**2021 Fatality Analysis Reporting System**

**CRASH LEVEL**

This collection of information is voluntary and will be used for informative purposes only so that we may develop and evaluate programs designed to reduce the number of motor vehicle-related injuries and deaths. We will not collect any personal information that would allow anyone to identify you. A federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a current valid OMB Control Number. The OMB Control Number for this information collection is 2127-0006. Public reporting for this collection of information is estimated to be approximately 3 hours per response, including the time for reviewing instructions, completing and reviewing the collection of information. All responses to this collection of information are voluntary. 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, National Highway Traffic Safety Administration, W51-316, 1200 New Jersey Ave, S.E., Washington, DC, 20590

**State Number Consecutive Number \*\*Number of Forms Submitted for Persons Not in Motor Vehicles \*\*Number of Vehicle Submitted**

**\*\*Number of Motor Vehicle Occupant Forms Submitted State Case #**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Crash Date  / / 2021 | | | Crash Time  : | | |
| County | | | City | | |
| Relation To Junction: Within Interchange Area | | | Relation To Junction: Specific Location | | |
|  |  |  |  |  |  |
| 0 - No | | | 01 - Non-Junction | | |
| 1 - Yes | | | 02 - Intersection | | |
| 8 - Not Reported | | | 03 - Intersection-Related | | |
| 9 - Reported as Unknown | | | 04 - Driveway Access | | |
|  | | | 05 - Entrance/Exit Ramp Related | | |
| 06 - Railway Grade Crossing | | |
| 07 - Crossover-Related | | |
| 08 - Driveway Access Related | | |
| 16 - Shared-Use Path Crossing | | |
| 17 - Acceleration/Deceleration Lane | | |
| 18 - Through Roadway | | |
| 19 - Other location within interchange area | | |
| 20 - Entrance/Exit Ramp | | |
| 98 - Not Reported | | |
| 99 - Reported as Unknown | | |
|  | | |
| Type of Intersection | | | Relation to Trafficway | | |
|  |  |  |  |  |  |
| 01 - Not an Intersection | | | 01 - On Roadway | | |
| 02 - Four-Way Intersection | | | 02 - On Shoulder | | |
| 03 - T-Intersection | | | 03 - On Median | | |
| 04 - Y-Intersection | | | 04 - On Roadside | | |
| 05 - Traffic Circle | | | 05 - Outside Trafficway | | |
| 06 - Roundabout | | | 06 - Off Roadway-Location Unknown | | |
| 07 - Five Point, or More | | | 07 - In Parking Lane/Zone | | |
| 10 - L-Intersection | | | 08 - Gore | | |
| 11 - Other Intersection Type | | | 10 - Separator | | |
| 98 - Not Reported | | | 11 - Continuous Left - Turn Lane | | |
| 99 - Reported as Unknown | | | 12 - Pedestrian Refuge Island or Traffic Island | | |
|  | | | 98 - Not Reported | | |
| 99 - Reported as Unknown | | |
|  | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Work Zone | | | Light Condition | | |
|  |  |  |  |  |  |
| 0 - None | | | 1 - Daylight | | |
| 1 - Construction | | | 2 - Dark - Not Lighted | | |
| 2 - Maintenance | | | 3 - Dark - Lighted | | |
| 3 - Utility | | | 4 - Dawn | | |
| 4 - Work Zone, Type Unknown | | | 5 - Dusk | | |
|  | | | 6 - Dark - Unknown Lighting | | |
| 7 - Other | | |
| 8 - Not Reported | | |
| 9 - Reported as Unknown | | |
|  | | |
| Atmospheric Conditions | | |  | | |
| 01 - Clear | | |
| 02 - Rain | | |
| 03 - Sleet or Hail | | |
| 04 - Snow | | |
| 05 - Fog, Smog, Smoke | | |
| 06 - Severe Crosswinds | | |
| 07 - Blowing Sand, Soil, Dirt | | |
| 08 - Other | | |
| 10 - Cloudy | | |
| 11 - Blowing Snow | | |
| 12 - Freezing Rain or Drizzle | | |
| 98 - Not Reported | | |
| 99 - Reported as Unknown | | |
|  | | |

# **TRAFFICWAY - CRASH LEVEL**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Trafficway Identifier (1) | | | Trafficway Identifier (2) | | |
| Route Signing | | | Land Use | | |
|  |  |  |  |  |  |
| 1 - Interstate | | | 1 - Rural | | |
| 2 - U.S. Highway | | | 2 - Urban | | |
| 3 - State Highway | | | 6 - Trafficway Not in State Inventory | | |
| 4 - County Road | | | 8 - Not Reported | | |
| 5 - Local Street - Township | | | 9 - Unknown | | |
| 6 - Local Street - Municipality | | |  | | |
| 7 - Local Street - Frontage Road | | |
| 8 - Other | | |
| 9 - Unknown | | |
|  | | |
| Functional System | | | Ownership | | |
|  |  |  |  |  |  |
| 01 - Interstate | | | 01 - State Highway Agency | | |
| 02 - Principal Arterial - Other Freeways and Expressways | | | 02 - County Highway Agency | | |
| 03 - Principal Arterial - Other | | | 03 - Town or Township Highway Agency | | |
| 04 - Minor Arterial | | | 04 - City or Municipal Highway Agency | | |
| 05 - Major Collector | | | 11 - State Park, Forest, or Reservation Agency | | |
| 06 - Minor Collector | | | 12 - Local Park, Forest or Reservation Agency | | |
| 07 - Local | | | 21 - Other State Agency | | |
| 96 - Trafficway Not in State Inventory | | | 25 - Other Local Agency | | |
| 98 - Not Reported | | | 26 - Private (other than Railroad) | | |
| 99 - Unknown | | | 27 - Railroad | | |
|  | | | 31 - State Toll Road | | |
| 32 - Local Toll Authority | | |
| 40 - Other Public Instrumentality (i.e., Airport) | | |
| 50 - Indian Tribe Nation | | |
| 60 - Other Federal Agency | | |
| 62 - Bureau of Indian Affairs | | |
| 63 - Bureau of Fish and Wildlife | | |
| 64 - U.S. Forest Service | | |
| 66 - National Park Service | | |
| 67 - Tennessee Valley Authority | | |
| 68 - Bureau of Land Management | | |
| 69 - Bureau of Reclamation | | |
| 70 - Corps of Engineers | | |
| 72 - Air Force | | |
| 74 - Navy/Marines | | |
| 80 - Army | | |
| 96 - Trafficway Not in State Inventory | | |
| 98 - Not Reported | | |
| 99 - Unknown | | |
|  | | |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| National Highway System | | | | | Special Jurisdiction | | | | |
|  |  | | |  |  |  | | |  |
| 0 - This section IS NOT on the NHS | | | | | 0 - No Special Jurisdiction | | | | |
| 1 - This section IS ON the NHS | | | | | 1 - National Park Service | | | | |
| 9 - Unknown if this section is on the NHS | | | | | 2 - Military | | | | |
|  | | | | | 3 - Indian Reservation | | | | |
| 4 - College/University Campus\* | | | | |
| 5 - Other Federal Properties\* | | | | |
| 8 - Other | | | | |
| 9 - Unknown | | | | |
|  | | | | |
|  | Mile Point | . | Global Position  Latitude: Longitude: | |  | Deg | Min | Sec |  |

**OTHER - CRASH LEVEL**

|  |  |
| --- | --- |
| School Bus Related | Rail Grade Crossing Identifier |
| Notification Time EMS  : | Arrival Time EMS  : |
| EMS Time at Hospital  : | Crash Related Factors |
| Additional State Information (1) | Additional State Information (2) |

**2021 Fatality Analysis Reporting System CRASH LEVEL - CRASH EVENTS**

Click here to open Clock Point Diagrams

First Harmful Event

Manner of Collision of the First Harmful Event

Vehicle No. (This)

Area of Impact (AOI) (This)

Sequence Of Events (SOE)

Vehicle No. (Other)

Area of Impact (AOI) (Other)

**2021 Fatality Analysis Reporting System PERSON LEVEL (NOT A MV OCCUPANT)**

**State Number Consecutive Number \*\*Person Number**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Vehicle Number of Motor Vehicle Striking Non-Motorist | | | | | Age | |
| Sex | | | Person Type | | | |
|  |  |  |  |  | |  |
| 1 - Male | | | 04 - Occupant of a Non-Motor Vehicle Transport Device | | | |
| 2 - Female | | | 05 - Pedestrian | | | |
| 8 - Not Reported | | | 06 - Bicyclist | | | |
| 9 - Reported as Unknown | | | 07 - Other Cyclist | | | |
|  | | | 10 - Persons In/On Buildings | | | |
| 11 - Person on Motorized Personal Conveyance | | | |
| 12 - Person on Non-Motorized Personal Conveyance | | | |
| 13 - Person on Personal Conveyance, Unknown if Motorized or Non-  Motorized | | | |
| 19 - Unknown Type of Non-Motorist | | | |
|  | | | |
|  |  |  |  |  | |  |
|  | | |  | | | |
| Injury Severity | | | Transported to First Medical Facility By | | | |
|  |  |  |  |  | |  |
| 0 - No Apparent Injury (O) | | | 0 - Not Transported for Treatment | | | |
| 1 - Possible Injury (C) | | | 1 - EMS Air | | | |
| 2 - Suspected Minor Injury (B) | | | 2 - Law Enforcement | | | |
| 3 - Suspected Serious Injury (A) | | | 3 - EMS Unknown Mode | | | |
| 4 - Fatal Injury (K) | | | 4 - Transported Unknown Source | | | |
| 5 - Injured, Severity Unknown | | | 5 - EMS Ground | | | |
| 6 - Died Prior to Crash\* | | | 6 - Other | | | |
| 9 - Unknown/Not Reported | | | 8 - Not Reported | | | |
|  | | | 9 - Reported as Unknown | | | |
|  | | | |
| Non-Motorist Related Factors | | | Conditions at Time of Crash | | | |
| 00 - None/Apparently Normal | | | |
| 01 - Ill, Blackout | | | |
| 02 - Asleep or Fatigued | | | |
| 03 - Walking with a Cane or Crutches, etc. | | | |
| 04 - Paraplegic or in a Wheelchair | | | |
| 05 - Impaired Due to Previous Injury | | | |
| 06 - Deaf/Hard of Hearing | | | |
| 07 - Blind/Low Vision | | | |
| 08 - Emotional (depressed, angry, disturbed, etc.) | | | |
| 09 - Under the Influence of Alcohol, Drugs or Medication | | | |
| 10 - Physical Impairment - No Details | | | |
| 96 - Other Physical Impairment | | | |
| 98 - Not Reported | | | |
| 99 - Reported as Unknown if Impaired | | | |
|  | | | |

**2021 Fatality Analysis Reporting System PERSON LEVEL (NOT A MV OCCUPANT - PEDESTRIAN)**

Motorist Initial Direction of Travel

Motorist Maneuver

**State Number Consecutive Number \*\*Vehicle Number \*\*Person Number**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| School Zone | | |  | Marked Crosswalk | | |
|  |  |  |  |  |  |
| 0 - None Noted | | | 0 - None Noted | | |
| 1 - Yes | | | 1 - Yes | | |
| 9 - Unknown | | | 9 - Unknown | | |
|  | | |  | | |
| Sidewalk Presence | | | Crash Type Number | | | |
|  |  |  |
| 0 - None Noted | | |
| 1 - Yes | | |
| 9 - Unknown | | |
|  | | |
| Crash Group Number | | |  | Crash Location | | |
|  |  |  |  |  |  |
| 100 - Unusual Circumstances | | | 1 - At Intersection | | |
| 200 - Backing Vehicle | | | 2 - Intersection-Related | | |
| 310 - Working or Playing in Roadway | | | 3 - Not At Intersection | | |
| 340 - Bus Stop-Related | | | 4 - Non-Trafficway Location | | |
| 350 - Unique Midblock | | | 9 - Unknown / Insufficient Information | | |
| 400 - Walking/Running Along Roadway | | |  | | |
| 460 - Driveway Access/Driveway Access Related | | |
| 500 - Waiting to Cross | | |
| 600 - Pedestrian in Roadway - Circumstances Unknown | | |
| 720 - Multiple Threat / Trapped | | |
| 740 - Dash – Run, No Visual Obstruction Noted / Dart-Out – Visual  Obstruction Noted | | |
| 750 - Crossing Roadway - Vehicle Not Turning | | |
| 790 - Crossing Roadway - Vehicle Turning | | |
| 800 - Non-Trafficway | | |
| 910 - Crossing Expressway | | |
| 990 - Other / Unknown - Insufficient Details | | |
|  | | |
| Pedestrian Position | | |  | Pedestrian Initial Direction of Travel | | |
|  |  |  |  |  |  |
| 1 - Intersection Area | | | 1 - Northbound | | |
| 2 - Crosswalk Area | | | 2 - Eastbound | | |
| 3 - Travel Lane | | | 3 - Southbound | | |
| 4 - Paved Shoulder / Bicycle Lane / Parking Lane | | | 4 - Westbound | | |
| 5 - Sidewalk / Shared-Use Path / Driveway Access | | | 9 - Not Derived/Unknown Initial Direction of Travel | | |
| 6 - Unpaved Right-of-Way | | |  | | |
| 7 - Non-Trafficway - Driveway | | |
| 8 - Non-Trafficway - Parking Lot/Other | | |
| 9 - Other/Unknown | | |
|  | | |

1 - Left Turn

1 - Northbound

2 - Right Turn

2 - Eastbound

3 - Straight through

3 - Southbound

9 - Unknown Motorist Maneuver

9 - Unknown Initial Direction of Travel

4 - Westbound

Leg Intersection Scenario

1 - Nearside

2 - Farside

9 - Unknown/None of the Above

Crash Type Expanded

**2021 Fatality Analysis Reporting System**

# **NON-MOTORIST ACTIONS (NOT A MV OCCUPANT)**

|  |  |
| --- | --- |
| NM. Location at Time of Crash | NM. Action/Circumstances |
| NM. Contributing Circumstances | NM. Distracted By |

Non-Motorist Safety Equipment

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Protective** | | | | | |
| Helmet | | | Pads | | |
|  |  |  |  |  |  |
| 1 - No | | | 1 - No | | |
| 2 - Yes | | | 2 - Yes | | |
| 8 - Not Reported | | | 8 - Not Reported | | |
| 9 - Reported as Unknown | | | 9 - Reported as Unknown | | |
|  | | |  | | |
| Other | | |  | | |
|  |  |  |
| 1 - No | | |
| 2 - Yes | | |
| 8 - Not Reported | | |
| 9 - Reported as Unknown | | |
|  | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Preventive** | | | | | |
| Clothing | | | Lighting | | |
|  |  |  |  |  |  |
| 1 - No | | | 1 - No | | |
| 2 - Yes | | | 2 - Yes | | |
| 8 - Not Reported | | | 8 - Not Reported | | |
| 9 - Reported as Unknown | | | 9 - Reported as Unknown | | |
|  | | |  | | |
| Other | | |  | | |
|  |  |  |
| 1 - No | | |
| 2 - Yes | | |
| 8 - Not Reported | | |
| 9 - Reported as Unknown | | |
|  | | |

**2021 Fatality Analysis Reporting System ALCOHOL (NOT A MV OCCUPANT)**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Police-Reported Alcohol Involvement | | |  | Alcohol Test Status | | |
|  |  |  |  |  |  |
| 0 - No (Alcohol Not Involved) | | | 0 - Test Not Given | | |
| 1 - Yes (Alcohol Involved) | | | 2 - Test Given | | |
| 8 - Not Reported | | | 8 - Not Reported | | |
| 9 - Reported as Unknown | | | 9 - Reported as Unknown if Tested | | |
|  | | |  | | |
| Alcohol Test Type | | | Alcohol Test Result | | | |
|  |  |  |
| 00 - Test Not Given | | |
| 01 - Blood | | |
| 02 - Breath Test (AC) | | |
| 03 - Urine | | |
| 04 - Vitreous | | |
| 05 - Blood Plasma/Serum | | |
| 06 - Blood Clot | | |
| 07 - Liver | | |
| 08 - Other Test Type | | |
| 10 - Preliminary Breath Test (PBT) | | |
| 11 - Breath Test, Unknown Type | | |
| 95 - Not Reported | | |
| 98 - Unknown Test Type | | |
| 99 - Reported as Unknown if Tested | | |
|  | | |

# **DRUG (NOT A MV OCCUPANT)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Police Reported Drug Involvement | | | | Method of Drug Determination by Police | |
| Drug Test Status | | | |  | |
| Drug Toxicology Results  Drug Specimen Drug Test Results | | | | | |
|  |  |  |  | |  |

**2021 Fatality Analysis Reporting System RACE (NOT A MV OCCUPANT)**

Race

Hispanic Origin

# **SUPPLEMENTAL (NOT A MV OCCUPANT)**

|  |  |  |  |
| --- | --- | --- | --- |
| Died at Scene/En Route | | | Death Date  / / |
|  |  |  |
| 0 - Not Applicable | | |
| 7 - Died at Scene | | |
| 8 - Died En Route | | |
| 9 - Unknown | | |
|  | | |
| Death Time  : | | |  |

**2021 Fatality Analysis Reporting System PERSON LEVEL (NOT A MV OCCUPANT)**

**State Number Consecutive Number \*\*Person Number**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Vehicle Number of Motor Vehicle Striking Non-Motorist | | | | | Age | |
| Sex | | | Person Type | | | |
|  |  |  |  |  | |  |
| 1 - Male | | | 04 - Occupant of a Non-Motor Vehicle Transport Device | | | |
| 2 - Female | | | 05 - Pedestrian | | | |
| 8 - Not Reported | | | 06 - Bicyclist | | | |
| 9 - Reported as Unknown | | | 07 - Other Cyclist | | | |
|  | | | 10 - Persons In/On Buildings | | | |
| 11 - Person on Motorized Personal Conveyance | | | |
| 12 - Person on Non-Motorized Personal Conveyance | | | |
| 13 - Person on Personal Conveyance, Unknown if Motorized or Non-  Motorized | | | |
| 19 - Unknown Type of Non-Motorist | | | |
|  | | | |
|  |  |  |  |  | |  |
|  | | |  | | | |
| Injury Severity | | | Transported to First Medical Facility By | | | |
|  |  |  |  |  | |  |
| 0 - No Apparent Injury (O) | | | 0 - Not Transported for Treatment | | | |
| 1 - Possible Injury (C) | | | 1 - EMS Air | | | |
| 2 - Suspected Minor Injury (B) | | | 2 - Law Enforcement | | | |
| 3 - Suspected Serious Injury (A) | | | 3 - EMS Unknown Mode | | | |
| 4 - Fatal Injury (K) | | | 4 - Transported Unknown Source | | | |
| 5 - Injured, Severity Unknown | | | 5 - EMS Ground | | | |
| 6 - Died Prior to Crash\* | | | 6 - Other | | | |
| 9 - Unknown/Not Reported | | | 8 - Not Reported | | | |
|  | | | 9 - Reported as Unknown | | | |
|  | | | |
| Non-Motorist Related Factors | | | Conditions at Time of Crash | | | |
| 00 - None/Apparently Normal | | | |
| 01 - Ill, Blackout | | | |
| 02 - Asleep or Fatigued | | | |
| 03 - Walking with a Cane or Crutches, etc. | | | |
| 04 - Paraplegic or in a Wheelchair | | | |
| 05 - Impaired Due to Previous Injury | | | |
| 06 - Deaf/Hard of Hearing | | | |
| 07 - Blind/Low Vision | | | |
| 08 - Emotional (depressed, angry, disturbed, etc.) | | | |
| 09 - Under the Influence of Alcohol, Drugs or Medication | | | |
| 10 - Physical Impairment - No Details | | | |
| 96 - Other Physical Impairment | | | |
| 98 - Not Reported | | | |
| 99 - Reported as Unknown if Impaired | | | |
|  | | | |

**2021 Fatality Analysis Reporting System PERSON LEVEL (NOT A MV OCCUPANT - BIKE)**

**State Number Consecutive Number \*\*Vehicle Number \*\*Person Number**

School Zone

Marked Crosswalk

0 - None Noted

1 - Yes

9 - Unknown Sidewalk Presence

0 - None Noted

1 - Yes

9 - Unknown

0 - None Noted

1 - Yes

9 - Unknown

Crash Type Number

Crash Group Number

Crash Location

110 - Loss of Control / Turning Error

140 - Motorist Failed to Yield - Sign-Controlled Intersection 145 - Bicyclist Failed to Yield - Sign-Controlled Intersection 150 - Motorist Failed to Yield - Signalized Intersection

158 - Bicyclist Failed to Yield - Signalized Intersection 190 - Crossing Paths - Other Circumstances

210 - Motorist Left Turn / Merge 215 - Motorist Right Turn / Merge

219 - Parking / Bus-Related

220 - Bicyclist Left Turn / Merge 225 - Bicyclist Right Turn / Merge 230 - Motorist Overtaking Bicyclist 240 - Bicyclist Overtaking Motorist 258 - Wrong-Way / Wrong-Side

290 - Parallel Paths - Other Circumstances 310 - Bicyclist Failed to Yield - Midblock 320 - Motorist Failed to Yield - Midblock 600 - Backing Vehicle

850 - Other / Unusual Circumstances 910 - Non-Trafficway

990 - Other / Unknown - Insufficient Details Bicyclist Position

1 - At Intersection

2 - Intersection-Related

3 - Not At Intersection

4 - Non-Trafficway Location

9 - Unknown / Insufficient Information

Bicyclist Direction

1. - Travel Lane
2. - Bicycle Lane / Paved Shoulder / Parking Lane
3. - Sidewalk / Crosswalk / Driveway Access
4. - Shared-Use Path
5. - Non-Trafficway - Driveway
6. - Non-Trafficway - Parking Lot/Other
7. - Other
8. - Unknown

Crash Type Expanded

1. - With Traffic
2. - Facing Traffic

3 - Not applicable

9 - Unknown

**2021 Fatality Analysis Reporting System**

# **NON-MOTORIST ACTIONS (NOT A MV OCCUPANT)**

|  |  |
| --- | --- |
| NM. Location at Time of Crash | NM. Action/Circumstances |
| NM. Contributing Circumstances | NM. Distracted By |

Non-Motorist Safety Equipment

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Protective** | | | | | |
| Helmet | | | Pads | | |
|  |  |  |  |  |  |
| 1 - No | | | 1 - No | | |
| 2 - Yes | | | 2 - Yes | | |
| 8 - Not Reported | | | 8 - Not Reported | | |
| 9 - Reported as Unknown | | | 9 - Reported as Unknown | | |
|  | | |  | | |
| Other | | |  | | |
|  |  |  |
| 1 - No | | |
| 2 - Yes | | |
| 8 - Not Reported | | |
| 9 - Reported as Unknown | | |
|  | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Preventive** | | | | | |
| Clothing | | | Lighting | | |
|  |  |  |  |  |  |
| 1 - No | | | 1 - No | | |
| 2 - Yes | | | 2 - Yes | | |
| 8 - Not Reported | | | 8 - Not Reported | | |
| 9 - Reported as Unknown | | | 9 - Reported as Unknown | | |
|  | | |  | | |
| Other | | |  | | |
|  |  |  |
| 1 - No | | |
| 2 - Yes | | |
| 8 - Not Reported | | |
| 9 - Reported as Unknown | | |
|  | | |

**2021 Fatality Analysis Reporting System ALCOHOL (NOT A MV OCCUPANT)**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Police-Reported Alcohol Involvement | | |  | Alcohol Test Status | | |
|  |  |  |  |  |  |
| 0 - No (Alcohol Not Involved) | | | 0 - Test Not Given | | |
| 1 - Yes (Alcohol Involved) | | | 2 - Test Given | | |
| 8 - Not Reported | | | 8 - Not Reported | | |
| 9 - Reported as Unknown | | | 9 - Reported as Unknown if Tested | | |
|  | | |  | | |
| Alcohol Test Type | | | Alcohol Test Result | | | |
|  |  |  |
| 00 - Test Not Given | | |
| 01 - Blood | | |
| 02 - Breath Test (AC) | | |
| 03 - Urine | | |
| 04 - Vitreous | | |
| 05 - Blood Plasma/Serum | | |
| 06 - Blood Clot | | |
| 07 - Liver | | |
| 08 - Other Test Type | | |
| 10 - Preliminary Breath Test (PBT) | | |
| 11 - Breath Test, Unknown Type | | |
| 95 - Not Reported | | |
| 98 - Unknown Test Type | | |
| 99 - Reported as Unknown if Tested | | |
|  | | |

# **DRUG (NOT A MV OCCUPANT)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Police Reported Drug Involvement | | | | Method of Drug Determination by Police | |
| Drug Test Status | | | |  | |
| Drug Toxicology Results  Drug Specimen Drug Test Results | | | | | |
|  |  |  |  | |  |

**2021 Fatality Analysis Reporting System RACE (NOT A MV OCCUPANT)**

Race

Hispanic Origin

# **SUPPLEMENTAL (NOT A MV OCCUPANT)**

|  |  |  |  |
| --- | --- | --- | --- |
| Died at Scene/En Route | | | Death Date  / / |
|  |  |  |
| 0 - Not Applicable | | |
| 7 - Died at Scene | | |
| 8 - Died En Route | | |
| 9 - Unknown | | |
|  | | |
| Death Time  : | | |  |

**2021 Fatality Analysis Reporting System VEHICLE LEVEL # 1**

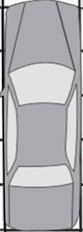
**State Number Consecutive Number \*\*Vehicle Number \*\*Number Of Occupants**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Number of Occupants | | |  | Unit Type | | |
|  |  |  |
| 1 - Motor Vehicle In-Transport (Inside or Outside the Trafficway) | | |
| 2 - Motor Vehicle Not In-Transport Within the Trafficway | | |
| 3 - Motor Vehicle Not In-Transport Outside the Trafficway | | |
| 4 - Working Motor Vehicle (Highway Construction, Maintenance,  Utility only) | | |
|  | | |
| Hit and Run | | | Registration State | | | |
|  |  |  |
| 0 - No | | |
| 1 - Yes | | |
|  | | |
| Registered Vehicle Owner | | | Travel Speed | | | |
|  |  |  |
| 0 - Not Applicable, Vehicle Not Registered | | |
| 1 - Driver (in this crash) was Registered Owner | | |
| 2 - Driver (in this crash) Not Registered Owner (Other Private Owner  Listed) | | |
| 3 - Vehicle Registered as Commercial/Business/Company/Government  Vehicle | | |
| 4 - Vehicle Registered as Rental Vehicle | | |
| 5 - Vehicle was Stolen (reported by police) | | |
| 6 - Driverless/Motor Vehicle Parked/Stopped Off Roadway | | |
| 9 - Unknown | | |
|  | | |
| Vehicle Underride/Override | | |  | Rollover | | |
|  |  |  |  |  |  |
| 0 - No Underride or Override | | | 0 - No Rollover | | |
| 1 - Underride | | | 1 - Rollover, Tripped by Object/Vehicle | | |
| 2 - Override | | | 2 - Rollover, Untripped | | |
| 7 - Not Applicable | | | 9 - Rollover, Unknown Type | | |
| 8 - Not Reported | | |  | | |
| 9 - Reported as Unknown | | |
|  | | |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Location of Rollover | | |  | Areas of Impact-Initial | | |
|  |  |  |  |  |  |
| 0 - No Rollover | | | 00 - Non-Collision | | |
| 1 - On Roadway | | | 01 - 1 Clock Point | | |
| 2 - On Shoulder | | | 02 - 2 Clock Point | | |
| 3 - On Median/Separator | | | 03 - 3 Clock Point | | |
| 4 - In Gore | | | 04 - 4 Clock Point | | |
| 5 - On Roadside | | | 05 - 5 Clock Point | | |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 6 - Outside of Trafficway | | |  | 06 - 6 Clock Point | | |
| 7 - In Parking Lane/Zone | | | 07 - 7 Clock Point | | |
| 9 - Unknown | | | 08 - 8 Clock Point | | |
|  | | | 09 - 9 Clock Point | | |
| 10 - 10 Clock Point | | |
| 11 - 11 Clock Point | | |
| 12 - 12 Clock Point | | |
| 13 - Top | | |
| 14 - Undercarriage | | |
| 18 - Cargo/Vehicle Parts Set-In-Motion | | |
| 19 - Other Objects or Person Set-In-Motion | | |
| 20 - Object Set in Motion, Unknown if Cargo/Vehicle Parts or Other | | |
| 61 - Left | | |
| 62 - Left-Front Side | | |
| 63 - Left-Back Side | | |
| 81 - Right | | |
| 82 - Right-Front Side | | |
| 83 - Right-Back Side | | |
| 98 - Not Reported | | |
| 99 - Reported as Unknown | | |
|  | | |
| Extent of Damage | | |  | Vehicle Removal | | |
|  |  |  |  |  |  |
| 0 - No Damage | | | 2 - Towed Due to Disabling Damage | | |
| 2 - Minor Damage | | | 3 - Towed But Not Due to Disabling Damage | | |
| 4 - Functional Damage | | | 5 - Not Towed | | |
| 6 - Disabling Damage | | | 7 - Towed, Unknown Reason | | |
| 8 - Not Reported | | | 8 - Not Reported | | |
| 9 - Reported as Unknown | | | 9 - Reported as Unknown | | |
|  | | |  | | |
| Vehicle Sequence of Events | | | Most Harmful Event | | | |

**DAMAGED AREAS FOR VEHICLE# 1**



01-1 Clock Value

02-2 Clock Value

03-3 Clock Value

04-4 Clock Value

05-5 Clock Value

06-6 Clock Value

07-7 Clock Value

08-8 Clock Value

09-9 Clock Value

10-10 Clock Value

11-11 Clock Value

12-12 Clock Value 13-Top

14-Undercarriage 15-No Damage

99-Damage Areas Unknown

**Left**

**12**

**Top**

**13**

**11**

**1**

**10**

**2**

**9**

**3**

**8**

**4**

**7**

**5**

**14**

**Under**

**6**

**Right**

**Damaged Areas**

**VIN INFORMATION FOR VEHICLE# 1**

|  |  |
| --- | --- |
| Vehicle Model Year | VIN  00000000000000000 - No VIN Required, Not a Vehicle for Road Use 88888888888888888 - Not Reported  99999999999999999 - Reported as Unknown |
| vPIC Make | vPIC Model |
| vPIC Body Class | NCSA Make |
| NCSA Model | NCSA Body Type |
| Power Unit GVWR From | Power Unit GVWR To |
| Automation System(s) in Vehicle  Highest Automation System Level Present in Vehicle  Highest Automation System Level Engaged at Time of Crash |  |

**DETAILS FOR VEHICLE# 1**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Motor Carrier ID Issuing Authority  Motor Carrier Identification Number | | | |  | | Vehicle Configuration | | | |
|  | |  |  |
| 00 - Not Applicable | | | |
| 01 - Single-Unit Truck (2- axle and GVWR more than 10,000 lbs) | | | |
| 02 - Single-Unit Truck (3 or more axles) | | | |
| 04 - Truck Pulling Trailer(s) | | | |
| 05 - Truck Tractor (Bobtail) | | | |
| 06 - Truck Tractor/Semi-Trailer | | | |
| 07 - Truck Tractor/Double | | | |
| 08 - Truck Tractor/Triple | | | |
| 10 - Vehicle 10,000 pounds or less placarded for hazardous materials | | | |
| 19 - Vehicle More Than 10,000 lbs., Other | | | |
| 20 - Bus/Large Van (seats for 9-15 occupants, including driver) | | | |
| 21 - Bus (seats for more than 15 occupants, including driver) | | | |
| 88 - Qualifying Vehicle, Unknown Configuration | | | |
| 99 - Unknown | | | |
|  | | | |
|  | Cargo Body Type | | |  | HM1: Hazardous Material Involvement | | | | |
|  |  |  |  | |  | |  |
| 00 - Not Applicable (N/A) | | | 1 - No | | | | |
| 01 - Van/Enclosed Box | | | 2 - Yes | | | | |
| 02 - Cargo Tank | | | HM2: Placard | | | | |
| 03 - Flatbed | | |
|  | |  | |  |
| 04 - Dump | | |
| 05 - Concrete Mixer | | | 0 - Not Applicable | | | | |
| 06 - Auto Transporter | | | 1 - No | | | | |
| 07 - Garbage/Refuse | | | 2 - Yes | | | | |
| 08 - Grain/ Chips/ Gravel | | | 8 - Not Reported | | | | |
| 09 - Pole-Trailer | | | HM3: Hazardous Material ID Number | | | | |
| 10 - Log | | |
|  | |  | |  |
| 11 - Intermodal Container Chassis | | |
| 0000 - Not Applicable | | | | |
| 12 - Vehicle Towing Another Motor Vehicle | | |
| 8888 - Not Reported | | | | |
| 22 - Bus | | |
| HM4: Hazardous Material Class Number | | | | |
| 96 - No Cargo Body Type | | |
| 97 - Other | | |  | |  | |  |
| 98 - Unknown Cargo Body Type | | |
| 00 - Not Applicable | | | | |
| 99 - Unknown | | |
| 01 - 01 | | | | |
|  | | |
| 02 - 02 | | | | |
| 03 - 03 | | | | |
| 04 - 04 | | | | |
| 05 - 05 | | | | |
| 06 - 06 | | | | |
| 07 - 07 | | | | |
| 08 - 08 | | | | |
| 09 - 09 | | | | |
| 88 - Not Reported | | | | |
| HM5: Release of Hazardous Material from the Cargo Compartment | | | | |
|  | |  | |  |
| 0 - Not Applicable | | | | |
| 1 - No | | | | |
| 2 - Yes | | | | |
| 8 - Not Reported | | | | |
|  | | | | |

**OTHER INFORMATION FOR VEHICLE# 1**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Vehicle Trailing | | |  | Jackknife | | |
|  |  |  |  |  |  |
| 0 - No Trailing Units | | | 0 - Not an Articulated Vehicle | | |
| 1 - One Trailing Unit | | | 1 - No | | |
| 2 - Two Trailing Units | | | 2 - Yes - First Event | | |
| 3 - Three or More Trailing Units | | | 3 - Yes - Subsequent Event | | |
| 4 - Yes, Number of Trailing Units Unknown | | |  | | |
| 5 - Vehicle Towing Another Motor Vehicle - Fixed Linkage | | |
| 6 - Vehicle Towing Another Motor Vehicle - Non-Fixed Linkage | | |
| 9 - Unknown | | |
|  | | |
| Bus Use | | |  | Special Use | | |
|  |  |  |  |  |  |
| 00 - Not a Bus | | | 00 - No Special Use Noted | | |
| 01 - School | | | 01 - Taxi | | |
| 04 - Intercity | | | 02 - Vehicle Used for School Transport | | |
| 05 - Charter/Tour | | | 03 - Vehicle Used as Other Bus | | |
| 06 - Transit/ Commuter | | | 04 - Military | | |
| 07 - Shuttle | | | 05 - Police | | |
| 08 - Modified for Personal/Private Use | | | 06 - Ambulance | | |
| 98 - Not Reported | | | 07 - Fire Truck | | |
| 99 - Reported as Unknown | | | 08 - Non-Transport Emergency Services Vehicle | | |
|  | | | 10 - Safety Service Patrols – Incident Response | | |
| 11 - Other Incident Response | | |
| 12 - Towing – Incident Response | | |
| 19 - Motor Vehicle Used for Vehicle Sharing Mobility | | |
| 20 - Motor Vehicle Used for Electronic Ride-hailing | | |
| 21 - Mail Carrier | | |
| 22 - Public Utility | | |
| 23 - Rental Truck over 10,000 lbs. | | |
| 24 - Truck Operating with Crash Attenuator Equipment | | |
| 99 - Reported as Unknown | | |
|  | | |
| Emergency Motor Vehicle Use | | | Vehicle Related Factors | | | |
|  |  |  |
| 0 - Not Applicable | | |
| 2 - Non-Emergency, Non-Transport | | |
| 3 - Non-Emergency Transport | | |
| 4 - Emergency Operation, Emergency Warning Equipment Not in Use | | |
| 5 - Emergency Operation, Emergency Warning Equipment in Use | | |
| 6 - Emergency Operation, Emergency Warning Equipment in Use  Unknown | | |
| 8 - Not Reported | | |
| 9 - Reported as Unknown | | |
|  | | |
| Fire Occurrence | | | | | | |
|  |  | | | | |  |
| 0 - No or Not Reported | | | | | | |
| 1 - Yes | | | | | | |
|  | | | | | | |

**TRAILER INFORMATION FOR VEHICLE# 1**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Trailer VIN (1) | | |  | vPIC Make  vPIC Body Class  vPIC Trailer Body Type vPIC Model  vPIC Model Year |
|  |  |  |
| 00000000000000000 - No VIN Required, Not a Vehicle for Road Use | | |
| 77777777777777777 - No Trailing Units | | |
| 88888888888888888 - Not Reported | | |
| 99999999999999999 - Reported as Unknown | | |
| Trailer GVWR | | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Trailer VIN (2) | | |  | vPIC Make  vPIC Body Class vPIC Body Type vPIC Model vPIC Year |
|  |  |  |
| 00000000000000000 - No VIN Required, Not a Vehicle for Road Use | | |
| 77777777777777777 - No Trailing Units | | |
| 88888888888888888 - Not Reported | | |
| 99999999999999999 - Reported as Unknown | | |
| Trailer GVWR | | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Trailer VIN (3) | | |  | vPIC Make  vPIC Body Class  vPIC Trailer Body Type vPIC Model  vPIC Year |
|  |  |  |
| 00000000000000000 - No VIN Required, Not a Vehicle for Road Use | | |
| 77777777777777777 - No Trailing Units | | |
| 88888888888888888 - Not Reported | | |
| 99999999999999999 - Reported as Unknown | | |
| Trailer GVWR | | | | |

**2021 Fatality Analysis Reporting System PRECRASH LEVEL (VEHICLE/DRIVER) FOR VEHICLE# 1**

**State Number Consecutive Number \*\*Vehicle Number**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Contributing Circumstances, Motor Vehicle | | |  | Trafficway Description | | |
|  |  |  |
| 00 - None Noted | | | 0 - Non-Trafficway or Driveway Access | | |
| 1 - Two-Way, Not Divided | | |
| 01 - Tires | | |
| 2 - Two-Way, Divided, Unprotected Median | | |
| 02 - Brake System | | | 3 - Two-Way, Divided, Positive Median Barrier | | |
| 03 - Steering | | | 4 - One-Way Trafficway | | |
| 5 - Two-Way, Not Divided With a Continuous Left-Turn Lane | | |
| 04 - Suspension | | |
| 6 - Entrance/Exit Ramp | | |
| 05 - Power Train | | | 8 - Not Reported | | |
| 9 - Reported as Unknown | | |
| 06 - Exhaust System | | |
|  | | |
| 07 - Head Lights | | |
| 08 - Signal Lights | | |
| 09 - Other Lights | | |
| 10 - Wipers | | |
| 11 - Wheels | | |
| 12 - Mirrors | | |
| 13 - Windows/Windshield | | |
| 14 - Body, Doors | | |
| 15 - Truck Coupling/Trailer Hitch/Safety Chains | | |
| 16 - Safety Systems | | |
| 17 - Vehicle Contributing Factors - No Details | | |
| 97 - Other | | |
| 99 - Reported as Unknown | | |
|  | | |
| Total Lanes in Roadway | | | Speed Limit | | | |
|  |  |  |
| 0 - Non-Trafficway or Driveway Access | | |
| 1 - One lane | | |
| 2 - Two lanes | | |
| 3 - Three lanes | | |
| 4 - Four lanes | | |
| 5 - Five lanes | | |
| 6 - Six lanes | | |
| 7 - Seven or more lanes | | |
| 8 - Not Reported | | |
| 9 - Reported as Unknown | | |
|  | | |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Roadway Alignment | | |  | Roadway Grade | | |
|  |  |  |  |  |  |
| 0 - Non-Trafficway or Driveway Access | | | 0 - Non-Trafficway or Driveway Access | | |
| 1 - Straight | | | 1 - Level | | |
| 2 - Curve Right | | | 2 - Grade, Unknown Slope | | |
| 3 - Curve Left | | | 3 - Hillcrest | | |
| 4 - Curve - Unknown Direction | | | 4 - Sag (Bottom) | | |
| 8 - Not Reported | | | 5 - Uphill | | |
| 9 - Reported as Unknown | | | 6 - Downhill | | |
|  | | | 8 - Not Reported | | |
| 9 - Reported as Unknown | | |
|  | | |
| Roadway Surface Type | | |  | Roadway Surface Conditions | | |
|  |  |  |  |  |  |
| 0 - Non-Trafficway or Driveway Access | | | 00 - Non-Trafficway or Driveway Access | | |
| 1 - Concrete | | | 01 - Dry | | |
| 2 - Blacktop, Bituminous, or Asphalt | | | 02 - Wet | | |
| 3 - Brick or Block | | | 03 - Snow | | |
| 4 - Slag, Gravel or Stone | | | 04 - Ice/Frost | | |
| 5 - Dirt | | | 05 - Sand | | |
| 7 - Other | | | 06 - Water (Standing or Moving) | | |
| 8 - Not Reported | | | 07 - Oil | | |
| 9 - Reported as Unknown | | | 08 - Other | | |
|  | | | 10 - Slush | | |
| 11 - Mud, Dirt or Gravel | | |
| 98 - Not Reported | | |
| 99 - Reported as Unknown | | |
|  | | |
| Traffic Control Device | | |  | Device Functioning | | |
|  |  |  |  |  |  |
| 00 - No Controls | | | 0 - No Controls | | |
| 01 - Traffic control signal (on colors) without Pedestrian Signal | | | 1 - Device Not Functioning | | |
| 02 - Traffic control signal (on colors) with Pedestrian Signal | | | 2 - Device Functioning-Functioning Improperly | | |
| 03 - Traffic control signal(on colors) not known whether or not  Pedestrian Signal | | | 3 - Device Functioning Properly | | |
| 4 - Device Not Functioning or Device Functioning Improperly, Specifics  Unknown | | |
| 04 - Flashing Traffic Control Signal | | |
| 07 - Lane Use Control Signal | | | 8 - Not Reported | | |
| 08 - Other Highway Traffic Signal | | | 9 - Reported as Unknown | | |
| 09 - Unknown Highway Traffic Signal | | |  | | |
| 20 - Stop Sign | | |
| 21 - Yield Sign | | |
| 23 - School Zone Sign/Device | | |
| 28 - Other Regulatory Sign | | |
| 29 - Unknown Regulatory Sign | | |
| 40 - Warning Sign | | |
| 50 - Person | | |
| 65 - Railway Crossing Device | | |
| 97 - Not Reported | | |
| 98 - Other | | |
| 99 - Reported as Unknown | | |
|  | | |

|  |  |
| --- | --- |
| Driver's Vision Obscured By | Driver Maneuvered to Avoid |
| Driver Distracted By | Pre-Event Movement(Prior to Recognition of Critical Event) |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Critical Event-Precrash (Category) | | | Critical Event -Precrash (Event) | | | |
|  |  |  |
| 1 - This Vehicle Loss of Control Due To: | | |
| 2 - This Vehicle Traveling | | |
| 3 - Other Motor Vehicle in Lane | | |
| 4 - Other Motor Vehicle Encroaching into Lane | | |
| 5 - Pedestrian or Pedalcyclist or Other Non-Motorist | | |
| 6 - Object or Animal | | |
| 7 - Other | | |
| 9 - Unknown | | |
|  | | |
| Attempted Avoidance Maneuver | | |  | Pre-Impact Stability | | |
|  |  |  |  |  |  |
| 00 - No Driver Present / Unknown if Driver Present | | | 0 - No Driver Present / Unknown if Driver Present | | |
| 01 - No Avoidance Maneuver | | | 1 - Tracking | | |
| 05 - Releasing brakes | | | 2 - Skidding longitudinally rotation less than 30 degrees | | |
| 06 - Steering left | | | 3 - Skidding laterally clockwise rotation | | |
| 07 - Steering right | | | 4 - Skidding laterally counterclockwise rotation | | |
| 08 - Braking and steering left | | | 5 - Skidding Laterally, Rotation Direction Unknown | | |
| 09 - Braking and steering right | | | 7 - Other vehicle loss-of-control (specify:) | | |
| 10 - Accelerating | | | 9 - Precrash stability unknown | | |
| 11 - Accelerating and steering left | | |  | | |
| 12 - Accelerating and steering right | | |
| 15 - Braking and Unknown Steering Direction | | |
| 16 - Braking | | |
| 98 - Other actions (specify:) | | |
| 99 - Unknown/Not Reported | | |
|  | | |
| Pre-Impact Location | | | Crash Type | | | |
|  |  |  |
| 0 - No Driver Present / Unknown if Driver Present | | |
| 1 - Stayed in original travel lane | | |
| 2 - Stayed on roadway, but left original travel lane | | |
| 3 - Stayed on roadway, not known if left original travel lane | | |
| 4 - Departed roadway | | |
| 5 - Remained off roadway | | |
| 6 - Returned to roadway | | |
| 7 - Entered roadway | | |
| 9 - Unknown | | |
|  | | |

**2021 Fatality Analysis Reporting System DRIVER LEVEL FOR VEHICLE# 1**

**State Number Consecutive Number \*\*Vehicle Number**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Driver Presence | | | Drivers License State | |
|  |  |  |
| 0 - No Driver Present/Not Applicable | | |
| 1 - Yes | | |
| 9 - Unknown | | |
|  | | |
| Driver Zip Code | | | Violations Charged | |
|  |  |  |
| 00000 - Not resident of U.S. or Territories | | |
| 99998 - Not Reported | | |
| 99999 - Reported as Unknown | | |
|  | | |
| Speeding Related | | |  | Condition (Impairment) At Time of Crash |
|  |  |  |
| 0 - No | | |
| 00 - None/Apparently Normal |
| 2 - Yes, Racing | | |
| 3 - Yes, Exceeded Speed Limit | | | 01 - Ill, Blackout |
| 4 - Yes, Too Fast for Conditions | | | 02 - Asleep or Fatigued |
| 5 - Yes, Specifics Unknown | | |
| 03 - Walking with a Cane or Crutches, etc. |
| 9 - Reported as Unknown | | |
|  | | | 04 - Paraplegic or in a Wheelchair |
| 05 - Impaired Due to Previous Injury |
| 06 - Deaf/Hard of Hearing |
| 07 - Blind/Low Vision |
| 08 - Emotional (depressed, angry, disturbed, etc.) |
| 09 - Under the Influence of Alcohol, Drugs or Medication |
| 10 - Physical Impairment - No Details |
| 96 - Other Physical Impairment |
| 98 - Not Reported |
| 99 - Reported as Unknown if Impaired |
|  |
| Driver Related Factors | | | | |

# **DRIVER LICENSE FOR VEHICLE# 1**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Non-CDL License Type | | |  | Non-CDL License Status | | |
|  |  |  |  |  |  |
| 0 - Not Licensed | | | 0 - Not licensed | | |
| 1 - Full Driver License | | | 1 - Suspended | | |
| 2 - Intermediate Driver License | | | 2 - Revoked | | |
| 7 - Learner's Permit | | | 3 - Expired | | |
| 8 - Temporary License | | | 4 - Canceled or denied | | |
| 9 - Unknown License Type | | | 6 - Valid | | |
|  | | | 9 - Unknown License Status | | |
|  | | |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Commercial Motor Vehicle License Status | | |  | Compliance With CDL Endorsements | | |
|  |  |  |  |  |  |
| 00 - No (CDL) | | | 0 - No Endorsements required for this vehicle | | |
| 01 - Suspended | | | 1 - Endorsement(s) Required, Complied with | | |
| 02 - Revoked | | | 2 - Endorsement(s) Required, Not Complied with | | |
| 03 - Expired | | | 3 - Endorsement(s) Required, Compliance Unknown | | |
| 04 - Cancelled or Denied | | | 9 - Unknown, if required | | |
| 05 - Disqualified | | |  | | |
| 06 - Valid | | |
| 07 - Commercial Learner’s Permit (CLP) | | |
| 08 - Other Not-Valid | | |
| 99 - Unknown License Status | | |
|  | | |
| License Compliance with Class of Vehicle | | |  | Compliance with license Restrictions | | |
|  |  |  |  |  |  |
| 0 - Not licensed | | | 0 - No Restrictions or Not Applicable | | |
| 1 - No license required for this class vehicle | | | 1 - Restrictions Complied With | | |
| 2 - No valid license for this class vehicle | | | 2 - Restrictions Not Complied With | | |
| 3 - Valid license for this class vehicle | | | 3 - Restrictions, Compliance Unknown | | |
| 8 - Unknown If CDL and/or CDL endorsement required for this vehicle | | | 9 - Unknown | | |
| 9 - Unknown | | |  | | |
|  | | |
| Driver Height(Feet) | | | Driver Height(Inches) | | | |
| Driver Weight | | |  | | | |

**DRIVER COUNTERS FOR VEHICLE# 1**

|  |  |
| --- | --- |
| Previous Rec. Crashes | Previous Rec. Susp.,Revoc. and Withdrawals  Previous Underage Admin. Per Se for BAC  Previous Admin. Per Se for BAC (Not Underage)  Previous Recorded Other Susp/Revoc/Withdrawals |
| Previous DWI Convictions | Previous Recorded Speeding Convictions |
| Previous Other Moving Violation Convictions | Date of Oldest Crash, Suspension, Convictions  / |
| Date of Most Recent Crash, Susp., Convictions  / |  |

**2021 Fatality Analysis Reporting System**

# **PERSON LEVEL (MV OCCUPANT) FOR VEHICLE# 1 AND PERSON# 1**

**State Number Consecutive Number \*\*Vehicle Number \*\*Person Number**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Age | | |  | Sex | | |
|  |  |  |
| 1 - Male | | |
| 2 - Female | | |
| 8 - Not Reported | | |
| 9 - Reported as Unknown | | |
|  | | |
| Person Type | | |  | Injury Severity | | |
|  |  |  |  |  |  |
| 01 - Driver of a Motor Vehicle In-Transport | | | 0 - No Apparent Injury (O) | | |
| 02 - Passenger of a Motor Vehicle In-Transport | | | 1 - Possible Injury (C) | | |
| 03 - Occupant of a Motor Vehicle Not In- Transport | | | 2 - Suspected Minor Injury (B) | | |
| 09 - Unknown Occupant Type in a Motor Vehicle In- Transport | | | 3 - Suspected Serious Injury (A) | | |
|  | | | 4 - Fatal Injury (K) | | |
| 5 - Injured, Severity Unknown | | |
| 6 - Died Prior to Crash\* | | |
| 9 - Unknown/Not Reported | | |
|  | | |
| Seating Position | | |  | Transported to First Medical Facility By | | |
|  |  |  |  |  |  |
| 11 - Front Seat, Left Side | | | 0 - Not Transported for Treatment | | |
| 12 - Front Seat, Middle | | | 1 - EMS Air | | |
| 13 - Front Seat, Right Side | | | 2 - Law Enforcement | | |
| 18 - Front Seat, Other | | | 3 - EMS Unknown Mode | | |
| 19 - Front Seat, Unknown | | | 4 - Transported Unknown Source | | |
| 21 - Second Seat, Left Side | | | 5 - EMS Ground | | |
| 22 - Second Seat, Middle | | | 6 - Other | | |
| 23 - Second Seat, Right Side | | | 8 - Not Reported | | |
| 28 - Second Seat, Other | | | 9 - Reported as Unknown | | |
| 29 - Second Seat, Unknown | | |  | | |
| 31 - Third Seat, Left Side | | |
| 32 - Third Seat, Middle | | |
| 33 - Third Seat, Right Side | | |
| 38 - Third Seat, Other | | |
| 39 - Third Seat, Unknown | | |
| 41 - Fourth Seat, Left Side | | |
| 42 - Fourth Seat, Middle | | |
| 43 - Fourth Seat, Right Side | | |
| 48 - Fourth Seat, Other | | |
| 49 - Fourth Seat, Unknown | | |
| 50 - Sleeper Section of Cab (Truck) | | |
| 51 - Other Passenger in enclosed passenger or cargo area | | |
| 52 - Other Passenger in unenclosed passenger or cargo area | | |
| 53 - Other Passenger in passenger or cargo area, unknown whether or  not enclosed | | |
| 54 - Trailing Unit | | |
| 55 - Riding on Exterior of Vehicle | | |
| 56 - Appended to a Motor Vehicle for Motion | | |
| 98 - Not Reported | | |
| 99 - Reported as Unknown | | |
|  | | |

Person Related Factors

# **SAFETY DEVICES FOR VEHICLE# 1 AND PERSON# 1**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Restraint System Use**  Type of Restraint System in Use | | |  | **Helmet Use**  Helmet Use | | |
|  |  |  |  |  |  |
| 01 - Shoulder Belt Only Used | | | 05 - DOT-Compliant Motorcycle Helmet | | |
| 02 - Lap Belt Only Used | | | 16 - Helmet, Other than DOT-Compliant Motorcycle Helmet | | |
| 03 - Shoulder and Lap Belt Used | | | 17 - No Helmet | | |
| 04 - Child Restraint Type Unknown | | | 19 - Helmet, Unknown if DOT-Compliant | | |
| 06 - Racing-Style Harness Used | | | 20 - Not Applicable | | |
| 08 - Restraint Used - Type Unknown | | | 98 - Not Reported | | |
| 10 - Child Restraint System - Forward Facing | | | 99 - Reported as Unknown if Helmet Worn | | |
| 11 - Child Restraint System - Rear Facing | | | Indication of Helmet Misuse? | | |
| 12 - Booster Seat | | |
|  |  |  |
| 20 - None Used/Not Applicable | | |
| 97 - Other | | | 0 - No Indication of Misuse | | |
| 98 - Not Reported | | | 1 - Yes, Indication of Misuse | | |
| 99 - Reported as Unknown | | | 7 - None Used/Not Applicable | | |
| Indication of Restraint System Misuse? | | |  | | |
|  |  |  |
| 0 - No Indication of Misuse | | |
| 1 - Yes, Indication of Misuse | | |
| 7 - None Used/Not Applicable | | |
|  | | |
| Air Bag Deployed | | |  | Ejection | | |
|  |  |  |
|  |  |  |
| 0 - Not Ejected | | |
| 01 - Deployed- Front | | |
| 1 - Totally Ejected | | |
| 02 - Deployed- Side (door, seatback) | | |
| 2 - Partially Ejected | | |
| 03 - Deployed- Curtain (roof) | | |
| 3 - Ejected - Unknown Degree | | |
| 07 - Deployed- Other (Knee, air belt, etc.) | | |
| 7 - Not Reported | | |
| 08 - Deployed- Combination | | |
| 8 - Not Applicable | | |
| 09 - Deployment- Unknown Location | | |
| 9 - Reported as Unknown if Ejected | | |
| 20 - Not Deployed | | |
|  | | |
| 98 - Not Reported | | |
| 99 - Reported as Deployment Unknown | | |
|  | | |
| Ejection Path | | |  | Extrication | | |
|  |  |  |  |  |  |
| 0 - Ejection Path Not Applicable | | | 0 - Not Extricated or Not Applicable | | |
| 1 - Through Side Door Opening | | | 1 - Extricated | | |
| 2 - Through Side Window | | | 9 - Unknown | | |
| 3 - Through Windshield | | |  | | |
| 4 - Through Back Window | | |
| 5 - Through Back Door/Tailgate Opening | | |
| 6 - Through Roof Opening (sun-roof, convertible top down) | | |
| 7 - Through roof (convertible top up) | | |
| 8 - Other Path (e.g., back of pick-up truck) | | |
| 9 - Ejection Path Unknown | | |
|  | | |

**2021 Fatality Analysis Reporting System ALCOHOL FOR VEHICLE# 1 AND PERSON# 1**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Police-Reported Alcohol Involvement | | |  | Alcohol Test Status | | |
|  |  |  |  |  |  |
| 0 - No (Alcohol Not Involved) | | | 0 - Test Not Given | | |
| 1 - Yes (Alcohol Involved) | | | 2 - Test Given | | |
| 8 - Not Reported | | | 8 - Not Reported | | |
| 9 - Reported as Unknown | | | 9 - Reported as Unknown if Tested | | |
|  | | |  | | |
| Alcohol Test Type | | | Alcohol Test Result | | | |
|  |  |  |
| 00 - Test Not Given | | |
| 01 - Blood | | |
| 02 - Breath Test (AC) | | |
| 03 - Urine | | |
| 04 - Vitreous | | |
| 05 - Blood Plasma/Serum | | |
| 06 - Blood Clot | | |
| 07 - Liver | | |
| 08 - Other Test Type | | |
| 10 - Preliminary Breath Test (PBT) | | |
| 11 - Breath Test, Unknown Type | | |
| 95 - Not Reported | | |
| 98 - Unknown Test Type | | |
| 99 - Reported as Unknown if Tested | | |
|  | | |

# **DRUG FOR VEHICLE# 1 AND PERSON# 1**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Police Reported Drug Involvement | | |  | Method of Drug Determination by Police | | |
|  |  |  |  |  |  |
| 0 - No (Drugs Not Involved) | | | 1 - Evidential Test (Blood, Urine) | | |
| 1 - Yes (Drugs Involved) | | | 2 - Drug Recognition Expert (or Evaluator) (DRE) | | |
| 8 - Not Reported | | | 3 - Observed Behavior or SFST | | |
| 9 - Reported as Unknown | | | 7 - Other | | |
|  | | | 8 - Not Reported | | |
|  | | |
| Drug Test Status | | |  | | | |
|  |  |  |
| 0 - Test Not Given | | |
| 2 - Test Given | | |
| 8 - Not Reported | | |
| 9 - Reported as Unknown if Tested | | |
|  | | |

Drug Specimen

Drug Test Results

00 - Test Not Given 01 - Whole Blood 02 - Urine

1. - Blood Plasma / Serum
2. - Blood Clot
3. - Oral Fluids
4. - Vitreous
5. - Liver
6. - Not Reported
7. - Unknown Specimen
8. - Other Specimen
9. - Reported as Unknown if Tested

**Drug Toxicology Results**

**2021 Fatality Analysis Reporting System RACE FOR VEHICLE# 1 AND PERSON# 1**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Race | | |  | Hispanic Origin | | |
|  |  |  |  |  |  |
| 00 - Not a Fatality (not applicable) | | | 00 - Not A Fatality (not Applicable) | | |
| 01 - White | | | 01 - Mexican | | |
| 02 - Black or African American | | | 02 - Puerto Rican | | |
| 03 - North American Indian or Alaska Native | | | 03 - Cuban | | |
| 04 - Chinese | | | 04 - Central or South American | | |
| 05 - Japanese | | | 05 - European Spanish | | |
| 06 - Native Hawaiian | | | 06 - Hispanic, Origin Not Specified or Other Origin | | |
| 07 - Filipino | | | 07 - Non-Hispanic | | |
| 18 - Asian Indian | | | 99 - Unknown | | |
| 19 - Other Indian (includes South and Central America, any others,  except North American or Asian Indians) | | |  | | |
| 28 - Korean | | |
| 38 - Samoan | | |
| 48 - Vietnamese | | |
| 58 - Guamanian or Chamorro | | |
| 68 - Other Asian or Pacific Islander | | |
| 78 - Asian or Pacific Islander, No Specific (individual) Race | | |
| 97 - Multiple Races Unspecified | | |
| 98 - Other Race | | |
| 99 - Unknown | | |
|  | | |

# **SUPPLEMENTAL FOR VEHICLE# 1 AND PERSON# 1**

|  |  |  |  |
| --- | --- | --- | --- |
| Died at Scene/En Route | | | Death Date  / / |
|  |  |  |
| 0 - Not Applicable | | |
| 7 - Died at Scene | | |
| 8 - Died En Route | | |
| 9 - Unknown | | |
|  | | |
| Death Time  : | | | Death Certificate Number |
| Fatal Injury At Work | | |  |

**2021 Fatality Analysis Reporting System**

# **PERSON LEVEL (MV OCCUPANT) FOR VEHICLE# 1 AND PERSON# 2**

**State Number Consecutive Number \*\*Vehicle Number \*\*Person Number**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Age | | |  | Sex | | |
|  |  |  |
| 1 - Male | | |
| 2 - Female | | |
| 8 - Not Reported | | |
| 9 - Reported as Unknown | | |
|  | | |
| Person Type | | |  | Injury Severity | | |
|  |  |  |  |  |  |
| 01 - Driver of a Motor Vehicle In-Transport | | | 0 - No Apparent Injury (O) | | |
| 02 - Passenger of a Motor Vehicle In-Transport | | | 1 - Possible Injury (C) | | |
| 03 - Occupant of a Motor Vehicle Not In- Transport | | | 2 - Suspected Minor Injury (B) | | |
| 09 - Unknown Occupant Type in a Motor Vehicle In- Transport | | | 3 - Suspected Serious Injury (A) | | |
|  | | | 4 - Fatal Injury (K) | | |
| 5 - Injured, Severity Unknown | | |
| 6 - Died Prior to Crash\* | | |
| 9 - Unknown/Not Reported | | |
|  | | |
| Seating Position | | |  | Transported to First Medical Facility By | | |
|  |  |  |  |  |  |
| 11 - Front Seat, Left Side | | | 0 - Not Transported for Treatment | | |
| 12 - Front Seat, Middle | | | 1 - EMS Air | | |
| 13 - Front Seat, Right Side | | | 2 - Law Enforcement | | |
| 18 - Front Seat, Other | | | 3 - EMS Unknown Mode | | |
| 19 - Front Seat, Unknown | | | 4 - Transported Unknown Source | | |
| 21 - Second Seat, Left Side | | | 5 - EMS Ground | | |
| 22 - Second Seat, Middle | | | 6 - Other | | |
| 23 - Second Seat, Right Side | | | 8 - Not Reported | | |
| 28 - Second Seat, Other | | | 9 - Reported as Unknown | | |
| 29 - Second Seat, Unknown | | |  | | |
| 31 - Third Seat, Left Side | | |
| 32 - Third Seat, Middle | | |
| 33 - Third Seat, Right Side | | |
| 38 - Third Seat, Other | | |
| 39 - Third Seat, Unknown | | |
| 41 - Fourth Seat, Left Side | | |
| 42 - Fourth Seat, Middle | | |
| 43 - Fourth Seat, Right Side | | |
| 48 - Fourth Seat, Other | | |
| 49 - Fourth Seat, Unknown | | |
| 50 - Sleeper Section of Cab (Truck) | | |
| 51 - Other Passenger in enclosed passenger or cargo area | | |
| 52 - Other Passenger in unenclosed passenger or cargo area | | |
| 53 - Other Passenger in passenger or cargo area, unknown whether or  not enclosed | | |
| 54 - Trailing Unit | | |
| 55 - Riding on Exterior of Vehicle | | |
| 56 - Appended to a Motor Vehicle for Motion | | |
| 98 - Not Reported | | |
| 99 - Reported as Unknown | | |
|  | | |

Person Related Factors

# **SAFETY DEVICES FOR VEHICLE# 1 AND PERSON# 2**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Restraint System Use**  Type of Restraint System in Use | | |  | **Helmet Use**  Helmet Use | | |
|  |  |  |  |  |  |
| 01 - Shoulder Belt Only Used | | | 05 - DOT-Compliant Motorcycle Helmet | | |
| 02 - Lap Belt Only Used | | | 16 - Helmet, Other than DOT-Compliant Motorcycle Helmet | | |
| 03 - Shoulder and Lap Belt Used | | | 17 - No Helmet | | |
| 04 - Child Restraint Type Unknown | | | 19 - Helmet, Unknown if DOT-Compliant | | |
| 06 - Racing-Style Harness Used | | | 20 - Not Applicable | | |
| 08 - Restraint Used - Type Unknown | | | 98 - Not Reported | | |
| 10 - Child Restraint System - Forward Facing | | | 99 - Reported as Unknown if Helmet Worn | | |
| 11 - Child Restraint System - Rear Facing | | | Indication of Helmet Misuse? | | |
| 12 - Booster Seat | | |
|  |  |  |
| 20 - None Used/Not Applicable | | |
| 97 - Other | | | 0 - No Indication of Misuse | | |
| 98 - Not Reported | | | 1 - Yes, Indication of Misuse | | |
| 99 - Reported as Unknown | | | 7 - None Used/Not Applicable | | |
| Indication of Restraint System Misuse? | | |  | | |
|  |  |  |
| 0 - No Indication of Misuse | | |
| 1 - Yes, Indication of Misuse | | |
| 7 - None Used/Not Applicable | | |
|  | | |
| Air Bag Deployed | | |  | Ejection | | |
|  |  |  |
|  |  |  |
| 0 - Not Ejected | | |
| 01 - Deployed- Front | | |
| 1 - Totally Ejected | | |
| 02 - Deployed- Side (door, seatback) | | |
| 2 - Partially Ejected | | |
| 03 - Deployed- Curtain (roof) | | |
| 3 - Ejected - Unknown Degree | | |
| 07 - Deployed- Other (Knee, air belt, etc.) | | |
| 7 - Not Reported | | |
| 08 - Deployed- Combination | | |
| 8 - Not Applicable | | |
| 09 - Deployment- Unknown Location | | |
| 9 - Reported as Unknown if Ejected | | |
| 20 - Not Deployed | | |
|  | | |
| 98 - Not Reported | | |
| 99 - Reported as Deployment Unknown | | |
|  | | |
| Ejection Path | | |  | Extrication | | |
|  |  |  |  |  |  |
| 0 - Ejection Path Not Applicable | | | 0 - Not Extricated or Not Applicable | | |
| 1 - Through Side Door Opening | | | 1 - Extricated | | |
| 2 - Through Side Window | | | 9 - Unknown | | |
| 3 - Through Windshield | | |  | | |
| 4 - Through Back Window | | |
| 5 - Through Back Door/Tailgate Opening | | |
| 6 - Through Roof Opening (sun-roof, convertible top down) | | |
| 7 - Through roof (convertible top up) | | |
| 8 - Other Path (e.g., back of pick-up truck) | | |
| 9 - Ejection Path Unknown | | |
|  | | |

**2021 Fatality Analysis Reporting System ALCOHOL FOR VEHICLE# 1 AND PERSON# 2**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Police-Reported Alcohol Involvement | | |  | Alcohol Test Status | | |
|  |  |  |  |  |  |
| 0 - No (Alcohol Not Involved) | | | 0 - Test Not Given | | |
| 1 - Yes (Alcohol Involved) | | | 2 - Test Given | | |
| 8 - Not Reported | | | 8 - Not Reported | | |
| 9 - Reported as Unknown | | | 9 - Reported as Unknown if Tested | | |
|  | | |  | | |
| Alcohol Test Type | | | Alcohol Test Result | | | |
|  |  |  |
| 00 - Test Not Given | | |
| 01 - Blood | | |
| 02 - Breath Test (AC) | | |
| 03 - Urine | | |
| 04 - Vitreous | | |
| 05 - Blood Plasma/Serum | | |
| 06 - Blood Clot | | |
| 07 - Liver | | |
| 08 - Other Test Type | | |
| 10 - Preliminary Breath Test (PBT) | | |
| 11 - Breath Test, Unknown Type | | |
| 95 - Not Reported | | |
| 98 - Unknown Test Type | | |
| 99 - Reported as Unknown if Tested | | |
|  | | |

# **DRUG FOR VEHICLE# 1 AND PERSON# 2**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Police Reported Drug Involvement | | |  | Method of Drug Determination by Police | | |
|  |  |  |  |  |  |
| 0 - No (Drugs Not Involved) | | | 1 - Evidential Test (Blood, Urine) | | |
| 1 - Yes (Drugs Involved) | | | 2 - Drug Recognition Expert (or Evaluator) (DRE) | | |
| 8 - Not Reported | | | 3 - Observed Behavior or SFST | | |
| 9 - Reported as Unknown | | | 7 - Other | | |
|  | | | 8 - Not Reported | | |
|  | | |
| Drug Test Status | | |  | | | |
|  |  |  |
| 0 - Test Not Given | | |
| 2 - Test Given | | |
| 8 - Not Reported | | |
| 9 - Reported as Unknown if Tested | | |
|  | | |

Drug Specimen

Drug Test Results

00 - Test Not Given 01 - Whole Blood 02 - Urine

1. - Blood Plasma / Serum
2. - Blood Clot
3. - Oral Fluids
4. - Vitreous
5. - Liver
6. - Not Reported
7. - Unknown Specimen
8. - Other Specimen
9. - Reported as Unknown if Tested

**Drug Toxicology Results**

**2021 Fatality Analysis Reporting System RACE FOR VEHICLE# 1 AND PERSON# 2**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Race | | |  | Hispanic Origin | | |
|  |  |  |  |  |  |
| 00 - Not a Fatality (not applicable) | | | 00 - Not A Fatality (not Applicable) | | |
| 01 - White | | | 01 - Mexican | | |
| 02 - Black or African American | | | 02 - Puerto Rican | | |
| 03 - North American Indian or Alaska Native | | | 03 - Cuban | | |
| 04 - Chinese | | | 04 - Central or South American | | |
| 05 - Japanese | | | 05 - European Spanish | | |
| 06 - Native Hawaiian | | | 06 - Hispanic, Origin Not Specified or Other Origin | | |
| 07 - Filipino | | | 07 - Non-Hispanic | | |
| 18 - Asian Indian | | | 99 - Unknown | | |
| 19 - Other Indian (includes South and Central America, any others,  except North American or Asian Indians) | | |  | | |
| 28 - Korean | | |
| 38 - Samoan | | |
| 48 - Vietnamese | | |
| 58 - Guamanian or Chamorro | | |
| 68 - Other Asian or Pacific Islander | | |
| 78 - Asian or Pacific Islander, No Specific (individual) Race | | |
| 97 - Multiple Races Unspecified | | |
| 98 - Other Race | | |
| 99 - Unknown | | |
|  | | |

**SUPPLEMENTAL FOR VEHICLE# 1 AND PERSON# 2**

|  |  |  |  |
| --- | --- | --- | --- |
| Died at Scene/En Route | | | Death Date  / / |
|  |  |  |
| 0 - Not Applicable | | |
| 7 - Died at Scene | | |
| 8 - Died En Route | | |
| 9 - Unknown | | |
|  | | |
| Death Time  : | | | Death Certificate Number |
| Fatal Injury At Work | | |  |