



U.S. Department
of Transportation

**National Highway
Traffic Safety
Administration**

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

Dear Crash Data Researchers/Users:

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

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

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

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

**TRANSPORTATION SCIENCES CENTER
ACCIDENT RESEARCH GROUP**

Division of Arvin/Calspan
[REDACTED]

**CALSPAN REMOTE AIR BAG DEPLOYMENT INVESTIGATION
CALSPAN CASE NO. 93-3
VEHICLE - 1991 MERCURY CAPRI
LOCATION - [REDACTED] CT
ACCIDENT DATE [REDACTED] 1992**

Contract No. DTNH22-93-P-07222

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

1. <i>Report No.</i> 93-3	2. <i>Government Accession No.</i>	3. <i>Recipient's Catalog No.</i>	
4. <i>Title and Subtitle</i> Calspan Remote Air Bag Deployment Investigation Vehicle - 1991 Mercury Capri Location ██████████, CT		5. <i>Report Date:</i> ██████████ 1993	
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15. <i>Supplementary Notes</i> Remote investigation of a front-to-rear impact sequence that resulted in the deployment of the supplemental driver's side air bag system in a 1991 Mercury Capri.			
16. <i>Abstract</i> This remote investigation was initiated as a result of a ██████████ in the ██████████ 1993 edition of the ██████████. The frontal area of a 1991 Mercury Capri impacted the rear of a 1989 Chrysler LeBaron with sufficient force to deploy the Capri's driver air bag system. Both vehicles sustained moderate damage as a result of the front-to-rear impact sequence. The driver of the Mercury Capri was a 22 year old female. She was not wearing the manual 3-point belt system that extended from the lower B-pillar due to the convertible design of the vehicle. The driver was in a police reported forward driving position with the seat track adjusted to a forward position which placed the driver within a close proximity to the steering wheel and air bag module assembly. As the air bag system deployed, the bag contacted the driver's chest with sufficient force to rupture the right atrium of the myocardium (AIS-5). The driver was transported to a local hospital by ambulance where her injury was diagnosed and surgically repaired. She was discharged following 11 days of hospitalization. Limited data was obtained from the attending physicians, the driver of vehicle #2, and the investigating police officer. The driver refused to provide data due to litigation.			
17. <i>Key Words</i> Front to rear impact sequence Air bag deployment Ruptured atrium AIS-5 level injury		18. <i>Distribution Statement</i> General Public	
19. <i>Security Classif. (of this report)</i> Unclassified	20. <i>Security Classif. (of this page)</i> Unclassified	21. <i>No. of Pages</i> 32	22. <i>Price</i>

CALSPAN REMOTE AIR BAG DEPLOYMENT INVESTIGATION
CALSPAN CASE NO. 93-3
VEHICLE - 1991 MERCURY CAPRI
LOCATION - ██████████, CT

SUMMARY

This remote investigation focused on a 1991 Mercury Capri that was involved in a moderate front-to-rear impact sequence with a stopped 1989 Chrysler LeBaron. The crash occurred on a straight, level, and dry two-lane asphalt roadway in ██████████ CT on ██████████ 1992 during daylight hours. The roadway had a posted speed limit of 56 KPH (35 mph). The Mercury Capri was equipped with a driver's side air bag Supplemental Restraint System (SRS) that deployed as a result of the crash. The vehicle was identified by the following vehicle identification number: 6 MPCT01Z2M8 (production number deleted).

The investigation was initiated as a result of a ██████████ that appeared in the ██████████ 1993 edition of the ██████████. The letter was authored by three physicians of a local hospital who were instrumental in the diagnosis and surgical repair of a right atrium tear (AIS-5) that the driver of the Capri sustained from her involvement with the deploying air bag. A ██████████ representative contacted one of the physicians via telephone on ██████████. The physician was extremely protective of the patient's identity at her request, and refused to discuss the injury, citing the patient's rights and confidentiality. Data for this case was ultimately obtained from the driver's insurance company, the investigating police officer and copies of his report (PAR) and on-scene photographs, and an extensive interview with the driver of the struck Chrysler LeBaron.

The 1989 Chrysler LeBaron was stopped in afternoon rush hour traffic that had backed up at a signalized intersection located approximately 100m (300') south of its stopped position. The driver stated that there were 6-10 vehicles ahead of her LeBaron waiting at the red signal phase. The driver of the LeBaron stated that while stopped, she glanced in her rearview mirror and observed the Mercury Capri approaching at a rapid and constant rate of speed. She continued to track the Capri in her rearview mirror and observed that its driver was looking to her left. The driver of the LeBaron sounded her horn and began to wave in an attempt to alert the driver of the approaching Capri. The driver of the vehicle that was stopped forward of the LeBaron heard the horn blast and accelerated his vehicle forward, away from the LeBaron. The driver of the LeBaron turned the front wheels of her vehicle in a clockwise direction and applied a full braking force in anticipation of an impending impact.

The driver of the LeBaron tracked the Mercury Capri and its driver to impact. She stated that the driver of the Capri continued to look to her left and never directed her attention forward; therefore, no avoidance actions were initiated. The driver of the LeBaron stated that the headlamps of the Capri were in the off and concealed position. The full frontal area of the Mercury Capri impacted the rear of the stopped Chrysler LeBaron

SUMMARY (CONTINUED)

resulting in a 12 o'clock/6 o'clock impact configuration. Contact between the vehicles was limited to bumper engagement; however, the rear of the LeBaron sustained extensive damage. The rear bumper was crushed approximately 15.2cm (6") and the quarter panels were displaced both forward and downward. The damage to the Capri involved slight deformation to the bumper structure and compression of the bumper energy absorbing devices (EADs). The bumper system on the Capri was rated at 8 KPH (5 mph). As a result of the crash the Mercury Capri's driver air bag system deployed.

The driver of the LeBaron stated that the impact displaced her vehicle in a forward direction; however, she maintained a sufficient braking force which prevented her vehicle from striking the rear of the vehicle that was ahead of the LeBaron. The Capri, although decelerated by the initial impact, continued forward and again impacted the rear of the LeBaron. The driver of the LeBaron stated that the secondary crash was minor and that it did not further displace her vehicle. The LeBaron came to rest with its right side tires straddling the white edgeline of the two lane roadway. The Capri came to rest directly behind the LeBaron, engaged against its rear bumper.

The 22 year old female driver of the Mercury Capri was reportedly looking to her left at impact. She was not wearing the manual 3-point lap and shoulder belt system. The lack of belt usage was determined from the investigating police officer's inspection of the belt system, witness statements who observed the driver immediately following the crash, and from driver statements to the investigating officer. Her driver's license identified her height at 162.6cm (64") and she was reportedly slender to average in weight. The investigating officer noted that the driver's seat was adjusted to a forward track position. His photographs also documented the position of the driver's seat. A similar Mercury Capri was inspected and the seat was adjusted to the approximate position depicted in the police photographs. In this position, the seat track was adjusted 10.8cm (4.25") rearward of its full forward position with a horizontal distance of 48.3cm (19") between the center of the air bag module cover and the seatback. With the seat track adjusted to the full rearward position and the seatback set to a normal adjustment point (slightly reclined from vertical), the horizontal distance between the air bag module assembly and the seatback was 61cm (24"). In the full forward position, this measurement was 37.5cm (14.75").

At impact, the Capri's supplemental driver's side air bag deployed which contacted the upper thoracic and facial areas of the driver. The bag and/or her possible contact with the large upper flap of the module assembly resulted in a tear of the right atrium of the myocardium (AIS-5) and an abrasion of the chin. There were no overlying rib or sternal injuries of the driver's chest area. She was probably positioned within a close proximity of the air bag as it contacted her chest and expanded between her and the steering wheel. The driver also initiated a forward trajectory in response to the 12 o'clock impact force and compressed the bag against the wheel. As a result of the latter contact sequences, the upper steering wheel rim was displaced forward and the energy absorbing steering column compressed. Her left hand probably separated from the steering wheel rim and impacted the

SUMMARY (CONTINUED)

headlamp switch which opened the concealed headlamps. There was no injury or interior damage from the switch contact sequence. Her facial involvement with the air bag resulted in an abrasion of the chin (AIS-1).

The driver slumped to her right where she came to rest in an unconscious state. She was subsequently removed from the vehicle by rescue personnel and transported by ambulance to a local hospital where she was admitted for treatment of her injury. She was discharged from the hospital eleven days following the crash.

**CALSPAN REMOTE AIR BAG DEPLOYMENT INVESTIGATION
CALSPAN CASE NO. 93-3
VEHICLE - 1991 MERCURY CAPRI
LOCATION - [REDACTED] CT**

CRASH DATA

Location:	Two lane road
City/Township:	[REDACTED] CT
Area/Type:	Urban/Commercial
Crash Date/Time:	[REDACTED] 1992, daylight hours
Investigating Police Agency:	[REDACTED] Police Department
Crash Type:	Car/Car, front-to-rear impact sequence
Air Bag Vehicle Driver Injury Severity:	Critical (AIS-5)

AMBIENCE

Viewing Conditions:	Daylight
Weather:	Clear
Precipitation:	None
Road Surface:	Dry

HIGHWAY

Type:	Unknown
Number of Lanes:	2
Surface:	Asphalt
Median:	None
Edge:	Paved shoulders

Vertical Alignment:	Level
Horizontal Alignment:	Straight
Traffic Controls:	Yellow full barrier center lines, solid white edge lines
Speed Limit:	48 KPH (35 mph) speed limit sign

VEHICLES

	<u>Air Bag Vehicle</u>	<u>Vehicle #2</u>
Description:	1991 Mercury Capri, 2 dr. convertible	1989 Chrysler LeBaron, 2 dr. convertible
V.I.N.:	6MPCT01Z2M8 (production number deleted)	1C3XJ55J3KG (production number deleted)
Color:	Red	Red
Odometer:	12,807.6km (7,955 miles)	Unknown
Engine:	4 cylinder, 1.6 liter	4 cylinder, 2.5 liter turbo
Transmission:	Automatic, console mounted transmission selector lever	Unknown
Steering:	Power-assisted rack-and-pinion	
Brakes:	Four-wheel disc brakes	
Padding:	Soft-edged steering wheel rim and air bag module cover, upper and mid instrument panel, knee bolster, sunvisors, door panels, door armrests, adjustable head restraints	

Manual Restraints:	3-point lap and shoulder belts for the four outboard seated positions	
Automatic Restraints:	Driver's side air bag Supplemental Restraint System (SRS) that deployed as a result of the front-to-rear impact sequence	
Defects:	None reported	
Tow Status:	Towed due to vehicle damage	Towed due to vehicle damage

VEHICLE DAMAGE

Air Bag Vehicle

Vehicle #2

Exterior:

The frontal area of the Mercury Capri sustained moderate damage from its impact sequences with the rear of vehicle #2. The attached police photographs and the vehicle repair estimate indicate that direct contact damage was distributed across the entire frontal width of the vehicle. The residual crush depth was minimal with an estimated maximum crush of 7.6-12.7cm (3-5"). The Capri was equipped with a 8 KPH (5 mph) front bumper system. The attached repair estimate identified replacement of the front bumper assembly inclusive of the energy absorbing devices (EADs). The EADs

The rear of vehicle #2 sustained moderate damage which involved displacement of the bumper and rear quarter panels. The owner of the vehicle stated that the rear frame rails were buckled near the rear axle area and that extensive undercarriage damage occurred to the vehicle. Maximum crush was estimated at 15-20cm (6-8") located on the rear bumper inboard of the left EAD. The rear quarter panels were buckled at the trailing edge of the wheel openings which resulted in downward displacement of the rear area.

were probably fully compressed which resulted in a velocity change estimated at the 13-16 KPH (8-10 mph) range.

CDC:	Primary - 12-FDEW-1 Secondary-12-FDEW-1	06-BDEW-1 06-BDEW-1
Repair Cost:	\$4,313.76 inclusive of air bag system	Total loss

Interior (Air Bag Vehicle):

The police photographs of the interior of the Mercury Capri identified slight deformation of the upper steering wheel rim that probably resulted from air bag expansion between the driver and the steering wheel rim. The body shop repair invoice identified replacement of the steering shaft which was probably compressed from driver loading of the air bag. There were no other interior components listed on the repair estimate; therefore, it was assumed that no other interior damage occurred.

The deployment of the SRS appeared to be a normal deployment with no damage occurring to the air bag or the module assembly.

SUPPLEMENTAL RESTRAINT SYSTEM

The 1991 Mercury Capri was equipped with a driver's side air bag Supplemental Restraint System (SRS) that deployed as a result of the front-to-rear impact sequence with the stopped Chrysler LeBaron. Due to the remote type of investigative effort, a similar 1991 Capri was inspected to determine SRS component configuration and location. The vehicle, although Australian built, had a typical Ford air bag system. There were three crash sensors mounted to the frontal structure of the vehicle. Crash sensors were mounted to the inboard aspect of both front frame rails directly below the headlamp assemblies. The third crash sensor was mounted to the forward edge of the center portion of the upper radiator support panel. The safing sensor and diagnostic unit were probably mounted under the instrument panel adjacent to the steering column or within the center area of the panel. The air bag indicator lamp was contained within the instrument cluster, directly forward of the steering assembly.

The driver's air bag deployed from the module assembly that was contained within the four-spoke steering wheel. The module cover flaps were of typical Ford design with a large upper flap and a small lower flap. These flaps opened in a H-configuration at the designated tear points. Based on previous investigations, the large upper module cover flap measures 20.3cm (8") horizontally x 12.4cm (4 7/8") vertically x 0.8cm (5/16") in thickness while the lower flap has respective measurements of 20.3cm (8") x 3.5cm (1 3/8").

SUPPLEMENTAL RESTRAINT SYSTEM (CONTINUED)

The attached police photographs show the deployed air bag extending from the module assembly in its deflated state. The upper module cover flap closed against the air bag which directed the bag downward in relation to the steering column. In this position, it was difficult to determine the vent port locations and whether the bag was a tethered design. There was a vent port visible at the upper portion of the bag. Ford air bags typically are vented by two ports located at the 2 and 8 o'clock positions. The new car sales brochure that was published by Lincoln-Mercury for this vehicle, pictures a non-tethered air bag for the Mercury Capri.

During our inspection of a similar 1991 Mercury Capri, the driver's seat was adjusted to the approximate position of the seat in the crash involved vehicle as shown in the attached police photographs. The adjusted position included the fore and aft positioning of the seat track and the vertical adjustment of the seatback. In this approximated position, the seat was adjusted to a mid track position and was 10.8cm (4.25") rearward of its full forward position and 12.1cm (4.75") from its full rearward position. The horizontal distance between the center of the air bag module cover and the seatback was measured at 48.3cm (19") with the seat adjusted in its approximate crash position. This horizontal measurement was 37.5cm (14.75") with the driver's seat adjusted to the full forward position and 61cm (24") in the full rearward position.

COLLISION SEQUENCE

Pre-Crash:

This crash occurred at a mid-block location of an urban two-lane road during evening rush hour traffic. Vehicle #2, a 1989 Chrysler LeBaron convertible, was stopped in traffic for a red signal phase approximately 100m (300') north of a signalized intersection. The 1991 Mercury Capri was traveling in a southerly direction in the 48 KPH (35 mph) speed zone as it approached the line of standing traffic. The driver of vehicle #2 checked her rearview mirror and observed the Capri approaching the rear of her vehicle at a constant speed. She further stated that the driver of the Capri appeared to be inattentive to her driving task as she was looking to the left. The driver of the stopped Chrysler LeBaron sounded her horn in an attempt to alert the driver of the Capri and in anticipation of the impending crash, she applied a clockwise steering input. Due to the standing traffic, she was unable to accelerate from the Capri's path of travel.

Although unconfirmed by driver statements and the lack of physical evidence at the crash scene (i.e., skid marks) the driver of the Capri probably noted the stopped vehicle immediately prior to impact and braked, thus resulting in a less severe crash.

Crash:

The attached police report and police photographs indicate that the full frontal area of the Mercury Capri impacted the rear of the stopped Chrysler LeBaron which resulted in respective impact forces of 12 o'clock and 6 o'clock. The impact compressed the Capri's front bumper and bumper EADs and produced an estimated velocity change of 12-16 KPH (8-10 mph) which deployed the supplemental driver's air bag system. Following the initial impact, the Chrysler LeBaron was displaced forward as its driver maintained a moderate braking force. The Capri continued forward and subsequently impacted the rear of the LeBaron. The subsequent impact was reported as minor by the driver of the LeBaron and did not further displace her vehicle. The Mercury Capri came to rest partially engaged with the rear of the LeBaron in the southbound travel lane.

Post-Crash:

At rest, the Chrysler LeBaron was straddling the outboard edgeline with its right side tires, with the Mercury Capri directly behind. Both drivers remained in their vehicles due to crash induced injuries and waited for rescue personnel to arrive on-scene. Both drivers were transported by ambulance to a local hospital. The driver of the LeBaron was treated for her injuries and released. The driver of the Mercury Capri was admitted for diagnosis, surgery, and recovery of her injury for an eleven day period.

HUMAN FACTORS/OCCUPANT DATA

Air Bag Vehicle

Driver:	22 year old female
Height:	162.6cm (64")
Weight:	Unknown
Manual Restraint System Usage:	None
Usage Source:	Police report
Eyewear:	Unknown
Vehicle Familiarity:	Unknown
Route Familiarity:	Unknown
Trip Plan:	En route from work
Mode of departure from scene:	Volunteer ambulance service
Type of Medical Treatment:	Admitted to a local hospital for 11 days for treatment and recovery from her injuries

DRIVER INJURIES

<u>Injury</u>	<u>Severity (OIC/AIS)</u>	<u>Source</u>
Tear of the right atrium of the myocardium	Critical (CCLH-5) AIS-90 Code: 441012.54	Air bag
Abrasion of the chin	Minor (FIAI-1) AIS-90 Code: 290202.18	Air bag

DRIVER KINEMATICS

The driver of the 1991 Mercury Capri was probably in a normal driving position behind the steering assembly as her vehicle impacted the rear of the stopped vehicle. Based on the severity of her injury and the deformation to the steering assembly, it was likely that she was positioned forward, within a close proximity of the steering wheel rim and air bag module assembly at impact and deployment of the SRS. The driver was not wearing the manual 3-point lap and shoulder belt system. The lack of belt usage was confirmed by driver statements to the investigating officer, his observations of the belt system (refer to PAR), and witness statements.

The deploying air bag and/or upper air bag module cover flap impacted the driver's chest with sufficient force to produce a tear of the right atrium of the myocardium. She reportedly did not sustain overlying rib or sternal fractures. As the air bag expanded, it contacted and abraded the driver's chin. Due to her presumed forward position and subsequent response to the 12 o'clock impact force, the expansion of the air bag was limited by the driver's position. The air bag expanded between the driver and the steering assembly which resulted in slight binding of the upper steering wheel rim. The driver's loading force was transmitted through the air bag and into the steering column which apparently compressed. The auto body repair shop replaced the steering column; however, the body shop could not recall the extent of column compression.

During the impact sequence, the driver's left hand probably struck the left mid instrument panel and headlamp switch. The switch was a rocker type switch and as a result of suspected contact, the switch was rotated forward which opened and turned on the concealed headlamps. There was no reported injury to her hand or left arm area. The driver rebounded from the contact sequence into the left front seatback and slumped unconscious to her right where she came to rest.

The driver was removed from the Mercury Capri by rescue personnel and was transported by ambulance to a local hospital. The hospital was located approximately 16-19 km (10-12 miles) from the crash scene which resulted in a transport time of 20 minutes. Physicians at the hospital diagnosed the driver's injury and surgically repaired the tear. She was hospitalized for 11 days for monitoring and recovery purposes.

ATTACHMENT A

Police Accident Report

MVD USE ONLY	CHECKED BY	LOW LETTER
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POLICE ACCIDENT REPORT

PR-1 Rev. 6-85

Please send to
 STATE OF CONNECTICUT
 DEPARTMENT OF MOTOR VEHICLES
 Accident Security Unit
 60 State Street
 Wethersfield, Connecticut 06109-1896

1-6 MVD CASE NUMBER

4

1735

1	7-12 DATE OF ACCIDENT (month, day, year)	DAY OF WEEK	13-16 TIME (military)	# KILLED	# INJURED	# OF VEHICLES INVOLVED	POLICE CASE NUMBER
	9/2			-	2	2	92- [redacted]
LOCATION	17-19 CITY OR TOWN (name) (City/Town Code)		ACCIDENT OCCURRED ON (street name or route #) AT ITS INTERSECTION WITH (street name or route #1)				
	[redacted]		[redacted]				
IF NOT AT INTERSECTION 1. Give distance and ✓ either "Feet" or "Tenths" of a mile. 2. Check (✓) direction. 3. Give nearest intersecting street (name or route #) underpass, overpass, bridge, river or town line. DO NOT USE house #, utility pole #, or business name.							
North S E W <input type="checkbox"/> Feet <input checked="" type="checkbox"/> Tenths <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> of [redacted] DR							

1748

3

7

1

8

1

9

1

10 11

G1 -

12 13

G1 -

14 15

G2 14

16 27

G2 05

18 19

H1 1

20 21

H2 1

OPERATOR AND VEHICLE #1

OPERATOR AND VEHICLE #2 (or pedestrian)

OPERATOR #1 NAME (last, first, middle initial)
 ADDRESS (street number and name)
 CITY OR TOWN STATE ZIP CODE
 20 SEX: F
 Lic State Code: 016
 24-48 OPERATOR LICENSE NUMBER: [redacted]
 49-54 DATE OF BIRTH: [redacted]
 DOT ONLY: 1
 VEHICLE #1 OWNER NAME (if same as operator #1, enter "same")
 ADDRESS (street number and name)
 CITY OR TOWN STATE ZIP CODE
 40-41 PLATE # AND STATE CODE: [redacted]
 VEHICLE YEAR AND MAKE: 89 Chrysler
 VEHICLE MODEL NAME: LABARON
 BODY TYPE (e.g. 4-door sedan, truck, etc.): 2-D Conv. Cab
 44-61 VEHICLE IDENTIFICATION NUMBER (not engine number): 1C3XJ55J3K6
 DOT ONLY: 2
 Did operator carry a current Connecticut No-Fault Insurance I.D. Card in vehicle as required under CGS, Section 14-12b YES NO
 NAME OF AUTOMOBILE INSURANCE CO.: [redacted]
 AUTOMOBILE INSURANCE POLICY NO.: [redacted]
 PARTS OF VEHICLE DAMAGED (i.e. left front fender, etc.): Repair and Implants
 VEHICLE #1 TOWED TO (if not towed, indicate "none"): Auto

OPERATOR #2 OR PEDESTRIAN NAME (last, first, middle initial)
 ADDRESS (street number and name)
 CITY OR TOWN STATE ZIP CODE
 21 SEX: F
 Lic State Code: 016
 9-33 OPERATOR LICENSE NUMBER: [redacted]
 34-39 DATE OF BIRTH: [redacted]
 VEHICLE #2 OWNER NAME (if same as operator #2, enter "same")
 ADDRESS (street number and name)
 CITY OR TOWN STATE ZIP CODE
 42-43 PLATE # AND STATE CODE: [redacted]
 VEHICLE YEAR AND MAKE: 91 Merc
 VEHICLE MODEL NAME: CAPRI
 BODY TYPE (e.g. 4-door sedan, truck, etc.): 2-D Conv. Cab
 7-24 VEHICLE IDENTIFICATION NUMBER (not engine number): 36MPC70122M86
 Did operator carry a current Connecticut No-Fault Insurance I.D. Card in vehicle as required under CGS, Section 14-12b YES NO
 NAME OF AUTOMOBILE INSURANCE CO.: [redacted]
 AUTOMOBILE INSURANCE POLICY NO.: [redacted]
 PARTS OF VEHICLE DAMAGED (i.e. left front fender, etc.): front end minor
 VEHICLE #2 TOWED TO (if not towed, indicate "none"): Auto

1. Describe the property and extent of damage (e.g. 50 feet of fence knocked down)
 2. Give name and address of property owner

WITNESSES

AGE	SEX	NAME AND ADDRESS OF WITNESS
43	M	[redacted]
AGE	SEX	NAME AND ADDRESS OF WITNESS

	J			K			L NAME AND ADDRESS (or operator #1, operator #2, etc.)	M	N	O	P	Q	
	25	26	27-28	31	32	33-34							
1	1	C	01				OPERATOR #1	46	F	23	34A		1
2	2	A	01				OPERATOR #2 OR PEDESTRIAN (circle the one which applies)	22	F	43	34A		2
3													3
4													4
5													5
6													6
7													7
8													8

DIAGRAM OF WHAT HAPPENED (be sure to include all vehicle pedestrian and bicyclist maneuvers both prior and after the collision)

LOW north in circle.



DIAGRAM SECTION



See Attached for Details

DIRECTION OF TRAVEL OF EACH VEHICLE, PEDESTRIAN, ETC.

VEHICLE #1 going N S E W on [redacted] RD
 VEHICLE #2 going N S E W on [redacted] RD

PLEASE GIVE A COMPLETE DESCRIPTION OF WHAT HAPPENED (be sure to explain any prior response marked with an asterisk*)

NARRATIVE SECTION

This officer was assigned to investigate a motor vehicle accident on [redacted] RD by the [redacted] dinner, involving two vehicles with injuries. Upon arrival at the scene I observed two vehicles stopped in the S/B Lane of [redacted] RD. A Meeney Capri (veh#2) was behind a Chrysler Lazzaron (veh#1). Both vehicles were occupied by lone female operators. The operator of veh#2 was seriously injured and unconscious. (she was attended to and transported to [redacted] H.R. via BKFED Vol Ambulance). Op#1 was conscious complaining of a sore neck and sore right leg. While waiting for medical attendants, Op#1 stated she was stopped in the S/B lane waiting for traffic to move on.

4 Cont	Road #	RL	Dir	NIR	Ramp	TR #	Cl	St	Cum Mile	Rd	Ty	I	SF	Local Road Location													
	22	25	26	27	28	30	31	34	35	36	37	38	39	44	45	46	47	48	49	50	53	54	57	58	61	62	65
DOT USE ONLY	CF	Col	Card	Card	Alpha Description																						
	66	67	68	69	7																						
	CV	Dir	Man	Obj #1	L	Obj #2	L	P	C	Dir	Man	CV	Dir	Man	60-62	Obj #1	L	Obj #2	L	P	C	Dir	Man	Card	15		

ENFORCEMENT ACTION	NAME OF PERSON ACTION WAS TAKEN AGAINST	TYPE OF ENFORCEMENT ACTION (✓ one) <input type="checkbox"/> Arrest <input type="checkbox"/> Written Warning <input type="checkbox"/> None <input type="checkbox"/> Other	COURT DATE AND TOWN CODE			
	CHARGE	STATUTE OR ORDINANCE NUMBER	UNIFORM SUMMONS/COMPLAINT NUMBER			
	NAME OF PERSON ACTION WAS TAKEN AGAINST	TYPE OF ENFORCEMENT ACTION (✓ one) <input type="checkbox"/> Arrest <input type="checkbox"/> Written Warning <input type="checkbox"/> None <input type="checkbox"/> Other	COURT DATE AND TOWN CODE			
	CHARGE	STATUTE OR ORDINANCE NUMBER	UNIFORM SUMMONS/COMPLAINT NUMBER			
RANK AND SIGNATURE OF INVESTIGATING OFFICER		BADGE NUMBER	DEPARTMENT NAME	REPORT DATE	CASE STATUS <input checked="" type="checkbox"/> Open <input type="checkbox"/> Closed	SUPERVISOR

POLICE DEPARTMENT
INCIDENT REPORT NARRATIVE SUPPLEMENT

INCIDENT # 12- [redacted]

INCIDENT	TIME OF INCIDENT	TYPE OF INCIDENT		INCIDENT CODE	INVESTIGATING OFFICER	BADGE NO.
1/92	[redacted]	Car MVA w/injury		[redacted]	[redacted]	[redacted]
DATE REPORT SUBMITTED	TIME	LOCATION OF INCIDENT	ST NO	CONDOMINIUM NAME	APT NO	
1/92	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	

The traffic light at [redacted] was red, she said. Cop #1 advised she looked in her rear view mirror and saw veh #2 coming towards her and that she wasn't slowing down to stop. Cop #1 said the female driver of this car was looking out her left window. She continued to say that she (cop #1) turned her wheel to the right, blew her horn and attempted to get cop #2's attention when she hit the rear end of her car.

Witness [redacted] stated he did not see the accident happen but that he arrived moments later and was the first person to come to the aid of cop #2. He advised that she was unconscious and that she did not have her seat belt on.

This officer observed that veh #1 sustained moderate damage to the rear end as well as the right & left quarter panels. No other damage observed.

Veh #2 sustained minor damage to the front end. The bumper and hood were dented. The turn signal lights were broken. The concealed head lights were up and on.

Veh #2 is equipped with a driver's side air bag - which deployed. The steering wheel's upper portion was pushed in towards the dashboard.

INVESTIGATING OFFICER'S SIGNATURE	BADGE #	DISTRIBUTION (FOR USE BY SHIFT COMM. ONLY)	FOLLOW-UP ACTIONS BY
[redacted]	[redacted]	<input type="checkbox"/> COURT <input type="checkbox"/> DETECTIVE DIVISION CMDR. <input type="checkbox"/> UNIFORM DIVISION CMDR. <input type="checkbox"/> OTHER (SPECIFY) _____	<input type="checkbox"/> DETECTIVE, BUREAU <input type="checkbox"/> PATROL <input type="checkbox"/> YOUTH OFFICER <input type="checkbox"/> CHIEF
REVIEWED BY SHIFT SUPERVISOR	[redacted]	PAGE 2 OF 4	

15

IF
PLEMENTARY REPORT

POLICE DEPARTMENT
INCIDENT REPORT NARRATIVE SUPPLEMENT

INCIDENT # 92

DATE OF INCIDENT 1/92	TIME OF INCIDENT [REDACTED]	TYPE OF INCIDENT Tire Cap PIVIA	INCIDENT CODE	INVESTIGATING OFFICER [REDACTED]	RADGE NO [REDACTED]
REPORT SUBMITTED 1/92	TIME 2:20	LOCATION OF INCIDENT [REDACTED] Rd	STREET NAME	CONDOMINIUM NAME	APT NO

The driver's seat was in a forward position on its adjustable track. (Cgt is 5' 4" tall according to her operator's Licence).

This officer then examined the driver's seat belt. It is a one piece lap + shoulder type. One end is belted to the frame, inside the vehicle, just to the left of the driver's seat. Velcro is a connectable with no B filler, there fore, the seat belt retracts w/ a space just behind the left seat back rest, as well as the driver's right shoulder. The buckle slides up + down on the belt. This officer observed that the portion of the belt that is belted to the frame was flush + tight to the side of the vehicle interior. Examined the buckle to the locking receptical and found no slack, or enough room to sit under it. Then pulled a slack through and disconnected the buckle. The belt buckle retracted, leaving a connectable amount of slack when the buckle came to rest.

This officer then examined the tires of both vehicles. All tires were found to be in good condition with good tread. No skid marks were observed near any tire.

Both vehicles were towed. Vehicle was towed to headquarters and released to the owner on 1/92.

INVESTIGATING OFFICER'S SIGNATURE [REDACTED]	RADGE # [REDACTED]	DISTRIBUTION (FOR USE BY SHIFT COMM. ONLY)	FOLLOW-UP ACTIONS BY
REVIEWED BY, SHIFT SUPERVISOR [REDACTED]		<input type="checkbox"/> COURT <input type="checkbox"/> DETECTIVE DIVISION CMDR <input type="checkbox"/> UNIFORM DIVISION CMDR <input type="checkbox"/> OTHER (SPECIFY)	<input type="checkbox"/> DETECTIVE, BUREAU <input type="checkbox"/> PATROL

16

CHECK IF
SUPPLEMENTARY REPORT

[REDACTED] POLICE DEPARTMENT
INCIDENT REPORT NARRATIVE SUPPLEMENT

INCIDENT # [REDACTED]

INCIDENT	TIME OF INCIDENT	TYPE OF INCIDENT		INCIDENT CODE	INVESTIGATOR	RADGE NO.
[REDACTED] 192	[REDACTED]	TWO CAR ACCIDENT		[REDACTED]	[REDACTED]	[REDACTED]
REPORT SUBMITTED	TIME	LOCATION OF INCIDENT	ST	CONDOMINIUM NAME	APT. NO.	
[REDACTED] 192	[REDACTED]	[REDACTED]	[REDACTED] RD	[REDACTED]	[REDACTED]	

This incident was called in at approx [REDACTED] ([REDACTED] hrs). [REDACTED] is a two lane highway with a high volume of traffic at that time of day. S/B traffic also must merge from two lanes into one lane at this location. There are no slight line obstructions in this area, however, there are several businesses which have heavy vehicular and pedestrian traffic. This case will remain open pending an interview with cpl 2.

17

INVESTIGATOR	[REDACTED]	DISTRIBUTION (FOR USE BY SHIFT COMM. ONLY)	FOLLOW-UP ACTIONS BY	PAGE 4 OF 4
REVIEWED BY SHIFT SUPERVISOR	[REDACTED]	<input type="checkbox"/> COURT <input type="checkbox"/> DETECTIVE DIVISION CMDR.	<input type="checkbox"/> DETECTIVE, BUREAU <input type="checkbox"/> YOUTH OFFICER <input type="checkbox"/> PATROL <input type="checkbox"/> CHIEF	
		<input type="checkbox"/> UNIFORM DIVISION CMDR. <input type="checkbox"/> OTHER (SPECIFY) _____		

[REDACTED] POLICE DEPARTMENT
INCIDENT REPORT NARRATIVE SUPPLEMENT

INCIDENT # 92-[REDACTED]

COMPLEMENTARY REPORT

DATE OF INCIDENT [REDACTED] / 92	TIME OF INCIDENT [REDACTED]	TYPE OF INCIDENT Two CAR MVA w/ injury		INCIDENT CODE	INVESTIGATING OFFICER [REDACTED]
DATE REPORT SUBMITTED [REDACTED] / 92	TIME [REDACTED]	LOCATION OF INCIDENT [REDACTED]	ST NO [REDACTED]	STREET NAME	CONDOMINIUM NAME
					APT NO

On [REDACTED] 92 at approx [REDACTED] hrs this officer interviewed Op^{#2} for the first time at [REDACTED] Hospital where she is recovering from her injuries.

Op^{#2} can not remember anything about this accident only that she had just left work at [REDACTED] Pharmacy. She did say she didn't have her seat belt on.

Op^{#2}'s injuries were to her chest and arm.

Based on the statements of Op^{#1} witness [REDACTED], the damage to the vehicles and the observations of this officer the following conclusions were made.

Op^{#2} was southbound on [REDACTED] at a moderate speed and did drive into the rear of veh^{#1} which was properly stopped in the same lane.

Also Op^{#2} did not have her seat belt on. Therefore, Op^{#2} was issued an infraction # [REDACTED] for following too close - 14-240 and a written warning for failing to wear a seat belt - 14-100 a(c)(1).

This case will be closed.

(Closed)

INVESTIGATING OFFICER SIGNATURE [REDACTED]	BADGE # [REDACTED]	DISTRIBUTION (FOR USE BY SHIFT COMM. ONLY) <input checked="" type="checkbox"/> COURT <input type="checkbox"/> UNIFORM DIVISION CMDR.	FOLLOW-UP ACTIONS BY <input type="checkbox"/> DETECTIVE/BUREAU <input type="checkbox"/> YOUTH OFFICER <input type="checkbox"/> PATROL <input type="checkbox"/> CHIEF	PAGE 1
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REST# 92- [redacted]

DATE 92 [redacted]

OFFICER [redacted]

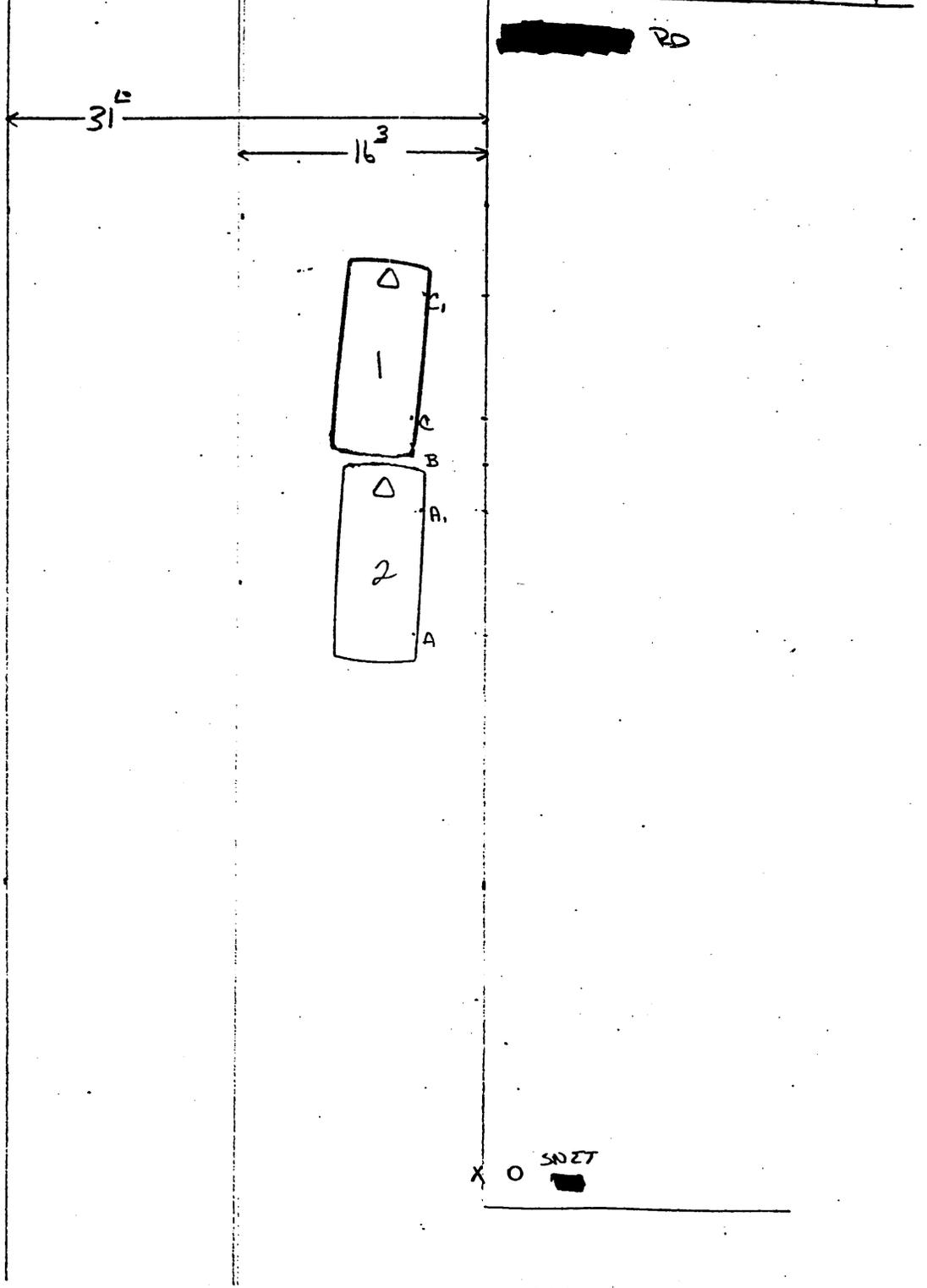
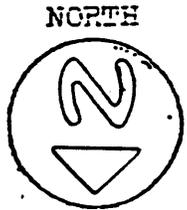
LOCATION: [redacted] RD

REF. POINT: X-2^E East of [redacted]

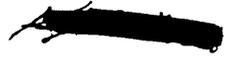
WEATHER COND. Clear/Hot

DRAWN BY: [redacted]

POINT:	A	A ₁	B	C	C ₁													
N/S	35 ^Z _S	43 ^L _S	46 ^A _S	49 ^I _S	57 ^S _S													
E/W	4 ^I _E	4 ³ _E	P.O.I	4 ¹⁰ _E	4 ² _E													



MAP NOT TO SCALE.



X O 5027

POLICE ACCIDENT REPORT

INSTRUCTIONS

1. Please print or type all responses.
2. Enter code number of correct response in box indicated by arrow (→ or ↓).
3. If correct response is UNKNOWN, enter an X
4. If question does not apply, enter a dash (-). DO NOT leave blank.
5. Please explain any response marked with an asterisk (*), in NARRATIVE SECTION.

A	TIME EMERGENCY MEDICAL SERVICE NOTIFIED (military)	→
B	TIME EMERGENCY MEDICAL SERVICE ARRIVED (military)	→

C. TYPE OF EMERGENCY MEDICAL SERVICE (ambulance, etc.—enter one item)

1. None	3. Municipal or Volunteer	5. State or Federal	9. Other *
2. Commercial or Private	4. Hospital based	6. Two or more Types	

D. WEATHER CONDITIONS (enter one item)

1. Clear	3. Fog	5. Snowing	7. Cloudy	9. Other *
2. Raining	4. Rain and Fog	6. Sleet or Freezing Rain	8. Hail	

E. ROAD SURFACE CONDITIONS (enter one item)

1. Dry	3. Icy	5. Slushy	7. Freshly oiled	9. Other *
2. Wet	4. Snowy	6. Muddy	8. Loose sand	

F. LIGHT CONDITIONS (enter one item)

1. Daylight	3. Dusk	5. Darkness with highway illumination
2. Dawn	4. Darkness, no highway illumination	

G. CONTRIBUTING FACTORS (enter only those which apply, either none (enter a dash (-)) one, or two items for each vehicle)

DRIVER	DRIVER (continued)	ROADWAY	
01. Speeding	12. Sick	20. Defective roadway surface (i.e. potholes, etc.)	Vehicle #1
02. Failed to yield right-of-way	13. Alcohol involved	21. Slippery roadway surface	
03. Improper passing	14. Inattentive	22. Traffic control signal inoperative	Vehicle #1
04. Failed to obey traffic control	15. Lost control of vehicle *	23. View obstructed by object (i.e. tree, fence, shrubbery, parked vehicle, etc.)	
05. Followed too closely	DEFECTIVE EQUIPMENT	24. Roadway restricted (i.e. construction, snowbank, etc.)	Vehicle #2
06. Made improper turn	16. Brakes	MISCELLANEOUS	
07. Made improper lane change	17. Tire(s)	25. Pedestrian under the influence of alcohol	
08. Drove left of center	18. Steering or wheel(s)	26. Pedestrian inattentive	Vehicle #2
09. Drove wrong way on one-way street	19. Other defective equipment *	27. Animal or foreign object in roadway	
10. Drove wrong way on divided highway		28. Blinded by sun or bad weather	
11. Fatigued or asleep		99. Other *	

H. VEHICLE TYPE (enter one item for each vehicle)

01. Passenger Car	07. Truck or Van-dual tires	13. Farm equipment	99. Other *
02. Motorcycle	08. Truck or Van-single tires	14. Train	
03. Pedalcycle (bicycle, tricycle, etc.)	09. Car-trailer combination	15. Moped (bicycle with helper motor)	Vehicle #1
04. Camper	10. Truck-trailer combination	16. Motor Scooter or Mini-bike	
05. Commercial Bus	11. Emergency vehicle (police, fire, etc.)	17. Snowmobile or Go-cart	Vehicle #2
06. School Bus	12. Taxi	18. Tractor trailer combination	
		19. Tandem trailer	

I. INJURY CODE

K. Killed.

A. Disabling—cannot leave scene without assistance (i.e., broken bones, severe cuts, prolonged unconsciousness, etc.).

B. Not disabling, but visible (i.e., minor cuts, swelling etc.).

C. Probable but not visible (i.e., complaint of pain, etc.).

N. No injury.

O. SAFETY EQUIPMENT USED

1. Lap belt only	7. Child seat
2. Lap and shoulder belt	8. Helmet (motorcyclist)
3. Passive belt	9. Light-reflecting or light-colored clothing (pedestrian or pedalcyclist)
4. Airbag deployed	0. None
5. Airbag failed	
6. Child harness	

P. EJECTED FROM VEHICLE

1. Completely
2. Partially
3. Not ejected

J. VEHICLE NUMBER

1. Veh. #1

2. Veh. #2

etc.

K. INDIVIDUAL POSITION CODE

01. Operator	03. Front-right	05. Rear-center	07. Rear of station wagon or truck	09. Pedestrian
02. Front-center	04. Rear-left	06. Rear-right	08. Motorcycle passenger	99. Other *

L. NAME AND ADDRESS OF EACH INVOLVED PERSON (or "operator #1", "operator #2", etc.)

N. SEX

M. Male

F. Female

M. AGE

Q. HOSPITAL CODE (see back of this sheet)

INSTRUCTIONS FOR DIAGRAM SECTION

1. Indicate the vehicle number (1, 2, 3, 4 etc.) assigned on the front of this report as , etc.
2. Include all non-contact vehicles as  (a non-contact vehicle is one which plays a role in the accident without making physical contact).
3. Be sure to show vehicle maneuvers and direction of travel for each vehicle both prior to and after the collision.
 - Use solid line to show path before the collision  • Use broken line to show path after the collision 
4. Indicate pedestrian as  or bicyclist as , and be sure to include maneuvers prior to collision.
5. Be sure to label all roadways with either the street name or the highway number (U.S. or State).
6. Be sure to include traffic controls, crosswalks, and major landmarks as they apply.
7. When applicable, include indication of vehicles attempting to make a right turn on red signal as 

HOSPITAL CODES	TOWN CODES			STATE CODES
104A Beckus	001 Andover	061 Hadham	121 Salem	01 Alabama
131A Bradley Memorial	002 Andover	062 Haddam	122 Salisbury	02 Arizona
015A Bridgeport	003 Ashford	063 Hampton	123 Scotland	03 Arkansas
017A Bristol	004 Avon	064 Hartford	124 Seymour	04 California
034A Danbury	005 Bethel	065 Hartford	125 Sharon	05 Colorado
116A Day Kimbell	006 Bethel	066 Meriden	126 Shelton	06 CONNECTICUT
057A Greenwich	007 Berlin	067 Hebron	127 Sherman	07 Delaware
037A Griffin	008 Bethany	068 Kent	128 Somers	08 District of Columbia
064A Hartford	009 Bethel	069 Killingly	129 Southbury	09 Florida
143A Charlotte Hungerford	010 Bethel	070 Killingworth	130 Southington	10 Georgia
134A Johnson Memorial	011 Bloomfield	071 Lebanon	131 Southington	11 Idaho
095A Lawrence and Memorial	012 Bolton	072 Ledyard	132 South Windsor	12 Illinois
077A Manchester Memorial	013 Bozrah	073 Lebanon	133 Sprague	13 Indiana
080A Meriden-Wallingford	014 Brandon	074 Litchfield	134 Stafford	14 Iowa
083A Middlesex Memorial	015 Bridgeport	075 Lyme	135 Stamford	15 Kansas
084A Milford	016 Bridgeport	076 Madison	136 Storring	16 Kentucky
064B Mount Sinai	017 Bristol	077 Manchester	137 Stratford	17 Louisiana
089A New Britain General	018 Brookfield	078 Mansfield	138 Stratford	18 Maine
094A Newington Children's	019 Brooklyn	079 Marlborough	139 Suffield	19 Maryland
096A New Milford	020 Burlington	080 Meriden	140 Thomaston	20 Massachusetts
103A Norwalk	021 Canaan	081 Middlebury	141 Thompson	21 Michigan
015B Perk City	022 Canaan	082 Middlefield	142 Tolland	22 Minnesota
059A Pequot Clinic	023 Canaan	083 Middletown	143 Torrington	23 Mississippi
146A Rockville General	024 Chaplin	084 Milford	144 Trumbull	24 Missouri
064C St. Francis	025 Cheshire	085 Monroe	145 Union	25 Montana
135A St. Joseph	026 Chester	086 Morrisville	146 Vernon	26 Nebraska
151A St. Mary's	027 Clinton	087 Morris	147 Voluntown	27 Nevada
093A St. Raphael	028 Colchester	088 Naugatuck	148 Wallingford	28 New Hampshire
015C St. Vincent's	029 Colebrook	089 New Britain	149 Warren	29 New Jersey
125A Sharon	030 Columbia	090 New Canaan	150 Washington	30 New Mexico
050A Shoreline Clinic	031 Cornwall	091 New Fairfield	151 Waterbury	31 New York
135B Stamford	032 Coventry	092 New Hartford	152 Waterford	32 North Carolina
052A UCann Health Center	033 Cromwell	093 New Haven	153 Watertown	33 North Dakota
151B Waterbury	034 Danbury	094 Newington	154 Westbrook	34 Ohio
163A Windham Comm. Mem.	035 Darien	095 New London	155 West Hartford	35 Oklahoma
162A Winsted Memorial	036 Deep River	096 New Milford	156 West Haven	36 Oregon
080B WW II Veteran's Mem.	037 Derby	097 Newtown	157 Weston	37 Pennsylvania
093B Yale-New Haven	038 Durham	098 Norfolk	158 Westport	38 Rhode Island
	039 Eastford	099 North Branford	159 Wethersfield	39 South Carolina
	040 East Granby	100 North Canaan	160 Willington	40 South Dakota
	041 East Hadham	101 North Haven	161 Wilton	41 Tennessee
	042 East Hampton	102 North Stonington	162 Winchester	42 Texas
	043 East Hartford	103 Norwalk	163 Windham	43 Utah
	044 East Haven	104 Norwich	164 Windsor	44 Vermont
	045 East Lyme		165 Windsor Locks	45 Virginia
	046 Easton	105 Old Lyme	166 Wolcott	46 Washington
	047 East Windsor	106 Old Saybrook	167 Woodbridge	47 West Virginia
	048 Ellington	107 Orange	168 Woodbury	48 Wisconsin
	049 Enfield	108 Oxford	169 Woodstock	49 Wyoming
	050 Essex			50 Alaska
	051 Fairfield	109 Plainfield		51 Hawaii
	052 Farmington	110 Plainville		98 Foreign
	053 Franklin	111 Plymouth		99 Other
	054 Glastonbury	112 Pomfret		
	055 Goshen	113 Portland		
	056 Granby	114 Preston		
	057 Greenwich	115 Prospect		
	058 Griswold	116 Putnam		
	059 Groton	117 Redding		
	060 Guilford	118 Ridgefield		
		119 Rocky Hill		
		120 Rosbury		

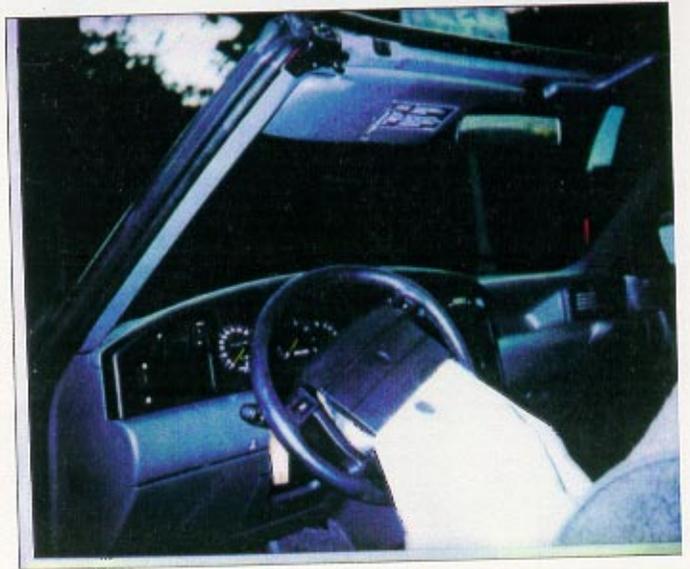
PR-1 Rev. 6-85 (BACK)

ATTACHMENT B

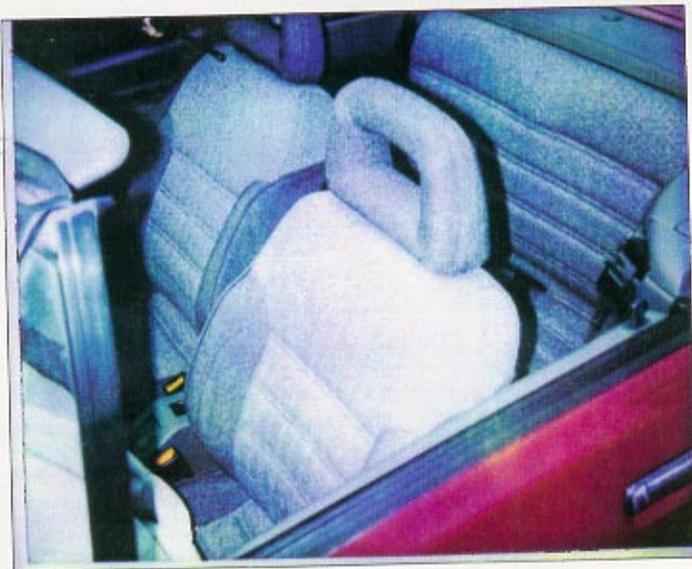
Police Photographs



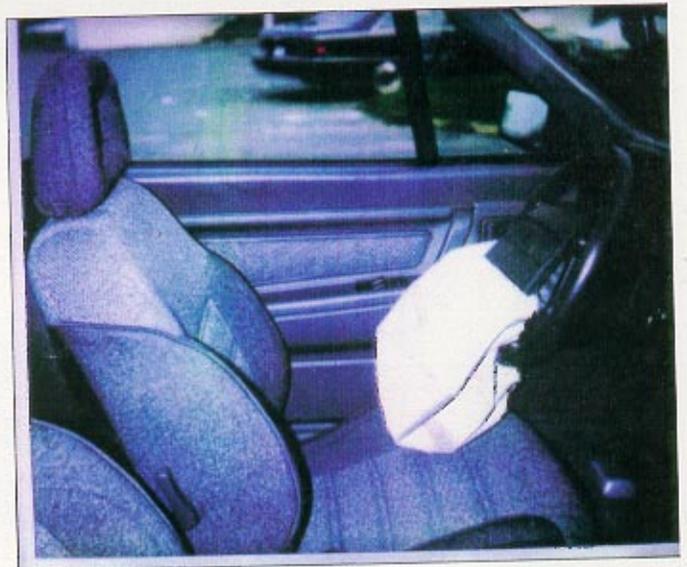
Overall interior view



Upper air bag module flap
and the deployed air bag



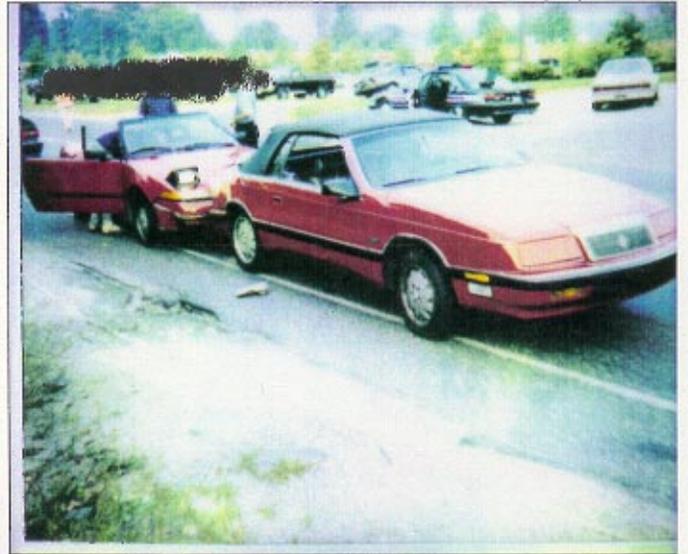
Adjusted mid track position of the
driver's seat



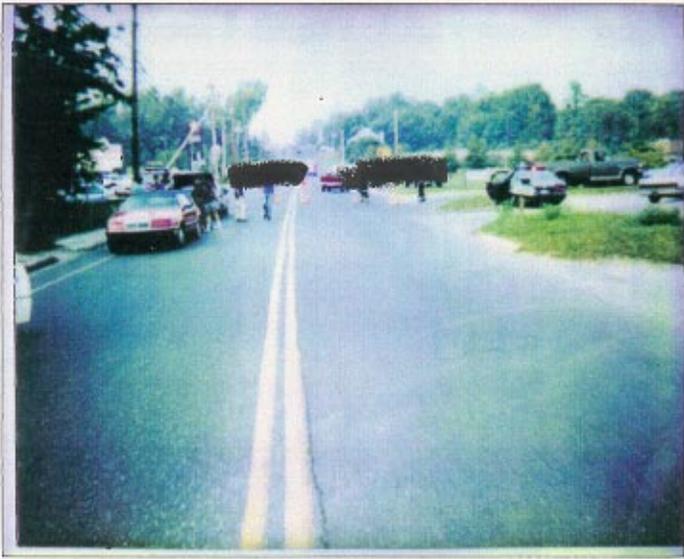
- 1) Perpendicular view of the driver's seat
with respect to the steering assembly
- 2) Bending of the upper steering wheel rim



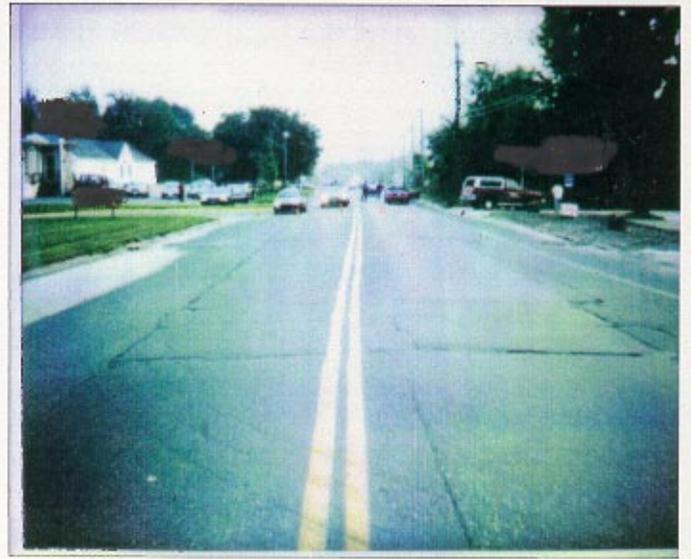
Damage to the rear of vehicle #2



Final rest positions of the
involved vehicles



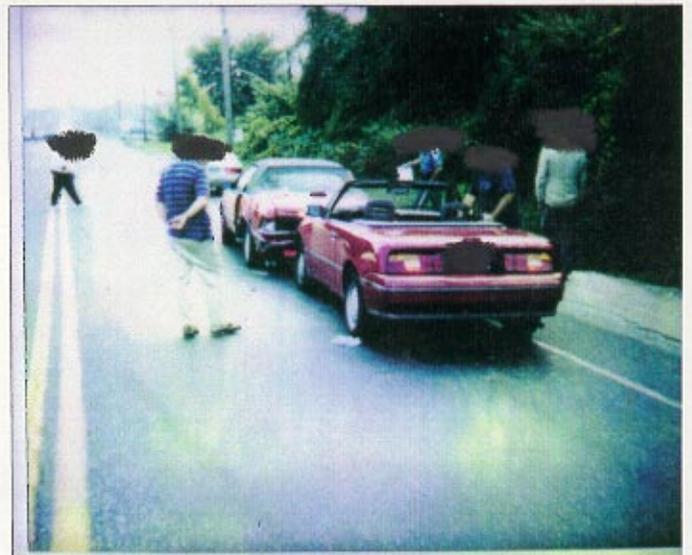
Lookback view of the
vehicle's path of travel



Trajectory of the Mercury Capri



Perpendicular view showing the end plane
damage to the involved vehicles



Final rest position of the vehicles

ATTACHMENT C



Letter to the Editor

AIR-BAG—ASSOCIATED RUPTURE OF THE RIGHT ATRIUM

To the Editor: We recently encountered an unusual complication associated with the deployment of an automobile air bag.

A 22-year-old woman was in a car traveling 10 to 15 mph that collided with a stopped car. The woman's car sustained relatively minor damage, but the air bag inflated. The woman became unconscious at the scene and was hypotensive when the emergency medical service arrived. No signs of trauma were detectable, and despite the aggressive administration of intravenous fluids, her blood pressure did not respond. Central venous pressure was 27.5 cm of water, and a pericardial effusion was noted on a computed tomographic scan. Pericardiocentesis revealed blood. At thoracotomy, 1100 ml of blood was evacuated from the tamponaded pericardium. A right-atrial tear was repaired. The patient did well and was sent home 11 days after the surgery.

Air bags reduce mortality,¹ but fatalities may occur in high-speed collisions that result in multiple chest trauma and cardiac rupture. This case is unusual in that it did not involve a high-speed collision and no rib fractures or other signs of trauma were noted.

The velocity of air bags during deployment has been measured at 98 to 211 mph (average, 144).² This may be sufficient to rupture the right atrium, since it is one of the thinnest vascular structures in the thorax. The absence of a rib fracture can probably be attributed to the patient's youth and relatively pliable thorax. The fact that she was not wearing a seat belt may have aggravated the situation by increasing the total velocity of the impact as well as by putting her thorax closer to the rapidly inflating air bag.

This case brings up two important points. First, cardiac rupture can occur even in the absence of rib fractures with severe barotrauma. Second, even in low-velocity collisions, the efficacy and safety of the air bag may be enhanced by the use of shoulder seat belts.

CT



Air bags: *Br J Surg*, N Engl J Med

2. National Highway Traffic Safety Administration. Air bag deployment characteristics. National Technical Information Service, September 1992.

Heart injury tied to air bag

(AP) — The force of an air bag opening in a low-speed accident in [redacted] tore a hole in a woman's heart, doctors reported in [redacted]

Doctors believe the pressure ruptured the motorist's right atrium, one of the heart's four pumping chambers, [redacted]

[redacted] Hospital said. The 22-year-old woman underwent surgery for the life-threatening injury and was released from the hospital after 11 days.

The bag opened when her car struck a parked vehicle at less than 15 mph, they reported.

[redacted] and automotive safety experts cited in the article theorized that the injury was caused, at least in part, by her failure to heed the manufacturer's instructions to wear her shoulder belt.

Air bags have been blamed for injuries including burns, eye damage and broken bones. Very few of them have been major.

ATTACHMENT D

Mercury Capri Repair Estimate

DATE: [REDACTED] P.M.
ESTIMATE ID: [REDACTED]

[REDACTED] INSURANCE COMPANY

[REDACTED]

DAMAGE ASSESSED BY: [REDACTED] LIC# [REDACTED]

PRESIDENT'S GUARANTEE ISSUED

LOSS DATE: [REDACTED] INSPECTION DATE: [REDACTED]
CLAIM NUMBER: [REDACTED] TYPE OF LOSS: COLLISION
PAY CODE: 1 DEDUCTIBLE: 500.00

CUSTOMER NAME: [REDACTED]
OWNER ADDRESS: [REDACTED]
TELEPHONE: HOME: [REDACTED]

VIN: 6MPCT0122MB [REDACTED] SERVICE CODE: [REDACTED]
DESCRIPTION: 91 CAPRI
OLD DAMAGE: Y LKB AVAILABLE: N OEM/AFT: 0 LICENSE: [REDACTED] CT MILEAGE: 7,955

LINE ENTRY	LABOR	LINE ITEM	PART TYPE/ PART NUMBER	DOLLAR AMOUNT	LABOR UNIT
1	AUTO BODY OVERHAUL	FRT BUMPER ASSY			1.8
2	AUTO REFIN REFINISH	FRT COVER			2.2
3	500840 BODY REMOVE/REPLACE	FRT BUMPER COVER	E9JY 17D957A	214.60	INCL
4	500870 BODY REMOVE/REPLACE	FRT BUMPER PAD	F0JY 17CB29A	13.72	INCL
5	500920 BODY REMOVE/REPLACE	R FRT BUMPER OPENING COVER	ORDER FROM DEALER	18.42	INCL
6	500930 BODY REMOVE/REPLACE	L FRT BUMPER OPENING COVER	ORDER FROM DEALER	18.42	INCL
7	500960 BODY REMOVE/REPLACE	R FRT BUMPER VALANCE REINF	E9JY 17CB61A	14.13	INCL
8	500970 BODY REMOVE/REPLACE	L FRT BUMPER VALANCE REINF	E9JY 17C861B	14.13	INCL
9	501000 BODY REMOVE/REPLACE	R FRT BUMPER COVER SUPPORT	E9JY 17C947A	48.07	INCL
10	501010 BODY REMOVE/REPLACE	L FRT BUMPER COVER SUPPORT	E9JY 17C947B	48.07	INCL
11	501020 BODY REMOVE/REPLACE	FRT BUMPER FACE BAR	E9JY 17A792A	194.28	INCL
12	501030 BODY REMOVE/REPLACE	R FRT BUMPER IMPACT ABSORBER	E9JY 17754A	100.28	INCL
13	501040 BODY REMOVE/REPLACE	L FRT BUMPER IMPACT ABSORBER	E9JY 17755A	94.25	INCL
14	501250 BODY CHECK/ADJUST	HEADLAMPS			.4
15	931084 BODY REPAIR	BATTERY	EXISTING		2.0*
16	931091 MECH REMOVE/REPLACE	WIRING	** QUAL REPL PART	93.97*	
17	501280 BODY REMOVE/INSTALL	R LAMP ASSY			.7
18	501290 BODY REMOVE/INSTALL	L LAMP ASSY			.7
19	501430 BODY REPAIR	R H/LAMP COVER			.3*
20	AUTO REFIN REFINISH	R LAMP COVER			.5
21	501440 BODY REPAIR	L H/LAMP COVER			.2*
22	AUTO REFIN REFINISH	L LAMP COVER			.5
23	931090 BODY ALIGNMENT	UNIBODY STRUCTURE	EXISTING		2.0*
24	501570 BODY REMOVE/REPLACE	R PARK/SIGNAL LAMP ASSEMBLY	E9JY 13200A	65.50	INCL
25	501580 BODY REMOVE/REPLACE	L PARK/SIGNAL LAMP ASSEMBLY	E9JY 13201A	65.45	INCL
26	501740 BODY REMOVE/INSTALL	R FRT MARKER LAMP ASSEMBLY			.2*
27	502040 BODY REPAIR	HOOD PANEL			.5*
28	AUTO REFIN REFINISH	HOOD OUTSIDE			2.7
29	502130 BODY REMOVE/REPLACE	LWR HOOD MOULDING	E9JY 8419A	16.45	.2
30	502180 BODY REMOVE/REPLACE	HOOD NAMEPLATE	E9JY 7642528E	4.12	.2
31	503210 BODY REPAIR	R FENDER PANEL			2.0*
32	AUTO REFIN REFINISH	R FENDER OUTSIDE			1.9
33	503390 BODY REMOVE/INSTALL	FENDER ANTENNA ASSY			.7*
34	503600 BODY REPAIR	FRONT BODY RADIATOR SUPPORT			.4

DATE: [REDACTED] P.M
ESTIMATE ID: [REDACTED]

LINE ENTRY	LABOR	LINE ITEM	PART TYPE/	DOLLAR	LABOR
ITEM NUMBER	TYPE OPERATION	DESCRIPTION	PART NUMBER	AMOUNT	UNIT
37	AUTO REFIN	REFINISH FRONT PANEL			1.0
38	503680 BODY	REMOVE/REPLACE GRILLE PANEL ORNAMENT	E9JY 8213A	9.60	.2
39	506830 MECH	REMOVE/REPLACE FRONT STRG WHEEL	-M FOJY 3600A	323.75	.8
40	506840 MECH	REMOVE/REPLACE FRONT STRG AIR BAG MODULE	-M FOJY 76043B13E	350.80	.5
41	900500 MECH	REMOVE/REPLACE AIR BAG SENSORS	0	122.40*	
42	506950 MECH	REMOVE/REPLACE FRONT STRG SHAFT	-M F2JY 3524A	417.22	1.6
43	933003 REFIN	ADD'L LABOR OPR TINT COLOR			1.0*
44	933004 BODY	ADD'L LABOR OPR UNDERCOATING		10.00*	
45	933006 FRAME	ADD'L LABOR OPR FRAME/RACK SET UP			1.5*
46	936001	ADD'L COST TOWING		116.00*	
47	936007	ADD'L COST SHOP MATERIALS		8.00*	
48	AUTO	ADD'L COST PAINT MATERIALS		135.00	

* JUDGEMENT ITEM

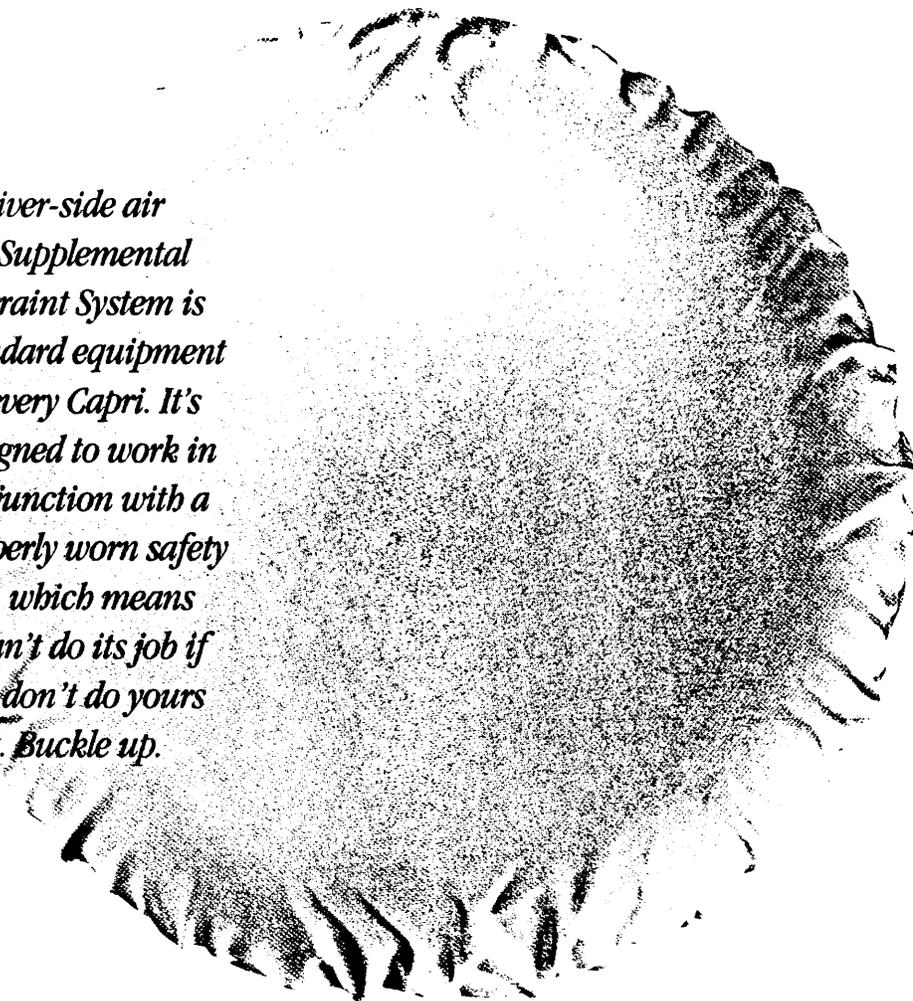
ESTIMATE DATA ERRORS: VIN UNABLE TO DECODE (D) 312

I. LABOR SUBTOTALS				ADD'L LABOR	TOTALS	II. PART REPLACEMENT SUMMARY	
	UNITS	RATE	AMOUNT			TAXABLE PARTS	AMOUNT
BODY	18.6	34.00	10.00	642.40			2,454.08
REFIN	13.4	34.00		455.60		SALES TAX @ 6.00%	147.24
FRAME	1.5	34.00		51.00		NONTAXABLE PARTS	122.40
MECH	2.9	34.00		98.60		TOTAL REPLACEMENT PARTS AMOUNT:	2,723.72
		LABOR SUBTOTAL		1,247.60			
		LABOR TAX @ 6.00%		74.86			
		LABOR SUMMARY TOTALS	36.4	1,322.46			
III. ADDITIONAL COSTS				AMOUNT	IV. ADJUSTMENTS		
TAXABLE COSTS				143.00	INSURANCE DEDUCTIBLE		
SALES TAX @ 6.00%				8.58	TOTAL CUSTOMER RESPONSIBILITY:		
NONTAXABLE COSTS				116.00	500.00-		
TOTAL ADDITIONAL COSTS:				267.58			
					I. TOTAL LABOR:		
					1,322.46		
					II. TOTAL REPLACEMENT PARTS:		
					2,723.72		
					III. TOTAL ADDITIONAL COSTS:		
					267.58		
					GROSS TOTAL:		
					4,313.76		
					IV. TOTAL ADJUSTMENTS:		
					500.00-		
					NET TOTAL:		
					3,813.76		

ATTACHMENT E

SRS Data From The Lincoln-Mercury Sales Brochure

A driver-side air bag Supplemental Restraint System is standard equipment on every Capri. It's designed to work in conjunction with a properly worn safety belt, which means it can't do its job if you don't do yours first. Buckle up.



OCCUPANT ASSESSMENT FORM

NATIONAL ACCIDENT SAMPLING SYSTEM
CRASHWORTHINESS DATA SYSTEM

1. Primary Sampling Unit Number _____
2. Case Number - Stratum 93-03
3. Vehicle Number 01
4. Occupant Number 01

OCCUPANT'S CHARACTERISTICS

5. Occupant's Age 22
Code actual age at time of accident.
(00) Less than one year old (specify by month): _____
(97) 97 years and older _____
(99) Unknown

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

7. Occupant's Height 165
Code actual height to the nearest centimeter.
(999) Unknown
65 inches X 2.54 = 165 centimeters

8. Occupant's Weight 061
Code actual weight to the nearest kilogram.
(999) Unknown
135 pounds X .4536 = 61.2 kilograms

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

OCCUPANT'S SEATING

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

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

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

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

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

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

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

EJECTION/ENTRAPMENT

12. Ejection 0

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

13. Ejection Area 0

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

14. Ejection Medium 0

- (0) No ejection
- (1) Door/hatch/tailgate
- (2) Nonfixed roof structure
- (3) Fixed glazing
- (4) Nonfixed glazing (specify):

- (5) Integral structure
- (8) Other medium (specify):

- (9) Unknown

15. Medium Status (Immediately Prior To Impact) 0

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

16. Entrapment 0

- (0) Not entrapped/exit not inhibited
- (1) Entrapped/pinned - mechanically restrained
- (2) Could not exit vehicle due to jammed doors, fire, etc.
(specify): _____
- (9) Unknown

17. Occupant Mobility 1

- (0) Occupant fatal before removed from vehicle
- (1) Removed from vehicle while unconscious or not oriented to time or place
- (2) Removed from vehicle due to perceived serious injuries
- (3) Exited vehicle with some assistance
- (4) Exited vehicle under own power
- (5) Occupant fully ejected
- (8) Removed from vehicle for other reasons
(specify): _____
- (9) Unknown

BELT SYSTEM FUNCTION

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

POLICE REPORTED RESTRAINT USE

AIR BAG SYSTEM FUNCTION

28. Police Reported Belt Use 0
- (0) None used
 - (1) Police did not indicate belt use
 - (2) Shoulder belt
 - (3) Lap belt
 - (4) Lap and shoulder belt
 - (5) Belt used, type not specified
 - (6) Child safety seat
 - (7) Automatic belt
 - (8) Other type belt, (specify):
- _____
- (9) Police indicated "unknown"

29. Police Reported Air Bag Availability/Function 2
- (0) No air bag available
 - (1) Police did not indicate air bag availability/function
 - (2) Deployed
 - (3) Not deployed
 - (4) Unknown if deployed
 - (9) Police indicated "unknown"

Check the Primary Source Used In Determining Belt Use.

- Vehicle inspection
 - Official injury data
 - Driver/occupant interview
 - Other (specify):
- _____
- Unknown if belt used
- _____
- _____
- _____
- _____

30. Frontal Air Bag System Availability/Function (This Occupant Position) 1
- (0) Not equipped/not available
 - (1) Air bag
- Non-functional*
- (2) Air bag disconnected (specify):
- _____
- (3) Air bag not reinstalled
 - (9) Unknown

31. Frontal Air Bag System Deployment (This Occupant Position) 1
- (0) Not equipped/not available
 - (1) Deployed during accident (as a result of impact)
 - (2) Deployed inadvertently just prior to accident
 - (3) Deployed, details unknown
 - (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)
 - (5) Unknown if deployed
 - (7) Nondeployed
 - (9) Unknown

32. Other Than First Seat Frontal Air Bag Availability/Function (This Occupant Position) 0
- (0) Not equipped/not available
 - (1) Air bag
- Non-functional*
- (2) Air bag disconnected (specify):
- _____
- (3) Air bag not reinstalled
 - (9) Unknown
- Specify type of "other" air bag present:*
- _____

33. Air Bag(s) Deployment, Other Than First Seat Frontal (This Occupant Position) 0
- (0) Not equipped with an "other" air bag
 - (1) Deployed during accident (as a result of impact)
 - (2) Deployed inadvertently just prior to accident
 - (3) Deployed, details unknown
 - (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)
 - (5) Unknown if deployed
 - (7) Nondeployed
 - (9) Unknown

34. Are There Indications of Air Bag System Failure? (This Occupant Position) 1
- (0) Not equipped/not available
 - (1) No
 - (2) Yes (specify):
- _____
- (9) Unknown

FIRST SEAT FRONTAL AIR BAG SYSTEM EVALUATION

35. Had Vehicle Been in Previous Accident(s)? 1
 (0) Not equipped/not available
 (1) No previous accidents
 Yes
 (2) Previous accident(s) without deployment(s)
 (3) One previous accident with deployment
 (4) More than one previous accident with at least one deployment
 (8) Previous accidents, unknown deployment status
 (9) Unknown

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

37. Had Any Prior Maintenance/Service Been Performed On This Air Bag System? 1
 (0) Not equipped/not available
 (1) No prior maintenance
 (2) Yes, prior maintenance (specify): _____
 (9) Unknown

38. Air Bag Deployment Accident Event Sequence Number 01
 (00) Not equipped/not available
 _____ Code the accident event sequence number that initiated the air bag deployment
 (96) Deployed, unknown event
 (97) Not deployed
 (98) Unknown if deployed
 (99) Unknown

39. CDC For Air Bag Deployment Impact 1
 (0) Not equipped/not available
 (1) Highest delta V
 (2) Second highest delta V
 (3) Other non-coded delta V (specify): _____
 (6) Deployed, unknown event
 (7) Not deployed
 (8) Unknown if deployed
 (9) Unknown

40. Longitudinal Component of Delta V For Air Bag Deployment Impact + 0014
 (____) Not equipped/not available
 Code the value of the delta V for the impact that initiated the air bag deployment
 (____) Deployed, unknown longitudinal Delta V
 (____) Not deployed
 (____) Unknown if deployed
 (____) Unknown
 8-10 mph
 12-16 mph

41. Did Air Bag Module Cover Flap(s) Open At Designated Tear Points? 2
 (0) Not equipped/not available
 (1) No
 (2) Yes
 (3) Deployed, unknown if flap(s) opened at designated tear points
 (7) Not deployed
 (8) Unknown if deployed
 (9) Unknown

42. Were Air Bag Module Cover Flap(s) Damaged? 1
 (0) Not equipped/not available
 (1) No
 (2) Yes (specify): _____
 (3) Deployed, unknown if air bag module cover flap(s) damaged
 (7) Not deployed
 (8) Unknown if deployed
 (9) Unknown

43. Was There Damage To The Air Bag? 01
 (00) Not equipped/not available
 (01) Not damaged
 Yes - Air Bag Damage
 (02) Ruptured
 (03) Cut
 (04) Torn
 (05) Holed
 (06) Burned
 (07) Abraded
 (88) Other damage (specify): _____
 (95) Damaged, details unknown
 (96) Deployed, unknown if damaged
 (97) Not deployed
 (98) Unknown if deployed
 (99) Unknown

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

44. Source of Air Bag Damage 01
 (00) Not equipped/not available
 (01) Not damaged
 (02) Object worn by occupant, (specify):

 (03) Object carried by occupant, (specify):

 (04) Adaptive/assistive controls, (specify):

 (05) Fire in vehicle
 (06) Thermal burns
 (07) Rescue or emergency efforts
 (88) Other damage source (specify):

 (95) Damaged, unknown source
 (96) Deployed, unknown if damaged
 (97) Not deployed
 (98) Unknown if deployed
 (99) Unknown
45. Was The Air Bag Tethered? 2
 (0) Not equipped/not available
 (1) No
 (2) Yes (specify number of tether straps):

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

 (3) Deployed, unknown if vent ports present
 (7) Not deployed
 (8) Unknown if deployed
 (9) Unknown
47. Was the Air Bag in this Occupant's Position Contacted by Another Occupant? 1
 (0) Not equipped/not available
 (1) No
 (2) Yes (specify):

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

HEAD RESTRAINT AND SEAT EVALUATION

49. Head Restraint Type/Damage by Occupant at This Occupant Position 3
 (0) No head restraints
 (1) Integral—no damage
 (2) Integral—damaged during accident
 (3) Adjustable—no damage
 (4) Adjustable—damaged during accident
 (5) Add-on—no damage
 (6) Add-on—damaged during accident
 (8) Other (specify):

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

 (99) Unknown
51. Seat Orientation (this Occupant Position) 1
 (0) Occupant not seated or no seat
 (1) Forward facing seat
 (2) Rear facing seat
 (3) Side facing seat (inward)
 (4) Side facing seat (outward)
 (8) Other (specify):

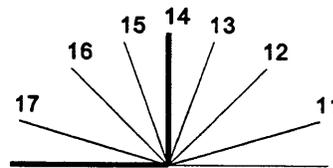
 (9) Unknown
52. Seat Track Adjusted Position Prior To Impact 2
 (0) Occupant not seated or no seat
 (1) Non-adjustable seat track
- Adjustable Seat Track*
 (2) Seat at forward most track position
 (3) Seat between forward most and middle track positions
 (4) Seat at middle track position
 (5) Seat between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

HEAD RESTRAINT AND SEAT EVALUATION *continued*

53. Seat Back Incline Prior and Post Impact 23
 (00) Occupant not seated or no seat
 (01) Not adjustable

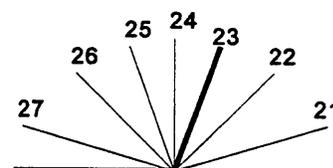
Upright prior to impact

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



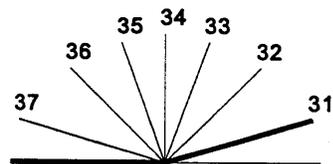
Slightly reclined prior to impact

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



Completely reclined prior to impact

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



(99) Unknown

54. Seat Performance (this Occupant Position) 1

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

CHILD SAFETY SEAT

55. Child Safety Seat Make/Model 000
 (000) No child safety seat

Applicable codes are found in your NASS CDS
 Data Collection, Coding and Editing

(950) Built-in child safety seat
 (997) Other make/model (specify):

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

56. Type of Child Safety Seat 0

(0) No child safety seat

(1) Infant seat

(2) Toddler seat

(3) Convertible seat

(4) Booster seat - with shield

(5) Booster seat - without shield

(7) Other type child safety seat (specify):

(8) Unknown child safety seat type

(9) Unknown if child safety seat used

57. Child Safety Seat Orientation 00

(00) No child safety seat

Designed for Rear Facing for This Age/Weight

(01) Rear facing

(02) Forward facing

(08) Other orientation (specify):

(09) Unknown orientation

Designed For Forward Facing for This Age/Weight

(11) Rear facing

(12) Forward facing

(18) Other orientation (specify):

(19) Unknown orientation

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

(21) Rear facing

(22) Forward facing

(28) Other orientation (specify):

(29) Unknown orientation

(99) Unknown if child safety seat used

58. Child Safety Seat Harness Usage 00

59. Child Safety Seat Shield Usage 00

60. Child Safety Seat Tether Usage 00

Note: Options below applicable to
 Variables OA58-OA60.

(00) No child safety seat

Not Designed With Harness/Shield/Tether

(01) After market harness/shield/tether
 added, not used

(02) After market harness/shield/tether used

(03) Child safety seat used, but no after market
 harness/shield/tether added

(09) Unknown if harness/shield/tether
 added or used

Designed With Harness/Shield/Tether

(11) Harness/shield/tether not used

(12) Harness/shield/tether used

(19) Unknown if harness/shield/tether used

Unknown If Designed With Harness/Shield/Tether

(21) Harness/shield/tether not used

(22) Harness/shield/tether used

(29) Unknown if harness/shield/tether used

(99) Unknown if child safety seat used

INJURY CONSEQUENCES61. Injury Severity (Police Rating) 3

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

62. Treatment - Mortality 3

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

Nonfatal

- (3) Hospitalization
- (4) Transported and released
- (5) Treatment at scene - nontransported
- (6) Treatment later
- (7) Treatment - other (specify):

- (8) Transported to a medical facility-unknown if treated
- (9) Unknown

63. Type Of Medical Facility (for Initial Treatment) 2

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

(9) Unknown

64. Hospital Stay 11

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

65. Working Days Lost 61

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

*n. 6 months***STOP WORK HERE****VARIABLES 66-74****TO BE CODED BY THE ZONE CENTER**

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

66. Time to Death 00
 _____ Code number of hours from time of accident to time of death up through 24 hours. If time of death is greater than 24 hours, code number of days. (Note: 1 day = 31, 2 days = 32, ... n days = 30 + n up through 30 days = 60)
 (00) Not fatal
 (96) Fatal - ruled disease
 (99) Unknown

67. 1st Medically Reported Cause of Death 00

68. 2nd Medically Reported Cause of Death 00

69. 3rd Medically Reported Cause of Death 00

_____ Code the Occupant Injury from line number(s) for the medically reported injury(s) which reportedly contributed to this occupant's death
 (00) Not fatal or no additional causes
 (96) Mode of death given but specific injuries are not linked to cause of death. (specify):

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

(99) _____ Unknown

70. Number of Recorded Injuries for This Occupant 02
 _____ Code the actual number of injuries recorded for this occupant.
 (00) No recorded injuries
 (97) Injured, details unknown
 (99) Unknown if injured

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

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

73. Arterial Blood Gases (ABG) - HCO₃ 01
 (00) Not injured
 (01) Injured, ABGs not measured or reported
 (02-50) Code the actual value of the HCO₃
 (96) ABGs reported, HCO₃ unknown
 (97) Injured, details unknown
 (99) Unknown if injured

BELT USE DETERMINATION

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



OCCUPANT INJURY FORM

1. Primary Sampling Unit Number _____	3. Vehicle Number _____
2. Case Number - Stratum _____	4. Occupant Number _____

INJURY DATA

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

	A.I.S. - 90										Occupant Area Intrusion Number
	Source of Injury Data	Body Region	Type of Anatomic Structure	Specific Anatomic Structure	Level of Injury	A.I.S. Severity	Aspect	Injury Source	Injury Confidence Level	Direct/ Indirect Injury	
1st	5. <u>2</u>	6. <u>4</u>	7. <u>4</u>	8. <u>10</u>	9. <u>12</u>	10. <u>5</u>	11. <u>4</u>	12. <u>170</u>	13. <u>1</u>	14. <u>1</u>	15. <u>00</u>
2nd	16. <u>7</u>	17. <u>2</u>	18. <u>9</u>	19. <u>02</u>	20. <u>02</u>	21. <u>1</u>	22. <u>8</u>	23. <u>170</u>	24. <u>1</u>	25. <u>1</u>	26. <u>00</u>
3rd	27. ___	28. ___	29. ___	30. ___	31. ___	32. ___	33. ___	34. ___	35. ___	36. ___	37. ___
4th	38. ___	39. ___	40. ___	41. ___	42. ___	43. ___	44. ___	45. ___	46. ___	47. ___	48. ___
5th	49. ___	50. ___	51. ___	52. ___	53. ___	54. ___	55. ___	56. ___	57. ___	58. ___	59. ___
6th	60. ___	61. ___	62. ___	63. ___	64. ___	65. ___	66. ___	67. ___	68. ___	69. ___	70. ___
7th	71. ___	72. ___	73. ___	74. ___	75. ___	76. ___	77. ___	78. ___	79. ___	80. ___	81. ___
8th	82. ___	83. ___	84. ___	85. ___	86. ___	87. ___	88. ___	89. ___	90. ___	91. ___	92. ___
9th	93. ___	94. ___	95. ___	96. ___	97. ___	98. ___	99. ___	100. ___	101. ___	102. ___	103. ___
10th	104. ___	105. ___	106. ___	107. ___	108. ___	109. ___	110. ___	111. ___	112. ___	113. ___	114. ___

OCCUPANT INJURY CLASSIFICATION

Body Region	Specific Anatomic Structure	Level of Injury	Aspect
(1) Head		Specific injuries are assigned consecutive two-digit numbers beginning with 02.	(1) Right
(2) Face			(2) Left
(3) Neck	<u>Vessels, Nerves, Organs,</u>	To the extent possible, within the organizational framework of the AIS, 00 is assigned to an injury NFS as to severity or where only one injury is given in the dictionary for that anatomic structure. 99 is assigned to any injury NFS as to lesion or severity.	(3) Bilateral
(4) Thorax	<u>Bones, Joints</u> are assigned consecutive two digit numbers beginning with 02.		(4) Central
(5) Abdomen		The exceptions to this rule apply to:	(5) Anterior
(6) Spine			(6) Posterior
(7) Upper Extremity			(7) Superior
(8) Lower Extremity			(8) Inferior
(9) Unspecified			(9) Unknown
			(0) Whole region
Type of Anatomic Structure	<u>Whole Area</u>	Abbreviated Injury Scale	
(1) Whole Area	(02) Skin - Abrasion	(1) Minor Injury	
(2) Vessels	(04) Skin - Contusion	(2) Moderate Injury	
(3) Nerves	(06) Skin - Laceration	(3) Serious Injury	
(4) Organs (includes Muscles/ligaments)	(08) Skin - Avulsion	(4) Severe Injury	
(5) Skeletal (includes joints)	(10) Amputation	(5) Critical Injury	
(6) Head - LOC	(20) Burn	(6) Maximum (untreatable)	
(9) Skin	(30) Crush	(7) Injured, unknown severity	
	(40) Degloving		
	(50) Injury - NFS		
	(90) Trauma, other than mechanical		
	<u>Head - LOC</u>		
	(02) Length of LOC		
	(04) Level		
	(06) of		
	(08) Consciousness		
	(10) Concussion		
	<u>Spine</u>		
	(02) Cervical		
	(04) Thoracic		
	(06) Lumbar		

SOURCE OF INJURY DATA

INJURY SOURCE

DIRECT/INDIRECT INJURY

OFFICIAL RECORDS

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

UNOFFICIAL RECORDS

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

CONFIDENCE LEVEL

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

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

INJURY SOURCES

- | | | | |
|---|--|--|---|
| <p>FRONT</p> <p>(001) Windshield</p> <p>(002) Mirror</p> <p>(003) Sunvisor</p> <p>(004) Steering wheel rim</p> <p>(005) Steering wheel hub/spoke</p> <p>(006) Steering wheel (combination of codes 004 and 005)</p> <p>(007) Steering column, transmission selector lever, other attachment</p> <p>(008) Cellular telephone or CB radio</p> <p>(009) Add on equipment (e.g., tape deck, air conditioner)</p> <p>(010) Left instrument panel and below</p> <p>(011) Center instrument panel and below</p> <p>(012) Right instrument panel and below</p> <p>(013) Glove compartment door</p> <p>(014) Knee bolster</p> <p>(015) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, mirror, or steering assembly (driver side only)</p> <p>(016) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, or mirror (passenger side only)</p> <p>(017) Windshield reinforced by exterior object (specify): _____</p> <p>(019) Other front object (specify): _____</p> | <p>(102) Right side hardware or armrest</p> <p>(103) Right A (A1/A2)-pillar</p> <p>(104) Right B-pillar</p> <p>(105) Other right pillar (specify): _____</p> <p>(106) Right side window glass</p> <p>(107) Right side window frame</p> <p>(108) Right side window sill</p> <p>(109) Right side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.</p> <p>(110) Other right side object (specify): _____</p> <p>INTERIOR</p> <p>(151) Seat, back support</p> <p>(152) Belt restraint webbing/buckle</p> <p>(153) Belt restraint B-pillar or door frame attachment point</p> <p>(154) Other restraint system component (specify): _____</p> <p>(155) Head restraint system</p> <p>(160) Other occupants (specify): _____</p> <p>(161) Interior loose objects</p> <p>(162) Child safety seat (specify): _____</p> <p>(163) Other interior object (specify): _____</p> <p>AIR BAG</p> <p>(170) Air bag-driver side</p> <p>(171) Air bag-driver side and eyewear</p> <p>(172) Air bag-driver side and jewelry</p> <p>(173) Air bag-driver side and object held</p> <p>(174) Air bag-driver side and object in mouth</p> <p>(175) Air bag compartment cover-driver side</p> <p>(176) Air bag compartment cover-driver side and eyewear</p> <p>(177) Air bag compartment cover-driver side and jewelry</p> <p>(178) Air bag compartment cover-driver side and object held</p> <p>(179) Air bag compartment cover-driver side and object in mouth</p> <p>(180) Air bag-passenger side</p> <p>(181) Air bag-passenger side and eyewear</p> <p>(182) Air bag-passenger side and jewelry</p> | <p>(183) Air bag-passenger side and object held</p> <p>(184) Air bag-passenger side and object in mouth</p> <p>(185) Air bag compartment cover-passenger side</p> <p>(186) Air bag compartment cover-passenger side and eyewear</p> <p>(187) Air bag compartment cover-passenger side and jewelry</p> <p>(188) Air bag compartment cover-passenger side and object held</p> <p>(189) Air bag compartment cover-passenger side and object in mouth</p> <p>(190) Other air bag (specify) _____</p> <p>(195) Other air bag compartment cover (specify) _____</p> <p>ROOF</p> <p>(201) Front header</p> <p>(202) Rear header</p> <p>(203) Roof left side rail</p> <p>(204) Roof right side rail</p> <p>(205) Roof or convertible top</p> <p>FLOOR</p> <p>(251) Floor (including toe pan)</p> <p>(252) Floor or console mounted transmission lever, including console</p> <p>(253) Parking brake handle</p> <p>(254) Foot controls including parking brake</p> <p>REAR</p> <p>(301) Backlight (rear window)</p> <p>(302) Backlight storage rack, door, etc.</p> <p>(303) Other rear object (specify): _____</p> <p>ADAPTIVE (ASSISTIVE) DRIVING EQUIPMENT</p> <p>(401) Hand controls for braking/acceleration</p> <p>(402) Steering control devices (attached to OEM steering wheel)</p> <p>(403) Steering knob attached to steering wheel</p> <p>(405) Replacement steering wheel (i.e., reduced diameter)</p> <p>(406) Joy stick steering controls</p> <p>(407) Wheelchair tie-downs</p> <p>(408) Modification to seat belts, (specify): _____</p> <p>(409) Additional or relocated switches, (specify): _____</p> <p>(410) Raised roof</p> | <p>(411) Wall mounted head rest (used behind wheel chair)</p> <p>(412) Other adaptive device (specify): _____</p> <p>EXTERIOR of OCCUPANT'S VEHICLE</p> <p>(451) Hood</p> <p>(452) Outside hardware (e.g., outside mirror, antenna)</p> <p>(453) Other exterior surface or tires (specify): _____</p> <p>(454) Unknown exterior objects</p> <p>EXTERIOR OF OTHER MOTOR VEHICLE</p> <p>(501) Front bumper</p> <p>(502) Hood edge</p> <p>(503) Other front of vehicle (specify): _____</p> <p>(504) Hood</p> <p>(505) Hood ornament</p> <p>(506) Windshield, roof rail, A-pillar</p> <p>(507) Side surface</p> <p>(508) Side mirrors</p> <p>(509) Other side protrusions (specify): _____</p> <p>(510) Rear surface</p> <p>(511) Undercarriage</p> <p>(512) Tires and wheels</p> <p>(513) Other exterior of other motor vehicle (specify): _____</p> <p>(514) Unknown exterior of other motor vehicle</p> <p>OTHER VEHICLE OR OBJECT IN THE ENVIRONMENT</p> <p>(551) Ground</p> <p>(598) Other vehicle or object (specify): _____</p> <p>(599) Unknown vehicle or object</p> <p>NONCONTACT INJURY</p> <p>(601) Fire in vehicle</p> <p>(602) Flying glass</p> <p>(603) Other noncontact injury source (specify): _____</p> <p>(604) Air bag exhaust gases</p> <p>(697) Injured, unknown source</p> |
| <p>LEFT SIDE</p> <p>(051) Left side interior surface, excluding hardware or armrests</p> <p>(052) Left side hardware or armrest</p> <p>(053) Left A (A1/A2)-pillar</p> <p>(054) Left B-pillar</p> <p>(055) Other left pillar (specify): _____</p> <p>(056) Left side window glass</p> <p>(057) Left side window frame</p> <p>(058) Left side window sill</p> <p>(059) Left side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.</p> <p>(060) Other left side object (specify): _____</p> <p>RIGHT SIDE</p> <p>(101) Right side interior surface, excluding hardware or armrests</p> | | | |

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.)

Restrained?

No

Yes

Blood Alcohol Level
(mg/dl)

BAL = ____

Glasgow Coma
Scale Score

GCSS = ____

Units of Blood
Given

Units = ____

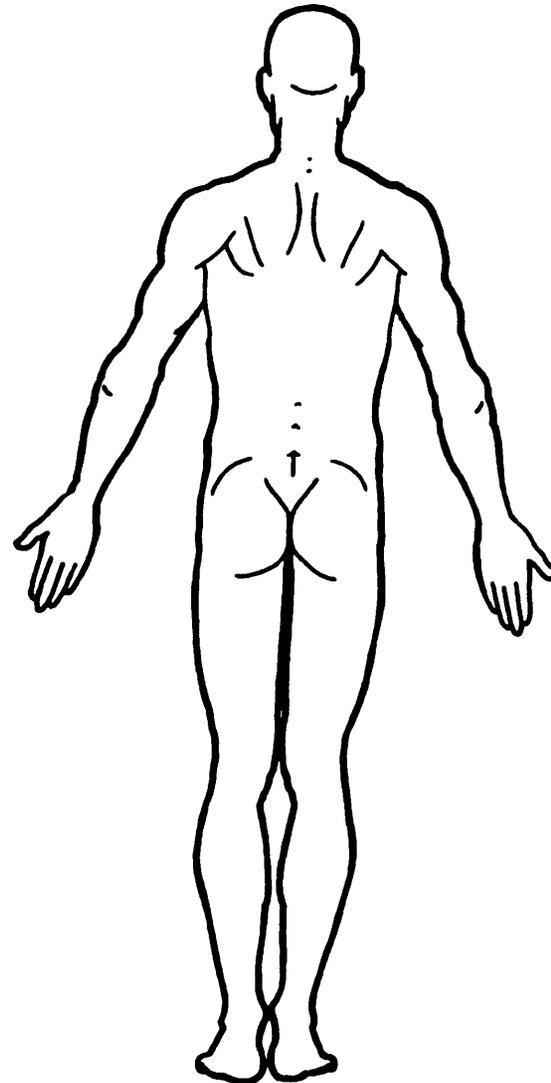
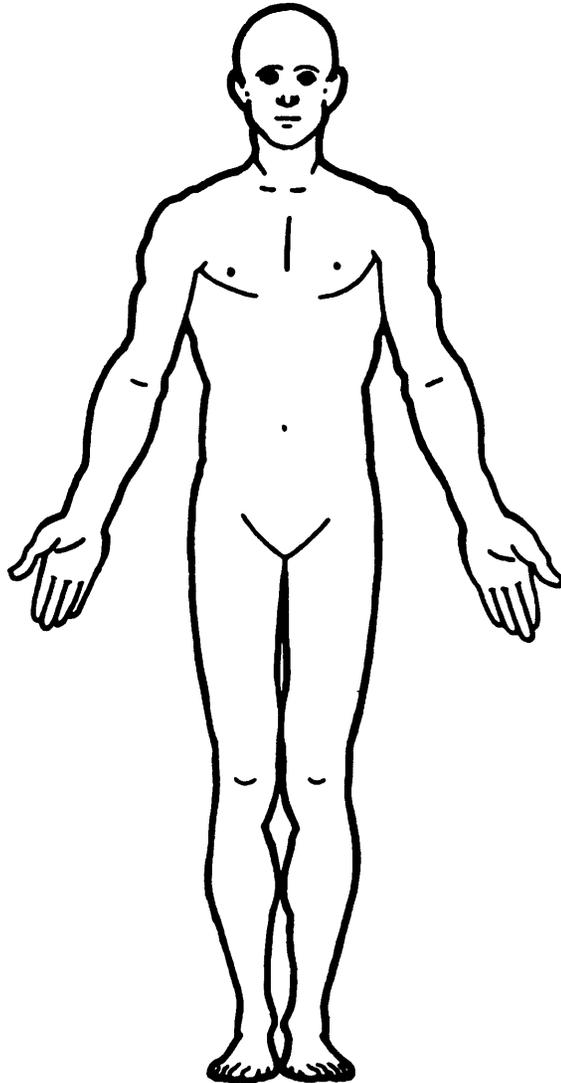
Arterial Blood Gases

pH = ____

PO₂ = ____

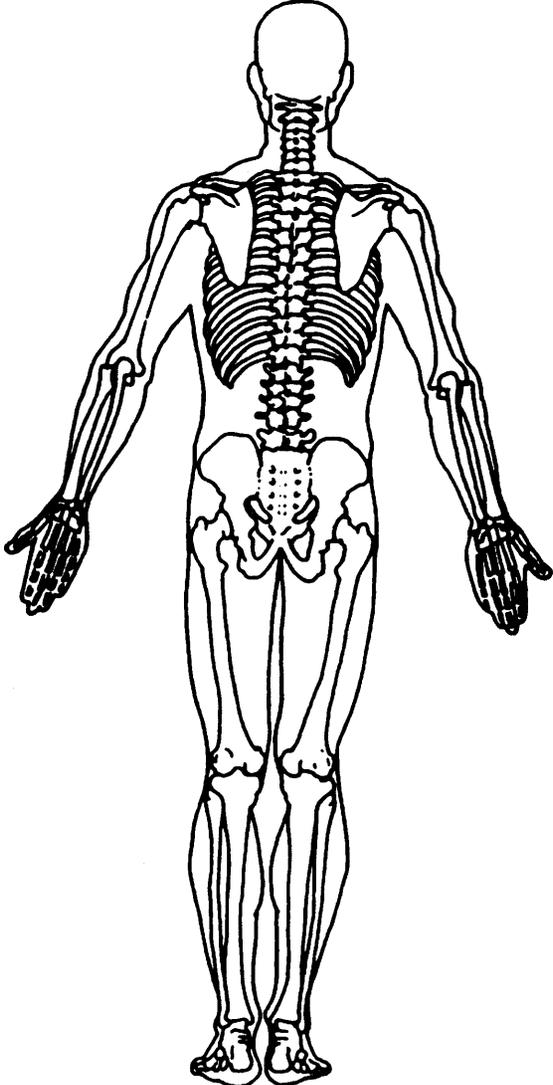
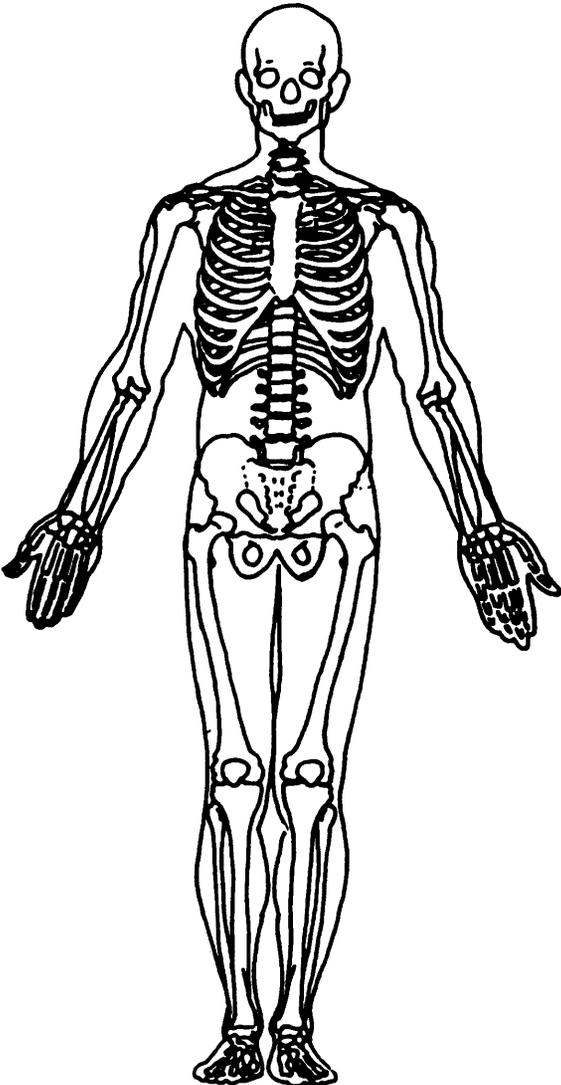
PCO₂ = ____

HCO₃ = ____



OFFICIAL INJURY DATA — SKELETAL INJURIES

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



OFFICIAL INJURY DATA – 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.)

