

CRASH DATA RESEARCH CENTER

Calspan Corporation
Buffalo, NY 14225

CALSPAN REMOTE HYPERTERMIA DEATH INVESTIGATION

NOT-IN-TRAFFIC SURVEILLANCE

SCI CASE NO.: CA08026

VEHICLE: 2000 FORD EXPLORER XLT

LOCATION: PENNSYLVANIA

INCIDENT DATE: JUNE 2008

Contract No. DTNH22-07-C-00043

Prepared for:

U.S. Department of Transportation
National Highway Traffic Safety Administration
Washington, D.C. 20590

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The crash investigation process is an inexact science which requires that physical evidence such as skid marks, vehicular damage measurements, and occupant contact points are coupled with the investigator's expert knowledge and experience of vehicle dynamics and occupant kinematics in order to determine the pre-crash, crash, and post-crash movements of involved vehicles and occupants.

Because each crash is a unique sequence of events, generalized conclusions cannot be made concerning the crashworthiness performance of the involved vehicle(s) or their safety systems.

TECHNICAL REPORT STANDARD TITLE PAGE

<i>1. Report No.</i> CA08026	<i>2. Government Accession No.</i>	<i>3. Recipient's Catalog No.</i>	
<i>4. Title and Subtitle</i> Calspan Remote Hyperthermia Death Investigation Vehicle: 2000 Ford Explorer Location: Pennsylvania		<i>5. Report Date:</i> January 2011	
		<i>6. Performing Organization Code</i>	
<i>7. Author(s)</i> Crash Data Research Center		<i>8. Performing Organization Report No.</i>	
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		<i>14. Sponsoring Agency Code</i>	
<i>15. Supplementary Note</i> <p>An investigation of a hyperthermia death involving a 14-month-old male non-motorist that was left unattended in a parked 2000 Ford Explorer.</p>			
<i>16. Abstract</i> <p>This remote investigation focused on the hyperthermia death of a 14-month-old male non-motorist that was left unattended in a parked 2000 Ford Explorer for an extended period of time during daylight summer hours. The non-motorist was restrained in a forward-facing Child Restraint System (CRS) in the left position of the back seat of the Ford for a five hour period. He was discovered by the 59-year-old male driver as he returned to the vehicle following a work shift. The non-motorist maintained shallow breathing and was removed from the CRS by the driver and carried into an air-conditioned building. The emergency response system was notified of the incident and police and ambulance personnel responded to the scene of the incident. The non-motorist was transported to a local hospital and was then transferred to a regional pediatric trauma center where he was admitted for treatment. The non-motorist was placed on life support and evaluated for recovery. He was diagnosed with brain death and expired four days following the incident. The driver was the grandfather to the non-motorist. He was subsequently charged with involuntary manslaughter. The Police Agency investigated this incident as a crime and compiled a Crime Report for this death. This report will not be provided to State and Federal crash databases.</p>			
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NOT-IN-TRAFFIC SURVEILLANCE
CALSPAN REMOTE HYPERTHERMIA DEATH INVESTIGATION
SCI CASE NO.: CA08026
VEHICLE: 2000 FORD EXPLORER XLT
LOCATION: PENNSYLVANIA
INCIDENT DATE: JUNE 2008

BACKGROUND

This remote investigation focused on the hyperthermia death of a 14-month-old male non-motorist that was left unattended in a parked 2000 Ford Explorer for an extended period of time during daylight summer hours. The non-motorist was restrained in a forward-facing Child Restraint System (CRS) in the left position of the back seat of the Ford for a five hour period. He was discovered by the 59-year-old male driver as he returned to the



Figure 1. Left side view of an exemplar 2000 Ford Explorer.

vehicle following a work shift. The non-motorist maintained shallow breathing and was removed from the CRS by the driver and carried into an air-conditioned building. The emergency response system was notified of the incident and police and ambulance personnel responded to the scene of the incident. The non-motorist was transported to a local hospital and was then transferred to a regional pediatric trauma center where he was admitted for treatment. The non-motorist was placed on life support and evaluated for recovery. He was diagnosed with brain death and expired four days following the incident. The driver was the grandfather to the non-motorist. He was subsequently charged with involuntary manslaughter. The Police Agency investigated this incident as a crime and compiled a Crime Report for this death. This report will not be provided to State and Federal crash databases. **Figure 1** is a left side view of an exemplar 2000 Ford Explorer.

This hyperthermia death was identified by the National Highway Traffic Safety Administration (NHTSA) through an Internet news search of potential cases of interest to the Special Crash Investigations (SCI) Program. The notification was forwarded to the Calspan SCI team on June 25, 2008 for remote follow-up. The team placed a telephone call to the investigating Police Detective on June 27 and received a callback on July 2, 2008. Details of the incident were provided by the investigating Detective. Official documents and images of the vehicle could not be provided until the criminal case was settled. The Detective notified the SCI team following the outcome of the criminal case that due to a computer malfunction, all images relating to this incident were lost.

Attempts to obtain images through computer recovery efforts and other sources were unsuccessful.

SUMMARY

Incident Site

This incident occurred in a commercial parking lot during daylight hours. The parking lot was surfaced with asphalt and delineated with parking spaces and driving isles. Small trees were located within curbed islands at the ends of the parking rows. These trees did not shade the Ford as the investigating detective stated the vehicle was parked in full sun for the duration of this incident. The parking lot was level with spaces oriented in northeast and southwesterly directions. The Ford was parked at a perimeter location of the parking lot facing in a police reported north/northwesterly direction. Local weather forecasters indicated the weather conditions on the day of the incident were clear, but hazy, with temperatures ranging from (81 degrees F) at the time the driver arrived at the incident site to (96.8 degrees F) when he returned to the vehicle at the end of his work shift. The humidity levels were 77 percent at the time the Ford was parked and 37 percent at the time the driver returned to the vehicle. Wind speeds averaged 9.3 km/h (5.8 mph) throughout this time period and were variable in direction. It should be noted that the recorded temperature at the time the driver returned to the vehicle was the high temperature for that day. A schematic of the incident site is provided as **Figure 6** of this report.

Vehicle

The involved vehicle was a 2000 Ford Explorer XLT 4x4, 4-door sport utility vehicle. The Ford was identified by Vehicle Identification Number (VIN): 1FMZU73E1YZ (production number deleted). The Ford was equipped with a 4.0 liter V-6 conventionally-mounted gasoline engine linked to a 5-speed automatic transmission. The exterior color of the Ford was white. **Figures 2 and 3** are exterior views of an exemplar 2000 Ford Explorer.



Figure 2. Left side view of an exemplar 2000 Ford Explorer.



Figure 3. Front left oblique view of an exemplar 2000 Ford Explorer.

The glazing consisted of standard tint front door glazing, and deep tint rear door, quarter window, and backlight glazing. The Ford was also equipped with a sunroof that was comprised of deep tint glazing. The condition and status of the glazing was reported by the investigating detective as clear with all four door windows opened approximately 6 mm (0.25 in). The sunroof was opened approximately 13 mm (0.5 in) with the interior sun shade panel in the full-open position.

The interior was configured with front bucket seats and a split, forward folding second row bench seat. All interior and seating surfaces were surfaced in cloth and were light gray in color. **Figures 4 and 5** are interior views of exemplar vehicles.



Figure 4. View of the second row left seat position of an exemplar 2000 Ford Explorer.



Figure 5. Rear interior view of an exemplar 2000 Ford Explorer.

Driver

The Ford was owned and operated by a 59-year-old male. He was the grandfather to the 14-month-old male non-motorist. The driver was responsible for providing transportation for this non-motorist to a daycare facility, three-days per week. He had been performing this task for approximately four months prior to his incident.

Non-Motorist

The non-motorist was the 14-month-old male. His height and weight were unknown. He was dressed in shorts over a disposal diaper and a T-shirt for his day at the daycare facility. The color and fabric of the non-motorist's clothing was unknown as the investigating detective arrived on-scene following the medical transport of the non-motorist. The non-motorist was restrained in a forward-facing convertible CRS in the second row left position. The non-motorist was restrained in the CRS by the integrated harness system and the CRS was secured to the vehicle by the 3-point lap and shoulder belt system.

Incident Sequence

Pre-Incident

On the morning of this incident, the driver arrived at his daughter's residence at approximately 0743 hours. His planned activities involved the transport of the non-motorist to the daycare facility with continued travel to his work place. The driving distance from the residence of the non-motorist to the daycare facility was approximately 2.4 km (1.5 mile). The total trip distance from the non-motorist's residence to his work place was 8.9 km (5.5 miles).

The driver placed the non-motorist in the forward facing CRS in the rear left position of the Ford and secured him in the CRS with the integrated harness system. The driver proceeded to his destinations, but became distracted from his tasks and continued directly to his work place, arriving at 0805 hours. He parked the Ford in a perimeter parking space with the front of the vehicle facing in a northwesterly direction. He opened the door windows approximately 6 mm (0.25 in) and the sunroof approximately 13 mm (0.5 in) to vent the interior of the vehicle. The driver locked the Ford with the remote key fob and proceeded to his work place. The 14-month old non-motorist remained secured in the CRS as the driver walked away from the vehicle.

Incident

The driver completed his work activities at approximately 1325 hours and returned to the vehicle to depart the commercial facility, en route to his residence. As the driver unlocked the Ford and opened the left front door, he observed the non-motorist restrained in the CRS. The non-motorist was unconscious with a faint breath. The driver immediately removed the non-motorist from the CRS and carried him into his workplace. A call was placed to the emergency response system to request medical assistance. The local police, fire, and emergency medical service personnel responded to the scene. Attempts to cool the non-motorist were initiated prior to the arrival of the paramedics and police.

Post-Incident

The non-motorist was immediately transported to a local hospital where his core temperature was measured at 41.7 degrees C (107.2 degrees F). The non-motorist was placed on life support and prepared for transport to a regional pediatric trauma center where he was evaluated for signs of recovery. The medical staff determined the non-motorist suffered brain death and life support was withdrawn four days following the incident. He expired with a Medical Examiner reported cause of death of hyperthermia.

The investigating detective and fire department measured the interior temperature of the Ford at 43.3 degrees C (110 degrees F) 90 minutes after the non-motorist was removed

from the vehicle. Prior to this point in time, the Ford had been opened and vented several times during the removal of the non-motorist and for the police investigation.

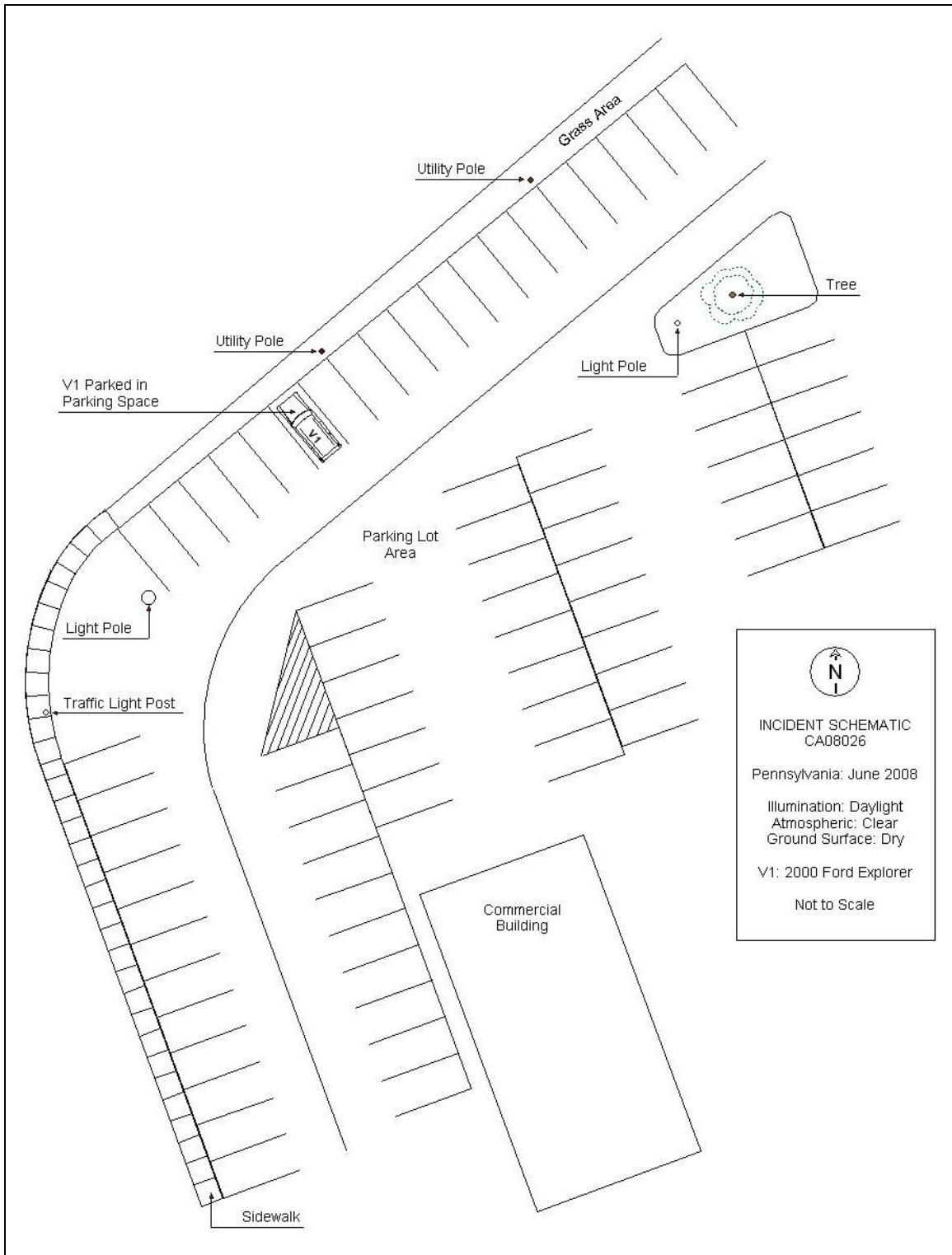


Figure 6: Incident Schematic

Attachment A

Not-In-Traffic Surveillance Forms



Not Applicable

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

SCENE FORM

Special Crash Investigations
Not In Traffic Surveillance

1. Case Number

C A 0 8 0 2 6

IDENTIFICATION

2. Date of Crash 0 6 / X X / 0 8

3. Time of Crash 9 9 9 9

Code reported military time of crash.

NOTE: Midnight = 2400

Unknown = 9999

AMBIENT CONDITIONS

4. Light Conditions

- Daylight
- Dark
- Dark but lighted
- Dawn
- Dusk
- Unknown

5. Atmospheric Conditions
(Select all that apply)

- Clear-No adverse conditions
- Cloudy
- Rain
- Snow
- Fog, Smog, Smoke
- Sleet, Hail (freezing rain or drizzle)
- Blowing Snow
- Severe Crosswinds
- Blowing Sand, Soil, Dirt
- Other (specify): HAZY
- Unknown

6. Temperature

- Below 0 degrees Celsius (Below 32 F)
- 1-10 degrees Celsius (33-50 F)
- >10-24 degrees Celsius (51-75 F)
- Over 24 degrees Celsius (Over 75 F)
- Unknown

7. Type of area in which crash occurred

(Select all that apply)

- Single family residential
- Row houses/townhouses
- Multi family housing
- Commercial
- Industrial
- Rural
- Unknown

8. Driver exterior sightline obstructions

(Select all that apply)

- | | |
|--|--|
| <input checked="" type="checkbox"/> None | <input type="checkbox"/> Utility poles |
| <input type="checkbox"/> Other vehicles | <input type="checkbox"/> Signs |
| <input type="checkbox"/> Building | <input type="checkbox"/> Glare |
| <input type="checkbox"/> Trees | <input type="checkbox"/> Unknown |
| <input type="checkbox"/> Shrubbery | <input type="checkbox"/> No driver present |
| <input type="checkbox"/> Other (specify) _____ | |

9. Crash location

- | | |
|--|--|
| <input type="checkbox"/> Driveway | <input type="checkbox"/> Road / street |
| <input checked="" type="checkbox"/> Parking Lot | <input type="checkbox"/> Roadside / shoulder |
| <input type="checkbox"/> Sidewalk | <input type="checkbox"/> Other (specify) _____ |
| <input type="checkbox"/> Alley | <input type="checkbox"/> Unknown |
| <input type="checkbox"/> Intersection of driveway and sidewalk | |

10. Non motorist sightline obstructions

(Select all that apply)

- None
- Other vehicles
- Building
- Trees
- Shrubbery
- Utility poles
- Signs
- Glare
- Other (specify) _____
- Unknown

+ / -

11. Grade at parked position 0 0 0 %

12. Estimated distance from parked position to impact

0 0 0 . 0 m

13. Estimated speed at impact 0 0 0 kmph

+ / -

14. Grade at impact 0 0 0 %

15. Estimated distance from impact to vehicle final rest

0 0 0 . 0 m

Unknown = 999 Reference Items 11,12, 13, 14, 15

Not Applicable U.S. Department of Transportation
National Highway Traffic Safety Administration

VEHICLE FORM

Special Crash Investigations
Not In Traffic Surveillance1. Case Number C A 0 8 0 2 6

VEHICLE IDENTIFICATION

2. VIN 1 F M Z U 7 3 E 1 Y Z X X X X X X X3. Model Year 2 0 0 04. Vehicle Make (specify): FORD5. Vehicle Model (specify): EXPLORER

GLAZING

Location	Presence (check)	Status (select)	Clarity (select)	Tint (check)	Glazing Obstructions (specify if present)
Windshield	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Fixed / <input type="checkbox"/> Closed / <input type="checkbox"/> Open / <input type="checkbox"/> Partially Open / <input type="checkbox"/> Unknown	<input checked="" type="checkbox"/> Clear / <input type="checkbox"/> Hazy / <input type="checkbox"/> Very Dirty / <input type="checkbox"/> Unknown	<input type="checkbox"/>	
LF	<input checked="" type="checkbox"/>	<input type="checkbox"/> Fixed / <input checked="" type="checkbox"/> Closed / <input type="checkbox"/> Open / <input type="checkbox"/> Partially Open / <input type="checkbox"/> Unknown	<input checked="" type="checkbox"/> Clear / <input type="checkbox"/> Hazy / <input type="checkbox"/> Very Dirty / <input type="checkbox"/> Unknown	<input type="checkbox"/>	
RF	<input checked="" type="checkbox"/>	<input type="checkbox"/> Fixed / <input checked="" type="checkbox"/> Closed / <input type="checkbox"/> Open / <input checked="" type="checkbox"/> Partially Open / <input type="checkbox"/> Unknown	<input checked="" type="checkbox"/> Clear / <input type="checkbox"/> Hazy / <input type="checkbox"/> Very Dirty / <input type="checkbox"/> Unknown	<input type="checkbox"/>	
2 nd Left	<input checked="" type="checkbox"/>	<input type="checkbox"/> Fixed / <input type="checkbox"/> Closed / <input type="checkbox"/> Open / <input type="checkbox"/> Partially Open / <input type="checkbox"/> Unknown	<input checked="" type="checkbox"/> Clear / <input type="checkbox"/> Hazy / <input type="checkbox"/> Very Dirty / <input type="checkbox"/> Unknown	<input checked="" type="checkbox"/>	
2 nd Right	<input checked="" type="checkbox"/>	<input type="checkbox"/> Fixed / <input type="checkbox"/> Closed / <input type="checkbox"/> Open / <input type="checkbox"/> Partially Open / <input type="checkbox"/> Unknown	<input checked="" type="checkbox"/> Clear / <input type="checkbox"/> Hazy / <input type="checkbox"/> Very Dirty / <input type="checkbox"/> Unknown	<input checked="" type="checkbox"/>	
3 rd Left	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Fixed / <input type="checkbox"/> Closed / <input type="checkbox"/> Open / <input type="checkbox"/> Partially Open / <input type="checkbox"/> Unknown	<input checked="" type="checkbox"/> Clear / <input type="checkbox"/> Hazy / <input type="checkbox"/> Very Dirty / <input type="checkbox"/> Unknown	<input checked="" type="checkbox"/>	
3 rd Right	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Fixed / <input type="checkbox"/> Closed / <input type="checkbox"/> Open / <input type="checkbox"/> Partially Open / <input type="checkbox"/> Unknown	<input checked="" type="checkbox"/> Clear / <input type="checkbox"/> Hazy / <input type="checkbox"/> Very Dirty / <input type="checkbox"/> Unknown	<input checked="" type="checkbox"/>	
Backlight	<input checked="" type="checkbox"/>	<input type="checkbox"/> Fixed / <input checked="" type="checkbox"/> Closed / <input type="checkbox"/> Open / <input type="checkbox"/> Partially Open / <input type="checkbox"/> Unknown	<input checked="" type="checkbox"/> Clear / <input type="checkbox"/> Hazy / <input type="checkbox"/> Very Dirty / <input type="checkbox"/> Unknown	<input checked="" type="checkbox"/>	
Left Backlight	<input type="checkbox"/>	<input type="checkbox"/> Fixed / <input type="checkbox"/> Closed / <input type="checkbox"/> Open / <input type="checkbox"/> Partially Open / <input type="checkbox"/> Unknown	<input type="checkbox"/> Clear / <input type="checkbox"/> Hazy / <input type="checkbox"/> Very Dirty / <input type="checkbox"/> Unknown	<input type="checkbox"/>	
Right Backlight	<input type="checkbox"/>	<input type="checkbox"/> Fixed / <input type="checkbox"/> Closed / <input type="checkbox"/> Open / <input type="checkbox"/> Partially Open / <input type="checkbox"/> Unknown	<input type="checkbox"/> Clear / <input type="checkbox"/> Hazy / <input type="checkbox"/> Very Dirty / <input type="checkbox"/> Unknown	<input type="checkbox"/>	
Roof	<input type="checkbox"/>	<input type="checkbox"/> Fixed / <input type="checkbox"/> Closed / <input type="checkbox"/> Open / <input type="checkbox"/> Partially Open / <input type="checkbox"/> Unknown	<input type="checkbox"/> Clear / <input type="checkbox"/> Hazy / <input type="checkbox"/> Very Dirty / <input type="checkbox"/> Unknown	<input type="checkbox"/>	
Other (specify)	<input type="checkbox"/>	<input type="checkbox"/> Fixed / <input type="checkbox"/> Closed / <input type="checkbox"/> Open / <input type="checkbox"/> Partially Open / <input type="checkbox"/> Unknown	<input type="checkbox"/> Clear / <input type="checkbox"/> Hazy / <input type="checkbox"/> Very Dirty / <input type="checkbox"/> Unknown	<input type="checkbox"/>	

TIRE DATA

6. Vehicle Manufacturer Recommended Tire Size P235/70R157. LF Tire Size UNKNOWN9. RF Tire Size UNKNOWN8. LR Tire Size UNKNOWN10. RR Tire Size UNKNOWN

Seats / Head Restraint Data				
Seat Position	Seat Type (Select from below)	Head Restraint (Check If available)	Head Restraint Adjustment (select)	NOTES:
Front Left	2	<input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Full Down / Mid / Full Up	HEAR RESTRAINT ADJUSTMENTS ARE UNKNOWN
Front Middle	0	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Full Down / Mid / Full Up	
Front Right	2	<input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Full Down / Mid / Full Up	
2 nd Left	7	<input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Full Down / Mid / Full Up	
2 nd Middle	7	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Full Down / Mid / Full Up	
2 nd Right	7	<input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Full Down / Mid / Full Up	
3 rd Left	0	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Full Down / Mid / Full Up	
3 rd Middle	0	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Full Down / Mid / Full Up	
3 rd Right	0	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Full Down / Mid / Full Up	

Seat Type codes:

0 = No seat or seat folded down

8 = Pedestal (i.e. column supported)

1 = Bucket

9 = Box mounted (i.e. van type)

2 = Bucket w/ folding back

10= Other seat type (specify)

3 = Bench

99= Unknown seat type

4 = Bench with folding back cushions

5 = Bench w/ folding back

6 = Split bench w/ separate back cushions

7 = Split bench w/ separate folding back

VEHICLE MEASUREMENTS

Clearance Heights		Measurements (all from ground, and in centimeters)	NOTES
Beltline		N/A	N/A
Top of trunk/tailgate		N/A	
Bottom of bumper		N/A	
Trailer hitch (if applicable)		N/A	
Undercarriage			
Sway bar		N/A	
Axle		N/A	
Differential		N/A	
Other (specify): N/A		N/A	
Sensor Height (if equipped)		N/A	
Camera Height (if equipped)		N/A	

Not Applicable



Undo Not Applicable

U S Department of Transportation
National Highway Traffic Safety Administration

Special Crash Investigations
Not In Traffic Surveillance

Back Up / Parking Aid Form

1. Case Number

C A 0 8 0 2 6

PARKING AID PRESENCE

2. Type of backing/parking aid present

- OEM camera
- OEM ultrasonic/radar sensor
- OEM combination camera-ultrasonic/radar sensor
- OEM Fresnel lens
- OEM interior mirrors
- Aftermarket camera
- Aftermarket ultrasonic/radar sensor
- Aftermarket combination camera-ultrasonic radar sensor
- Aftermarket Fresnel lens
- Aftermarket interior mirrors
- Other (specify): _____

CAMERA INFORMATION

Specify field of view measurements on diagram

3. System make/model

Not Applicable

4. Video sensor type

- None present
- LCD (color)
- CRT (black & white)
- Unknown

5. Video display size (Diagonal) _____ cm

6. Camera location

- None present
- Bumper
- License plate
- Tailgate/Hatch/Trunk
- Other (specify): _____

7. Video image quality under scene lighting conditions

- None present
- Good
- Average
- Poor (specify): _____
- Unknown

8. Was the camera functioning properly

- None present
- Yes
- No, poor image quality due to glare
- No, poor image quality due to atmospheric conditions
- No, camera turned off
- No, camera inoperable
- Unknown

ULTRASONIC/RADAR SENSOR

Specify object detection range on diagram

9. System make/model

10. Auditory warning illumination

- No sensor present
- Yes
- No
- Unknown

11. Number of sensors

12. Sensor locations (Select all that apply)

- No sensor present
- Left bumper
- Center bumper
- Right bumper
- License plate area
- Tailgate/Hatch/Trunk

13. Was warning system functioning properly

- No sensor present
- Yes, system alerted driver
- No, system did not alert driver
- No, system turned off
- No, system inoperable
- Unknown

14. Did driver react to warning

- No sensor present
- Yes
- No
- Unknown
- Sensor present, did not sound

15. Did driver report common false warnings

- No sensor present
- Yes
- No
- Unknown

Not Applicable

No Driver Present 

DRIVER FORM

Special Crash Investigations
Not In Traffic Surveillance

1 Case Number

C A 0 8 0 2 6

DRIVER PROFILE

2. Driver's Age

99 = Unknown

5 9

3. Driver's Sex

- Male
 Female
 Unknown

4. Driver's Height

999 = Unknown

9 9 9 cm

5. Driver's Weight

999 = Unknown

9 9 9 kg

6. Driver eyewear worn

(Select all that apply)

- None
 Eyeglasses
 Sunglasses
 Contacts
 Unknown

7. Driver vision deficiency condition

(Select all that apply)

- None
 Near sighted
 Far sighted
 Astigmatism
 Other (specify) _____
 Unknown

8. Non motorist's relationship to driver

- No relationship
 Child
 Grandchild
 Sibling
 Neighbor
 Friend
 Other (specify): _____
 Unknown

DRIVER ACTIONS

9. Driver approach to vehicle for entry

- From left front
 From left
 From left rear
 From right rear
 From right front
 Circled vehicle
 Return trip (backing into driveway/lot)
 Other (specify): _____
 N/A
 Unknown

10. Driver entry interruption
(Select all that apply)

- Direct trip from building to vehicle
 Loaded items into vehicle
 Spoke with family
 Spoke with neighbors
 Spoke with contacted nonmotorist
 Return trip (backing into driveway/lot)
 Other (specify): _____
 N/A
 Unknown

11. Purpose of backing

- Leaving parking space in parking lot
 Backing onto roadway from driveway
 Entering parking space in parking lot
 Backing into driveway from roadway
 Other (specify): _____
 N/A
 Unknown

12. Where was driver going

Description:

TO WORK PLACE

13. Driver in a hurry

- Yes N/A
 No Unknown

14. How did driver check behind (rear area of vehicle) after vehicle entry

(Select all that apply)

- Did not look
 Checked mirrors
 Turned right and looked back
 Turned left and looked back
 Viewed Camera
 Listened for auditory/visual warning from system
 Other (specify): _____
 N/A Unknown

15. Estimated time between vehicle entry and start of backing

- 0-10 Seconds Over 60 Seconds
 11-30 Seconds N/A
 31-60 Seconds Unknown

<p>16. What direction was the driver looking during backing maneuver (Select all that apply)</p> <p><input type="checkbox"/> Straight ahead <input type="checkbox"/> Right <input type="checkbox"/> Left <input type="checkbox"/> Rearward <input type="checkbox"/> At object inside the car <input type="checkbox"/> At mirrors <input type="checkbox"/> Other (specify): _____ <input checked="" type="radio"/> N/A <input type="checkbox"/> Unknown</p> <p>17. Was the driver distracted during back up maneuver (Select all that apply)</p> <p><input checked="" type="radio"/> No non-driving activities External <input type="checkbox"/> Looking at other vehicles <input type="checkbox"/> Looking at other non motorist <input type="checkbox"/> Looking at intended turn destination <input type="checkbox"/> External focus, not specified <input type="checkbox"/> Other external focus (specify): _____ Internal <input type="checkbox"/> Looking at other occupant <input type="checkbox"/> Talking to passenger <input type="checkbox"/> Dialing phone <input type="checkbox"/> Talking on phone <input type="checkbox"/> Listening to radio/cd/portable playback device <input type="checkbox"/> Adjusting radio/cd player <input type="checkbox"/> Adjusting climate controls <input type="checkbox"/> Using a device/controls integral to vehicle (specify): _____ <input type="checkbox"/> Reading/adjusting navigation system <input type="checkbox"/> Eating or drinking <input type="checkbox"/> Smoking related <input type="checkbox"/> Retrieving fallen object (specify): _____ <input type="checkbox"/> Internal focus, not specified <input type="checkbox"/> Focused on other internal object (specify): _____ <input type="checkbox"/> N/A <input type="checkbox"/> Unknown</p> <p>18. Driver avoidance actions prior to impact (Select all that apply)</p> <p><input type="checkbox"/> None <input type="checkbox"/> Braking <input type="checkbox"/> Steering left <input type="checkbox"/> Steering right <input type="checkbox"/> Accelerating <input type="checkbox"/> Other (specify): _____ <input checked="" type="radio"/> N/A <input type="checkbox"/> Unknown</p>	<p>19. Did driver see struck non motorist prior to impact (Select all that apply)</p> <p><input type="checkbox"/> No, never saw non motorist <input type="checkbox"/> Saw non motorist prior to entering vehicle <input type="checkbox"/> Saw non motorist after entering vehicle <input type="checkbox"/> Other (specify): _____ <input checked="" type="radio"/> N/A <input type="checkbox"/> Unknown</p> <p>20. Est time between start of backing and impact</p> <p><input type="checkbox"/> <2 or = 1 second <input type="checkbox"/> 2-5 seconds <input type="checkbox"/> 6-10 seconds <input type="checkbox"/> > 10 seconds <input checked="" type="radio"/> N/A <input type="checkbox"/> Unknown</p> <p>21. Driver interior sightline obstructions (Select all that apply)</p> <p><input type="checkbox"/> Pillar <input type="checkbox"/> Other occupant <input type="checkbox"/> Headrest <input type="checkbox"/> Other (specify) _____ <input type="checkbox"/> Cargo <input type="checkbox"/> Unknown <input checked="" type="radio"/> None</p> <p>22. Recent experience driving this vehicle</p> <p><input checked="" type="radio"/> More than 10 times the last three months <input type="checkbox"/> 6-10 times the last three months <input type="checkbox"/> 2-5 times the last three months <input type="checkbox"/> Less than 2 times the last three months <input type="checkbox"/> First time driving this vehicle <input type="checkbox"/> N/A <input type="checkbox"/> Unknown</p> <p>23. Frequency of driving in this parking lot/driveway</p> <p><input checked="" type="radio"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Several times a month <input type="checkbox"/> Monthly <input type="checkbox"/> Rarely <input type="checkbox"/> First time in lot/driveway <input type="checkbox"/> N/A <input type="checkbox"/> Unknown</p> <p>24. Driver Impairment (Select all that apply)</p> <p><input checked="" type="radio"/> No drugs or alcohol present <input type="checkbox"/> Alcohol present (specify BAC): _____ <input type="checkbox"/> Drugs present (specify): _____ <input type="checkbox"/> Unknown</p> <p>25. Source of alcohol/drug results</p> <p><input checked="" type="radio"/> Police reported <input type="checkbox"/> Medical record <input type="checkbox"/> Other (specify) _____ <input type="checkbox"/> Not Tested <input type="checkbox"/> Unknown if tested</p>
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Not Applicable U.S. Department of Transportation
National Highway Traffic Safety Administration

Non Motorist Form

Special Crash Investigations
Not In Traffic Surveillance

1. Case Number

C A 0 8 0 2 6

NON-MOTORIST PROFILE

2. Non-motorist's Age
99 = Unknown1 4 Months
 Years

3. Non-motorist's Sex

 Male
 Female
 Unknown
4. Non-motorist's Height
999 = Unknown

9 9 9 cm

5. Non-motorist's Weight
999 = Unknown

9 9 9 kg

6. Medical outcome

- Not injured
 ER only
 Hospitalized 1-4 days
 Hospitalized 5 days or more
 Treatment later
 Fatal
 Unknown

7. Source of most severe injury

- Bumper
 Tire
 Undercarriage
 Other Specify: HYPERTHERMIA
 Ground
 N/A
 Unknown

8. Non-motorist impairment

(Select all that apply)

- No drugs or alcohol present
 Positive for alcohol (specify BAC): _____
 Positive for drugs (specify): _____
 Unknown

9. Source of alcohol/drug results

- Police reported
 Medical Report
 Other (specify) _____
 Not Tested
 Unknown if tested

NON-MOTORIST ACTIONS

10. Non-motorist attitude

- | | |
|---|--|
| <input type="checkbox"/> Standing | <input type="checkbox"/> On skates/skateboard |
| <input type="checkbox"/> Bending at waist | <input type="checkbox"/> On bike/scooter |
| <input type="checkbox"/> Sitting | <input checked="" type="radio"/> Other (specify) <u>in CRS</u> |
| <input type="checkbox"/> Crouching | <input type="checkbox"/> Unknown |
| <input type="checkbox"/> Kneeling | |

11. Non-motorist motion

- Not moving
 Walking slowly
 Walking rapidly
 Running or jogging
 Skipping/Hopping/Jumping
 Falling/Stumbling/Rising
 On skates/skateboard
 On bike/scooter
 Other (specify): Restrained in CRS
 Unknown

12. Non-motorist approach relative to rear of vehicle

- Stationary
 From left
 From right
 From behind
 Other (specify): Restrained in CRS
 Unknown

13. Non-motorist first avoidance action

- No avoidance actions
 Stopped
 Accelerated pace
 Ran away (along vehicle path)
 Jumped
 Turned away from vehicle
 Turned toward vehicle and braced
 Drove or fell away from vehicle
 Other (specify): _____
 Unknown

14. Non-motorist primary focus of attention

- Striking vehicle
 Play object
 Person
 Surrounding traffic
 Animal
 Handheld electronic (phone, MP3 player, etc.)
 Other Object (specify) Rest. in CRS
 Unknown

15. Were any other Non-motorists present?

(Select all that apply)

- Alone
 One adult present
 One other child present
 Multiple adults present
 Multiple children present
 Unknown

NON MOTORIST CLOTHING**NOTES:**

- Specify Color, Fabric and Texture/Weight for outermost layer only
- Indicate "NONE" if applicable
- Available codes:

<u>Colors</u>	<u>Fabrics</u>	<u>Textures</u>	<u>Weights</u>
Black	Charcoal gray	Natural	Soft
Lt gray/silver	Brown	Synthetic	Heavy
Gold/tan	Purple	Blend	Medium
Dark blue	Light blue		Coarse
Dark green	Light green		Light
Maroon	Red		
Orange	Yellow		
White	Other (specify)		
Pink			

	Clothing	Color	Fabric	Texture	Weight
H	Hat				
E	Helmet				
A	Hood				
D	Other (specify):	N/A			
W	Unknown				
U	Short Sleeve	Unknown	Unknown	Unknown	Light
P	Long Sleeve				
P	Light Jacket				
E	Heavy Jacket				
R	Other (Specify):				
B	Unknown				
O	Shorts	Unknown	Unknown	Unknown	Light
D	Pants				
Y	Shoes				
L	Other (specify):				
O	Unknown				
W					
E					
R					
B					
O					
D					
Y					