TOYOTA

Vehicle Model (specify):

TERCEL DX

PEDESTRIAN FRONT CONTACT WORK SHEET

PEV06 Hood Material

PEV08 Hood Length

cm

PEV09 Hood Width-Forward Opening

cm

PEV10 Hood Width-Midway

cm

PEV11 Hood Width-Rear Opening

cm

PEV14 Front Bumper Cover Material

PEV15 Front Bumper Reinforcement Material

VERTICAL MEASUREMENTS

PEV16 Front Bumper-Bottom Height

cm

PEV17 Front Bumper-Top Height

cm

PEV18 Forward Hood Opening

cm

PEV19 Front Bumper Lead

cm

WRAP DISTANCES

PEV20 Ground to Forward Hood Opening

cm

PEV21 Ground to Front/Top Transition Point

cm

PEV22 Ground to Rear Hood Opening

cm

PEV23 Ground to Base of Windshield

cm

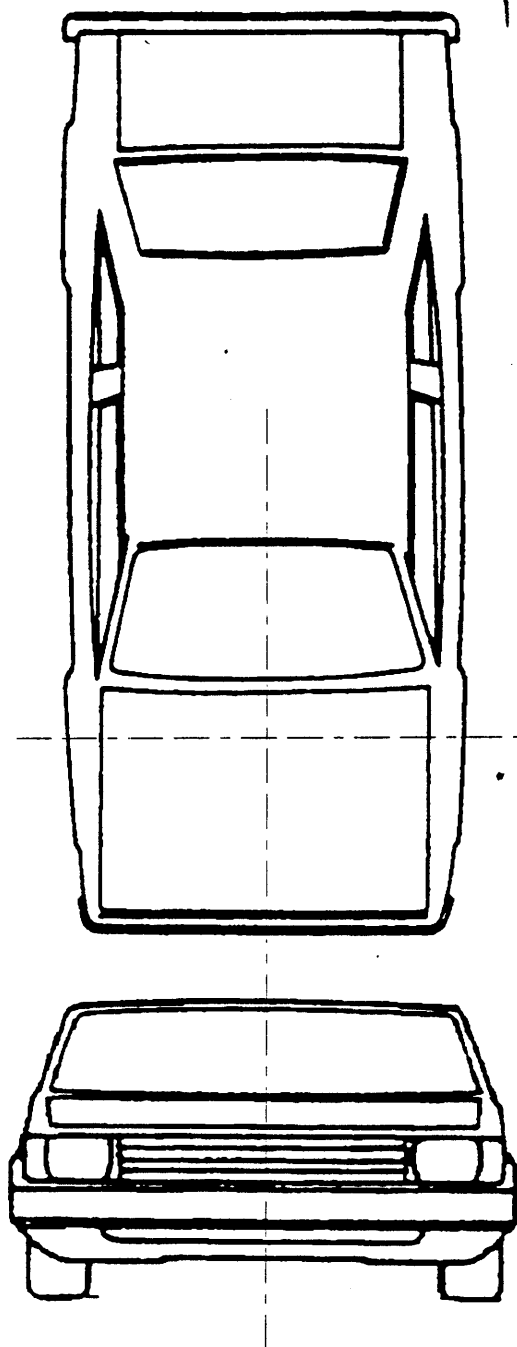
PEV24 Ground to Top of Windshield

cm

PEV25 Ground to Head Contact

cm

## VEHICLE DAMAGE SKETCH



NOTES: Sketch all pedestrian contacts, include the size and depth in centimeters. Locate the pedestrian contacts from the intercept point of the centerline (lateral) and the front axles (longitudinal) in centimeters. Annotate observations which might be useful in reconstructing the accident (e.g., grass in tire bead, direction of striations, scuff on sidewalls, etc.).

Location of the origin (intercept point of the centerline and the front axles) from the ground: \_\_\_\_\_ cm

## PEDESTRIAN SIDE CONTACT WORK SHEET

PEV06 Hood Material

STEEL

PEV08 Hood Length

088 cm

PEV09 Hood Width-Forward Opening

125 cm

PEV10 Hood Width-Midway

131 cm

PEV11 Hood Width-Rear Opening

135 cm

## VERTICAL MEASUREMENTS

PEV26 Ground Clearance

023 cm

PEV27 Side Bumper-Bottom Height

040 cm

PEV28 Side Bumper-Top Height

048 cm

PEV29 Centerline of Wheel

026 cm

PEV30 Top of Tire

057 cm

PEV31 Top of Wheel Well Opening

063 cm

PEV32 Bottom of A-Pillar at Windshield

085 cm

PEV33 Top of A-Pillar at Windshield

122 cm

PEV34 Top of Side View Mirror

096 cm

## LATERAL MEASUREMENTS

PEV35 C<sub>L</sub> to A-Pillar at Bottom of Windshield073 cmPEV36 C<sub>L</sub> to A-Pillar at Top of Windshield053 cmPEV37 C<sub>L</sub> to Maximum Side View Mirror Protrusion092 cm

## WRAP DISTANCES

PEV38 Ground to Side/Top Transition

085 cm

PEV39 Ground to Hood Edge

090 cm

PEV40 Ground to Centerline of Hood (ORIGIN)

158 cm

PEV41 Ground to Head Contact

N/A cm



## ORIGINAL SPECIFICATIONS

Wheelbase	<u>0</u> <u>9</u> <u>3</u> . <u>7</u>	inches	x 2.54	=	<u>2</u> <u>3</u> <u>8</u>	cm
Overall Length	<u>1</u> <u>6</u> <u>1</u> . <u>8</u>	inches	x 2.54	=	<u>4</u> <u>1</u> <u>1</u>	cm
Maximum Width	<u>  </u> <u>6</u> <u>5</u> . <u>3</u>	inches	x 2.54	=	<u>  </u> <u>1</u> <u>6</u> <u>6</u>	cm
Curb Weight	<u>  </u> <u>2</u> . <u>0</u> <u>0</u> <u>5</u>	pounds	x .4536	=	<u>  </u> <u>0</u> . <u>9</u> <u>0</u> <u>9</u>	kg
Average Track	<u>  </u> <u>5</u> <u>5</u> . <u>7</u>	inches	x 2.54	=	<u>  </u> <u>1</u> <u>4</u> <u>1</u>	cm
Front Overhang	<u>  </u> <u>3</u> <u>1</u> . <u>8</u>	inches	x 2.54	=	<u>  </u> <u>8</u> <u>1</u>	cm
Rear Overhang	<u>  </u> <u>3</u> <u>7</u> . <u>0</u>	inches	x 2.54	=	<u>  </u> <u>9</u> <u>4</u>	cm
Undeformed End Width	<u>  </u> <u>  </u> <u>  </u> . <u>  </u>	inches	x 2.54	=	<u>  </u> <u>  </u> <u>  </u>	cm
Engine Size: cyl./displ.	<u>  </u> <u>1</u> <u>5</u> <u>0</u> <u>0</u>	cc	x .001	=	<u>  </u> <u>1</u> . <u>5</u>	L
	<u>  </u> <u>  </u> <u>  </u>	CID	x .0164	=	<u>  </u> <u>  </u> <u>  </u>	L

## INJURY SOURCE

### FRONT

700 Front bumper  
 701 Front lower valance/spoiler  
 702 Front grille  
 703 Hood edge and/or trim  
 704 Hood ornament (fixed)  
 705 Hood ornament (spring loaded)  
 706 Headlight  
 707 Retractable headlight door (Open/Closed)  
 708 Turn signal/parking lights  
 718 Other front or add on object  
     (specify): \_\_\_\_\_  
 719 Unknown front object

### Left Side Components

720 Front fender side surface  
 721 Front antenna  
 722 A1 pillar  
 723 A2 pillar  
 724 B pillar  
 725 C pillar  
 726 D pillar  
 728 Other pillar  
     (specify): \_\_\_\_\_  
 729 Left side roof rail  
 730 Left side door surface  
 731 Left side door handle  
 732 Left side mirror fixed housing  
 733 Left side folding mirror  
 734 Left side glazing forward of B pillar  
 735 Left side glazing rearward of B pillar  
 736 Left side back fender or quarter panel  
 737 Rear antenna  
 738 Other left side object  
     (specify): \_\_\_\_\_  
 739 Unknown left side component

### Right Side Components

740 Front fender side surface  
 741 Front antenna  
 742 A1 pillar  
 743 A2 pillar

744 B pillar  
 745 C pillar  
 746 D pillar  
 748 Other pillar (specify): \_\_\_\_\_  
 749 Right side roof rail  
 750 Right side door surface  
 751 Right side door handle  
 752 Right side mirror fixed housing  
 753 Right side folding mirror  
 754 Right side glazing forward of B pillar  
 755 Right side glazing rearward of B pillar  
 756 Rear antenna  
 757 Rear fender or quarter panel  
 758 Other right side object  
     (specify): \_\_\_\_\_  
 759 Unknown right side component

### Back Components

760 Rear (back) bumper  
 761 Tailgate  
 762 Hatchback, vertical surface  
 768 Other back component  
     (specify): \_\_\_\_\_  
 769 Unknown back component

### Top Components

770 Hood surface  
 771 Hood surface reinforced by under hood component  
 772 Front fender top surface  
 773 Cowl area  
 774 Wiper blade & mountings  
 775 Windshield glazing  
 776 Front header  
 777 Roof surface  
 778 Backlight glazing  
 779 Rear header  
 780 Hatchback  
 781 Rear trunk lid  
 788 Other top component (specify): \_\_\_\_\_  
 789 Unknown top component

### Wheels / tires

790 Left front wheel / tire  
 791 Right front wheel / tire  
 792 Left rear wheel / tire  
 793 Right rear wheel / tire  
 798 Other wheel / tire (specify): \_\_\_\_\_  
 799 Unknown wheel / tire

### Undercarriage components

800 Front cross member  
 801 Steering assembly/Front suspension  
 802 Oil pan  
 803 Exhaust system pipe  
 804 Transmission  
 805 Drive shaft  
 806 Catalytic converter  
 807 Muffler  
 808 Floor pan  
 809 Fuel tank  
 810 Rear suspension  
 818 Other undercarriage component  
     (specify): \_\_\_\_\_  
 819 Unknown undercarriage component

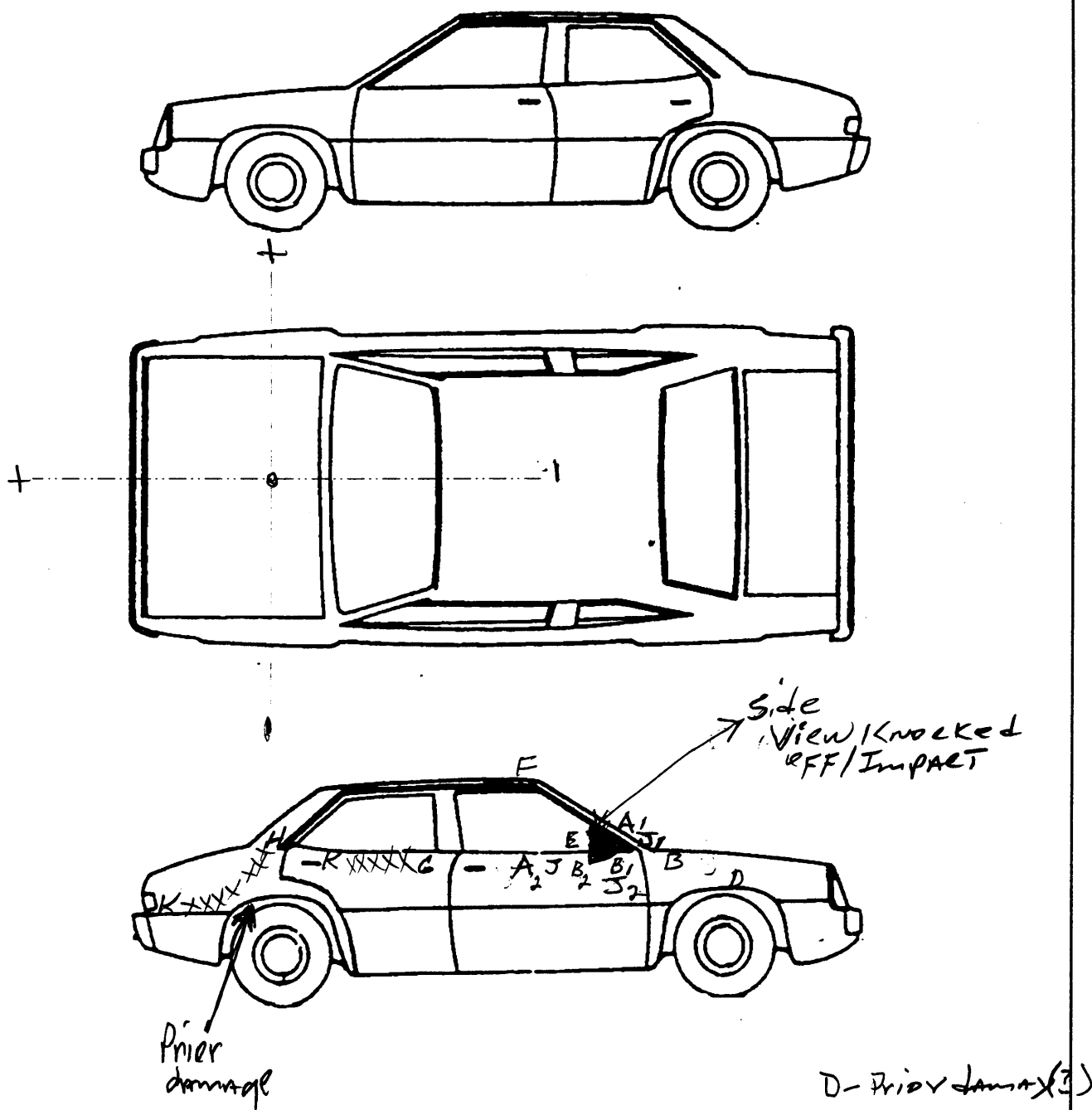
### Accessories

820 Air scoop, deflector  
 821 Cellular or CB radio antenna  
 822 Emergency lights or bar  
 823 Fog lights  
 824 Luggage, ski, or bike rack  
 825 Cargo (specify): \_\_\_\_\_  
 826 Spare tire  
 827 Spotlight  
 828 Other accessory (specify): \_\_\_\_\_

### Other Object or Vehicle in Environment

947 Ground  
 948 Other object (specify): \_\_\_\_\_  
 949 Unknown object in environment  
 959 Unknown object on contacting vehicle  
 997 Noncontact injury source  
 999 Unknown injury source

## VEHICLE DAMAGE SKETCH



NOTES: Sketch all pedestrian contacts, include the size and depth in centimeters. Locate the pedestrian contacts from the intercept point of the centerline (lateral) and the front axes (longitudinal) in centimeters. Annotate observations which might be useful in reconstructing the accident (e.g., grass in tire bead, direction of striations, scuff on sidewalls, etc.).

Location of the origin (intercept point of the centerline and the front axes) from the ground: 148 cm

## PEDESTRIAN CONTACT WORKSHEET

[illegible]



## VEHICLE DIMENSIONS

4. Original Wheelbase 238  
 \_\_\_\_\_ Code to the  
 nearest centimeter  
 (999) Unknown

93.7 inches X 2.54 = 238 centimeters

5. Original Average Track Width 141  
 \_\_\_\_\_ Code to the  
 nearest centimeter  
 (185) 185 centimeters or more  
 (999) Unknown

55.7 inches X 2.54 = 141 centimeters

6. Hood Material 3  
 (1) Plastic  
 (2) Fiberglass  
 (3) Steel  
 (4) Aluminum  
 (5) Stainless Steel  
 (8) Other (specify): \_\_\_\_\_  
 (9) Unknown

7. Hood Original 1  
 Equipment Manufacturer (OEM)  
 (1) OEM factory installed hood  
 (2) OEM replacement  
 (3) Non-OEM replacement  
 (9) Unknown

8. Hood Length 088  
 \_\_\_\_\_ Code to the  
 nearest centimeter  
 (180) 180 centimeters or more  
 (999) Unknown

346.4 inches X 2.54 = 088 centimeter

9. Hood Width Forward Opening 125  
 \_\_\_\_\_ Code to the  
 nearest centimeter  
 (210) 210 centimeters or more  
 (999) Unknown

049.2 inches X 2.54 = 125 centimeters

10. Hood Width Midway 131  
 \_\_\_\_\_ Code to the  
 nearest centimeter  
 (210) 210 centimeters or more  
 (999) Unknown

051.5 inches X 2.54 = 131 centimeters

11. Hood Width Rear Opening 135  
 \_\_\_\_\_ Code to the  
 nearest centimeter  
 (210) 210 centimeters or more  
 (999) Unknown

053.1 inches X 2.54 = 135 centimeters

12. Hood/Fender Vertical/Lateral Crush From Pedestrian 0  
 (0) Not damaged  
 (1) Surface scratching only, no residual crush  
 (2) Minor crush (1-3 centimeters)  
 (3) Moderate crush (4-7 centimeters)  
 (4) Severe crush (> 7 centimeters)  
 (8) Damage present, unknown if damage is from pedestrian impact  
 (9) Unknown

13. Windshield Contact Damage From Pedestrian Contact 0  
 (0) Not contacted by pedestrian  
 (1) Contacted by pedestrian - not damaged  
 (2) Contacted by pedestrian - damaged  
 (3) Unknown if contacted by pedestrian - not damaged  
 (4) Unknown if contacted by pedestrian - damaged  
 (9) Unknown if contacted by pedestrian - unknown if damaged

## FRONT CONTACT DAMAGE

## Front Vertical Measurements

14. Front Bumper Cover Material 0  
 (0) No front contact  
 (1) Plastic  
 (2) Fiberglass  
 (3) Rubber  
 (4) Other (specify): \_\_\_\_\_  
 (9) Unknown

15. Front Bumper Reinforcement Material 0  
 (0) No front contact  
 (1) Steel  
 (2) Aluminum  
 (3) Stainless Steel  
 (4) Other (specify): \_\_\_\_\_  
 (9) Unknown

16. Front Bumper-Bottom Height 000  
 \_\_\_\_\_ Code to the  
 nearest centimeter  
 (000) No front contact  
 (150) 150 centimeters or more  
 (999) Unknown

000.0 inches X 2.54 = 000 centimeters

17. Front Bumper-Top Height

000Code to the  
nearest centimeter(000) No front contact  
(150) 150 centimeters or more  
(999) Unknown000.0 inches X 2.54 = 000 centimeters

18. Forward Hood Opening

000Code to the  
nearest centimeter(000) No front contact  
(200) 200 centimeters or more  
(999) Unknown000.0 inches X 2.54 = 000 centimeters

19. Front Bumper Lead

00

(00) No front contact

Code to the  
nearest centimeter(30) 30 centimeters or more  
(99) Unknown000.0 inches X 2.54 = 000 centimeters

23. Ground to Base of Windshield

000Code to the  
nearest centimeter(000) No front contact  
(400) 400 centimeters or more  
(999) Unknown000.0 inches X 2.54 = 000 centimeters

24. Ground to Top of Windshield

000Code to the  
nearest centimeter(000) No front contact  
(500) 500 centimeters or more  
(999) Unknown000.0 inches X 2.54 = 000 centimeters

25. Ground To Head Contact

000Code to the  
nearest centimeter(000) No front contact  
(400) 400 centimeters or more  
(998) No head contact  
(999) Unknown000.0 inches X 2.54 = 000 centimeters

## Front Wrap Distance Measurements

20. Ground to Forward Hood Opening

000Code to the  
nearest centimeter(000) No front contact  
(200) 200 centimeters or more  
(999) Unknown000.0 inches X 2.54 = 000 centimeters

21. Ground to Front/Top Transition Point

000Code to the  
nearest centimeter(000) No front contact  
(180) 180 centimeters or more  
(999) Unknown000.0 inches X 2.54 = 000 centimeters

22. Ground to Rear Hood Opening

000Code to the  
nearest centimeter(000) No front contact  
(400) 400 centimeters or more  
(999) Unknown000.0 inches X 2.54 = 000 centimeters

## SIDE CONTACT DAMAGE

## Side Vertical Measurements

26. Ground Clearance

023Code to the  
nearest centimeter(000) No side contact  
(150) 150 centimeters or more  
(999) Unknown009.0 inches X 2.54 = 023 centimeters

27. Side Bumper-Bottom Height

040Code to the  
nearest centimeter(000) No side contact  
(150) 150 centimeters or more  
(999) Unknown101.6 inches X 2.54 = 040 centimeters

28. Side Bumper-Top Height

048Code to the  
nearest centimeter(000) No side contact  
(150) 150 centimeters or more  
(999) Unknown018.8 inches X 2.54 = 048 centimeters

29. Centerline of Wheel

0 2 6Code to the  
nearest centimeter

(000) No side contact

(150) 150 centimeters or more

(999) Unknown

0 1 0 . 2 inches X 2.54 =        centimeters

30. Top of Tire

0 5 7Code to the  
nearest centimeter

(000) No side contact

(200) 200 centimeters or more

(999) Unknown

0 2 2 . 4 inches X 2.54 = 0 5 7 centimeters

31. Top of Wheel Well Opening

0 6 3Code to the  
nearest centimeter

(000) No side contact

(250) 250 centimeters or more

(999) Unknown

0 2 4 . 8 inches X 2.54 = 0 6 3 centimeters

32. Bottom of A-Pillar at Windshield

0 8 5Code to the  
nearest centimeter

(000) No side contact

(250) 250 centimeters or more

(999) Unknown

3 3 . 4 inches X 2.54 = 0 8 5 centimeters

33. Top of A-Pillar at Windshield

1 2 2Code to the  
nearest centimeter

(000) No side contact

(300) 300 centimeters or more

(999) Unknown

0 4 8 . 0 inches X 2.54 = 1 2 2 centimeters

34. Top of Side View Mirror

0 9 6Code to the  
nearest centimeter

(000) No side contact

(300) 300 centimeters or more

(999) Unknown

0 3 7 . 7 inches X 2.54 = 0 9 6 centimeters

## Side Lateral Measurements

35. Centerline to A-Pillar  
at Bottom of Windshield0 7 3

(000) No side contact

Code to the  
nearest centimeter

(250) 250 centimeters or more

(999) Unknown

0 2 8 . 7 inches X 2.54 = 0 7 3 centimeters36. Centerline to A-Pillar  
at Top of Windshield0 5 3Code to the  
nearest centimeter

(000) No side contact

(250) 250 centimeters or more

(999) Unknown

0 2 0 . 8 inches X 2.54 = 0 5 3 centimeter37. Centerline to Maximum Side  
View Mirror Protrusion0 9 2Code to the  
nearest centimeter

(000) No side contact

(300) 300 centimeters or more

(999) Unknown

0 3 6 . 2 inches X 2.54 = 0 9 2 centimeter

## Side Wrap Distance Measurements

38. Ground to Side/Top Transition

0 8 5Code to the  
nearest centimeter

(000) No side contact

(400) 400 centimeters or more

(999) Unknown

0 3 3 . 4 inches X 2.54 = 0 8 5 centimeters

39. Ground to Hood Edge

0 9 0Code to the  
nearest centimeter

(000) No side contact

(500) 500 centimeters or more

(999) Unknown

0 3 5 . 4 inches X 2.54 = 0 9 0 centimeters

40. Ground to Centerline of Hood

158       Code to the  
nearest centimeter

(000) No side contact

(700) 700 centimeters or more

(999) Unknown

062.2 inches X 2.54 = 158 centimeters

41. Ground to Head Contact

998       Code to the  
nearest centimeter

(000) No side contact

(800) 800 centimeters or more

(998) No head contact

(999) Unknown

       .        inches X 2.54 = 000 centimeters





## PEDESTRIAN INTERVIEW FORM

1. Primary Sampling Unit Number

90

Interviewee(s) Role or Name(s):

TRANSIT-PED.

2. Case Number - Stratum

605PPedestrian #1, UNABLE

3. Pedestrian Number

01TO OBTAIN INTERVIEW

Review all available information and interview questions prior to conducting interview(s) to ensure the acquisition of all pertinent data.

If the pedestrian was not the person interviewed, was an appointment made for a follow-up interview?

## PEDESTRIAN'S DESCRIPTION OF ACCIDENT EVENTS

I CONTACTED THE MEDICAL RECORDS DEPARTMENT IN PERSON, WHERE THE PEDESTRIAN WAS TRANSPORTED.

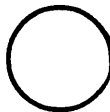
THE PERSON IN CHARGE OF MEDICAL RECORDS SAID THEY WERE UNABLE TO LOCATE ANY SORT OF MEDICAL RECORDS FOR PEDESTRIAN.

THE PEDESTRIAN INVOLVED IN THIS ACCIDENT WAS A TRANSIT AND DID NOT HAVE ANY MEANS OF SUPPORT AND LIVED ON THE STREETS OF THIS CITY.

THIS PEDESTRIAN WAS NOT A FATALITY, ONLY SERIOUSLY INJURED.

## WITNESS DESCRIPTION OF ACCIDENT EVENTS

## ACCIDENT DIAGRAM



The use of this diagram is optional. It may serve to aid in relating interviewee accident trajectory data (i.e., pre-impact to FRP orientations) to identifiable objects in the environment.

INDICATE NORTH

PSU NUMBER  
CASE NUMBER  
YEAR

90  
605P  
1995

# PEDESTRIAN INTERVIEW FORM

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

☐ ENTIRE FORM

☒ PAGE NUMBER (S) 2

1. Primary Sampling Unit Number 90 3. Pedestrian Number 01  
 2. Case Number - Stratum 605P

## PEDESTRIAN PRE-CRASH DATA QUESTIONS

1. Did the driver of the vehicle which hit you lose control of the vehicle and collide with you before regaining control?

☐ No

☐ Yes, explain: \_\_\_\_\_

2. Did the driver take any avoidance actions prior to the collision (with you)?

☐ No - Go to question 3

☐ Yes- Go to question 2a.

2a. What actions did the driver take?

☐ Braking with lock-up

☐ Braking without lock-up

☐ Releasing brakes

☐ Accelerating

☐ Steering left

☐ Steering right

☐ Other (specify): \_\_\_\_\_

2b. Did the vehicle skid sideways?

☐ No

☐ Yes- which way

☐ Clockwise

☐ Counter clockwise

How much rotation

☐ Less than 30°

☐ 30° or more

3. Before the collision, was the driver attentive to the driving task or was the driver distracted by:

☐ Another person in the vehicle

☐ A moving object in the vehicle

☐ Something outside the vehicle

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

☐ Cellular phone or CB, specify: \_\_\_\_\_

☐ Sleeping or dozing

☐ Other (specify): \_\_\_\_\_

☐ Not distracted

4. Can you estimate the speed of the vehicle at the time of the collision?

☐ Stopped

☐ 1-10

☐ 10-20

☐ 20-30

☐ 30-40

☐ 40-50

☐ 50-60

☐ 60-70

☐ 70+

5. Just prior to the impact, were you:

☐ Standing/Walking/Running

☐ Crouching

☐ Kneeling

☐ Bending at the waist

☐ Other (specify): \_\_\_\_\_

6. Just before the impact, were you:

☐ Stopped

☐ Walking

☐ Walking Rapidly

☐ Running or Jogging

☐ Hopping

☐ Skipping

☐ Jumping

☐ Falling or Rising

☐ Other (specify): \_\_\_\_\_

7. Just before the impact, were you:

☐ Crossing road, straight

☐ Crossing road, diagonally

☐ Moving in road, with traffic

☐ Moving in road, against traffic

☐ Off road, approaching road

☐ Off road, going away from road

☐ Off road, moving parallel

☐ Off road, crossing driveway

☐ Off road, moving along driveway

☐ Other (specify): \_\_\_\_\_

8. Before trying to avoid being struck by the vehicle, was your chest:

☐ Facing vehicle

☐ Facing away

☐ Left side to vehicle

☐ Right side to vehicle

☐ Other (specify): \_\_\_\_\_

9. Did you do anything to avoid being hit, like:

☐ Stopping

☐ Accelerating pace

☐ Running away (along vehicle path)

☐ Jumping

☐ Turning toward the vehicle

☐ Turning away from the vehicle

☐ Diving or Falling away

Using hands to:

☐ Vault corner of vehicle

☐ Vault onto vehicle

☐ Brace against vehicle

☐ Crouch and brace hands against vehicle

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

☐ Other (specify): \_\_\_\_\_

☐ No

10. What portion of the vehicle first struck you?

☐ The front

☐ Corner, or

☐ Side

1. Primary Sampling Unit Number

90

3. Pedestrian Number

01

2. Case Number - Stratum

605P

## PEDESTRIAN CRASH DATA QUESTIONS

## PEDESTRIAN CHARACTERISTICS

11. When struck by the vehicle, was your chest:

- ☐ Facing vehicle  
☐ Facing away  
☐ Left side to vehicle  
☐ Right side to vehicle  
☐ Other (specify): \_\_\_\_\_

12. Which way was your head facing (relative to your chest) at impact?

- ☐ To front  
☐ To left  
☐ To right  
☐ Up  
☐ Down  
☐ Other (specify): \_\_\_\_\_

13. Where were your arms at impact? Would you say:

- ☐ At sides  
☐ Folded across chest  
☐ Hands clasped behind back  
☐ Hands on hips  
☐ Hands in pockets

One or both arms:

- ☐ Extended upward  
☐ Extended to side  
☐ Extended forward, bracing  
☐ Extended forward or backward holding or pulling object.  
☐ Holding object in arms  
☐ Holding object on shoulder or head  
☐ Other (specify): \_\_\_\_\_

14. Where were your legs at impact? Were they:

- ☐ Together  
☐ Apart, laterally  
☐ Apart, left leg forward  
☐ Apart, right leg forward  
☐ Apart, forward leg unknown  
☐ Left foot off the ground  
☐ Right foot off the ground  
☐ Both feet off the ground  
☐ Other (specify): \_\_\_\_\_

15. What happened to you after being hit by the vehicle?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

16. Height, Weight, Age, and Sex?

Height \_\_\_\_\_

Weight \_\_\_\_\_

Age \_\_\_\_\_

Sex:

☒ Male☐ Female

17. What kind of shoes were you wearing?

\_\_\_\_\_

18. Could you tell me your following measurements without shoes?

\_\_\_\_\_ Ground to center of knee cap

\_\_\_\_\_ Ground to top of hip bone

\_\_\_\_\_ Ground to top of shoulder

19. Type/Color of clothing worn?

\_\_\_\_\_

\_\_\_\_\_

20. Was an object carried or worn?

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

Go to Pedestrian Injury Data questions

1. Primary Sampling Unit Number

9 0

3. Pedestrian Number

0 1

2. Case Number - Stratum

6 0 5 P

## PEDESTRIAN INJURY DATA

1. Were you injured?

- ☐ No - Go to question 8  
☐ Yes

2. Did you receive any cuts, abrasions, or bruises?

- ☐ No - Go to question 3  
☐ Yes - Record exact locations, sizes, and descriptions on the manikin(s), and then go to question 2a.

2a. Do you know what caused these injuries?

- ☐ No - Go to question 3  
☐ Yes - Specify injury sources, striking profile, type of damage, and damage depth on the manikin(s).

3. Did you experience any broken bones?

- ☐ No - Go to question 4  
☐ Yes - Record the exact locations, and type of fractures on the manikin(s), and then go to question 3a.

3a. Do you know what caused the injury(s)?

- ☐ No - Go to question 4  
☐ Yes - Specify injury sources, striking profile, type of damage, and damage depth on the manikin(s).

4. Did you injure your head?

- ☐ No - Go to question 5  
☐ Yes - Record the type of injury(s) on the manikins, and then go to question 4a.

4a. Do you know what caused the injury?

- ☐ No  
☐ Yes - specify the injury sources, striking profile, type of damage, and damage depth on the manikin(s).

5. Were any of your internal organs injured?

- ☐ No - Go to question 6  
☐ Yes - Thoroughly describe the type of injury(s) and specify the internal organs(s) injured on the manikin(s), and then go to question 5a.

5a. Do you know what caused the injury(s)?

- ☐ No  
☐ Yes - specify injury sources, striking profile, type of damage, and damage depth on the manikin(s).

6. Did you receive any joint sprains or muscle strains?

- ☐ No - Go to question 7  
☐ Yes - specify injury(s) on manikin(s), and then go to question 6a.

6a. Do you know what caused the injuries?

- ☐ No  
☐ Yes - specify injury sources, striking profile, type of damage, and damage depth on the manikin(s).

7. Did you receive any treatment?

- ☐ No (If "No", go to question 8)  
☐ Yes (If "Yes", go to question 7a or return to question 2.)

7a. Were you treated by (check all that apply):

- ☐ Hospital/trauma center? (specify hospital name):  
☐ Medical clinic  
☐ Out patient surgery?  
Specify: (medical facility:) \_\_\_\_\_  
☐ Paramedics or first aid at the scene?  
☐ A doctor in his/her office?  
☐ Treated at home?  
☐ None of the above, go to question 8.

7b. Were you treated and released from the emergency room?

- ☐ No (If "No", go to question 7c.)  
☐ Yes (If "Yes", go to question 7e.)

7c. Were you hospitalized?

- ☐ No (If "No", give an explanation)  
☐ Yes (If "Yes", go to question 7d.)
- \_\_\_\_\_
- \_\_\_\_\_

7d. How many days were you in the hospital? \_\_\_\_\_ days

7e. Have you received any follow-up treatment?

- ☐ No  
☐ Yes (If "Yes", describe:)
- \_\_\_\_\_
- \_\_\_\_\_

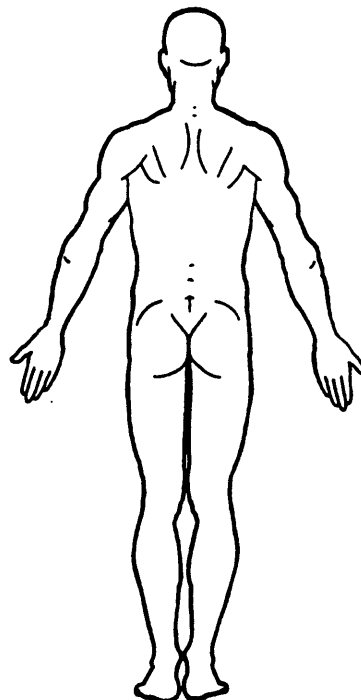
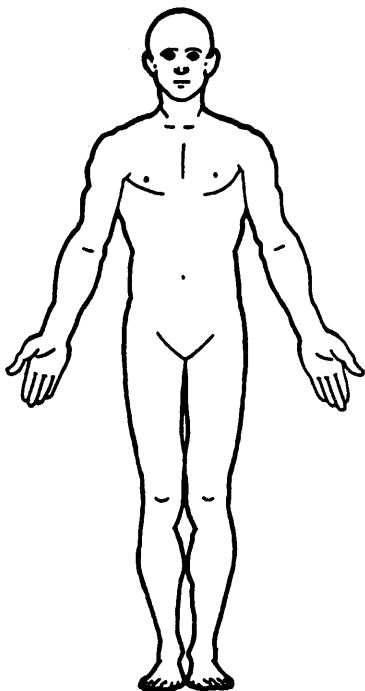
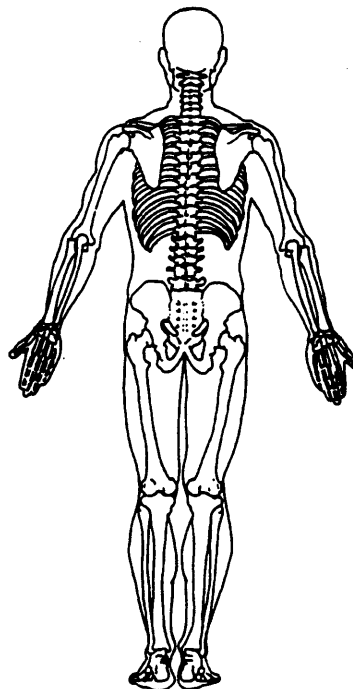
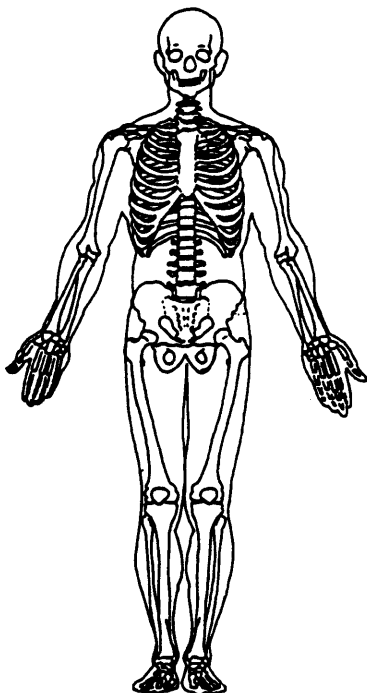
☐ Unknown

7f. In order to achieve the best possible scientific data regarding your injury(s), we need to obtain a copy of your medical reports. Would you sign a medical release form?

- ☐ No  
☐ Yes (If "Yes", mail or present the form for signature.)

8. Have you lost any days from work or school (college)?

- ☐ No  
☐ Yes (If "Yes", determine the number of days lost)  
Specify: \_\_\_\_\_  
☐ Not working prior to the accident  
☐ Unknown

PSU Number 90Case Number—Stratum 605 PPedestrian Number 01**PEDESTRIAN INJURY DATA FROM INTERVIEWEE(S)**Indicate the *Location, Lesion, Detail, and Source* of all injuries. Specify interviewee(s): \_\_\_\_\_**SOFT TISSUE/INTERNAL INJURIES****SKELETAL INJURIES**



## DRIVER INTERVIEW FORM

1. Primary Sampling Unit Number 9 02. Case Number - Stratum 6 0 5 P3. Vehicle Number 0 1

Interviewee(s) Role or Name(s): \_\_\_\_\_

Driver #1 Interview

Review all available information and interview questions prior to conducting interview(s) to ensure the acquisition of all pertinent data.

If the driver was not the person interviewed, was an appointment made for a follow-up interview?

## DRIVER'S DESCRIPTION OF ACCIDENT EVENTS

I WAS TRAVELING UP THE FREEWAY IN THE LEFT LANE APPROXIMATELY AT 55 MPH. A LARGE TRUCK IN FRONT, BUT IN THE LANE NEXT TO ME (MIDDLE LANE), SWERVED TO AVOID THE PEDESTRIAN. I THEN SAW THE PEDESTRIAN, SLAMMED ON MY BRAKES, AND LOCKED-UP A TIRE, BUT THE PEDESTRIAN WALKED INTO THE RIGHT FRONT FENDER, NEAR THE OUTSIDE MIRROR. THE PEDESTRIAN WAS WALKING ACROSS THE FREEWAY FROM EAST TO WEST. AFTER THE ACCIDENT I COULD SEE THE PEDESTRIAN LYING IN THE SAME LANE I WAS DRIVING IN, BUT HE WAS TO THE REAR OF MY CAR.

## OCCUPANT'S DESCRIPTION OF ACCIDENT EVENTS



# ACCIDENT DIAGRAM

The use of this diagram is optional. It may serve to aid in relating interviewee accident trajectory data (i.e., pre-impact to FRP orientations) to identifiable objects in the environment.

Asphalt  
Travel Lanes  
& Shoulder  
Slight curve  
to roadway

Driver  
coasted to  
a stop

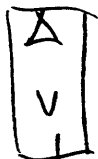
INDICATE NORTH

3.6

3.6

3.6

1.4m



Red POI

Ped Path

1.07m

Lamp Pole

Solid  
yellow  
line

.4

Cement  
wall

1. Primary Sampling Unit Number

90

3. Vehicle Number

0 1

2. Case Number - Stratum

6 0 5 P

4. Occupant Number

0 1

## DRIVER CRASH DATA QUESTIONS

1. Can you tell me in which direction you were traveling?

[X] North [ ] South [ ] East [ ] West

(Optional - Where were you coming from or going to?)

2. In which lane were you traveling?

(Note: Lane 1 is designated as the right curb lane.)

[1] [2] [X] [4] [ ] Other (specify):

3. Can you remember your estimated travel speed (in miles per hour) before the accident?

[ ] Stopped [ ] 1-10 [ ] 10-20  
 [ ] 20-30 [ ] 30-40 [ ] 40-50  
 [X] 50-60 [ ] 60-70 [ ] 70+

4. Just before the accident, can you tell me what you were intending to do or were doing?

[X] Going straight [ ] Stopped  
 [ ] slowing [ ] Accelerating  
 [ ] Turning left [ ] Turning right  
 [ ] Changing lanes to left [ ] Changing lanes to right  
 [ ] Backing  
 [ ] Other (specify):

5. Did you experience any loss of control?

[X] No  
 [ ] Yes (If yes, describe below)

6. Did you have to take any avoidance actions prior to the accident?

[ ] No - Go to question 7  
 [X] Yes - Go to question 6a

6a. What actions did you take?

[X] Braking with lock-up  
 [ ] Braking without lock-up  
 [ ] Releasing brakes  
 [ ] Accelerating  
 [ ] Steering left  
 [ ] Steering right  
 [ ] Other (specify):

6b. Did the vehicle skid sideways?

[ ] Yes  
 Which way?

[ ] Clockwise  
 [ ] Counter clockwise

How much rotation?

[ ] Less than 30°  
 [ ] 30° or more  
 [X] No

7. Where was your vehicle at the time of the collision?

[X] Original travel lane [ ] Different travel lane  
 [ ] In intersection [ ] Off roadway to right  
 [ ] Off roadway to left  
 [ ] Other (specify):

8. Was your travel speed at the time of the collision different from your previous travel speed?

[ ] No  
 [X] Lower  
 [ ] Higher  
 [ ] Unknown

8a. Can you estimate your speed at the time of the collision?

[ ] Stopped [ ] 1-10 [ ] 10-20  
 [ ] 20-30 [ ] 30-40 [ ] 40-50  
 [ ] 50-60 [ ] 60-70 [ ] 70+

9. Immediately following the collision, can you describe how your vehicle moved to its stopped position?

Moved straight lane to  
 rest in original travel lane

10. What direction was your vehicle facing at final rest?

N  
 W E  
 S

11. Where was your vehicle when it came to rest?

[X] Original travel lane [ ] Different travel lane  
 [ ] In intersection [ ] Off roadway to right  
 [ ] Off roadway to left  
 [ ] Other (specify):

1. Primary Sampling Unit Number

90

3. Vehicle Number

01

2. Case Number - Stratum

605P

4. Occupant Number

01

## VEHICLE/DRIVER DATA QUESTIONS

## VEHICLE/PEDESTRIAN RELATED DATA

12. Was there any previous damage to your vehicle that is not related to this accident?

☒ No☐ Yes (If "yes", describe below, go to question 13)

---

13. Was your vehicle repaired with Original Equipment Manufacture (OEM) parts?

☐ No (If "No", describe below)☐ Yes☐ Unknown

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14. At the time of the accident, was the vehicle being used as a:

☐ Taxi☐ School Bus☐ Other Bus?

Is the vehicle a:

☐ Military☐ Police☐ Ambulance☐ Fire Truck/Car☐ Other Special use, specify:

---

15. Before the collision, were you attentive to the driving task or were you distracted by:

☐ talking on a cellular phone☐ another person in the car☐ a moving object in the car☐ something outside the car, specify:☐ sleeping or dozing☐ other (specify): 

---

☒ not distracted

## OPTIONAL

If you need additional vehicle information. Request the owner's permission for an additional inspection.

16. Do you know where the vehicle is currently located?

home & work w/ me

17. May I take a look at your vehicle to assess the damage?

☐ No☒ Yes

18. Just prior to the impact, was the pedestrian:

☒ Standing☐ Crouching☐ Kneeling☐ Bending at waist☐ Other, specify: 

---

19. Just before the impact, was the pedestrian:

☐ Stopped☒ Walking☐ Walking Rapidly☐ Running or Jogging☐ Hopping☐ Skipping☐ Jumping☐ Falling or Rising☐ Other (specify): 

---

20. Just before impact, was the pedestrian:

☐ Crossing road, straight☒ Crossing road, diagonally☐ Moving in road, with traffic☐ Moving in road, against traffic☐ Off road, approaching road☐ Off road, going away from road☐ Off road, moving parallel☐ Off road, crossing driveway☐ Off road, moving along driveway☐ Other (specify): 

---

21. Where was the pedestrian at impact:

☐ In intersection, in a crosswalk☒ In intersection, not in a crosswalk☐ Not at intersection, in a crosswalk☐ Not at intersection, not in a crosswalk☐ Off road☐ Other (specify): 

---

22. Before trying to avoid being struck by the vehicle, was the pedestrian's chest:

☒ Facing vehicle☐ Facing away☐ Left side to vehicle☐ Right side to vehicle☐ Other (specify): 

---

1. Primary Sampling Unit Number

9 0

3. Vehicle Number

0 1

2. Case Number - Stratum

6 0 5 P

4. Occupant Number

0 1

## VEHICLE/DRIVER PEDESTRIAN RELATED DATA QUESTIONS (CONTINUED)

23. Did the pedestrian do anything to avoid being hit, like:

- ☐ Stopping  
☐ Accelerating pace  
☐ Running away (along vehicle path)  
☐ Jumping  
☐ Turning towards the vehicle  
☐ Turning away from the vehicle  
☐ Diving or falling away

using hands to:

- ☐ Vault corner of vehicle  
☐ Vault onto the vehicle  
☐ Brace against vehicle  
☐ Crouch and brace hands against vehicle  
☐ Combination of above (specify): \_\_\_\_\_

- ☒ Other (specify): \_\_\_\_\_  
☒ No

25. Where did the pedestrian hit the vehicle?

Would you say:

- ☐ The front  
☐ Corner, or  
☒ Side MINOR AREA (ATR-A pillar)

26. When struck by the vehicle was the pedestrian's chest:

- ☒ Facing vehicle  
☐ Facing away  
☐ Left side to vehicle  
☐ Right side to vehicle  
☐ Other (specify): \_\_\_\_\_

27. Which way was the pedestrian's head facing (relative to the chest) at impact?

- ☐ To front  
☐ To Left  
☐ To Right  
☐ Up  
☐ Down  
☐ Other (specify): \_\_\_\_\_ Unknown

28. Where were the pedestrian's arms at impact?

Would you say:

- ☐ At sides  
☐ Folded across chest  
☐ Hands clasped behind back  
☐ Hands on hips  
☐ Hands in pockets

one or both arms:

- ☐ Extended upward  
☒ Extended to side L-Arm @ side R-Arm unknown  
☐ Extended forward, bracing  
☐ Extended forward or backward holding or pulling

object

- ☐ Holding object in arms Unknown If holding object  
☐ Holding object on shoulder or hand  
☐ Other (specify): \_\_\_\_\_

29. Where were the pedestrian's legs at impact?

Were they:

- ☐ Together  
☒ Apart, laterally  
☐ Apart, left leg forward  
☐ Apart, right leg forward  
☒ Apart, forward leg unknown  
☐ Left foot off the ground  
☐ Right foot off the ground  
☐ Both feet off the ground  
☐ Other (specify): \_\_\_\_\_

30. What happened to the pedestrian after being hit by the vehicle?

Tell to Right Side of Vehicle

31. Were there any other pedestrians contacted by your vehicle?

- ☐ Yes- How many? \_\_\_\_\_  
 continue collecting information (questions 24 through 34 above) for each additional pedestrian contacted.

☒ No- End Driver Interview

[illegible]

PSU90  
CASE 605P  
CURRENT VERSION: 8.05

ERROR SUMMARY SCREEN  
PEDESTRIAN STUDY

36

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