



LOCAL REPORT NUMBER *

HSY7001 OH1 1/19 [760-0820]

HSY8304 OH1U 1/19 [760-0820]

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MOTORIST / NON-MOTORIST	UNIT # 01		NAME: LAST, FIRST, MIDDLE HAYNES ALEXANDRA SHARON		DATE OF BIRTH 06291991		AGE 34		GENDER F										
	ADDRESS: STREET, CITY, STATE, ZIP 6294 CHESTNUT RD INDEPENDENCE OH 44131					CONTACT PHONE - INCLUDE AREA CODE													
	INJURIES 5		INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)		SAFETY EQUIPMENT USED 04		<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION 01		AIR BAG USAGE 1		EJECTION 1		TRAPPED 1		
	OL STATE		OPERATOR LICENSE NUMBER			OFFENSE CHARGED			LOCAL CODE <input type="checkbox"/>	OFFENSE DESCRIPTION				CITATION NUMBER					
	OL CLASS 4		ENDORSEMENT SELECT UP TO 2		RESTRICTION SELECT UP TO 3			DRIVER DISTRACTED BY 1	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> OTHER DRUG <input type="checkbox"/> MARIJUANA		CONDITION 1	STATUS 1	ALCOHOL TEST TYPE 1 VALUE		STATUS 1	TYPE 1	DRUG TEST(S) RESULT SELECT UP TO 4		
	UNIT # 02		NAME: LAST, FIRST, MIDDLE UNKNOWN					DATE OF BIRTH				AGE		GENDER U					
	ADDRESS: STREET, CITY, STATE, ZIP OH					CONTACT PHONE - INCLUDE AREA CODE													
	INJURIES		INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)		SAFETY EQUIPMENT USED 99		<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION 01		AIR BAG USAGE 1		EJECTION 1		TRAPPED 1		
	OL STATE		OPERATOR LICENSE NUMBER			OFFENSE CHARGED			LOCAL CODE <input type="checkbox"/>	OFFENSE DESCRIPTION				CITATION NUMBER					
	OL CLASS		ENDORSEMENT SELECT UP TO 2		RESTRICTION SELECT UP TO 3			DRIVER DISTRACTED BY 1	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> OTHER DRUG <input type="checkbox"/> MARIJUANA		CONDITION 1	STATUS 1	ALCOHOL TEST TYPE 1 VALUE		STATUS 1	TYPE 1	DRUG TEST(S) RESULT SELECT UP TO 4		
UNIT #		NAME: LAST, FIRST, MIDDLE					DATE OF BIRTH				AGE		GENDER						
ADDRESS: STREET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE														
INJURIES		INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)		SAFETY EQUIPMENT USED		<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION		AIR BAG USAGE		EJECTION		TRAPPED			
OL STATE		OPERATOR LICENSE NUMBER			OFFENSE CHARGED			LOCAL CODE <input type="checkbox"/>	OFFENSE DESCRIPTION				CITATION NUMBER						
OL CLASS		ENDORSEMENT SELECT UP TO 2		RESTRICTION SELECT UP TO 3			DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED ALCOHOL MARIJUANA OTHER DRUG		CONDITION	STATUS	ALCOHOL TEST TYPE VALUE		STATUS	TYPE	DRUG TEST(S) RESULT SELECT UP TO 4			
UNIT #		NAME: LAST, FIRST, MIDDLE					DATE OF BIRTH				AGE		GENDER						
ADDRESS: STREET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE														
INJURIES		INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)		SAFETY EQUIPMENT USED		<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION		AIR BAG USAGE		EJECTION		TRAPPED			
OL STATE		OPERATOR LICENSE NUMBER			OFFENSE CHARGED			LOCAL CODE <input type="checkbox"/>	OFFENSE DESCRIPTION				CITATION NUMBER						
OL CLASS		ENDORSEMENT SELECT UP TO 2		RESTRICTION SELECT UP TO 3			DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED ALCOHOL MARIJUANA OTHER DRUG		CONDITION	STATUS	ALCOHOL TEST TYPE VALUE		STATUS	TYPE	DRUG TEST(S) RESULT SELECT UP TO 4			
INJURIES		SEATING POSITION		AIR BAG		OL CLASS		OL RESTRICTION(S)		DRIVER DISTRACTION		TEST STATUS							
1 - FATAL		1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)		1 - NOT DEPLOYED		1 - CLASS A		1 - ALCOHOL INTERLOCK DEVICE		1 - NOT DISTRACTED		1 - NONE GIVEN							
2 - SUSPECTED SERIOUS INJURY		2 - FRONT - MIDDLE		2 - DEPLOYED FRONT		2 - CLASS B		2 - CDL INTRASTATE ONLY		2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)		2 - TEST REFUSED							
3 - SUSPECTED MINOR INJURY		3 - FRONT - RIGHT SIDE		3 - DEPLOYED SIDE		3 - CLASS C		3 - CORRECTIVE LENSES		3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE & CLASS B BUS		3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE							
4 - POSSIBLE INJURY		4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)		4 - DEPLOYED BOTH FRONT / SIDE		4 - REGULAR CLASS (OHIO = D)		4 - FARM WAIVER		4 - TALKING ON HAND-HELD COMMUNICATION DEVICE		4 - TEST GIVEN, RESULTS KNOWN							
5 - NO APPARENT INJURY		5 - SECOND - MIDDLE		5 - NOT APPLICABLE		5 - M / C MOPED ONLY		5 - EXCEPT CLASS A BUS		5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE		5 - TEST GIVEN, RESULTS UNKNOWN							
INJURED TAKEN BY		6 - SECOND - RIGHT SIDE		9 - DEPLOYMENT UNKNOWN		6 - NO VALID OL		7 - EXCEPT TRACTOR-TRAILER		6 - PASSENGER		ALCOHOL TEST TYPE							
1 - NOT TRANSPORTED /TREATED AT SCENE		7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)		EJECTION		H - HAZMAT		8 - INTERMEDIATE LICENSE RESTRICTIONS		7 - OTHER DISTRACTION INSIDE THE VEHICLE		1 - NONE							
2 - EMS		8 - THIRD - MIDDLE		1 - NOT EJECTED		M - MOTORCYCLE		9 - LEARNER'S PERMIT RESTRICTIONS		8 - OTHER DISTRACTIONS OUTSIDE THE VEHICLE		2 - BLOOD							
3 - POLICE		9 - THIRD - RIGHT SIDE		2 - PARTIALLY EJECTED		P - PASSENGER		10 - LIMITED TO DAYLIGHT ONLY		9 - OTHER / UNKNOWN		3 - URINE							
9 - OTHER / UNKNOWN		10 - SLEEPER SECTION OF TRUCK CAB		3 - TOTALLY EJECTED		N - TANKER		11 - LIMITED TO EMPLOYMENT		CONDITION		4 - BREATH							
SAFETY EQUIPMENT		11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)		4 - NOT APPLICABLE		Q - MOTOR SCOOTER		12 - LIMITED - OTHER		1 - APPARENTLY NORMAL		5 - OTHER							
1 - NONE USED		12 - PASSENGER IN UNENCLOSED CARGO AREA		TRAPPED		R - THREE-WHEEL MOTORCYCLE		13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)		2 - PHYSICAL IMPAIRMENT		DRUG TEST TYPE							
2 - SHOULDER BELT ONLY USED		13 - TRAILING UNIT		1 - NOT TRAPPED		S - SCHOOL BUS		14 - MILITARY VEHICLES ONLY		3 - EMOTIONAL (E.G. DEPRESSED, ANGRY, DISTURBED)		1 - NONE							
3 - LAP BELT ONLY USED		14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)		2 - EXTRICATED BY MECHANICAL MEANS		T - DOUBLE & TRIPLE TRAILERS		15 - MOTOR VEHICLES WITHOUT AIR BRAKES		4 - ILLNESS		2 - BLOOD							
4 - SHOULDER & LAP BELT USED		15 - NON-MOTORIST		3 - FREED BY NON-MECHANICAL MEANS		X - TANKER / HAZMAT		16 - OUTSIDE MIRROR		5 - EMOTIONAL (E.G. DEPRESSED, ANGRY, DISTURBED)		3 - URINE							
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING		99 - OTHER / UNKNOWN		GENDER		U - OTHER/UNKNOWN		17 - PROSTHETIC AID		6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUG									