

Basic

TYPE, PLACE, CAUSE AND MECHANISM OF INJURY (PED)

Type of injury:	Place of injury:	Cause of injury:
<input type="radio"/> Closed <input type="radio"/> Penetrating <input type="radio"/> Blast <input type="radio"/> Crush <hr/> Inflicted injury (child abuse): <input type="radio"/> No <input type="radio"/> Suspect <input type="radio"/> Definite	<input type="radio"/> Street/highway <input type="radio"/> Public location (e.g. café, station) <input type="radio"/> Home/domestic <input type="radio"/> Work/school <input type="radio"/> Sport/recreation <input type="radio"/> Military deployment <input type="radio"/> Other: _____	<input type="radio"/> Road Traffic Incident <input type="radio"/> Incidental fall <input type="radio"/> Other non-intentional injury <input type="radio"/> Violence/assault <input type="radio"/> Act of mass violence <input type="radio"/> Suicide attempt <input type="radio"/> Other: _____

If Road Traffic Incident:

Victim:

- Motor vehicle occupant
- Pedestrian
- Cyclist
- Moped/Scooter
- Motor Bike
- Other _____

Intermediate

TYPE, PLACE, CAUSE AND MECHANISM OF INJURY (PED)

Type of injury:	Place of injury:	Cause of injury:	Mechanism of injury*:
<input type="radio"/> Closed <input type="radio"/> Penetrating <input type="radio"/> Blast <input type="radio"/> Crush <hr/> Inflicted injury (child abuse): <input type="radio"/> Suspected <input type="radio"/> Definite (perpetrator identified) <input type="radio"/> Not determined	<input type="radio"/> Street/highway <input type="radio"/> Public location (e.g. café, station) <input type="radio"/> Home/domestic <input type="radio"/> Work/school <input type="radio"/> Sport/recreation <input type="radio"/> Military deployment <input type="radio"/> Other: _____	<input type="radio"/> Road Traffic Incident <input type="radio"/> Incidental fall <input type="radio"/> Other non-intentional injury <input type="radio"/> Violence/assault <input type="radio"/> Act of mass violence <input type="radio"/> Suicide attempt <input type="radio"/> Other: _____	<input type="radio"/> Acceleration/Deceleration <input type="radio"/> Direct impact: blow to head <input type="radio"/> Direct impact: head against object <input type="radio"/> Crush <input type="radio"/> Blast <input type="radio"/> Ground level fall <input type="radio"/> Fall from height > 1 meter (3ft) <input type="radio"/> Gunshot wound <input type="radio"/> Fragment (incl. shell/shrapnel) <input type="radio"/> Other penetrating brain injury * Multiple categories permitted

If Road Traffic Incident:

Victim: <input type="radio"/> Motor vehicle occupant <input type="radio"/> Pedestrian <input type="radio"/> Cyclist <input type="radio"/> Moped/Scooter <input type="radio"/> Motor Bike <input type="radio"/> Other _____	Other party: <input type="radio"/> Motor vehicle <input type="radio"/> Pedestrian <input type="radio"/> Cyclist <input type="radio"/> Moped/Scooter <input type="radio"/> Motor Bike <input type="radio"/> Tram/Bus <input type="radio"/> Train/Metro <input type="radio"/> Obstacle <input type="radio"/> No other party <input type="radio"/> Unknown
---	--

