

Fatal injury surveillance data collection form (short version)

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1.1 FACILITY NAME		
1.2 FACILITY TYPE <input type="radio"/> Mortuary <input type="radio"/> Hospital / Health facility		1.3 CASE IDENTIFICATION NUMBER
1.4 POSTMORTEM EXAM DATE yyyy-mm-dd		1.5 INTERNAL AUTOPSY PERFORMED? <input type="radio"/> Yes <input type="radio"/> No
1.6 DECEASED AGE	SELECT AGE UNIT <input type="radio"/> Years <input type="radio"/> Months (if < 2 yr) <input type="radio"/> Unknown	1.7 DECEASED SEX <input type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Unknown

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2.1 DATE OF INJURY yyyy-mm-dd	2.2 DATE OF DEATH yyyy-mm-dd
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3.1 PLACE OF INJURY OCCURRENCE		
<input type="radio"/> 01 Private house / home (including yard)	<input type="radio"/> 02 Residential institution	<input type="radio"/> 03 Medical service area
<input type="radio"/> 04 Street / highway / road	<input type="radio"/> 05 Railway line / station	<input type="radio"/> 06 Trade / service area
<input type="radio"/> 07 Industrial and construction area	<input type="radio"/> 08 Farm or place of primary production	<input type="radio"/> 09 Sea, lake, river, dam, borehole, well
<input type="radio"/> 10 Sports / athletics area	<input type="radio"/> 11 School, institution, or educational area	<input type="radio"/> 12 Public administrative area
<input type="radio"/> 13 Open land, beach, forest, desert	<input type="radio"/> 77 Other (please specify)	<input type="radio"/> 99 Unknown / unspecified

SPECIFY OTHER:

3.2 PLACE OF DEATH OCCURRENCE

- | | | |
|--|----------------------------------|---|
| <input type="radio"/> 01 At injury site | <input type="radio"/> 02 At home | <input type="radio"/> 03 In the ambulance / in transit to health facility |
| <input type="radio"/> 04 In hospital / health facility | <input type="radio"/> 77 Other | <input type="radio"/> 99 Unknown / unspecified |

SPECIFY OTHER:

4

4.1 APPARENT INTENT

- | | | |
|--|--|---|
| <input type="radio"/> 01 Unintentional (accidental) | <input type="radio"/> 02 Suicide / self-harm | <input type="radio"/> 03 Assault / homicide |
| <input type="radio"/> 04 Legal intervention / war operations | <input type="radio"/> 05 Natural | <input type="radio"/> 06 Undetermined |
| <input type="radio"/> 99 Unknown / unspecified | | |

4.2 MECHANISM OF INJURY

- | | | |
|---|--|---|
| <input type="radio"/> 01 Road traffic incident | <input type="radio"/> 02 Other transport incident | <input type="radio"/> 03 Blunt force (struck / hit by a person, animal or object) |
| <input type="radio"/> 04 Fall | <input type="radio"/> 05 Stab / cut | <input type="radio"/> 06 Animal bite |
| <input type="radio"/> 07 Drowning / submersion | <input type="radio"/> 08 Burn (smoke / fire / flames) | <input type="radio"/> 09 Burn (contact with heat / scald) |
| <input type="radio"/> 10 Poisoning | <input type="radio"/> 11 Suffocation, choking, hanging | <input type="radio"/> 12 Electrocutation |
| <input type="radio"/> 13 Firearm discharge / gun shot | <input type="radio"/> 14 Explosive blast | <input type="radio"/> 15 Envenomation |
| <input type="radio"/> 77 Other | <input type="radio"/> 99 Unknown / unspecified | |

MODE OF TRANSPORT

- | | | |
|---|--|--|
| <input type="radio"/> 01 Car | <input type="radio"/> 02 Pick-up, van or minibus (< 10-seater) | <input type="radio"/> 03 Truck / heavy transport vehicle |
| <input type="radio"/> 04 Bus (> 10-seater) | <input type="radio"/> 05 Motorized 3-wheeler | <input type="radio"/> 06 Motorized 2-wheeler (motorcycles, moped, E-bikes) |
| <input type="radio"/> 07 Walking | <input type="radio"/> 08 Cycles (bicycles, tricycles) | <input type="radio"/> 09 Non-motorized vehicles (rickshaws, carts, etc.) |
| <input type="radio"/> 77 Other transport mode | <input type="radio"/> 99 Unknown / unspecified | |

ROAD USER

- | | | |
|-------------------------------------|--|------------------------------------|
| <input type="radio"/> 01 Pedestrian | <input type="radio"/> 02 Driver / rider (including bicycles and motorcyclists) | <input type="radio"/> 03 Passenger |
| <input type="radio"/> 77 Other | <input type="radio"/> 99 Unknown / unspecified | |

SPECIFY OTHER:

COUNTER PART

- | | | |
|--|---|---|
| <input type="radio"/> 01 Pedestrian | <input type="radio"/> 02 Animal | <input type="radio"/> 03 Cycles (bicycles, tricycles) |
| <input type="radio"/> 04 Motorized 3-wheeler | <input type="radio"/> 05 Motorized 2-wheeler
(motorcycles, moped, E-bikes) | <input type="radio"/> 06 Car, pick-up truck or van |
| <input type="radio"/> 07 Heavy transport vehicle or
bus | <input type="radio"/> 08 Railway train or railway
vehicle | <input type="radio"/> 09 Other non-motorized vehicle |
| <input type="radio"/> 10 Fixed stationary object | <input type="radio"/> 11 Non-collision transport
incident | <input type="radio"/> 77 Other |
| <input type="radio"/> 99 Unknown / unspecified | | |

SPECIFY OTHER:

5

NATURE OF INJURY

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INCIDENT SUMMARY NARRATIVE

(From the autopsy report, police records, inquest data and bystander reports) Describe the cause, nature and circumstances of the injury.
