

This collection of information is voluntary, and will be used to better understand the causes of motorcycle crashes. Public reporting burden is estimated to average 25 minutes per response, including the time for reviewing instructions searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Please note that an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this collection is 2125-0619. This collection expires on 11/31/2013. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Information Collection Clearance Officer, Federal Highway Administration, 1200 New Jersey Avenue, SE, Washington, DC 20590.

**CONTROL
MOTORCYCLE RIDER QUESTIONNAIRE**

1. Case Number _____

2. Motorcycle Rider Number _____

BACKGROUND INFORMATION

3. How old are you? _____

Code actual age in years
(99) unknown

4. Where did you get your current driver's license? _____

- (1) no license
- (2) California
- (3) other State (list) _____
- (4) Canada
- (5) Mexico
- (6) military
- (8) other (describe) _____
- (9) unknown

5. What kind of operator's license is it? _____

- (Code up to 4; input "97" in remaining responses)
- (01) no license held _____
 - (02) learner's permit, only _____
 - (03) motorcycle license _____
 - (04) automobile license _____
 - (05) commercial license _____
 - (06) motorcycle driver and competition license _____
 - (07) license to transport people _____
 - (08) heavy truck license _____
 - (97) not applicable _____
 - (98) other (describe) _____
 - (99) unknown _____

6. What year was/were the license(s) issued? _____ A.5.1.1.6.1

(Listed in same order as licenses above) _____ A.5.1.1.6.2

(9997) not applicable _____ A.5.1.1.6.3

(9999) unknown _____ A.5.1.1.6.4

7. Are you of Hispanic or Latino origin? _____

- (0) refused to answer
- (1) no
- (2) yes
- (8) other (describe) _____
- (9) unknown

8. What is your race? _____

Please select one or more, code "7" in others _____

- (0) refused to answer _____
- (1) white _____
- (2) black or African American
- (3) Asian
- (4) Native Hawaiian or other Pacific Islander
- (5) American Indian or Alaska native
- (9) unknown

9. What is your height? _____ ft. _____ in. A.5.1.1.9

(9/99) unknown

10. What is your weight? _____ lbs. A.5.1.1.10

(999) unknown

11. Gender _____ A.5.1.1.11

- (1) male
- (2) female
- (9) unknown

12. How much formal education have you had? _____ A.5.1.1.12

- (01) no formal schooling
- (02) less than high school diploma
- (03) high school diploma or GED
- (04) partial college/university
- (05) college/university graduate
- (06) graduate school, advanced degree, professional degree
- (07) specialty/technical school
- (97) not applicable
- (98) other (specify) _____
- (99) unknown

15. What is your current occupation? _____ A.5.1.1.13

- (11) management occupations
- (13) business and financial
- (15) computer and mathematical
- (17) architecture and engineering
- (19) life, physical, and social science
- (21) community and social services
- (23) legal
- (25) education, training or library
- (27) arts, design, entertainment, sports or media
- (29) healthcare practitioners and technical jobs
- (31) healthcare support
- (33) protective services

- (35) food preparation and serving related
- (37) building and grounds maintenance
- (39) personal care and services
- (41) sales and related occupations
- (43) office and administrative support
- (45) farming, fishing or forestry
- (47) construction or extraction
- (49) installation, maintenance or repair
- (53) transportation and material moving
- (55) military
- (60) full time student
- (97) not applicable, not in workforce at present
- (98) other (specify) _____
- (99) unknown

RIDING/DRIVING EXPERIENCE

14. Are you the owner of this motorcycle? _____

- (1) no
- (2) yes
- (8) other _____
- (9) unknown

15. How many YEARS have you been driving any kind of motor vehicle? _____ years

- (00) less than two weeks
- (01) one year or less
- (02-96) actual number of years
- (97) not applicable/no previous experience/first time
- (99) unknown

16. How many MONTHS have you operated a street motorcycle? _____

- (000) this is the first time
- (001) less than or equal to one month
- (002-095) actual number of months
- (096) 96 months or more
- (997) not applicable
- (998) other (specify) _____
- (999) unknown

17. What is the average number of days per year you ride motorcycles? _____

- (001-365) Actual number of days per year
- (997) not applicable, first time
- (999) unknown

18. About how many miles per year do you ride motorcycles? _____

- (00000) none
- (00001-99995) actual miles
- (99996) 99996 or greater miles
- (99998) other (specify) _____
- (99999) unknown

19. What kind of motorcycle training have you had? _____

(99) unknown

TRIP INFORMATION

26. At what kind of location did you begin your trip today? ___ ___

- (01) home
- (02) work, business
- (03) recreation/social
- (04) school/religious activity
- (05) errand, shopping
- (06) family personal business/obligations
- (07) meals, restaurant, etc.
- (08) transport someone
- (09) medical/dental
- (10) bar, pub
- (98) other (specify) _____
- (99) unknown

27. What was your trip destination? ___ ___ A.5.1.1.28

- (01) home
- (02) work, business
- (03) recreation/social
- (04) school/religious activity
- (05) errand, shopping
- (06) family personal business/obligations
- (07) meals, restaurant, etc
- (08) transport someone
- (09) medical/dental
- (10) bar, pub
- (11) no destination, joy riding
- (98) other (specify) _____
- (99) unknown

28. About how many miles would the trip have been one way? ___ ___ ___ A.5.1.1.29

- (001) one mile or less
- (002-995) actual number of miles
- (996) 996 miles or greater
- (997) not applicable
- (999) unknown

29. How many hours have you been riding today since your trip departure ? ___ ___

- (01) one hour or less
- (02-95) actual hours
- (96) 96 or more
- (97) not applicable, had not yet begun trip
- (98) other (specify) _____
- (99) unknown

30. How many miles have you gone since your trip departure? ___ ___ ___

- (001) one mile or less
- (002-095) actual hours
- (096) 96 or more

- (997) not applicable, had not yet begun trip
- (998) other (specify) _____
- (999) unknown

PROTECTIVE CLOTHING/GEAR WHEN RIDING

31. What kind of clothing was on your upper body? _____

- (0) none
- (1) light cloth garment, i.e., thin cotton
- (2) medium cloth garment, i.e., denim, nylon
- (3) heavy cloth garment, i.e., imitation leather
- (4) leather garment
- (5) Kevlar
- (8) other (specify) _____
- (9) unknown

32. Was this upper body clothing motorcycle-oriented? _____ A.5.3.1.2

- (1) no
- (2) yes
- (7) not applicable/no clothing
- (8) other (specify) _____
- (9) unknown _____

33. What kind of clothing was on your lower body? _____ A.5.3.1.3

- (0) none
- (1) light cloth garment, i.e., thin cotton
- (2) medium cloth garment, i.e., denim, nylon
- (3) heavy cloth garment, i.e., imitation leather
- (4) leather garment
- (5) Kevlar
- (8) other (specify) _____
- (9) unknown _____

34. Was this lower body clothing motorcycle-oriented? _____ A.5.3.1.4

- (1) no
- (2) yes
- (7) not applicable/no clothing
- (8) other (specify) _____
- (9) unknown

35. Were you wearing an inflatable safety vest? _____

- (1) no
- (2) yes
- (8) other (specify) _____
- (9) unknown

36. What kind of shoes or boots were you wearing? _____ A.5.3.1.5

- (1) no shoes or boots, barefoot
- (2) light sandal
- (3) medium street shoe, loafer
- (4) athletic, training shoe
- (5) heavy shoe or boot

- (6) reinforced work boot or motorcycle boot
- (8) other (specify) _____
- (9) unknown

37. Did this footwear go up over your ankle? _____

- (1) no
- (2) yes
- (7) not applicable, no footwear worn
- (8) other, specify _____
- (9) unknown

38. Was the footwear motorcycle-oriented? _____ A.5.3.1.6

- (1) no
- (2) yes
- (7) not applicable, no footwear worn
- (9) unknown

39. What kind of gloves were you wearing? _____ A.5.3.1.7

- (0) none
- (1) light cloth garment, i.e., thin cotton
- (2) medium cloth garment, i.e., denim, nylon
- (3) heavy cloth garment, i.e., imitation leather
- (4) leather garment
- (5) Kevlar
- (8) other (specify)
- (9) unknown

40. Are the gloves motorcycle-oriented? _____ A.5.3.1.8

- (1) no
- (2) yes, full fingered
- (3) yes-shorties
- (7) not applicable, no gloves worn
- (8) other (specify) _____
- (9) unknown

41. Is any of this clothing retroreflective? _____

- Code up to 3 responses _____
- (1) no retroreflective clothing or gloves _____
 - (2) upper body (shirt/jacket/vest) _____
 - (3) lower body (pants/ shorts)
 - (4) gloves
 - (5) special arm bands, or similar items
 - (7) not applicable, no clothing or gloves
 - (8) other (specify) _____
 - (9) unknown

42. What is the clothing color of the following?

- Upper body clothing** _____ D.5.3.1.6.1
- Lower body clothing** _____ D.5.3.1.6.2
- Footwear** _____ D.5.3.1.6.3
- Gloves** _____ D.5.3.1.6.4

- (01) no dominating color, multi-colored
- (02) white
- (03) yellow
- (04) black
- (05) red
- (06) blue
- (07) green
- (08) silver
- (09) orange
- (10) brown
- (11) purple
- (12) gold
- (13) grey
- (97) not applicable/no clothing
- (98) other (specify) _____
- (99) unknown

43. Do you think any of your clothing helped with your ability to safely operate your motorcycle?

Upper body clothing ____ ____

Lower body clothing ____ ____

Footwear ____ ____

Gloves ____ ____

- (01) apparel had no effect
- (02) apparel protected or helped rider
- (03) apparel uncomfortable or distracting
- (97) not applicable, no apparel
- (98) other, specify _____
- (99) unknown

44. What kind of eye protection do you usually wear? ____ ____

- (01) none
- (02) non-prescription clear glasses
- (03) prescription clear glasses
- (04) non-prescription sunglasses
- (05) prescription sunglasses
- (06) goggles, non-prescription
- (07) goggles, prescription
- (08) industrial safety glasses
- (98) other (specify) _____
- (99) unknown

45. Are you required to wear corrective lenses when riding/driving? ____

- (1) no
- (2) yes
- (8) other specify _____
- (9) unknown

46. What color was the eye coverage lens? ____

- (1) clear
- (2) green
- (3) grey, smoke

- (4) amber, yellow
- (5) blue
- (6) reflective (any color)
- (7) not applicable, not wearing eye coverage
- (8) other (specify) _____
- (9) unknown

HELMET DATA

47. Do you usually wear a helmet? ____ A.5.3.1.11

- (1) no
- (2) yes
- (3) helmet available, but not used
- (8) other (specify) _____
- (9) unknown

48. What is your reason for not wearing a helmet? ____ ____ D.5.2.1.1.13

- (01) not required by law
- (02) no expectation of accident involvement
- (03) helmets too expensive
- (04) helmets are inconvenient and uncomfortable
- (05) helmets reduce traffic awareness, limit hearing and vision
- (06) helmets ineffective in reducing head injury
- (07) helmets cause neck injury
- (08) helmets can not be used, physical or religious reasons
- (09) do not own a helmet
- (10) forgot to bring helmet today
- (97) not applicable, rider always wears a helmet
- (98) other (*describe, 80 characters) _____
- (99) unknown

IF NO HELMET WAS WORN, go to IMPAIRMENT section.

49. Is your helmet properly adjusted? ____ A.5.3.1.12

- (1) no
- (2) yes
- (7) not applicable, no helmet
- (8) other (specify) _____
- (9) unknown

50. Is your helmet securely fastened? ____ A.5.3.1.13

- (1) no
- (2) yes
- (7) not applicable, no helmet
- (8) other (specify) _____
- (9) unknown

51. What type of helmet is it? ____ A.5.3.1.14

- (1) not a motorcycle helmet
- (2) half/police motor vehicle, motorcycle helmet
- (3) open face motor vehicle, motorcycle helmet
- (4) full face motor vehicle, motorcycle helmet

- (5) novelty helmet
- (7) not applicable, not helmet
- (8) other (specify)
- (9) unknown

52. What is the type of helmet coverage? ____ ____ A.5.3.1.15

- (11) partial coverage
- (12) full coverage
- (13) full facial, integral chin bar but no face shield
- (14) full facial, removable chin bar
- (15) full facial, retractable chin bar
- (16) full facial coverage, integral chin bar and face shield
- (17) wrap around face shield
- (18) bubble type face shield
- (19) visor/face shield combo
- (97) not applicable/no helmet
- (98) other (specify)
- (99) unknown

53. What is the predominant color of your helmet? ____ ____ A.5.3.1.16

- (01) no dominating color, multi-colored
- (02) white
- (03) yellow
- (04) black
- (05) red
- (06) blue
- (07) green
- (08) silver, grey
- (09) orange
- (10) brown, tan
- (11) purple
- (12) gold
- (13) chrome, metallic
- (97) not applicable/no helmet
- (98) other (specify) _____
- (99) unknown

54. What is the color of the face shield? ____ A.5.3.1.17

- (1) clear
- (2) green
- (3) grey, smoke
- (4) amber, yellow
- (5) blue
- (6) reflective (any color)
- (7) not applicable/no face shield
- (8) other (specify) _____
- (9) unknown

55. Do you own this helmet? ____ A.5.3.1.18

- (1) no
- (2) yes
- (7) not applicable, no helmet

- (8) other (specify) _____
- (9) unknown

56. How well does this helmet fit? _____ A.5.3.1.19

- (1) acceptable fit
- (2) too large, too loose
- (3) too small, too tight
- (7) not applicable/no helmet
- (8) other (specify) _____
- (9) unknown

57. What percentage of time do you wear your helmet when riding? _____ %

- Code from 001-100 percent A.5.3.1.20
- (997) not applicable/no helmet
- (999) unknown

58. Under what conditions do you usually wear your helmet? _____ A.5.3.1.21.1

- (code up to four; input "7" for remaining responses) _____ A.5.3.1.21.2
- (1) never uses helmet _____ A.5.3.1.21.3
- (2) long trips _____ A.5.3.1.21.4
- (3) highway traffic
- (4) in adverse weather
- (5) never in hot weather
- (6) always
- (7) not applicable/no helmet
- (8) other (specify) _____
- (9) unknown

IMPAIRMENT

59. Do you have any of the following permanent physical conditions? _____ A.5.1.1.39.1

- (Code up to three; input "01" in remaining responses) _____ A.5.1.1.39.2
- (01) no _____ A.5.1.1.39.3
- (02) vision reduction or loss
- (03) hearing reduction or loss
- (04) respiratory, cardiovascular condition
- (05) paraplegia
- (06) amputee
- (07) neurological, epilepsy, stroke
- (08) endocrine system, diabetes, digestive system
- (09) infirmity, arthritis, senility
- (98) other (specify) _____
- (99) unknown

60. Are you experiencing any of the following? _____ A.5.1.1.40.1

- (Code up to three; input "01" in remaining responses) _____ A.5.1.1.40.2
- (01) no _____ A.5.1.1.40.3
- (02) fatigue
- (03) hunger
- (04) thirst
- (05) elimination urgency
- (06) muscle spasm, cramp, itch

- (07) headache, minor malaise, fever
- (08) siesta syndrome (tired in afternoon)
- (98) other (specify) _____
- (99) unknown

61. Are you concerned about any of the following issues today?

- (Code up to three; input "01" in remaining responses) _____ A.5.1.1.41.1
- (01) no problems _____ A.5.1.1.41.2
 - (02) conflict with friends, relatives, divorce, separation _____ A.5.1.1.41.3
 - (03) work related problems
 - (04) financial distress
 - (05) school problems
 - (06) legal, police problems
 - (07) reward stress
 - (08) traffic conflict, road rage
 - (09) death of family, friend
 - (98) other (specify) _____
 - (99) unknown

62. How many hours of sleep did you have in the past 24 hours? _____

- (00) no sleep
- (01-24) number of hours slept
- (98) other (specify) _____
- (99) unknown

63. Did you drink any alcohol or take any drugs or medications today? _____

- (1) no A.5.1.1.32
- (2) alcohol use, only
- (3) drug/medication use, only
- (4) combined alcohol and drug/medication use
- (8) other, _____
- (9) unknown

64. Type of drugs other than alcohol? _____ A.5.1.1.37

- (1) no drugs other than alcohol
- (2) stimulant
- (3) depressant
- (4) drugs taken, type unknown
- (5) multiple drugs taken
- (7) not applicable, no drugs or alcohol
- (8) other (specify) _____
- (9) unknown

65. Source of drugs other than alcohol? _____ A.5.1.1.38

- (1) no drugs other than alcohol
- (2) prescription
- (3) non-prescription, over the counter
- (4) illegal
- (7) not applicable, no drugs or alcohol
- (9) unknown