



U.S. Department
of Transportation

**National Highway
Traffic Safety
Administration**

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

Dear Crash Data Researchers/Users:

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

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

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

*** *** ***



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



PEDESTRIAN CASE SUMMARY

PSU 49 CASE NO. 609P 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.)

V1 was traveling north on a divided asphalt urban street in the second of three northbound lanes. Vehicles were parked along the east edge of the street in the first lane. The pedestrian was walking west and stepped out into the second lane from between two parked vehicles. The front-right of V1 struck the pedestrian. The pedestrian was struck by the front bumper and wrapped on to the hood and into the windshield and front header. He continued over the vehicle and struck the right side roof rail above the right rear door. He came to rest near the west edge of the first lane. V1 came to rest in the second lane headed north. The pedestrian was transported and hospitalized overnight. V1 was driven.

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	33	Male	Hospitalized	Head	Head LOC	2	Header-Windshield

Body Region	Type of Anatomic Structure	Abbreviated Injury Scale
Head	Whole Area	(1) Minor injury
Face	Vessels	(2) Moderate injury
Throat	Nerves	(3) Serious injury
Chest	Organs	(4) Severe injury
Abdomen/Pelvis	Skeletal	(5) Critical injury
Spine	Head-LOC	(6) Maximum (untreatable)
Upper Extremity	Skin-Burn	(7) Injured, unknown severity
Lower Extremity	Skin-Other	
External		

C. VEHICLE PROFILE

Vehicle No.	Class of Vehicle	Year/Make/Model	Most Severe Damage Based on Vehicle Inspection	
			Damage Plane	Damage Description
01	Compact car	95/Mitsubishi/Galant	Front	Light damage to front and windshield


DO NOT SANITIZE THIS FORM



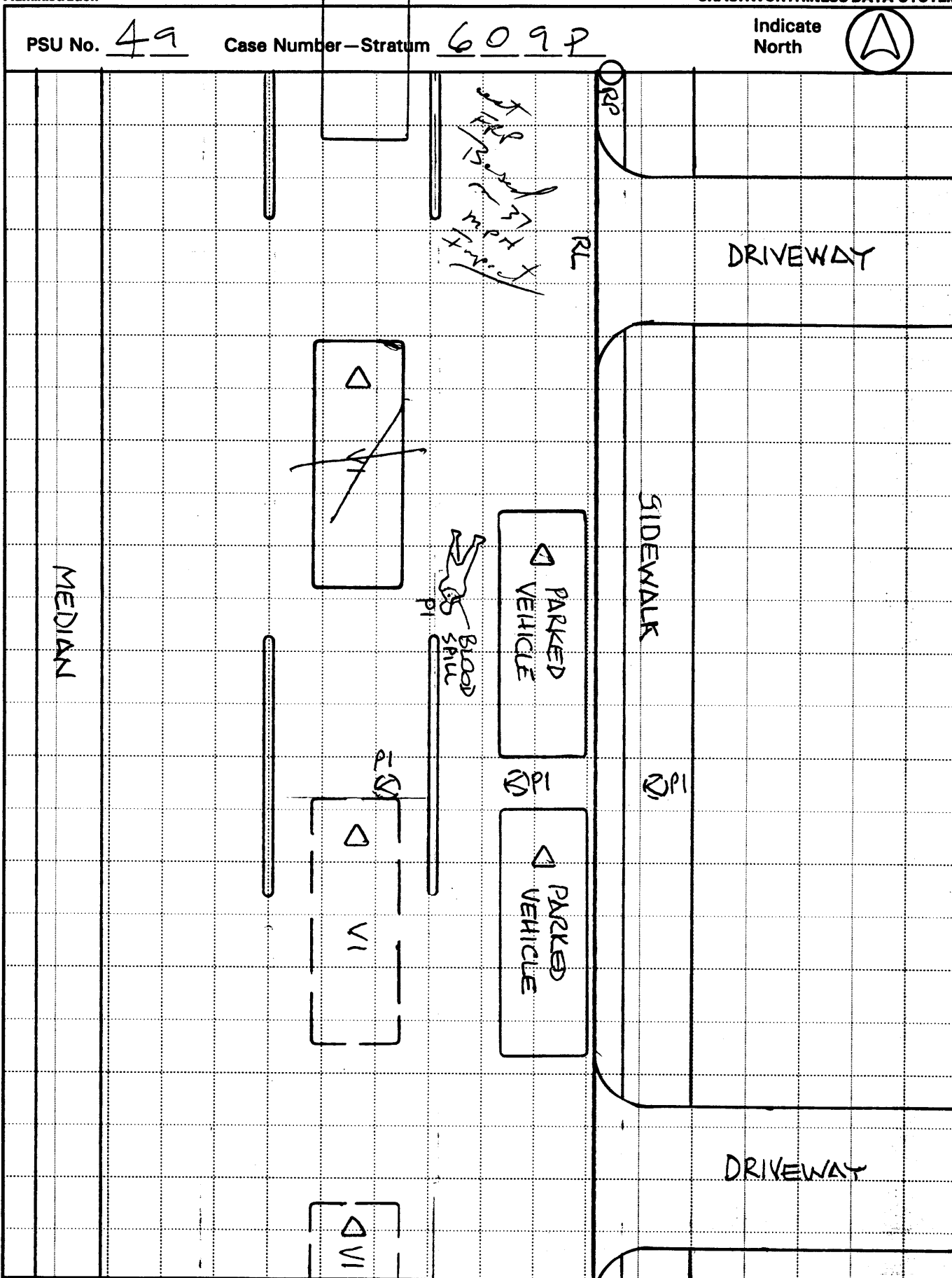
U.S. Department of Transportation
National Highway Traffic Safety
Administration

ACCIDENT COLLISION DIAGRAM

NATIONAL ACCIDENT SAMPLING SYSTEM
CRASHWORTHINESS DATA SYSTEM

PSU No. 49 Case Number—Stratum 609P Indicate North 

Handwritten notes:
- Top center: Δ
- Top right: Δ
- Left side: MEDIAN
- Center: Δ (crossed out)
- Right side: DRIVEWAY
- Bottom center: Δ VI
- Bottom right: DRIVEWAY
- Labels: PARKED VEHICLE, SIDEWALK, BLOOD SPILL, PI, VI, VI





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National Highway Traffic Safety
Administration

ACCIDENT COLLISION DIAGRAM

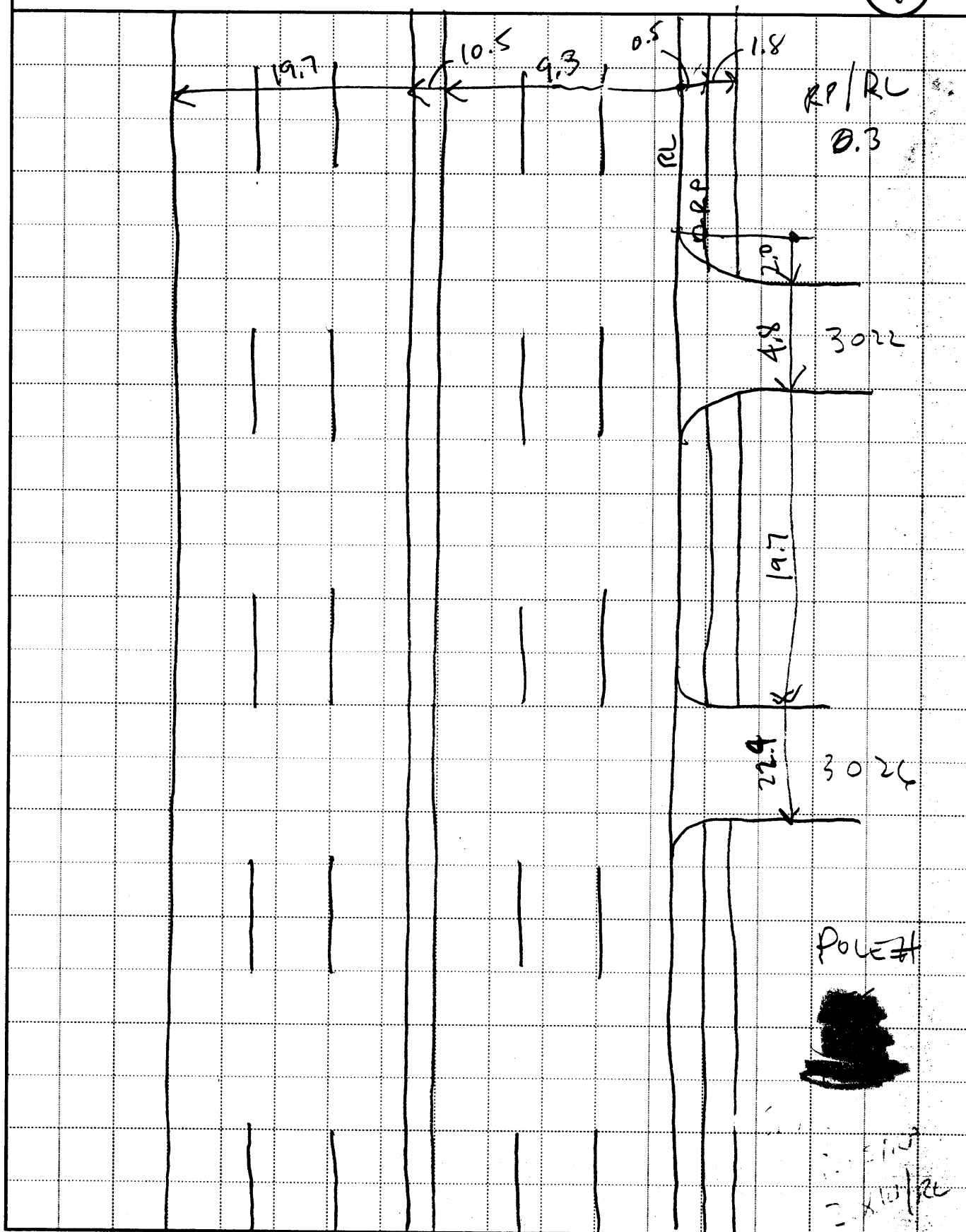
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NATIONAL ACCIDENT SAMPLING SYSTEM
CRASHWORTHINESS DATA SYSTEM

PSU No. 49

Case Number—Stratum 609P

Indicate
North



PEDESTRIAN ACCIDENT COLLISION MEASUREMENT TABLE

**NATIONAL ACCIDENT SAMPLING SYSTEM
PEDESTRIAN CRASH DATA STUDY**

Primary Sampling Unit Number 49

Case Number—Stratum 6 09 P

PEDESTRIAN ACCIDENT COLLISION DATA COLLECTION

- * document reference point and reference line relative to physical features
- * documentation of all accident induced physical evidence including (if applicable):
 - a) vehicle skid marks
 - b) pedestrian contacts with ground or object
 - c) vehicle/pedestrian point of impact (POI)
 - d) location of pedestrian separation point from vehicle
 - f) final resting points (FRP) for pedestrian and vehicle
- * documentation of the physical plant including:
 - a) all road/roadway delineation (e.g., crosswalks, curbs/edge lines, lane markings, medians, pavement markings, parked vehicles, poles, signs, etc.)
 - b) all traffic controls (e.g., lights, signs)

Surface Type

Asp

Surface Condition

DRY

Coefficient of Friction

65.

Grade (v/h) Measurement

0/122

a) at impact

b) between impact
and final rest

Pedestrian Travel Direction

W

Vehicle Travel Direction

2

Number of Travel Lanes

3

SCALED DIAGRAM

- * north arrow placed on diagram
- * grade measurements for all applicable roadways.
- * scaled representations of the physical plant including:
 - a) all road/roadway delineation (e.g., crosswalks, curbs/edge lines, lane markings, medians, pavement markings, parked vehicles, poles, signs, etc.)
 - b) all traffic controls (e.g., lights, signs)
- * scaled representations of the vehicle and pedestrian at pre-impact, impact, and final rest based upon either:
 - a) physical evidence, or
 - b) reconstructed accident dynamics

Reference Point: POLE # [REDACTED]

Reference line: EAST ROAD EDGE

[illegible]

[illegible]



U.S. Department of Transportation

National Highway Traffic Safety
Administration

PEDESTRIAN ACCIDENT FORM

NATIONAL ACCIDENT SAMPLING SYSTEM
PEDESTRIAN CRASH DATA STUDY

1. Primary Sampling Unit Number

49

2. Case Number - Stratum

6 09 P

IDENTIFICATION

3. Number of General Vehicle
Forms Submitted

0 1

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

[REDACTED] 9 5

5. Time of Accident

0907

Code reported military time of accident.

NOTE: Midnight = 2400
Unknown = 9999

SPECIAL STUDIES - INDICATORS

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.

6. SS15 Administrative Use

0

7. ✓ SS16 Pedestrian Crash Data Study

1

8. SS17 Impact Fires

0

9. SS18

0

10. SS19

0

NUMBER OF EVENTS

11. Number of Recorded Events
in This Accident

0 1

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
NumberVehicle
NumberClass Of
VehicleGeneral
Area of
DamageVehicle Number
or
Object ContactedClass Of
VehicleGeneral
Area of
Damage

12. 0 1

13. 0 1

14. 02

15. F

16. 7 2

17. 0 0

18. 0

CODES FOR CLASS OF VEHICLE

- (00) Not a motor vehicle
- (01) Subcompact/mini (wheelbase < 254 cm)
- (02) Compact (wheelbase \geq 254 but < 265 cm)
- (03) Intermediate (wheelbase \geq 265 but < 278 cm)
- (04) Full size (wheelbase \geq 278 but < 291 cm)
- (05) Largest (wheelbase \geq 291 cm)
- (09) Unknown passenger car size
- (11) Compact utility vehicle
- (12) Large utility vehicle (\leq 4,500 kgs GVWR)
- (13) Passenger van (\leq 4,500 kgs GVWR)
- (14) Other van (\leq 4,500 kgs GVWR)
- (15) Pickup truck (\leq 4,500 kgs GVWR)
- (18) Other truck (\leq 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



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National Highway Traffic Safety
Administration

PEDESTRIAN ASSESSMENT FORM

Form Approved
O.M.B. No. 2127-0021

NATIONAL ACCIDENT SAMPLING SYSTEM
PEDESTRIAN CRASH DATA STUDY

1. Primary Sampling Unit Number

49

2. Case Number - Stratum

6 09 P

3. Pedestrian Number

0 1

10. Pedestrian's Weight

078Code actual weight to the nearest
kilogram.

(999) Unknown

172 pounds X .4536 = 78 kilograms**PEDESTRIAN'S CHARACTERISTICS**

4. Pedestrian's Age

33

Code actual age at time of accident.

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

(97) 97 years and older

(99) Unknown

5. Pedestrian's Sex

1

(1) Male

(2) Female - not reported pregnant

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

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

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

(6) Female - pregnant-term unknown

(9) Unknown

6. Pedestrian's Overall Height

185Code actual height to the nearest
centimeter.

(999) Unknown

73 inches X 2.54 = 185 centimeters

7. Pedestrian's Height - Ground to Knee

46Code to the nearest
centimeter.

(999) Unknown

18 EST inches X 2.54 = 46 centimeters

8. Pedestrian's Height - Ground to Hip

091Code to the nearest
centimeter.

(999) Unknown

36 EST inches X 2.54 = 91 centimeters

9. Pedestrian's Height - Ground to Shoulder

152Code to the nearest
centimeter.

(999) Unknown

60 EST inches X 2.54 = 152 centimeters**PEDESTRIAN'S PRE-AVOIDANCE ACTIONS**

11. Pedestrian Attitude

1

(1) Standing

(2) Crouching

(3) Kneeling

(4) Bending at waist

(8) Other (specify):

(9) Unknown

12. Pedestrian Motion

2

(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

13. Pedestrian's Action Relative to Vehicle

01

(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

14. Pedestrian's Body (Chest) Orientation
Relative to Striking Vehicle Prior to
Avoidance Actions3

(1) Facing vehicle

(2) Facing away

(3) Left side to vehicle

(4) Right side to vehicle

(8) Other (specify):

(9) Unknown

PEDESTRIAN'S AVOIDANCE ACTIONS15. 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 IMPACT16. Pedestrian's Head Orientation at Initial Impact 2

- (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 3

- (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 01

- (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 04

- (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 04

- (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

1 ~~X~~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

99
03

Source: P.A.R.

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

0

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): Cocaine
(3) Specimen test given, results unknown or not obtained
(9) Unknown

2
0

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

2

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

01

29. Working Days Lost

- 10 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

10

STOP - VARIABLES 30 THROUGH 37 ARE COMPLETED BY THE ZONE CENTER

30. Glasgow Coma Scale (GCS) Score (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?

(1) No - blood not given

(2) Yes - blood given

(specify units): _____

(9) Unknown if blood given

32. Arterial Blood Gases (ABG) - HCO_3

(00) Not injured

(01) Injured, ABGs not measured or reported

(02-50) Code the actual value of the HCO_3

(96) ABGs reported, HCO_3 unknown

(97) Injured, details unknown

(99) Unknown if injured

33. Time to Death

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

(00) Not fatal

(96) Fatal - ruled disease

(99) Unknown

34. 1st Medically Reported Cause of Death

35. 2nd Medically Reported Cause of Death

36. 3rd Medically Reported Cause of Death

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

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 [☒]



PEDESTRIAN INJURY FORM

1. Primary Sampling Unit Number

49

3. Pedestrian Number

0 1

2. Case Number - Stratum

6 09 P

4. Blank

X X

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.

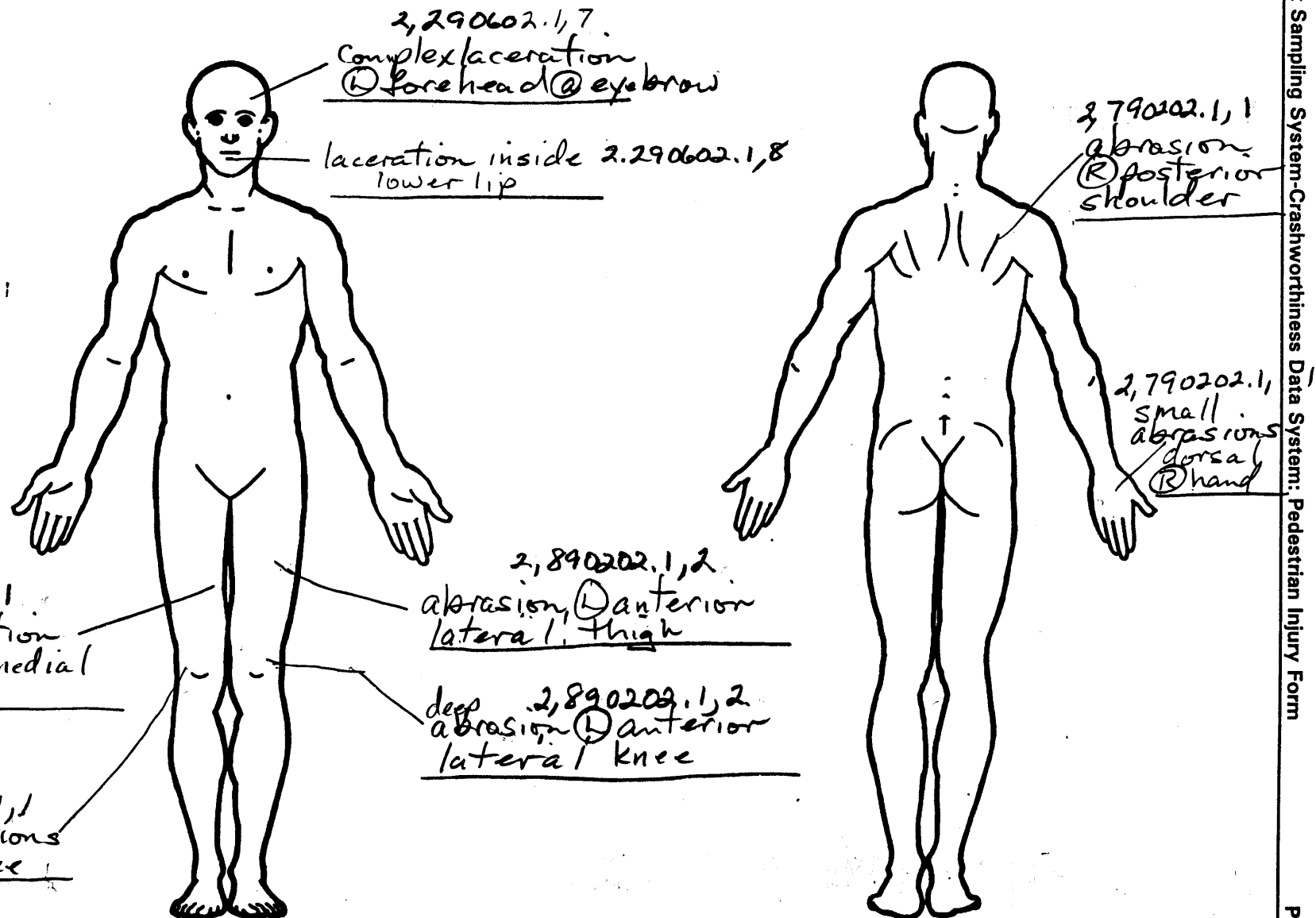
	Source of Injury Data	Body Region	Type of Anatomic Structure	Specific Anatomic Structure	Level of Injury	A.I.S. Severity	Aspect	Injury Source	Injury Confidence Level	Direct/Indirect Injury	Striking Profile	Type Of Damage	Damage Depth
1st	5. 2	6. 8	7. 9	8. 02	9. 02	10. 1	11. 2	12. 700	13. 1	14. 1	15. 2	16. 2	17. 2
2nd	18. 2	19. 8	20. 9	21. 02	22. 02	23. 1	24. 2	25. 703	26. 1	27. 1	28. 3	29. 2	30. 2
3rd	31. 2	32. 2	33. 9	34. 06	35. 02	36. 1	37. 7	38. 775	39. 1	40. 1	41. 2	42. 5	43. 5
4th	44. 2	45. 1	46. 6	47. 04	48. 10	49. 2	50. 0	51. 776	52. 1	53. 1	54. 3	55. 3	56. 3
5th	57. 2	58. 2	59. 9	60. 06	61. 02	62. 1	63. 8	64. 775	65. 1	66. 1	67. 2	68. 5	69. 5
6th	70. 2	71. 8	72. 9	73. 06	74. 02	75. 1	76. 1	77. 775	78. 1	79. 1	80. 2	81. 5	82. 5
7th	83. 2	84. 8	85. 9	86. 06	87. 02	88. 1	89. 1	90. 775	91. 1	92. 1	93. 2	94. 5	95. 5
8th	96. 2	97. 7	98. 9	99. 02	100. 02	101. 1	102. 1	103. 947	104. 1	105. 1	106. 0	107. 0	108. 0
9th	109. 2	110. 7	111. 9	112. 02	113. 02	114. 1	115. 1	116. 947	117. 1	118. 1	119. 0	120. 0	121. 0
10th	122.	123.	124.	125.	126.	127.	128.	129.	130.	131.	132.	133.	134.

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 StructureWhole 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 SOURCEFRONT

- 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 = 0.33
+ cocaine (crack)

Glasgow Coma
Scale Score

GCSS = 15

Units of Blood
Given

Units = 0

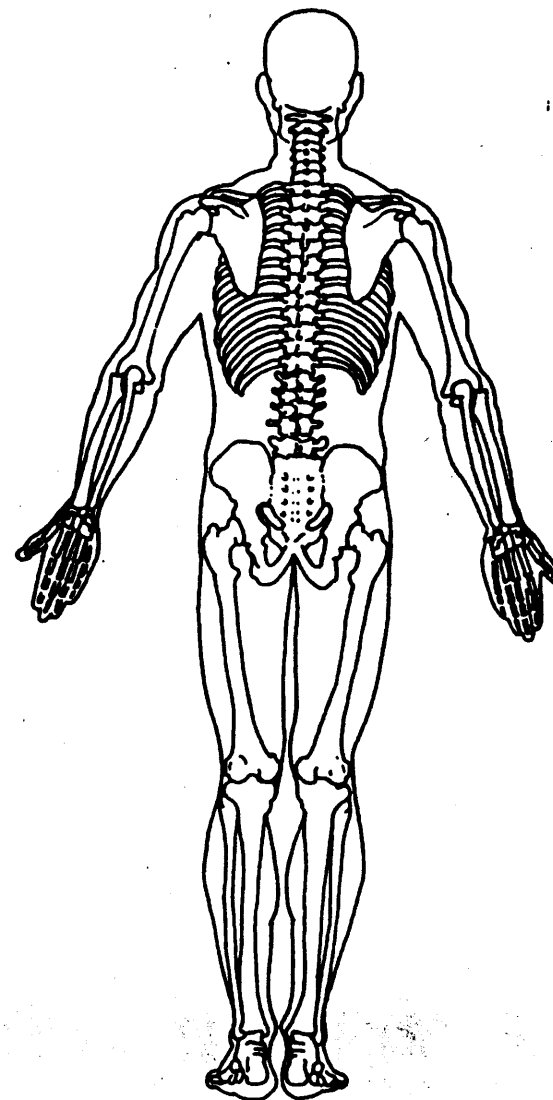
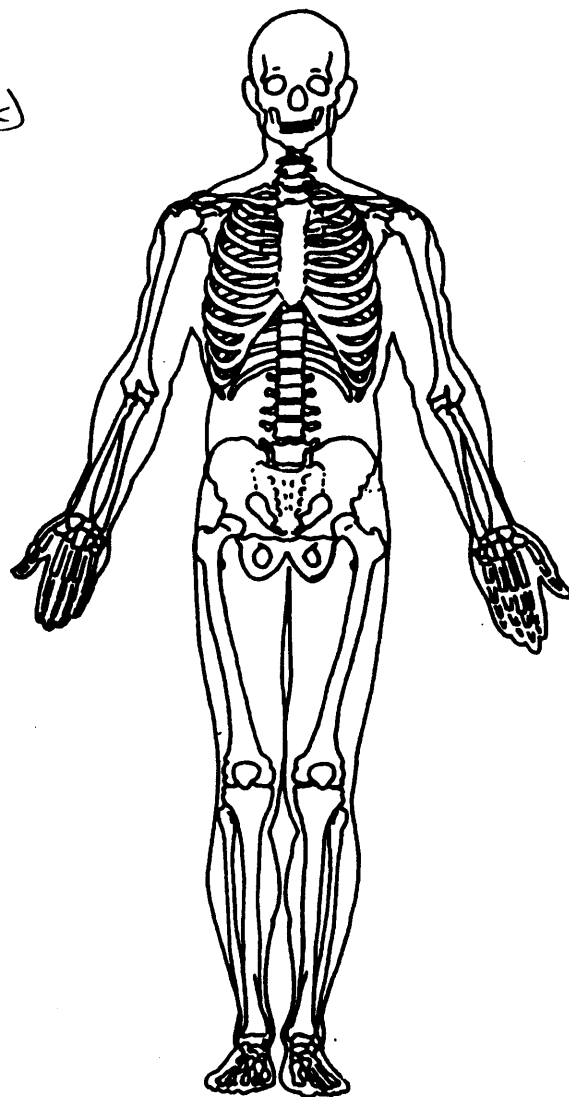
Arterial Blood Gases

Ph =

PO₂ =

PCO₂ =

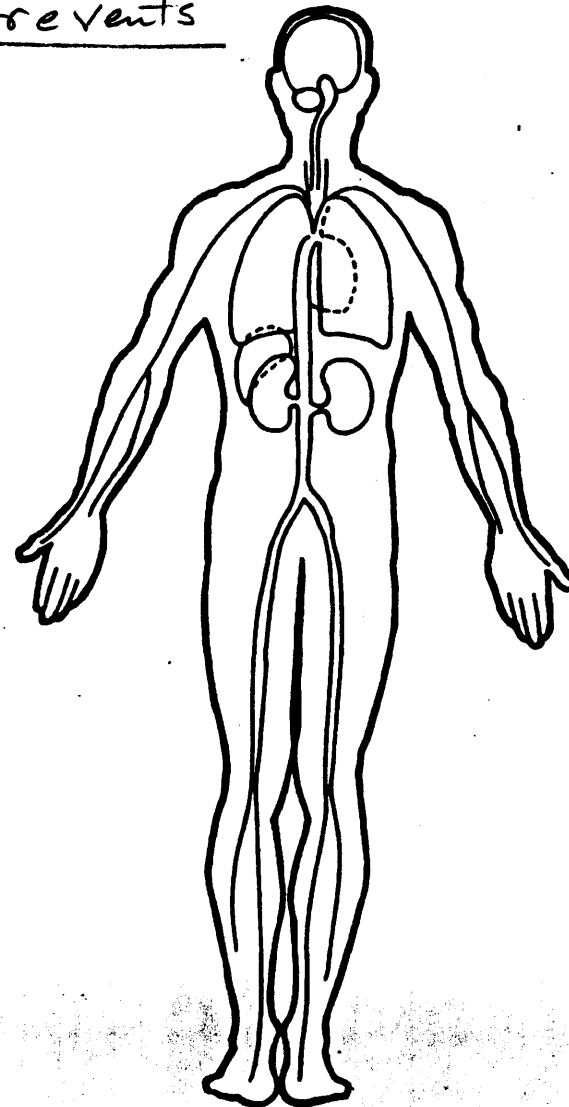
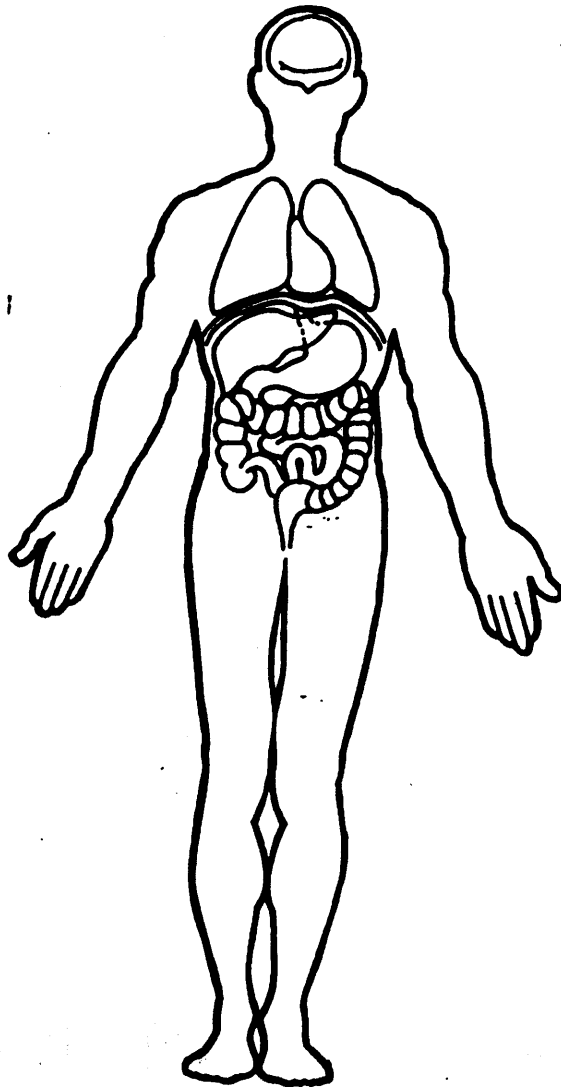
HCO₃ =



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.)

2,160410.2,0 Closed Head Injury
? LOC GCS 15 @ ER
Amnesia for events





U.S. Department of Transportation

National Highway Traffic Safety
Administration

PEDESTRIAN GENERAL VEHICLE FORM NATIONAL ACCIDENT SAMPLING SYSTEM
PEDESTRIAN CRASH DATA STUDY

1. Primary Sampling Unit Number 49

2. Case Number - Stratum 6 09 P

3. Vehicle Number 0 1

VEHICLE IDENTIFICATION

4. Vehicle Model Year 95

Code the last two digits of the model year
(99) Unknown

5. Vehicle Make (specify): 52

MITSUBISHI

Applicable codes are found in your
NASS PCDS Data Collection, Coding and
Editing Manual.
(99) Unknown

6. Vehicle Model (specify): 034

GALANT

Applicable codes are found in your
NASS PCDS Data Collection, Coding and
Editing Manual.
(999) Unknown

7. Body Type 04

Note: Applicable codes may be found on
the back of this page.

8. Vehicle Identification Number ✓

4A3AJ46G55E

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

OFFICIAL RECORDS

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 056

(000) No statutory limit

Code posted or statutory speed limit
in kmph

(999) Unknown

35 mph X 1.6093 = 56 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: PAR

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 6

(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 (78 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

Code weight to nearest
10 kilograms.

- (045) Less than 450 kilograms
(610) 6,100 kilograms or more
(999) Unknown

2755 lbs X .4536 = 1250 kgs

Source: 95 

16. Vehicle Cargo Weight

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) 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

Nearest kmph

(NOTE: 000 means greater than .5 kmph)
(160) 159.5 kmph and above
(999) Unknown

19. Accuracy Range of Impact Speed Estimate

- (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

- (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

(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

(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

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

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

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

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

ENVIRONMENTAL DATA

27. Relation to Junction 0

- (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 2

- (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 2

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

30. Roadway Alignment 1

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

31. Roadway Profile 1

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

32. Roadway Surface Type 2

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

33. Roadway Surface Condition 1

- (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

- (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):
(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

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

36. Light Conditions 1

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

37. Atmospheric Conditions 1

- (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

49-609

33 yom

6'11" 172#

0'907 Hours

V_1 final vel to impact
 $8.7 \text{ meters} = 28.5 \text{ ft}$

$$V^2 = 2gh$$

$$V = \sqrt{2gh}$$

$$V = \sqrt{(2)(28.5)(0.6)(32.2)}$$

$$= \sqrt{1101} = 33 \text{ FPS} = 22 \text{ mph}$$

To. low of impact speed
 for Vault over roof.

From available data speed
 probably 35 to 40 mph.

Driver estimated speed at
 35 mph.

$$\underline{\underline{37 \text{ mph}}} = \underline{\underline{60 \text{ kph}}}$$



U.S. Department of Transportation

National Highway Traffic Safety
Administration

PEDESTRIAN EXTERIOR VEHICLE FORM

NATIONAL ACCIDENT SAMPLING SYSTEM
PEDESTRIAN CRASH DATA STUDY

1. Primary Sampling Unit Number

49

3. Vehicle Number

0 1

2. Case Number - Stratum

6 09 P

VEHICLE IDENTIFICATION

VIN

4A3AJ46G5SE ~~XXXXXXXXXX~~

Model Year

95

Vehicle Make (specify):

MITSUBISHI

Vehicle Model (specify):

GAZANT

PEDESTRIAN FRONT CONTACT WORK SHEET

PEV06 Hood Material

STEEL

PEV08 Hood Length

125 + 14 cm

PEV09 Hood Width-Forward Opening

132 cm ✓

PEV10 Hood Width-Midway

141 cm ✓

PEV11 Hood Width-Rear Opening

140 cm ✓

PEV14 Front Bumper Cover Material

PLASTIC

PEV15 Front Bumper Reinforcement Material

STEEL

VERTICAL MEASUREMENTS

PEV16 Front Bumper-Bottom Height

037 cm ✓

PEV17 Front Bumper-Top Height

052 cm ✓

PEV18 Forward Hood Opening

067 cm ✓

PEV19 Front Bumper Lead

010 cm ✓

WRAP DISTANCES

PEV20 Ground to Forward Hood Opening

75 cm ✓

PEV21 Ground to Front/Top Transition Point

72 cm ✓

PEV22 Ground to Rear Hood Opening

 $\begin{array}{r} 140 \\ 140 + 39 \\ 179 \end{array}$ 189 cm 199

PEV23' Ground to Base of Windshield

 $\begin{array}{r} 140 \\ 140 + 56 \\ 196 \end{array}$ 196 cm 206

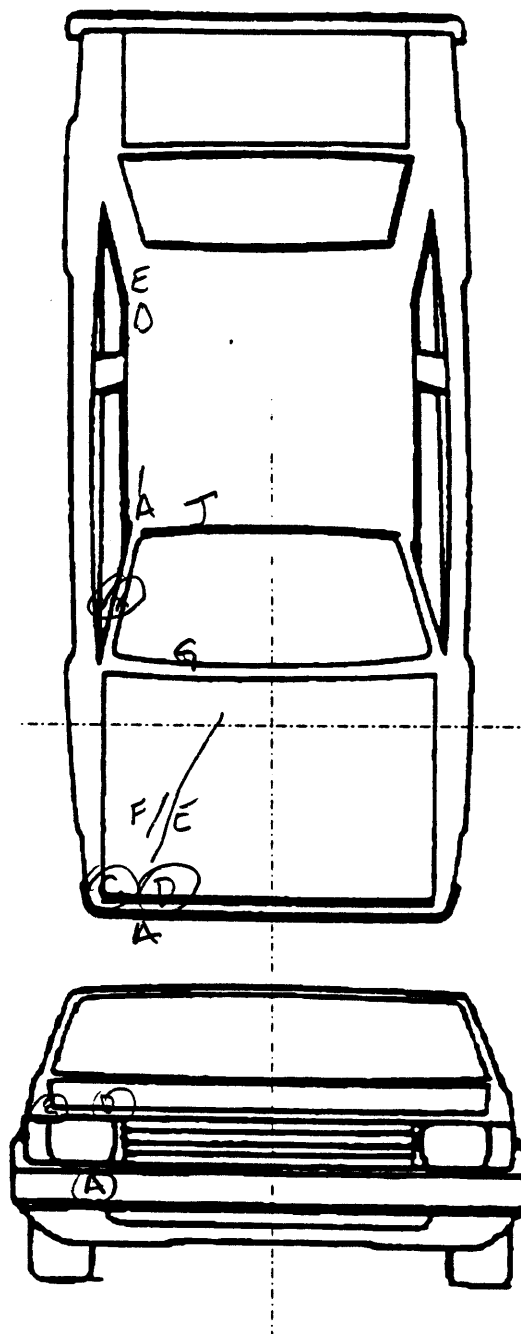
PEV24 Ground to Top of Windshield

 $\begin{array}{r} 140 \\ 140 + 129 \\ 269 \end{array}$ 279 cm 289

PEV25 Ground to Head Contact

 $\begin{array}{r} 140 \\ 140 + 127 \\ 267 \end{array}$ 267 cm 277

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: _____ cm

PEDESTRIAN SIDE CONTACT WORK SHEET

PEV06 Hood Material

STEEL

PEV08 Hood Length

114 cm

PEV09 Hood Width-Forward Opening

132 cm

PEV10 Hood Width-Midway

141 cm

PEV11 Hood Width-Rear Opening

140 cm

VERTICAL MEASUREMENTS

PEV26 Ground Clearance

24 cm

PEV27 Side Bumper-Bottom Height

24 cm

PEV28 Side Bumper-Top Height

52 cm

PEV29 Centerline of Wheel

28 cm

PEV30 Top of Tire

60 cm

PEV31 Top of Wheel Well Opening

68 cm

PEV32 Bottom of A-Pillar at Windshield

92 cm

PEV33 Top of A-Pillar at Windshield

104 cm

PEV34 Top of Side View Mirror

130 cm

LATERAL MEASUREMENTS

PEV35 C_L to A-Pillar at Bottom of Windshield74 cmPEV36 C_L to A-Pillar at Top of Windshield75 cmPEV37 C_L to Maximum Side View Mirror Protrusion97 cm

WRAP DISTANCES

PEV38 Ground to Side/Top Transition

84 cm

PEV39 Ground to Hood Edge

97 cm

PEV40 Ground to Centerline of Hood (ORIGIN)

167 cm

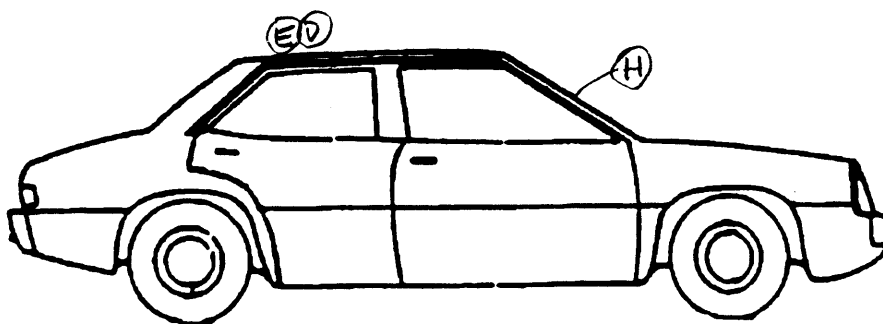
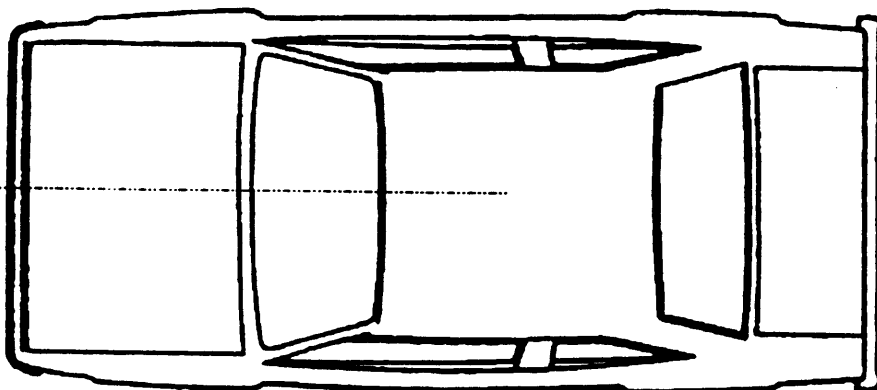
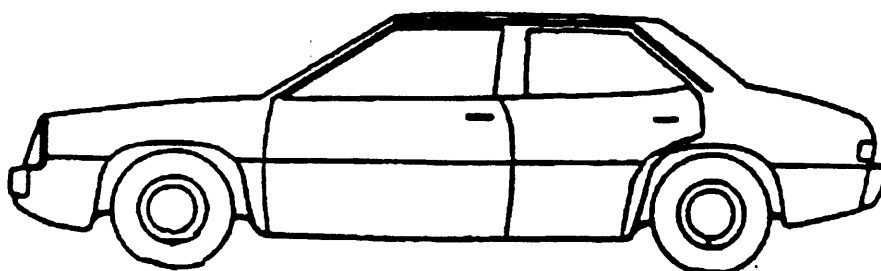
PEV41' Ground to Head Contact

N/A cm

ORIGINAL SPECIFICATIONS

Wheelbase	<u>103.7</u>	inches	x 2.54 =	<u>263</u> cm ✓
Overall Length	<u>187.0</u>	inches	x 2.54 =	<u>475</u> cm ✓
Maximum Width	<u>68.1</u>	inches	x 2.54 =	<u>173</u> cm ✓
Curb Weight	⁴⁶⁴ <u>2755</u>	pounds	x .4536 =	<u>1,250</u> kg ✓
Average Track	^{59.4} <u>59.3</u> <u>54.35</u>	inches	x 2.54 =	<u>151</u> cm ✓
Front Overhang	— — — . —	inches	x 2.54 =	<u>102</u> cm
Rear Overhang	— — — . —	inches	x 2.54 =	— — — cm
Undeformed End Width	— — — . —	inches	x 2.54 =	<u>158</u> cm
Engine Size: cyl./displ.	— — — —	cc	x .001 =	<u>2.4</u> L
	— — — —	CID	x .0164 =	— . — L

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

POINTS OF PEDESTRIAN CONTACT

LIST CONTACTS IN CHRONOLOGICAL ORDER

CONTACT #	COMPONENT CONTACTED CODE	LONGITUDINAL LOCATION (X)	LATERAL LOCATION (Y)	CRUSH IN CENTIMETERS	SUSPECTED BODY REGION	SUPPORTING PHYSICAL EVIDENCE	CONFIDENCE LEVEL OF CONTACT POINT (Circle)
1							1 2 3 9
2							1 2 3 9
3							1 2 3 9
4							1 2 3 9
5							1 2 3 9
6							1 2 3 9
7							1 2 3 9
8							1 2 3 9
9							1 2 3 9
10							1 2 3 9

CODES FOR COMPONENTS CONTACTED

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 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 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 underhood 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

- 848 Other object in environment (specify): _____
 849 Unknown object in environment
 959 Unknown object on contacting vehicle
 997 Noncontact injury source
 999 Unknown injury source

PEDESTRIAN CONTACT WORKSHEET PAGE 1

[illegible]

VEHICLE DIMENSIONS

4. Original Wheelbase

Code to the nearest centimeter
(999) Unknown

103.7 inches X 2.54 = 263 centimeters

5. Original Average Track Width

Code to the nearest centimeter
(185) 185 centimeters or more
(999) Unknown

59.35 inches X 2.54 = 151 centimeters

6. Hood Material

- (1) Plastic
(2) Fiberglass
(3) Steel
(4) Aluminum
(5) Stainless Steel
(8) Other (specify):
(9) Unknown

7. Hood Original

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

8. Hood Length

Code to the nearest centimeter
(180) 180 centimeters or more
(999) Unknown

_____ inches X 2.54 = _____ centimeter

9. Hood Width Forward Opening

Code to the nearest centimeter
(210) 210 centimeters or more
(999) Unknown

_____ inches X 2.54 = _____ centimeters

10. Hood Width Midway

Code to the nearest centimeter
(210) 210 centimeters or more
(999) Unknown

_____ inches X 2.54 = _____ centimeters

11. Hood Width Rear Opening

Code to the nearest centimeter
(210) 210 centimeters or more
(999) Unknown

_____ inches X 2.54 = _____ centimeters

12. Hood/Fender Vertical/Lateral Crush From Pedestrian

- (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) 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) No front contact
(1) Plastic
(2) Fiberglass
(3) Rubber
(4) Other (specify):
(9) Unknown

15. Front Bumper Reinforcement Material

- (0) No front contact
(1) Steel
(2) Aluminum
(3) Stainless Steel
(4) Other (specify):
(9) Unknown

16. Front Bumper-Bottom Height

Code to the nearest centimeter
(000) No front contact
(150) 150 centimeters or more
(999) Unknown

_____ inches X 2.54 = _____ centimeters

17. Front Bumper-Top Height 052
 _____ Code to the
 nearest centimeter
 (000) No front contact
 (150) 150 centimeters or more
 (999) Unknown

_____ inches X 2.54 = _____ centimeters

18. Forward Hood Opening 067
 _____ Code to the
 nearest centimeter
 (000) No front contact
 (200) 200 centimeters or more
 (999) Unknown

_____ inches X 2.54 = _____ centimeters

19. Front Bumper Lead 10
 (00) No front contact
 _____ Code to the
 nearest centimeter
 (30) 30 centimeters or more
 (99) Unknown

_____ inches X 2.54 = _____ centimeters

23. Ground to Base of Windshield 196
 _____ Code to the
 nearest centimeter
 (000) No front contact
 (400) 400 centimeters or more
 (999) Unknown

_____ inches X 2.54 = _____ centimeters

24. Ground to Top of Windshield 279
 _____ Code to the
 nearest centimeter
 (000) No front contact
 (500) 500 centimeters or more
 (999) Unknown

_____ inches X 2.54 = _____ centimeters

25. Ground To Head Contact 267
 _____ Code to the
 nearest centimeter
 (000) No front contact
 (400) 400 centimeters or more
 (999) Unknown

_____ inches X 2.54 = _____ centimeters

Front Wrap Distance Measurements

20. Ground to Forward Hood Opening 075
 _____ Code to the
 nearest centimeter
 (000) No front contact
 (200) 200 centimeters or more
 (999) Unknown

_____ inches X 2.54 = _____ centimeters

21. Ground to Front/Top Transition Point 072
 _____ Code to the
 nearest centimeter
 (000) No front contact
 (180) 180 centimeters or more
 (999) Unknown

_____ inches X 2.54 = _____ centimeters

22. Ground to Rear Hood Opening 189
 _____ Code to the
 nearest centimeter
 (000) No front contact
 (400) 400 centimeters or more
 (999) Unknown

_____ inches X 2.54 = _____ centimeters

SIDE CONTACT DAMAGE

Side Vertical Measurements

26. Ground Clearance 024
 _____ Code to the
 nearest centimeter
 (000) No side contact
 (150) 150 centimeters or more
 (999) Unknown

_____ inches X 2.54 = _____ centimeters

27. Side Bumper-Bottom Height 024
 _____ Code to the
 nearest centimeter
 (000) No side contact
 (150) 150 centimeters or more
 (999) Unknown

_____ inches X 2.54 = _____ centimeters

28. Side Bumper-Top Height 050
 _____ Code to the
 nearest centimeter
 (000) No side contact
 (150) 150 centimeters or more
 (999) Unknown

_____ inches X 2.54 = _____ centimeters

29. Centerline of Wheel

____ Code to the
nearest centimeter

- (000) No side contact
(150) 150 centimeters or more
(999) Unknown

_____ inches X 2.54 = _____ centimeters

30. Top of Tire

____ Code to the
nearest centimeter

- (000) No side contact
(200) 200 centimeters or more
(999) Unknown

_____ inches X 2.54 = _____ centimeters

31. Top of Wheel Well Opening

____ Code to the
nearest centimeter

- (000) No side contact
(250) 250 centimeters or more
(999) Unknown

_____ inches X 2.54 = _____ centimeters

32. Bottom of A-Pillar at Windshield

____ Code to the
nearest centimeter

- (000) No side contact
(250) 250 centimeters or more
(999) Unknown

_____ inches X 2.54 = _____ centimeters

33. Top of A-Pillar at Windshield

____ Code to the
nearest centimeter

- (000) No side contact
(300) 300 centimeters or more
(999) Unknown

_____ inches X 2.54 = _____ centimeters

34. Top of Side View Mirror

____ Code to the
nearest centimeter

- (000) No side contact
(300) 300 centimeters or more
(999) Unknown

_____ inches X 2.54 = _____ centimeters

Side Lateral Measurements

35. Centerline to A-Pillar
at Bottom of Windshield

____ Code to the
nearest centimeter

- (000) No side contact
(250) 250 centimeters or more
(999) Unknown

_____ inches X 2.54 = _____ centimeters

36. Centerline to A-Pillar
at Top of Windshield

____ Code to the
nearest centimeter

- (000) No side contact
(250) 250 centimeters or more
(999) Unknown

_____ inches X 2.54 = _____ centimeter

37. Centerline to Maximum Side
View Mirror Protrusion

____ Code to the
nearest centimeter

- (000) No side contact
(300) 300 centimeters or more
(999) Unknown

_____ inches X 2.54 = _____ centimeter

Side Wrap Distance Measurements

38. Ground to Side/Top Transition

____ Code to the
nearest centimeter

- (000) No side contact
(400) 400 centimeters or more
(999) Unknown

_____ inches X 2.54 = _____ centimeters

39. Ground to Hood Edge

____ Code to the
nearest centimeter

- (000) No side contact
(500) 500 centimeters or more
(999) Unknown

_____ inches X 2.54 = _____ centimeters

40. Ground to Centerline of Hood (Origin)

_____ Code to the
nearest centimeter

(000) No side contact

(700) 700 centimeters or more

(999) Unknown

_____ inches X 2.54 = _____ centimeters

41. Ground to Head Contact

_____ Code to the
nearest centimeter

(000) No side contact

(800) 800 centimeters or more

(999) Unknown

_____ inches X 2.54 = _____ centimeters



PEDESTRIAN INTERVIEW FORM

NATIONAL ACCIDENT SAMPLING SYSTEM
PEDESTRIAN CRASH DATA STUDY

1. Primary Sampling Unit Number <u>49</u>	Interviewee(s) Role or Name(s): <u>[REDACTED]</u>
2. Case Number - Stratum <u>609</u> P	<u>[REDACTED]</u>
3. Pedestrian Number <u>01</u>	

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

GOING TO CROSS STREET WESTWARD - CAR
COMING NORTH IN RT LANE - CARS PARKED
AT RT CURB - I STEPPED OUT BETWEEN 2
PARKED CARS & LOOKED TO MY LEFT & HE HIT
ME - DON'T REMEMBER ANYTHING AFTER THAT

WITNESS DESCRIPTION OF ACCIDENT EVENTS

ACCIDENT DIAGRAM



INDICATE NORTH

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.

PSU NUMBER
CASE NUMBER
YEAR

49
6097
1995

PEDESTRIAN INTERVIEW FORM

THE FOLLOWING DATA IS NOT INCLUDED IN THIS CASE:

☐ ENTIRE FORM

☒ PAGE NUMBER (S) 2

1. Primary Sampling Unit Number

49

3. Pedestrian Number

0 1

2. Case Number - Stratum

6 0 9 P

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): UNIC☐ 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☐ 50-50 ☐ 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

49

3. Pedestrian Number

0 1

2. Case Number - Stratum

609 P

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?

NOT SURE

16. Height, Weight, Age, and Sex?

Height 6' Weight 172 Age 33Sex: ☒ Male ☐ Female

17. What kind of shoes were you wearing?

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

18 Ground to center of knee cap
36 Ground to top of hip bone
60 Ground to top of shoulder

Go to Pedestrian Injury Data questions

1. Primary Sampling Unit Number

49

3. Pedestrian Number

0 1

2. Case Number - Stratum

6 09 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?

1 1/2 days

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

☐ No☒ Yes (If "Yes", describe:)CHERILIPS☐ 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)?

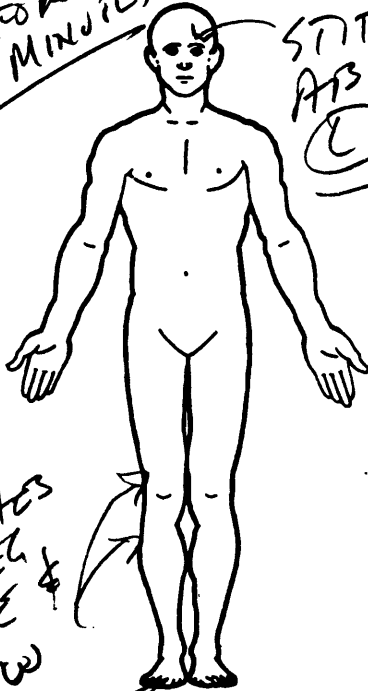
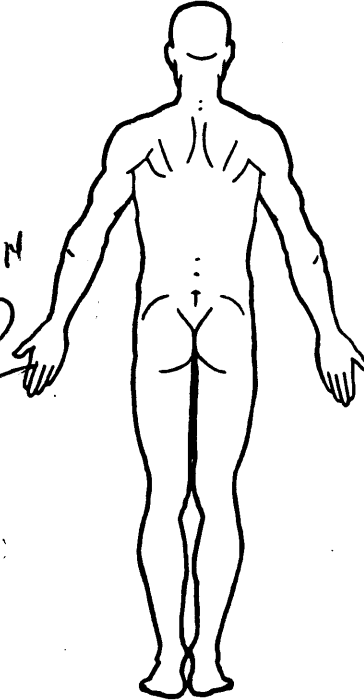
☐ No☒ Yes (If "Yes", determine the number of days lost) (Specify:)10 DAYS☐ Not working prior to the accident☐ Unknown

PSU Number 49 Case Number—Stratum 6 0 9 P Pedestrian Number 0 1

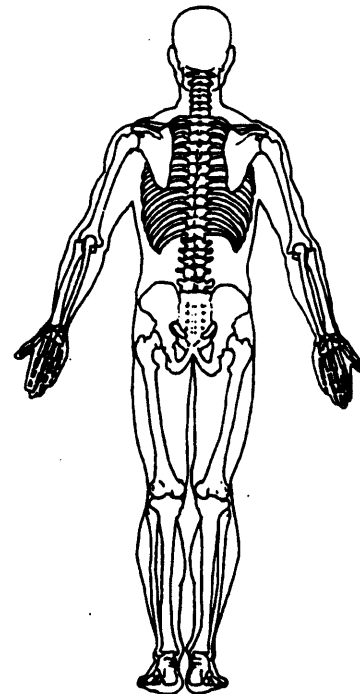
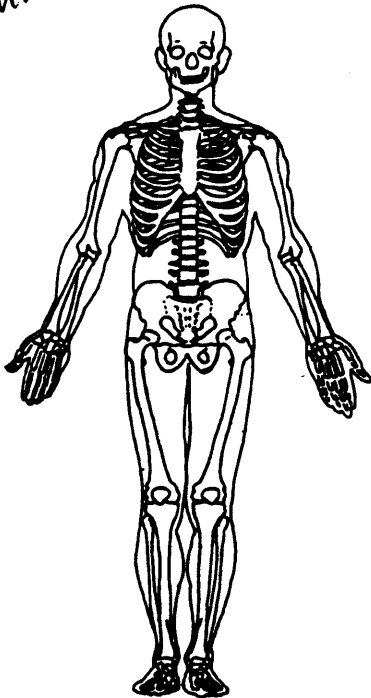
PEDESTRIAN INJURY DATA FROM INTERVIEWEE(S)

Indicate the Location, Lesion, Detail, and Source of all injuries. Specify interviewee(s) P1

SOFT TISSUE/INTERNAL INJURIES

INCISED
OUT TO A
FEW MINUTESSTITCHES
ABOVE
EYE
w/sABRASION
HAND
w/sSTITCHES
BELOW
KNEE
BUMP

SKELETAL INJURIES





DRIVER INTERVIEW FORM

NATIONAL ACCIDENT SAMPLING SYSTEM
PEDESTRIAN CRASH DATA STUDY

9

1. Primary Sampling Unit Number <u>49</u>	Interviewee(s) Role or Name(s): <u>DRIVER</u>
2. Case Number - Stratum <u>6</u> <u>09</u> <u>P</u>	
3. Vehicle Number <u>0</u> <u>1</u>	

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

N/B ON [REDACTED] IN 2ND LANE - RCD W/B INTO
STREET FROM MY RIGHT - RAN BETWEEN 2 PARKED
CARS & I HIT HIM W/ MY RT FRONT - HE
WENT UP & OVER THE CAR

OCCUPANT'S DESCRIPTION OF ACCIDENT EVENTS

ACCIDENT DIAGRAM



INDICATE NORTH

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.

1. Primary Sampling Unit Number

— —

3. Vehicle Number

0 1

2. Case Number - Stratum

6 — — P

4. Occupant Number

0 1

DRIVER CRASH DATA QUESTIONS

1. Can you tell me in which direction you were traveling?☒ 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) (3) (4) ☐ Other (specify):3. Can you remember your estimated travel speed (in miles per hour) before the accident?

<input type="checkbox"/> Stopped	<input type="checkbox"/> 1-10	<input type="checkbox"/> 10-20
<input type="checkbox"/> 20-30	<input checked="" type="checkbox"/> 30-40 35	<input type="checkbox"/> 40-50
<input type="checkbox"/> 50-60	<input type="checkbox"/> 60-70	<input type="checkbox"/> 70+

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

<input checked="" type="checkbox"/> Going straight	<input type="checkbox"/> Stopped
<input type="checkbox"/> slowing	<input type="checkbox"/> Accelerating
<input type="checkbox"/> Turning left	<input type="checkbox"/> Turning right
<input type="checkbox"/> Changing lanes to left	<input type="checkbox"/> Changing lanes to right
<input type="checkbox"/> Backing	
<input type="checkbox"/> Other (specify):	

5. Did you experience any loss of control?
☒ No
☐ Yes (If yes, describe below)
6. Did you have to take any avoidance actions prior to the accident?
☐ No - Go to question 7
☒ Yes - Go to question 6a
6a. What actions did you take?
☒ 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
☒ No7. Where was your vehicle at the time of the collision?
☒ 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
☒ Lower
☐ Higher
☐ Unknown
8a. Can you estimate your speed at the time of the collision?

<input type="checkbox"/> Stopped	<input type="checkbox"/> 1-10	<input type="checkbox"/> 10-20
<input checked="" type="checkbox"/> 20-30 25	<input type="checkbox"/> 30-40	<input type="checkbox"/> 40-50
<input type="checkbox"/> 50-60	<input type="checkbox"/> 60-70	<input type="checkbox"/> 70+

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

SM Forward

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

☒ N
 W . E
 S

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

☒ Original travel lane ☐ Different travel lane
☐ In intersection ☐ Off roadway to right
☐ Off roadway to left
☐ Other (specify):

1. Primary Sampling Unit Number

3. Vehicle Number

0 1

2. Case Number - Stratum

6 P

4. Occupant Number

0 1

VEHICLE/DRIVER DATA QUESTIONS

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)SCRATCHES TO BUMPER

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

☐ No (If "No", describe below)☐ Yes☐ UnknownNOT REPAIRED

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:NO

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?

A

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

☐ No☐ Yes

VEHICLE/PEDESTRIAN RELATED DATA

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 _____ 3. Vehicle Number 0 1
2. Case Number - Stratum 6 _____ 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
- NOT SURE*

25. Where did the pedestrian hit the vehicle?

Would you say:

- ☒ The front
☐ Corner, or
☐ Side

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): _____
- NOT SURE*

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
☐ Extended forward, bracing
☐ Extended forward or backward holding or pulling
object
☐ Holding object in arms
☐ 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): _____
- ONLY*

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

Car Jolt

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

