

LOUISIANA UNIFORM CRASH REPORT
CRASH INFORMATION

2021000346

<input type="checkbox"/> Secondary Crash		<input type="checkbox"/> Photos Taken		<input type="checkbox"/> Videos Taken		Rev. 2024-1		Case #		L-202000-23		Page 1 of 20	
Number of Motorists 2		Number of Non-Motorists 2		Non-Fatally Injured Persons 1		Fatalities 3		Total Injuries and Fatalities 4		Vehicles Involved 2		Troop A	
Investigating Agency LSP (Troop A)				Division		Parish East Baton Rouge		City Baton Rouge		Latitude 30.440064° N		Longitude 91.016188° W	

CRASH TIME INFORMATION

Crash Date/Time 08/24/2021 0500		Police Notified Date/Time 08/24/2021 0500		Police Arrived Date/Time 08/24/2021 0505		Roadway Cleared Date/Time 08/24/2021 0510		On Scene Investigation Completed Date/Time 08/24/2021 0510	
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ROAD INFORMATION

Highway <input type="checkbox"/> Not applicable Interstate 12		Road I-12	
Distance/Direction From Intersection <input type="checkbox"/> Not applicable 0.6 mi East		Intersecting Road <input type="checkbox"/> Crash was at an intersection main	

LOCATION INFORMATION

Road Classification 100		Road Subtype 100		Property Ownership 100		Trafficway Characteristics 100		Number of Intersection Approaches 1		Traffic Flow Direction N	
100 Interstate 101 US highway 102 State highway 103 Parish road 104 City street 200 Off road/private property		100 Mainline 200 On-ramp 201 Off-ramp 300 Frontage/service 970 Not applicable		100 Public property 200 Private property		100 Trafficway, on road 101 Trafficway, not on road 200 Non-trafficway		1 Not an intersection 2 Two 3 Three 4 Four 5 Five or more		X Not applicable (not a divided highway) N North W West S South E East	

INVESTIGATING OFFICER

Rank Sgt.		First Name Eric		Middle Name M		Last Name Newman		Suffix Sr.	
Badge # 77		Printed Name eric				Signature eric			

CRASH CIRCUMSTANCES AND CONDITIONS

First Harmful Event 201		Location of First Harmful Event 104		Manner of Crash 505	
Non-collision 100 Cargo/equipment loss or shift 101 Fell/jumped from motor vehicle 102 Fire/explosion 103 Immersion, full or partial 104 Jackknife 105 Overturn/rollover 106 Thrown or falling object 198 Other non-collision harmful event		100 Gore 101 In parking lane or zone 102 Median 103 Off roadway, location unknown 104 On roadway 105 On shoulder, left side 106 On shoulder, right side 107 Outside road/right-of-way 108 Roadside 109 Separator/traffic island 999 Unknown		000 Not a collision between two motor vehicles in transport 200 Front to front - head on 300 Front to rear - rear end 400 Backing - rear to front 401 Backing - rear to rear 402 Backing - rear to side 502 Sideswipe - opposite direction 505 Sideswipe - same direction 980 Other 999 Unknown	
Collision with Non-Fixed Object 200 Collision with animal (live) 201 Collision with motor vehicle in transport 202 Collision with parked motor vehicle 203 Collision with pedalcycle (including bicycles) 204 Collision with pedestrian 205 Collision with railway vehicle (train, engine) 206 Collision with object at rest from MV in transport 207 Collision with falling/shifting cargo or anything set in motion by MV 208 Collision with work zone/maintenance equipment 209 Collision with farm equipment 297 Collision with other non-motorist 298 Collision with other non-fixed object		Relation to Junction 000 000 Not an interchange area 100 Acceleration or deceleration lane 101 Crossover related 102 Driveway access or related 103 Entrance/exit ramp or related 104 Intersection or related 106 Railway grade crossing 107 Shared-use path or trail 108 Through roadway 980 Other location within an interchange area (median, shoulder, and roadside) 999 Unknown		Contributing Factor Primary 100 Secondary 111 100 Violations 101 Movement prior to crash 102 Vision obstructions 103 Driver condition 104 Vehicle condition 105 Road surface 106 Roadway condition 107 Lighting condition 108 Weather condition 109 Traffic control 110 Non-motorist condition 111 Non-motorist action 970 Not applicable	
Collision with Fixed Object 300 Collision with bridge overhead structure 301 Collision with bridge pier or support 302 Collision with bridge rail 303 Collision with cable barrier 304 Collision with concrete traffic barrier 305 Collision with culvert 306 Collision with curb 307 Collision with ditch 308 Collision with embankment 309 Collision with fence 310 Collision with guardrail end terminal 311 Collision with guardrail face 312 Collision with impact attenuator/crash cushion 313 Collision with mailbox 314 Collision with traffic sign support 315 Collision with traffic signal support 316 Collision with tree (standing) 317 Collision with utility pole/light support 396 Collision with other post, pole, or support 397 Collision with other traffic barrier 398 Collision with other fixed object (wall, building, tunnel, etc.) 399 Collision with unknown fixed object		Intersection Geometry 970 100 Angled / skewed 101 Roundabout / traffic circle 102 Perpendicular 970 Not applicable		School Bus Relation 000 000 No 100 Yes, school bus directly involved 101 Yes, school bus indirectly involved	
Intersection Traffic Control 970 000 No controls 100 Signalized 101 Stop -all way 102 Stop -partial 103 Yield 970 Not applicable					

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CRASH CONDITIONS

Roadway Surface Condition

107

000 Dry
100 Ice/Frost
101 Mud, dirt, gravel
102 Oil
103 Sand
104 Slush
105 Snow
106 Water (standing,moving)
107 Wet
980 Other
999 Unknown

Light Condition

399

100 Daylight
200 Dawn/dusk
300 Dark - continuous street lights
301 Dark - street lights at intersection only
302 Dark - not lighted
399 Dark - unknown lighting
980 Other
999 Unknown

Weather Conditions

105

106

000 Clear
100 Blowing sand, soil, dirt
101 Blowing snow
102 Cloudy
103 Fog, smog, smoke
104 Freezing rain or freezing drizzle
105 Rain
106 Severe crosswinds
107 Sleet or hail
108 Snow
980 Other
999 Unknown

Environmental Conditions

101

117

000 None
100 Animal(s)
101 Debris
102 Glare
103 Non-highway work
104 Obstructed crosswalks
105 Obstruction in roadway
106 Overhead clearance limited
107 Prior crash
108 Prior non-recurring incident
109 Regular congestion
110 Related to a bus stop
111 Road surface condition (wet, icy, snow, slush, etc.)
112 Ruts, holes, bumps
113 Shoulders (none, low, soft, high)
114 Toll booth/plaza related
115 Traffic control device
116 Traffic incident
117 Visual obstruction(s)
118 Weather conditions
119 Work zone (construction/maintenance/utility)
120 Worn, travel-polished surface
980 Other
999 Unknown

WORK ZONE CRASH INFORMATION

Work Zone Relation

000

000 No
100 Yes
999 Unknown

Work Zone Location

970

100 Before the first work zone warning sign
101 Advance warning area
102 Transition area
103 Activity area
104 Termination area
970 Not applicable
999 Unknown

Work Zone Type

970

100 Lane closure
101 Lane shift / crossover
102 Work on shoulder or median
103 Intermittent or moving work
970 Not applicable
980 Other type of work zone
999 Unknown

Work Zone Circumstances

970

100 Back of queue
101 Congestion (dense & slow traffic), typical
102 Heavy (dense & fast traffic)
103 Congestion (dense & slow traffic), not typical
104 Traffic control device malfunction
105 Free flow (light & fast traffic)
980 Other
970 Not applicable
999 Unknown

Worker(s) Present

970

000 No
100 Yes
970 Not applicable
999 Unknown

Law Enforcement Present

970

000 No
100 Yes
970 Not applicable
999 Unknown

REVIEWING OFFICER

Rank

First Name

Middle Name

Last Name

Suffix

Eric

Newman

WITNESS #

WITNESS #

Name

First

Middle

Last

Suffix

Name

First

Middle

Last

Suffix

Address

City

State

Postal Code

Phone Number

Age

Sex

NON-VEHICULAR PROPERTY DAMAGE

PROPERTY #

Property Type

Damage Severity

Owner Name

Unknown

Owner Phone Number

Not Collected

Owner Address

Unknown

Street

City

State

Postal Code

NON-VEHICULAR PROPERTY DAMAGE

PROPERTY #

Property Type

Damage Severity

Owner Name

Unknown

Owner Phone Number

Not Collected

Owner Address

Unknown

Street

City

State

Postal Code

NON-VEHICULAR PROPERTY DAMAGE

PROPERTY #

Property Type

Damage Severity

Owner Name

Unknown

Owner Phone Number

Not Collected

Owner Address

Unknown

Street

City

State

Postal Code

PROPERTY DAMAGE CODES

Property Type

100 Private property
200 Bridge overhead structure
201 Bridge pier or support
202 Bridge rail

300 Cable barrier
301 Concrete traffic barrier
302 Guardrail end terminal

303 Guardrail face
304 Impact attenuator/crash cushion
398 Other traffic barrier

400 Traffic sign support
401 Traffic signal support
402 Utility pole/light support

598 Other state property
980 Other

Damage Severity

100 Light (less than \$500)
101 Moderate (between \$500 and \$10,000)
102 Severe (over \$10,000)

CRASH REPORT - SUMMARY BACK

LOUISIANA UNIFORM CRASH REPORT
VEHICLE INFORMATION

2021000346

Motor Vehicle #		Case #		Page	
1		L-202000-23		3 of 20	
DESCRIPTION AND INFORMATION					
<input type="checkbox"/> Check if this vehicle had no driver		Hit and Run 000 No, did not leave scene 100 Yes, driver and vehicle left scene 101 Yes, only driver left scene		Vehicle Type 000 Motor vehicle in transport 101 Parked motor vehicle 102 Working vehicle / equipment	
VIN 321ASD456QWER123F		<input type="checkbox"/> Unknown		Vehicle Body Type Passenger Vehicles 100 Passenger car 101 Passenger van / Minivan (less than 9 seats) 102 (Sport) utility vehicle Construction / Farm Equipment 200 Construction equipment (backhoe, bulldozer, etc.) 201 Farm equipment (tractor, combine, harvester, etc.) Cycle / Off Road / Recreation 300 2-wheeled motorcycle 301 3-wheeled motorcycle 302 Moped or motorized bicycle 303 All-terrain vehicle / all-terrain cycle (ATV / ATC) 304 Golf Cart 305 Snowmobile 306 Low Speed Vehicle 307 Recreational off-highway vehicles (ROV) 308 Autocycle Trucks 400 Single unit truck 401 Truck tractor 498 Other truck Large Passenger Vehicle 500 Motor home 501 Passenger van (9-15 seats) 502 Passenger van (16+ seats) 503 Large limo 504 Mini-bus Other 980 Other	
Model Year <input type="checkbox"/> Unknown 1999		Make GMC		Model Canyon	
License Plate <input type="checkbox"/> Missing State AL <input type="checkbox"/> Unknown Number 123QWE <input type="checkbox"/> Unknown Year 2022 <input type="checkbox"/> Unknown		Color White		103	
Owner Name <input type="checkbox"/> Same as driver <input type="checkbox"/> Unknown First1 M1 Last1 Jr		Owner Address <input type="checkbox"/> Same as driver <input type="checkbox"/> Unknown 321 first st. Street City State Postal Code baton rouge LA 77888		103	
Insurance <input type="checkbox"/> Uninsured at time of crash Company ABC <input type="checkbox"/> Unknown Phone # 888-555-7777 <input type="checkbox"/> Unknown NAIC # 1230 <input type="checkbox"/> Unknown Policy # 123asd <input type="checkbox"/> Unknown Expiration Date 12/31/2023 <input type="checkbox"/> Unknown		103		103	
DAMAGE			TOWING		
Damage Extent <input type="checkbox"/> 000 None <input type="checkbox"/> 100 Minor damage <input type="checkbox"/> 101 Functional damage <input type="checkbox"/> 102 Disabling damage <input type="checkbox"/> 990 Vehicle not at scene		Initial Point of Contact 6 7 8 9 10 11 12 5 4 3 2 1 <input type="checkbox"/> 000 Non-collision <input type="checkbox"/> 001 Vehicle not at scene <input type="checkbox"/> 100 Top <input type="checkbox"/> 113 Undercarriage <input type="checkbox"/> 114 Cargo Loss <input type="checkbox"/> 999 Unknown		Damaged Areas 6 7 8 9 10 11 12 5 4 3 2 1 <input type="checkbox"/> 001 Vehicle not at scene <input type="checkbox"/> 002 No damage <input type="checkbox"/> 100 Top <input type="checkbox"/> 113 Undercarriage	
Tow Status <input type="checkbox"/> 000 Not towed <input type="checkbox"/> 100 Towed, but not due to disabling damage <input type="checkbox"/> 101 Towed (or will be towed) due to disabling damage <input type="checkbox"/> Towed By <input type="checkbox"/> Unknown		Tow Authority <input type="checkbox"/> 100 Owner <input type="checkbox"/> 101 Law enforcement <input type="checkbox"/> 970 Not applicable <input type="checkbox"/> 980 Other towing co.		101	
MOTOR VEHICLE CIRCUMSTANCES					
Vehicle Usage 000 No special function 100 Bus - school (public or private) 101 Bus - childcare / daycare 102 Bus - transit / commuter 103 Bus - charter / tour 104 Bus - intercity 105 Bus - shuttle 198 Bus - other 200 Farm vehicle 201 Fire truck 202 Highway / maintenance 203 Mail carrier 204 Military 205 Ambulance 206 Police 207 Public utility 208 Non-transport emergency services vehicle 209 Safety service patrols - incident response 210 Other incident response 211 Rental truck (over 10,000 lbs) 212 Towing - incident response 213 Truck acting as crash attenuator 214 Taxi 215 Vehicle used for electronic ride-hailing (transportation network company)		Vehicle Maneuver 000 Going straight 100 Backing 101 Merging 102 Making U-turn 103 Negotiating a curve 104 Turning left 105 Turning right 106 Traveling wrong way 200 Leaving a parking position 300 Entering a parking position 400 Slowing 500 Parked 501 Stopped		Vehicle Maneuver Reason 000 Normal movement 100 To avoid other vehicle 101 To avoid non-motorist 102 To avoid animal 198 To avoid other object 200 Passing 201 Vehicle out of control, not passing 202 Vehicle out of control, passing 203 For traffic control 204 Due to congestion 205 Due to prior crash (collision) 206 Due to driver condition 207 Due to driver violation 208 Due to vehicle condition (failure) 209 Due to pavement condition 210 High wind 980 Other 999 Unknown	
Emergency Vehicle Usage 000 Non-emergency, non-transport 100 Non-emergency transport 200 Emergency operation, emergency warning equipment not in use 201 Emergency operation, emergency warning equipment in use 970 Not applicable 999 Unknown		Direction of Travel Before Crash 000 Not on roadway 001 In roadway but not in motion 002 Not on trafficway 100 Northbound 300 Eastbound 500 Southbound 700 Westbound 999 Unknown		100	

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MOTOR VEHICLE CIRCUMSTANCES																																			
Skidmark Data (Feet)				Distance Traveled After Impact (Feet) <input type="checkbox"/> Unknown				Contributing Defects				000																							
Front Left		Front Right		<input checked="" type="checkbox"/> Not applicable or measured		250																													
<input type="text"/>		<input type="text"/>		<input type="checkbox"/> Unknown																															
Rear Left		Rear Right																																	
<input type="text"/>		<input type="text"/>																																	
Vehicle Lighting																																			
000 Headlights off																																			
100 Headlights on																																			
101 Daytime running lights																																			
999 Unknown																																			
100																																			
Traffic Control Device Types and Statuses																																			
Traffic Control Device Types				Devices Present				Devices Inoperative or Missing																											
000 None				300 Flashing railroad crossing (may include gates)				1 000				1 000																							
100 Person (including flagger, law enforcement, crossing guard, etc)				301 Flashing school zone signal				2				2																							
200 Bicycle crossing sign				302 Flashing traffic control signal				3				3																							
201 Curve Ahead warning sign				303 Lane use control signal				4				4																							
202 Intersection Ahead warning sign				304 Ramp meter signal																															
203 Pedestrian crossing sign				305 Traffic control signal																															
204 Railroad crossing sign				398 Other signal																															
205 Reduce Speed Ahead warning sign				400 Bicycle crossing																															
206 School zone sign				401 Pedestrian crossing																															
207 Stop sign				402 Railroad crossing																															
208 Yield sign				403 School zone																															
298 Other warning sign				404 Yellow no passing line																															
				405 White or yellow dash line																															
				406 Solid white lane line																															
				498 Other pavement marking (excluding edgelines, centerlines, or lane lines)																															
980 Other				999 Unknown																															
Trafficway Division				101				Barrier Type				101																							
000 Not divided				100 Divided, flush median (greater than 4 ft wide)				000 None				100 Cable barrier																							
001 Not divided, with a continuous left turn lane				101 Divided, raised median (curbed)				101 Concrete barrier (e.g. Jersey barrier)				100 One-way																							
				102 Divided, depressed median				102 Earth embankment				200 Two-way																							
				999 Unknown				103 Guardrail				Speed Limit																							
								980 Other				55 <input type="checkbox"/> Unknown <input type="checkbox"/> N/A																							
Roadway Grade		101		Number of Through Lanes		Number of Auxiliary Lanes		Roadway Alignment		100		Permitted Travel		200		HOV Lane Presence		000		HOV Lane Relation		000													
000 Not on trafficway				2		0		000 Not on trafficway				000 Not on trafficway				000 None present				000 No															
100 Level								100 Straight				100 One-way				100 Separated barrier, flush (greater than 4 ft wide), raised or depressed median				100 Yes															
101 Uphill								101 Curve left				200 Two-way				101 Not separated, painted pavement markings, post-mounted delineators																			
102 Hillcrest								102 Curve right																											
103 Downhill																																			
104 Sag (bottom)																																			
MOTOR VEHICLE EVENTS																																			
Sequence of Events				1 201				2 204				3 204				4				Most Harmful Event				201											
Non-Harmful Events																		Collision with Fixed Object																	
000 Cross centerline																		005 Ran off roadway left																	
001 Cross median																		006 Ran off roadway right																	
002 End departure (T-intersection, dead-end, etc.)																		007 Reentering roadway																	
003 Downhill runaway																		008 Separation of units																	
004 Equipment failure (blown tire, brake failure, etc.)																		009 Other non-harmful event																	
Non-Collision Events																		Collision with Person / Vehicle / Non-Fixed Object																	
100 Cargo/equipment loss or shift																		200 Collision with animal (live)																	
101 Fell/jumped from motor vehicle																		201 Collision with motor vehicle in transport																	
102 Fire/explosion																		202 Collision with parked motor vehicle																	
103 Immersion, full or partial																		203 Collision with pedalcycle (including bicycles)																	
104 Jackknife																		204 Collision with pedestrian																	
105 Overturn/rollover																		205 Collision with railway vehicle (train, engine)																	
106 Thrown or falling object																		206 Collision with object at rest from MV in transport																	
198 Other non-collision harmful event																		207 Collision with falling, shifting cargo, or anything set in motion by MV																	
																		208 Collision with work zone/maintenance equipment																	
																		209 Collision with farm equipment																	
																		297 Collision with other non-motorist																	
																		298 Collision with other non-fixed object																	
																		300 Collision with bridge overhead structure																	
																		301 Collision with bridge pier or support																	
																		302 Collision with bridge rail																	
																		303 Collision with cable barrier																	
																		304 Collision with concrete traffic barrier																	
																		305 Collision with culvert																	
																		306 Collision with curb																	
																		307 Collision with ditch																	
																		308 Collision with embankment																	
																		309 Collision with fence																	
																		310 Collision with guardrail end terminal																	
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																		312 Collision with impact attenuator/crash cushion																	
																		313 Collision with mailbox																	
																		314 Collision with traffic sign support																	
																		315 Collision with traffic signal support																	
																		316 Collision with tree (standing)																	
																		317 Collision with utility pole/light support																	
																		396 Collision with other post,pole,or support																	
																		397 Collision with other traffic barrier																	
																		398 Collision with other fixed object (wall, building, tunnel, etc.)																	
																		399 Collision with unknown fixed object																	
CRASH REPORT - MOTOR VEHICLE CIRCUMSTANCES AND EVENTS																																			

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COMMERCIAL MOTOR VEHICLE INFORMATION

Vehicle Configuration

000 Vehicles 10,000 lbs or less
100 Vehicles 10,000 lbs or less placarded for hazardous materials
200 Bus/large van (seats 9-15 occupants, including driver)
201 Bus (seats more than 15 occupants, including driver)

300 Single-unit truck (2-axle and GVWR > 10,000 lbs.)
301 Single-unit truck (3 or more axles)
302 Truck pulling trailer(s)
303 Truck tractor (bobtail)
304 Truck tractor/semi-trailer
305 Truck tractor/double
306 Truck tractor/triple
307 Truck more than 10,000 lbs., cannot classify

999 Unknown

Hazardous Materials Placard

000 Had no placard and not carrying hazardous materials
001 Had a placard, not carrying hazardous materials
100 Carried hazardous material that required placarding
200 Carried hazardous materials without placard

999 Unknown

Cargo Body Type

000 No cargo body
100 Bus
101 Auto transporter
102 Cargo tank
103 Concrete mixer
104 Dump
970 Not applicable
980 Other
999 Unknown

105 Flatbed
106 Garbage / refuse
107 Grain / chips / gravel
108 Intermodal container chassis

109 Log
110 Pole trailer
111 Van / enclosed box
112 Vehicle towing another vehicle

970

Special Sizing

☒ 000 No special sizing
☐ 100 Over-height
☐ 101 Over-length
☐ 102 Over-weight
☐ 103 Over-width
☐ 999 Unknown

Load Permitted

000 Non-permitted load
100 Permitted load
970 Not applicable (not a qualifying vehicle)
999 Unknown

970

Number of Axles

☐ Unknown

Motor Carrier Type

000 Personal vehicle
001 Not in commerce: government
002 Not in commerce: personal rental truck or bus
098 Not in commerce: other
100 Interstate carrier
101 Intrastate carrier

000

Motor Carrier Identification

100 US DOT number
101 State number
970 Not applicable
999 Unknown/unable to determine

970

Motor Carrier Name

☐ Unknown

Motor Carrier ID Number

State

Motor Carrier Address

☐ Unknown

Motor Carrier Phone Number

☐ Unknown

Street

City

State

Postal Code

GVWR/GCWR

100 Light (less than 10,000 lbs.GVWR/GCWR)
101 Medium (10,001 - 26,000 lbs GVWR/GCWR)
102 Heavy (greater than 26,000 lbs GVWR/GCWR)
970 Not applicable (not a qualifying vehicle)
999 Unknown

970

Commodity Hauled

TRAILER INFORMATION

TRAILER #

VIN

☐ Unknown

Number of Axles

☐ Unknown

Year

☐ Unknown

Make

☐ Unknown

Model

☐ Unknown

License Plate

☐ Missing

☐ Non-expiring

State

☐ Unknown

Number

☐ Unknown

Year

☐ Unknown

TRAILER INFORMATION

TRAILER #

VIN

☐ Unknown

Number of Axles

☐ Unknown

Year

☐ Unknown

Make

☐ Unknown

Model

☐ Unknown

License Plate

☐ Missing

☐ Non-expiring

State

☐ Unknown

Number

☐ Unknown

Year

☐ Unknown

TRAILER INFORMATION

TRAILER #

VIN

☐ Unknown

Number of Axles

☐ Unknown

Year

☐ Unknown

Make

☐ Unknown

Model

☐ Unknown

License Plate

☐ Missing

☐ Non-expiring

State

☐ Unknown

Number

☐ Unknown

Year

☐ Unknown

CRASH REPORT - DRIVER INFORMATION

Motor Vehicle #	1	Rev. 2024-1	Case #	L-202000-23	Page	7	of	20
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MEDICAL INFORMATION			
Injury Status	100	Type of Medical Transportation	100
100 (K) Fatal Injury		000 Not transported	980 Other
101 (A) Suspected Serious Injury		100 EMS air	999 Unknown
102 (B) Suspected Minor Injury		101 EMS ground	
103 (C) Possible Injury		200 Law enforcement	
104 (O) No Apparent Injury			
EMS Response Agency		Acadian Air Med Services	
EMS Response Run #		<input type="checkbox"/> Unknown	
		8877	
Universally Unique Identifier		<input type="checkbox"/> Not applicable <input type="checkbox"/> Unknown	
789789		Facility Receiving Patient	
		LSU-Walter Olin Moss Regional Medical Center	

DRIVER CONDITION AND CIRCUMSTANCES			
Conditions at Time of Crash	100	Distraction Action	100
000 Apparently normal		000 Not distracted	
100 Asleep/blacked out	101	100 Talking / listening	
101 Fatigued		101 Manually operating a device	
102 Emotional (depressed, angry, disturbed, etc.)		(e.g., texting, dialing, playing game, etc.)	
103 Ill (sick), fainted		200 Inattentive	
104 Physically impaired		980 Other distraction or distraction details unknown	
105 Under the influence of medications/drugs/alcohol		999 Unknown if distracted	
106 Inattentive/distracted			
970 Not applicable			
980 Other			
999 Unknown			
Distraction Source		100	Speeding Relation
100 Hands-free mobile phone	200 Passenger or other non-motorist	000 No	
101 Hand-held mobile phone	201 External to vehicle/non-motorist area	100 Exceeded speed limit	
102 Vehicle-integrated device	298 Other	101 Racing	
198 Other electronic device	970 Not applicable	102 Too fast for conditions	
	999 Unknown	999 Unknown	
Vision Obscurement			101
000 None	105 Embankment	111 Blinded by sun glare	
100 Rain, snow, etc. on windshield	106 Sign boards	112 Distracted by neon lights in field of view	
101 Windshield otherwise obscured	107 Hillcrest		
102 Vision obscured by load	108 Parked vehicles		
103 Trees, bushes, etc.	109 Moving vehicles	980 Other	
104 Building	110 Blinded by headlights	999 Unknown	
Suspected Alcohol Usage	000	Test Status	000
000 No		000 Test not given	
100 Yes		001 Test refused	
999 Unknown		100 Test given	
		999 Unknown if tested	
Alcohol Kit Number	<input type="checkbox"/> Unknown	Alcohol Test Type	970
		100 Blood	300 Urine
		101 Blood clot	301 Vitreous
		102 Blood plasma/serum	302 Liver
		200 Breath	970 Not applicable
		201 Preliminary breath test (PBT)	980 Other
Suspected Drug Usage	000	Test Status	000
000 No		000 Test not given	
100 Yes		001 Test refused	
999 Unknown		100 Test given	
		999 Unknown if tested	
Drug Kit Number	<input type="checkbox"/> Unknown	Drug Test Type	970
		100 Blood	970 Not applicable
		101 Urine	999 Unknown
		102 Both blood and urine	
		103 Saliva	
		198 Other	
Drug Test Results		Not applicable	

DRIVER ACTIONS			
Driver Actions at Time of Crash	100	Avoidance Maneuver	100
000 No contributing action	101	000 No avoidance maneuver	
100 Disregarded other road markings	102	100 Accelerating	
101 Disregarded other traffic signs	103	101 Accelerating and steering left	
102 Failed to keep in proper lane		102 Accelerating and steering right	
103 Failed to yield right-of-way		103 Braking and steering left	
104 Followed too closely		104 Braking and steering right	
105 Improper backing		105 Braking (lockup)	
106 Improper passing		106 Braking (no lockup)	
107 Improper turn		107 Braking (lockup unknown)	
108 Careless driving, inattentive operation, improper driving, or driving without due care		108 Releasing brakes	
109 Operating the vehicle in an erratic, reckless, or negligent manner		109 Steering left	
110 Over-correcting or over-steering		110 Steering right	
		980 Other	
		999 Unknown	
980 Other contributing action			
999 Unknown			
Pre-Collision Stability			
000 Tracking			
100 Skidding longitudinally - rotation less than 30 degrees			
200 Skidding laterally - clockwise rotation			
201 Skidding laterally - counter-clockwise rotation			
299 Skidding laterally - rotation direction unknown			
980 Other vehicle loss of control			
999 Unknown			

CITATIONS	
CRASH REPORT - DRIVER CONDITION AND CIRCUMSTANCES	

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DESCRIPTION AND INFORMATION									
<div>Check if this vehicle had no driver <input type="checkbox"/></div>		<div>Hit and Run 000 No, did not leave scene 100 Yes, driver and vehicle left scene 101 Yes, only driver left scene</div>		<div>000 Vehicle Type 100 Motor vehicle in transport 101 Parked motor vehicle 102 Working vehicle / equipment</div>		<div>100 Vehicle Body Type <u>Passenger Vehicles</u> 100 Passenger car 101 Passenger van / Minivan (less than 9 seats) 102 (Sport) utility vehicle <u>Construction / Farm Equipment</u> 200 Construction equipment (backhoe, bulldozer, etc.) 201 Farm equipment (tractor, combine, harvester, etc.) <u>Cycle / Off Road / Recreation</u> 300 2-wheeled motorcycle 301 3-wheeled motorcycle 302 Moped or motorized bicycle 303 All-terrain vehicle / all-terrain cycle (ATV / ATC) 304 Golf Cart 305 Snowmobile 306 Low Speed Vehicle 307 Recreational off-highway vehicles (ROV) 308 Autocycle <u>Trucks</u> 400 Single unit truck 401 Truck tractor 498 Other truck <u>Large Passenger Vehicle</u> 500 Motor home 501 Passenger van (9-15 seats) 502 Passenger van (16+ seats) 503 Large limo 504 Mini-bus <u>Other</u> 980 Other 999 Unknown</div>			
VIN WERTY456654SDFGFF <div><input type="checkbox"/> Unknown</div>									
Model Year <div><input checked="" type="checkbox"/> Unknown</div>		Make Unknown		Model Unknown		Color Ivory			
License Plate <div><input type="checkbox"/> Missing</div> <div><input type="checkbox"/> Non-expiring</div> <div>State LA<div><input type="checkbox"/> Unknown</div>Number E45Y<div><input type="checkbox"/> Unknown</div>Year 2021<div><input type="checkbox"/> Unknown</div></div>									
Owner Name <div><input type="checkbox"/> Same as driver<div><input checked="" type="checkbox"/> Unknown</div></div>									
Owner Address <div><input type="checkbox"/> Same as driver<div><input checked="" type="checkbox"/> Unknown</div></div> <div>StreetCityStatePostal Code</div>									
<div>Insurance<div><input type="checkbox"/> Uninsured at time of crash</div><div>Company<div><input checked="" type="checkbox"/> Unknown</div>Phone #<div><input checked="" type="checkbox"/> Unknown</div>NAIC #<div><input checked="" type="checkbox"/> Unknown</div>Policy #<div><input checked="" type="checkbox"/> Unknown</div>Expiration Date<div><input checked="" type="checkbox"/> Unknown</div></div></div>									
DAMAGE									
<div>Damage Extent 000 None 100 Minor damage 101 Functional damage 102 Disabling damage 990 Vehicle not at scene</div>		<div>101 Initial Point of Contact <div><div>7891011</div><div>6<div>→</div>12</div><div>54321</div></div><div><input type="checkbox"/> 000 Non-collision <input type="checkbox"/> 001 Vehicle not at scene <input type="checkbox"/> 100 Top <input type="checkbox"/> 113 Undercarriage <input type="checkbox"/> 114 Cargo Loss <input type="checkbox"/> 999 Unknown</div></div>		<div>Damaged Areas <div><div>7891011</div><div>6<div>→</div>12</div><div>54321</div></div><div><input type="checkbox"/> 001 Vehicle not at scene <input type="checkbox"/> 002 No damage <input checked="" type="checkbox"/> 100 Top <input checked="" type="checkbox"/> 113 Undercarriage</div></div>		<div>Tow Status 000 Not towed 100 Towed, but not due to disabling damage 101 Towed (or will be towed) due to disabling damage Towed By<div><input type="checkbox"/> Unknown</div></div> <div>100 Tow Authority 100 Owner 101 Law enforcement 970 Not applicable 980 Other toe tows</div>			
MOTOR VEHICLE CIRCUMSTANCES									
<div>Vehicle Usage 000 No special function 100 Bus - school (public or private) 101 Bus - childcare / daycare 102 Bus - transit / commuter 103 Bus - charter / tour 104 Bus - intercity 105 Bus - shuttle 198 Bus - other 200 Farm vehicle 201 Fire truck 202 Highway / maintenance 203 Mail carrier 204 Military 205 Ambulance 206 Police 207 Public utility 208 Non-transport emergency services vehicle 209 Safety service patrols - incident response 210 Other incident response 211 Rental truck (over 10,000 lbs) 212 Towing - incident response 213 Truck acting as crash attenuator 214 Taxi 215 Vehicle used for electronic ride-hailing (transportation network company)</div>		<div>214 Vehicle Maneuver 100 Going straight 101 Backing 102 Merging 103 Making U-turn 104 Negotiating a curve 106 Turning left 107 Turning right 108 Traveling wrong way</div>		<div>200 Leaving a parking position 300 Entering a parking position 400 Slowing 500 Parked 501 Stopped</div>		<div>980 Other 999 Unknown</div>			
		<div>Vehicle Maneuver Reason 000 Normal movement 100 To avoid other vehicle 101 To avoid non-motorist 102 To avoid animal 198 To avoid other object 200 Passing</div>		<div>201 Vehicle out of control, not passing 202 Vehicle out of control, passing 203 For traffic control 204 Due to congestion 205 Due to prior crash (collision) 206 Due to driver condition</div>		<div>207 Due to driver violation 208 Due to vehicle condition (failure) 209 Due to pavement condition 210 High wind 980 Other 999 Unknown</div>			
		<div>Emergency Vehicle Usage 000 Non-emergency, non-transport 100 Non-emergency transport 200 Emergency operation, emergency warning equipment not in use 201 Emergency operation, emergency warning equipment in use 970 Not applicable 999 Unknown</div>		<div>970</div>		<div>Direction of Travel Before Crash 000 Not on roadway 001 In roadway but not in motion 002 Not on trafficway 100 Northbound 300 Eastbound 500 Southbound 700 Westbound 999 Unknown</div>			
CRASH REPORT - MOTOR VEHICLE DESCRIPTION AND IDENTIFICATION									

Motor Vehicle # 2	Rev. 2024-1	Case #	L-202000-23	Page	9	of	20							
MOTOR VEHICLE CIRCUMSTANCES														
Skidmark Data (Feet)		Distance Traveled After Impact (Feet) <input checked="" type="checkbox"/> Unknown		Contributing Defects		109								
Front Left <div></div>	Front Right <div></div>	<input type="checkbox"/> Not applicable or measured <input checked="" type="checkbox"/> Unknown		Vehicle Lighting		101								
Rear Left <div></div>	Rear Right <div></div>	000 Headlights off 100 Headlights on 101 Daytime running lights 999 Unknown		000 None 100 Brakes 101 Exhaust system 102 Body, doors 103 Steering 104 Power train 105 Suspension 106 Tires 107 Wheels 108 Headlights 109 Tail lights 110 Signal lights 111 All lights 112 Window / windshield 113 Mirrors 114 Wipers 115 Truck coupling / trailer hitch / safety chains 980 Other 999 Unknown										
Traffic Control Device Types and Statuses														
Traffic Control Device Types		Devices Present		Devices Inoperative or Missing										
000 None	300 Flashing railroad crossing (may include gates)	1	100	1	000									
100 Person (including flagger, law enforcement, crossing guard, etc)	301 Flashing school zone signal	2	201	2										
200 Bicycle crossing sign	302 Flashing traffic control signal	3	205	3										
201 Curve Ahead warning sign	303 Lane use control signal	4	400	4										
202 Intersection Ahead warning sign	304 Ramp meter signal													
203 Pedestrian crossing sign	305 Traffic control signal													
204 Railroad crossing sign	398 Other signal													
205 Reduce Speed Ahead warning sign	400 Bicycle crossing													
206 School zone sign	401 Pedestrian crossing													
207 Stop sign	402 Railroad crossing													
208 Yield sign	403 School zone													
298 Other warning sign	404 Yellow no passing line													
	405 White or yellow dash line													
	406 Solid white lane line													
	498 Other pavement marking (excluding edgelines, centerlines, or lane lines)													
980 Other	999 Unknown													
Trafficway Division		100		Barrier Type		102								
000 Not divided	100 Divided, flush median (greater than 4 ft wide)	000 None		100 Cable barrier										
001 Not divided, with a continuous left turn lane	101 Divided, raised median (curbed)	101 Concrete barrier (e.g. Jersey barrier)		100 One-way										
	102 Divided, depressed median	102 Earth embankment		200 Two-way										
	999 Unknown	103 Guardrail		Speed Limit										
		980 Other		55 <input type="checkbox"/> Unknown <input type="checkbox"/> N/A										
Roadway Grade	101	Number of Through Lanes	2	Number of Auxiliary Lanes	2	Roadway Alignment	101	Permitted Travel	200	HOV Lane Presence	000	HOV Lane Relation	000	
000 Not on trafficway						000 Not on trafficway		000 Not on trafficway		000 None present		000 No		
100 Level						100 One-way		100 One-way		100 Separated barrier, flush (greater than 4 ft wide), raised or depressed median		100 Yes		
101 Uphill						100 Straight		100 Straight		101 Not separated, painted pavement markings, post-mounted delineators				
102 Hillcrest						101 Curve left		101 Curve left						
103 Downhill						102 Curve right		102 Curve right						
104 Sag (bottom)														
MOTOR VEHICLE EVENTS														
Sequence of Events		1	201	2	203	3	203	4		Most Harmful Event				203
Non-Harmful Events								Collision with Fixed Object						
000 Cross centerline 001 Cross median 002 End departure (T-intersection, dead-end, etc.) 003 Downhill runaway 004 Equipment failure (blown tire, brake failure, etc.)								005 Ran off roadway left 006 Ran off roadway right 007 Reentering roadway 008 Separation of units 009 Other non-harmful event						
Non-Collision Events								Collision with Person / Vehicle / Non-Fixed Object						
100 Cargo/equipment loss or shift 101 Fell/jumped from motor vehicle 102 Fire/explosion 103 Immersion, full or partial 104 Jackknife 105 Overturn/rollover 106 Thrown or falling object 198 Other non-collision harmful event								200 Collision with animal (live) 201 Collision with motor vehicle in transport 202 Collision with parked motor vehicle 203 Collision with pedalcycle (including bicycles) 204 Collision with pedestrian 205 Collision with railway vehicle (train, engine) 206 Collision with object at rest from MV in transport 207 Collision with falling, shifting cargo, or anything set in motion by MV 208 Collision with work zone/maintenance equipment 209 Collision with farm equipment 297 Collision with other non-motorist 298 Collision with other non-fixed object						
								300 Collision with bridge overhead structure 301 Collision with bridge pier or support 302 Collision with bridge rail 303 Collision with cable barrier 304 Collision with concrete traffic barrier 305 Collision with culvert 306 Collision with curb 307 Collision with ditch 308 Collision with embankment 309 Collision with fence 310 Collision with guardrail end terminal 311 Collision with guardrail face 312 Collision with impact attenuator/crash cushion 313 Collision with mailbox 314 Collision with traffic sign support 315 Collision with traffic signal support 316 Collision with tree (standing) 317 Collision with utility pole/light support						
								396 Collision with other post,pole,or support 397 Collision with other traffic barrier 398 Collision with other fixed object (wall, building, tunnel, etc.) 399 Collision with unknown fixed object						
CRASH REPORT - MOTOR VEHICLE CIRCUMSTANCES AND EVENTS														

Motor Vehicle #
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COMMERCIAL MOTOR VEHICLE INFORMATION

Vehicle Configuration

000 Vehicles 10,000 lbs or less
100 Vehicles 10,000 lbs or less placarded for hazardous materials
200 Bus/large van (seats 9-15 occupants, including driver)
201 Bus (seats more than 15 occupants, including driver)

300 Single-unit truck (2-axle and GVWR > 10,000 lbs.)
301 Single-unit truck (3 or more axles)
302 Truck pulling trailer(s)
303 Truck tractor (bobtail)
304 Truck tractor/semi-trailer
305 Truck tractor/double
306 Truck tractor/triple
307 Truck more than 10,000 lbs., cannot classify

999 Unknown

Hazardous Materials Placard

000 Had no placard and not carrying hazardous materials
001 Had a placard, not carrying hazardous materials
100 Carried hazardous material that required placarding
200 Carried hazardous materials without placard 999 Unknown

000

Hazardous Material ID

N/A

Hazardous Material Class

970

1 Explosives
2 Gas
3 Flammable liquids
4 Other flammable substances
5 Oxidizing substances and organic peroxides
6 Toxic (poisonous) and infectious substances
7 Radioactive material
8 Corrosives
9 Miscellaneous dangerous goods

970 Not applicable
999 Unknown

Cargo Body Type

000 No cargo body
100 Bus
101 Auto transporter
102 Cargo tank
103 Concrete mixer
104 Dump
105 Flatbed
106 Garbage / refuse
107 Grain / chips / gravel
108 Intermodal container chassis
109 Log
110 Pole trailer
111 Van / enclosed box
112 Vehicle towing another vehicle
970 Not applicable
980 Other
999 Unknown

970

Special Sizing

☒ 000 No special sizing
☐ 100 Over-height
☐ 101 Over-length
☐ 102 Over-weight
☐ 103 Over-width
☐ 999 Unknown

Hazardous Materials Released from Vehicle Cargo Compartment

970

000 No, hazardous materials not released
100 Yes, hazardous materials released
970 Not applicable

Motor Carrier Type

000

000 Personal vehicle
001 Not in commerce: government
002 Not in commerce: personal rental truck or bus
098 Not in commerce: other
100 Interstate carrier
101 Intrastate carrier

Motor Carrier Identification

970

100 US DOT number
101 State number
970 Not applicable
999 Unknown/unable to determine

Motor Carrier Name

☐ Unknown

Motor Carrier ID Number

Load Permitted

970

000 Non-permitted load
100 Permitted load
970 Not applicable (not a qualifying vehicle)
999 Unknown

Number of Axles

☐ Unknown

State

Motor Carrier Address

☐ Unknown

Street

City

State

Postal Code

Motor Carrier Phone Number

☐ Unknown

GVWR/GCWR

970

100 Light (less than 10,000 lbs.GVWR/GCWR)
101 Medium (10,001 - 26,000 lbs GVWR/GCWR)
102 Heavy (greater than 26,000 lbs GVWR/GCWR)
970 Not applicable (not a qualifying vehicle)
999 Unknown

Commodity Hauled

TRAILER INFORMATION

TRAILER #

VIN

☐ Unknown

Number of Axles

☐ Unknown

Year

☐ Unknown

Make

☐ Unknown

Model

☐ Unknown

License Plate

☐ Missing

☐ Non-expiring

State

☐ Unknown

Number

☐ Unknown

Year

☐ Unknown

TRAILER INFORMATION

TRAILER #

VIN

☐ Unknown

Number of Axles

☐ Unknown

Year

☐ Unknown

Make

☐ Unknown

Model

☐ Unknown

License Plate

☐ Missing

☐ Non-expiring

State

☐ Unknown

Number

☐ Unknown

Year

☐ Unknown

TRAILER INFORMATION

TRAILER #

VIN

☐ Unknown

Number of Axles

☐ Unknown

Year

☐ Unknown

Make

☐ Unknown

Model

☐ Unknown

License Plate

☐ Missing

☐ Non-expiring

State

☐ Unknown

Number

☐ Unknown

Year

☐ Unknown

Motor Vehicle # 2		DRIVER INFORMATION		Case #	L-202000-23	Page	11	of	20
DRIVER INFORMATION									
Name <input type="checkbox"/> Unknown				Age <input checked="" type="checkbox"/> Unknown	Sex	100	Race		
first2 middle2 last2					100 Female 101 Male 999 Unknown		100 American Indian or Alaska Native 101 Asian or Pacific Islander 102 Black 103 White 980 Other 999 Unknown		
Address <input checked="" type="checkbox"/> Unknown				Phone Number		<input checked="" type="checkbox"/> Not Collected			
Street City State Postal Code									
Incident Responder				000	Date of Birth		<input checked="" type="checkbox"/> Unknown	Ethnicity	
000 No 102 Police 980 Other 100 EMS 103 Tow operator 999 Unknown 101 Fire 104 Transportation (i.e. maintenance workers, safety service patrol operators, etc.)								100 Hispanic 101 Other than Hispanic 999 Unknown	
DRIVER LICENSE INFORMATION									
License Status		000	License Class		970	Driver License Type		970	Commercial Driver License Status
100 Valid license 004 Suspended 000 Not licensed 999 Unknown 001 Canceled or denied 002 Expired 003 Revoked			000 None 100 Class A 101 Class B 102 Class C 200 Light commercial/chauffeur (LA class D) 300 Motorcycle only 400 Regular driver license (LA class E) 970 Not applicable			100 Non-CDL driver license 101 Non-CDL restricted driver license (learner's permit, temporary/limited, graduated driver license, etc.) 200 Commercial driver license (CDL) 970 Not applicable			100 Valid 000 Canceled or denied 101 Learner's permit 001 Disqualified 002 Expired 003 Revoked 004 Suspended 098 Other (not valid) 970 Not applicable (no CDL) 999 Unknown
License Number		License State							
Endorsements on License		Endorsement Compliance		000					
<input type="checkbox"/> 000 None/not applicable <input type="checkbox"/> 100 H - Hazardous materials <input type="checkbox"/> 101 N - Tank vehicle <input type="checkbox"/> 102 P - Passenger <input type="checkbox"/> 103 S - School <input type="checkbox"/> 104 T - Double/triple trailers <input type="checkbox"/> 105 X - Combination of tank vehicle and hazardous materials <input type="checkbox"/> 200 M - Motorcycle <input type="checkbox"/> 298 Other non-commercial license endorsements <input type="checkbox"/> 999 Unknown		000 No endorsements required for the vehicle 100 Endorsements required, complied with 101 Endorsements required, not complied with 199 Endorsements required, compliance unknown 999 Unknown if endorsements required		Restrictions on License					
				Alcohol Interlock Presence					
				000 No 970 Not applicable 100 Yes 999 Unknown					
DRIVER SEATING AND SAFETY INFORMATION									
Seating Position		100		Restraint Systems Used					
Standard Vehicle Seats		Other Seating Positions		001 None used – motor vehicle occupant 002 No helmet 970 Not applicable 980 Other 999 Unknown					
Front		700 Unenclosed cargo area		100 Booster seat 200 DOT-compliant motorcycle helmet					
Row	Left	Middle	Right	Unk	101 Child restraint system – forward facing 201 Not DOT-compliant motorcycle helmet				
1	100	101	102	199	102 Child restraint system – rear facing 299 Unknown if DOT-compliant motorcycle helmet				
2	200	201	202	299	103 Child restraint system – type unknown				
3	300	301	302	399	104 Lap belt only used				
4	400	401	402	499	105 Shoulder and lap belt used				
Oth	500	501	502	599	106 Shoulder belt only used				
Unk	600	601	602	699	107 Stretcher				
		801 Sleeper section of cab (truck)		108 Wheelchair					
		800 Trailing unit		199 Restraint used – type unknown					
		898 Other enclosed cargo area							
		970 Not applicable							
		999 Unknown							
Air Bags Deployed		Ejection		100		Extrication			
<input type="checkbox"/> 000 Not deployed <input type="checkbox"/> 001 Not deployed - switch off <input checked="" type="checkbox"/> 100 Front <input checked="" type="checkbox"/> 101 Side <input checked="" type="checkbox"/> 102 Curtain <input type="checkbox"/> 103 Other (knee, air belt, etc.)		<input type="checkbox"/> 970 Not applicable <input type="checkbox"/> 999 Deployment unknown		000 Not ejected 100 Ejected, partially 101 Ejected, totally 970 Not applicable 999 Unknown		000 No 100 Trapped and extricated 101 Trapped but not extricated 999 Unknown			

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MEDICAL INFORMATION			
Injury Status	100	Type of Medical Transportation	101
100 (K) Fatal Injury	000 Not transported	980 Other	EMS Response Agency Advanced Emergency Medical Services
101 (A) Suspected Serious Injury	100 EMS air	999 Unknown	
102 (B) Suspected Minor Injury	101 EMS ground		
103 (C) Possible Injury	200 Law enforcement		
104 (O) No Apparent Injury			
EMS Response Run #	<input checked="" type="checkbox"/> Unknown		
Universally Unique Identifier	<input type="checkbox"/> Not applicable <input checked="" type="checkbox"/> Unknown		Facility Receiving Patient
		Ochsner Acadia General Hospital	

DRIVER CONDITION AND CIRCUMSTANCES				
Conditions at Time of Crash	102	Distraction Action	000	
000 Apparently normal	103	000 Not distracted	Distraction Source	
100 Asleep/blacked out		100 Talking / listening		970
101 Fatigued		101 Manually operating a device		999
102 Emotional (depressed, angry, disturbed, etc.)		(e.g., texting, dialing, playing game, etc.)		
103 Ill (sick), fainted		200 Inattentive		
104 Physically impaired		980 Other distraction or distraction details unknown		
105 Under the influence of medications/drugs/alcohol		999 Unknown if distracted		
106 Inattentive/distracted				
970 Not applicable				
980 Other				
999 Unknown				
Suspected Alcohol Usage	000	Alcohol Kit Number	<input type="checkbox"/> Unknown	
000 No	000 Test not given	100 Blood	Alcohol Test Type	
100 Yes	001 Test refused	101 Blood clot	970	
999 Unknown	100 Test given	102 Blood plasma/serum	300 Urine	
	999 Unknown if tested		301 Vitreous	
			302 Liver	
		200 Breath	970 Not applicable	
		201 Preliminary breath test (PBT)	980 Other	
Suspected Drug Usage	000	Drug Kit Number	<input type="checkbox"/> Unknown	
000 No	000 Test not given	100 Blood	Drug Test Type	
100 Yes	001 Test refused	101 Urine	970	
999 Unknown	100 Test given	102 Both blood and urine	999 Unknown	
	999 Unknown if tested	103 Saliva	Drug Test Results	
		198 Other	Not applicable	

DRIVER ACTIONS			
Driver Actions at Time of Crash	104	Avoidance Maneuver	106
000 No contributing action	110	000 No avoidance maneuver	Pre-Collision Stability
100 Disregarded other road markings	108	100 Accelerating	000 Tracking
101 Disregarded other traffic signs	109	101 Accelerating and steering left	100 Skidding longitudinally - rotation less than 30 degrees
102 Failed to keep in proper lane		102 Accelerating and steering right	200 Skidding laterally - clockwise rotation
103 Failed to yield right-of-way		103 Braking and steering left	201 Skidding laterally - counter-clockwise rotation
104 Followed too closely		104 Braking and steering right	299 Skidding laterally - rotation direction unknown
105 Improper backing		105 Braking (lockup)	980 Other vehicle loss of control
106 Improper passing		106 Braking (no lockup)	999 Unknown
107 Improper turn		107 Braking (lockup unknown)	
108 Careless driving, inattentive operation, improper driving, or driving without due care		108 Releasing brakes	
109 Operating the vehicle in an erratic, reckless, or negligent manner		109 Steering left	
110 Over-correcting or over-steering		110 Steering right	
		980 Other	
		999 Unknown	
980 Other contributing action			
999 Unknown			

CITATIONS	

CRASH REPORT - DRIVER CONDITION AND CIRCUMSTANCES

LOUISIANA UNIFORM CRASH REPORT
NON-MOTORIST INFORMATION

Non-Motorist #		Rev. 2024-1		Case #		L-202000-23		Page 13 of 20	
NON-MOTORIST INFORMATION									
Name <input type="checkbox"/> Unknown nmfirst1 nmmiddle1 nmlast1 <small>First Middle Last Suffix</small>				Age <input type="checkbox"/> Unknown 15		Sex 101 100 Female 101 Male 999 Unknown		Race 101 100 American Indian or Alaska Native 101 Asian or Pacific Islander 102 Black 103 White 980 Other 999 Unknown	
Address <input checked="" type="checkbox"/> Unknown <small>Street City State Postal Code</small>				Phone Number <input checked="" type="checkbox"/> Not Collected					
Incident Responder 000 000 No 102 Police 980 Other 100 EMS 103 Tow operator 999 Unknown 101 Fire 104 Transportation (i.e. maintenance workers, safety service patrol operators, etc.)				Date of Birth <input checked="" type="checkbox"/> Unknown		Ethnicity 101 100 Hispanic 101 Other than Hispanic 999 Unknown			
NON-MOTORIST CIRCUMSTANCES									
Non-Motorist Type 200		Initial 101		Location 105					
100 Bicyclist 198 Other cyclist 200 Pedestrian 298 Other pedestrian on personal conveyance 300 Occupant of a non-motor vehicle transportation device 500 Person in or on a building 999 Unknown		Contact Point 100 Front (12 o'clock) 101 Right (3 o'clock) 102 Rear (6 o'clock) 103 Left (9 o'clock) 999 Unknown		100 Intersection - marked crosswalk 101 Intersection - unmarked crosswalk 102 Intersection - other 103 Median/crossing island 104 Midblock - marked crosswalk 105 Shoulder/roadside 106 Travel lane - other location		200 Signed route (no pavement marking) 201 Shared lane markings 202 On-street bike lanes 203 On-street buffered bike lanes 204 Separated bike lanes 205 Off-street trails/sidepaths 980 Other 999 Unknown		300 Driveway access 301 Non-trafficway area 302 Shared-use path or trail 303 Sidewalk	
Struck by Vehicle # 1		Origin/Destination 101 100 Going to or from school (K-12) 101 Going to or from transit 970 Not applicable 999 Unknown		Safety Equipment <input checked="" type="checkbox"/> 000 None <input type="checkbox"/> 100 Helmet <input type="checkbox"/> 101 Protective pads used (elbows, knees, shins, etc.) <input type="checkbox"/> 102 Reflective wear (backpack, triangles, etc.)		<input type="checkbox"/> 103 Lighting <input type="checkbox"/> 980 Other <input type="checkbox"/> 104 Reflectors <input type="checkbox"/> 999 Unknown			
Action Prior to Crash 101		Actions or Circumstances At Time of Crash 100				Clothing Brightness 100		Upper 100	
000 None 100 Adjacent to roadway (e.g., shoulder, median) 101 Crossing roadway 102 Waiting to cross roadway 103 Walking/cycling along roadway against traffic (in or adjacent to travel lane) 104 Walking/cycling along roadway with traffic (in or adjacent to travel lane) 105 Walking/cycling on sidewalk 106 Working in trafficway (incident response) 198 In roadway -other 980 Other 999 Unknown		000 None (no improper action) 100 Dart / dash 101 Disabled vehicle related (working on, pushing, leaving/approaching) 102 Entering/exiting parked/standing vehicle 103 Failure to obey traffic signs, signals, or officer 104 Failure to yield right-of-way 105 Improper passing 106 Improper turn/merge 107 Inattentive (talking, eating, etc.) 108 In roadway improperly (standing, lying, working, playing)				101 100 Light 101 Dark 970 Not applicable 999 Unknown		Lower 101	
NON-MOTORIST MEDICAL INFORMATION									
Injury Status 103		Type of Medical Transportation 000		EMS Response Agency		EMS Response Run # <input type="checkbox"/> Unknown			
100 (K) Fatal Injury 101 (A) Suspected Serious Injury 102 (B) Suspected Minor Injury 103 (C) Possible Injury 104 (O) No Apparent Injury		000 Not transported 100 EMS air 101 EMS ground 200 Law enforcement 980 Other 999 Unknown		Not applicable					
				Universally Unique Identifier <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Unknown		Facility Receiving Patient Not applicable			
NON-MOTORIST CONDITION									
Conditions at the Time of the Crash 103		Distraction Action 000		Distraction Source 970					
000 Apparently normal 100 Asleep/blacked out 101 Fatigued 102 Emotional (depressed, angry, disturbed, etc.) 103 Ill (sick), fainted 104 Physically impaired 105 Under the influence of medications/ drugs/alcohol 106 Inattentive/distracted		970 Not applicable 980 Other 999 Unknown		000 Not distracted 100 Talking / listening 101 Manually operating a device (texting, typing, dialing, playing game, etc.) 200 Inattentive 980 Other distraction or distraction details unknown 999 Unknown if distracted		100 Hands-free mobile phone 101 Hand-held mobile phone 102 Vehicle-integrated device 198 Other electronic device 200 Passenger or other non-motorist 201 External to vehicle/non-motorist area 298 Other 970 Not applicable 999 Unknown			
Suspected Alcohol Usage 100		Test Status 100		Alcohol Kit Number <input type="checkbox"/> Unknown		Alcohol Test Type 200		Alcohol Test Results 000 BAC	
000 No 100 Yes 999 Unknown		000 Test not given 001 Test refused 100 Test given 999 Unknown if tested				100 Blood 300 Urine 101 Blood clot 301 Vitreous 102 Blood plasma/serum 302 Liver 200 Breath 970 Not applicable 201 Preliminary breath test (PBT) 980 Other		000 Results pending 001 Negative results with no actual value 100 Results received 101 Positive results with no actual value 970 Not applicable 999 Unknown	
Suspected Drug Usage 999		Test Status 000		Drug Kit Number <input type="checkbox"/> Unknown		Drug Test Type 970		Drug Test Results	
000 No 100 Yes 999 Unknown		000 Test not given 001 Test refused 100 Test given 999 Unknown if tested				100 Blood 970 Not applicable 101 Urine 999 Unknown 102 Both blood and urine 103 Saliva 198 Other		Not applicable	

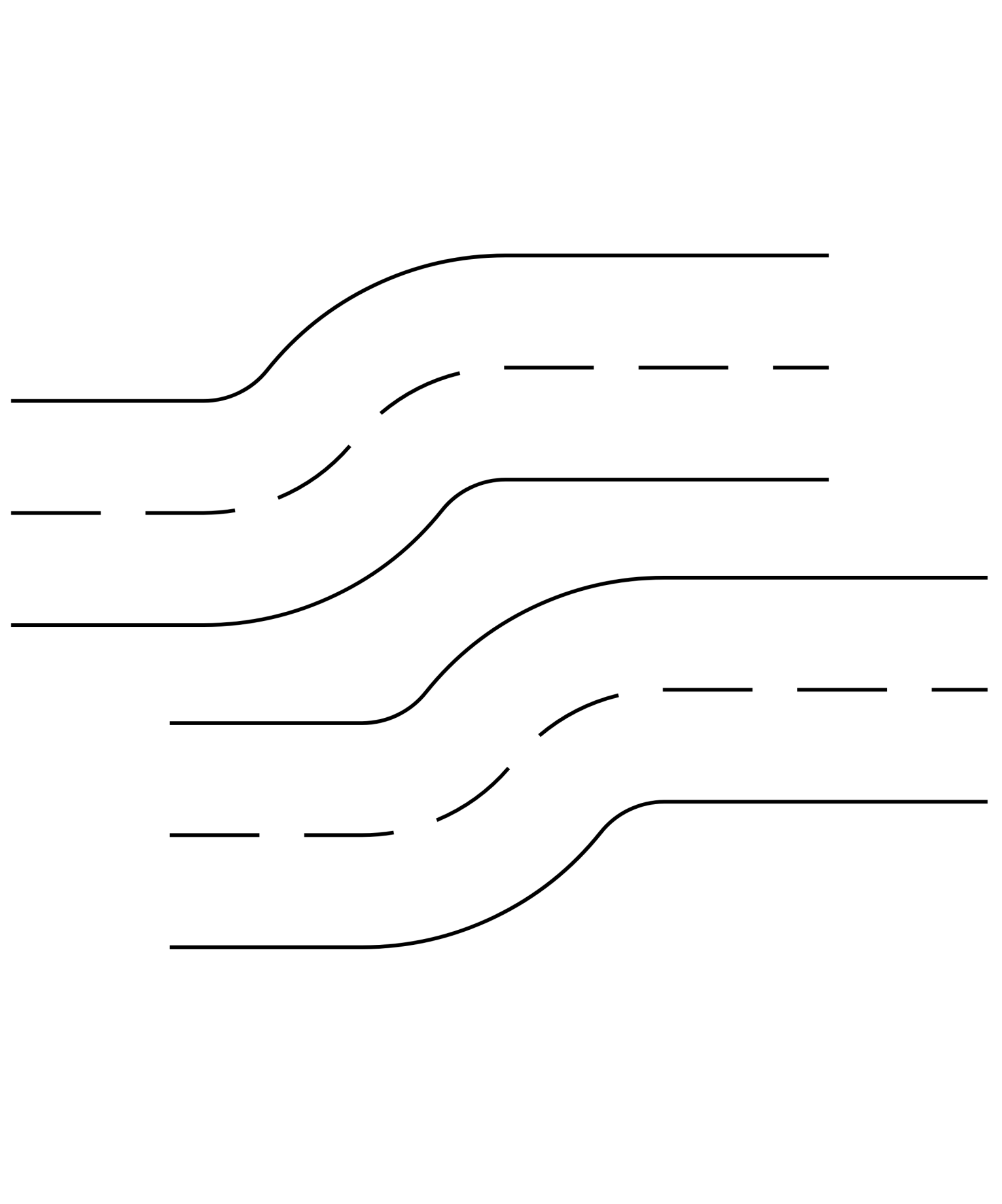
Non-Motorist # 2		Rev. 2024-1		Case #		L-202000-23		Page 14 of 20			
NON-MOTORIST INFORMATION											
Name <input type="checkbox"/> Unknown nmfirst2 nmlast2 First Middle Last Suffix					Age <input type="checkbox"/> Unknown 22		Sex <input type="checkbox"/> Unknown 100 Female 101 Male 999 Unknown		Race <input type="checkbox"/> Unknown 100 American Indian or Alaska Native 101 Asian or Pacific Islander 102 Black 103 White 980 Other 999 Unknown		
Address <input type="checkbox"/> Unknown 123 glen ave. park city UT 44555 Street City State Postal Code					Phone Number <input checked="" type="checkbox"/> Not Collected			Date of Birth <input type="checkbox"/> Unknown 12/13/1998			
Incident Responder 000 No 102 Police 980 Other 100 EMS 103 Tow operator 999 Unknown 101 Fire 104 Transportation (i.e. maintenance workers, safety service patrol operators, etc.)					Date of Birth <input type="checkbox"/> Unknown 12/13/1998			Ethnicity <input type="checkbox"/> Unknown 100 Hispanic 101 Other than Hispanic 999 Unknown			
NON-MOTORIST CIRCUMSTANCES											
Non-Motorist Type <input type="checkbox"/> Unknown 100 Bicyclist 198 Other cyclist 200 Pedestrian 298 Other pedestrian on personal conveyance 300 Occupant of a non-motor vehicle transportation device 500 Person in or on a building 999 Unknown		Initial Contact Point <input type="checkbox"/> Unknown 100 Front (12 o'clock) 101 Right (3 o'clock) 102 Rear (6 o'clock) 103 Left (9 o'clock) 999 Unknown		Location <input type="checkbox"/> Unknown 100 Intersection - marked crosswalk 101 Intersection - unmarked crosswalk 102 Intersection - other 103 Median/crossing island 104 Midblock - marked crosswalk 105 Shoulder/roadside 106 Travel lane - other location		Safety Equipment <input type="checkbox"/> Unknown 000 None 100 Helmet 101 Protective pads used (elbows, knees, shins, etc.) 102 Reflective wear (backpack, triangles, etc.)		Clothing Brightness <input type="checkbox"/> Unknown 100 Light 101 Dark 970 Not applicable 999 Unknown			
Struck by Vehicle # 2		Origin/Destination <input type="checkbox"/> Unknown 100 Going to or from school (K-12) 101 Going to or from transit 970 Not applicable 999 Unknown		Actions or Circumstances At Time of Crash <input type="checkbox"/> Unknown 000 None (no improper action) 100 Dart / dash 101 Disabled vehicle related (working on, pushing, leaving/approaching) 102 Entering/exiting parked/standing vehicle 103 Failure to obey traffic signs, signals, or officer 104 Failure to yield right-of-way 105 Improper passing 106 Improper turn/merge 107 Inattentive (talking, eating, etc.) 108 In roadway improperly (standing, lying, working, playing)		Upper <input type="checkbox"/> Unknown Lower <input type="checkbox"/> Unknown					
NON-MOTORIST MEDICAL INFORMATION											
Injury Status <input type="checkbox"/> Unknown 100 (K) Fatal Injury 101 (A) Suspected Serious Injury 102 (B) Suspected Minor Injury 103 (C) Possible Injury 104 (O) No Apparent Injury		Type of Medical Transportation <input type="checkbox"/> Unknown 000 Not transported 100 EMS air 101 EMS ground 200 Law enforcement 980 Other 999 Unknown		EMS Response Agency <input type="checkbox"/> Unknown Air Evac Lifeteam			EMS Response Run # <input checked="" type="checkbox"/> Unknown				
NON-MOTORIST CONDITION											
Conditions at the Time of the Crash <input type="checkbox"/> Unknown 000 Apparently normal 100 Asleep/blacked out 101 Fatigued 102 Emotional (depressed, angry, disturbed, etc.) 103 Ill (sick), fainted 104 Physically impaired 105 Under the influence of medications/ drugs/alcohol 106 Inattentive/distracted				Distraction Action <input type="checkbox"/> Unknown 000 Not distracted 100 Talking / listening 101 Manually operating a device (texting, typing, dialing, playing game, etc.) 200 Inattentive 980 Other distraction or distraction details unknown 999 Unknown if distracted		Distraction Source <input type="checkbox"/> Unknown 100 Hands-free mobile phone 101 Hand-held mobile phone 102 Vehicle-integrated device 198 Other electronic device 200 Passenger or other non-motorist 201 External to vehicle/non-motorist area 298 Other 970 Not applicable 999 Unknown					
Suspected Alcohol Usage <input type="checkbox"/> Unknown 000 No 100 Yes 999 Unknown		Test Status <input type="checkbox"/> Unknown 000 Test not given 001 Test refused 100 Test given 999 Unknown if tested		Alcohol Kit Number <input type="checkbox"/> Unknown		Alcohol Test Type <input type="checkbox"/> Unknown 100 Blood 101 Blood clot 102 Blood plasma/serum 200 Breath 201 Preliminary breath test (PBT)		Alcohol Test Results <input type="checkbox"/> Unknown 000 Results pending 001 Negative results with no actual value 100 Results received 101 Positive results with no actual value 970 Not applicable 999 Unknown		BAC <input type="checkbox"/> Unknown	
Suspected Drug Usage <input type="checkbox"/> Unknown 000 No 100 Yes 999 Unknown		Test Status <input type="checkbox"/> Unknown 000 Test not given 001 Test refused 100 Test given 999 Unknown if tested		Drug Kit Number <input checked="" type="checkbox"/> Unknown		Drug Test Type <input type="checkbox"/> Unknown 100 Blood 101 Urine 102 Both blood and urine 103 Saliva 198 Other		Drug Test Results <input type="checkbox"/> Unknown Results pending			
CRASH REPORT - NON-MOTORIST INFORMATION											

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CRASH DIAGRAM

Scene # 2	DIAGRAM Rev. 2024-1	Case #	L-202000-23	Page	16	of	20
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CRASH DIAGRAM



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CRASH NARRATIVE

The LACRASH software system is used by law enforcement agencies throughout the state of Louisiana to electronically capture motor vehicle accident reporting information.

LACRASH was developed to enhance the paper uniform motor vehicle traffic crash report form in the state of Louisiana. By electronically reproducing the crash report form, the LACRASH software allows officers to enter accident reporting information using a laptop in their patrol car or a desktop computer in their office. The electronic submission of the data helps to collect traffic crash reporting information in a timelier manner. With the added benefits of software edits, GPS devices, and card swipes, information collected using LACRASH is more accurate and complete.

Designed by the Center for Analytics & Research in Transportation Safety (CARTS) at Louisiana State University, the LACRASH system was initially released in December 2004 with a hand full of agencies going online January 1, 2005. As of October 2019, roughly 250 Louisiana law enforcement agencies were using LACRASH (~249 using version 2.0 SP1) with new and old agencies continually being added\upgraded as needed.

CARTS also analyzes the motor vehicle accident data and produces Louisiana Crash Data and Statistical Reports using data collected from the LACRASH application.

We invite you to browse our website to learn more about LACRASH. If you would like any additional information, please contact us at (225) 578-0366 or email us at lacrash@lsu.edu

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CRASH NARRATIVE

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