Thomas B. Zuzik, Jr. PO Box 241 Oldwick, NJ 08858

908-832-9620 Fax 908-832-5855

May 3, 2000

To:

Mr. Todd Stevenson & Ms. Sharon B. Winston Consumer Product Safety Commission

Dear Mr. Stevenson & Ms. Winston,

Below you will find a list of reports I would like to obtain from the CPSC in electronic format. At your request I have enclosed five preformatted 3-1/2" IBM format disks for you to put the information on. I also enclosed 1 zip drive disk also formatted in IBM format which can hold up to 100 Mega Bytes of information and prefer you use this if possible over the disks.

I would like the searches done in all databases if possible and limited to ages 10 and under only. I would also like to start with January 1, 1994 and run through the present date of April 30, 2000. This would be a total of 76 months of information.

If you could be so kind as to forward the completed list of items requested to the address listed above, it would be very appreciative. If you have any questions or need to talk to me before doing so, please either call me at 908-832-9620, fax to 908-832-5855 or E-Mail to tbz@superlink.net. I prefer E-mail because I check it three times a day.

The information I am looking for is,

- 1. "Falls from or off Porches, Balconies, upper levels, decks, banisters or rails"
- 2. "Jumps from or off Porches, Balconies, upper levels, decks, banisters or rails"
- 3. "(climb or climbing references) Porches, Balconies, upper levels, decks, banisters or rails"
- 4. "The product code of choice is 1817 for the searches above and then under 1829 also"
- I would like to make sure we get all accident investigations, reported incidents and death certificate files for above also.

If you need more disks or information please contact me. If at all possible I would like to have this information before May 26, 2000 which is about three weeks away.

I wish to thank you in advance for your help on this matter.

Sincerely,

Thomas b ZuzikJr

Thomas B. Zuzik, Jr.



# U.S. CONSUMER PRODUCT SAFETY COMMISSION WASHINGTON, DC 20207

Ida Harper-Brown Technical Information Specialist National Injury Information Clearinghouse Office of Information Services Tel: (301) 504-0424, X1180 Fax: (301) 504-0124 Email: ibrown@cpsc.gov

May 25, 2000

Mr. Thomas B. Zuzik, Jr. Post Office Box 241 Oldwick, NJ 08858

Dear Mr. Zuzik:

As recently requested by you, we are enclosing the specified item(s).

If you have any questions concerning any of the information or if we can be of further assistance, please feel free to contact us.

Sincerely,

Sda Harper-Brown
Ida Harper-Brown

Enclosure(s)

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The INDP, IPII and DTHS data cover the time period 01/01/1994 - 04/30/2000) for product codes 1817 and 1829.

PRODUCT CODE 1817 and 1829 FOR INDP ON THE FOLLOWING SEARCHS:

FALL/FELL - INFALL1817.TXT (28 records)

- INFALL1829.TXT (7 records)

JUMP - NO DATA FOUND - NO DATA FOUND

CLIMB

- INCLIMB1817.TXT (1 record)
- INCLIMB1829.TXT (1 record)

PRODUCT CODE 1817 and 1829 FOR IPII ON THE FOLLOWING SEARCHS:

2.7

FALL/FELL - IPFALL1817.TXT (675 records) - IPFALL1829.TXT (207 records)

JUMP - IPJUMP1817.TXT (14 records) - IPJUMP1829.TXT (3 records)

- IPCLIMB1817.TXT (9 records) - IPCLIMB1829.TXT (6 records)

PRODUCT CODE 1817 and 1829 FOR DTHS ON THE FOLLOWING SEARCHS:

FALL/FELL - DTFALL1817.TXT (66 records)

- DTFALL1829.TXT (11 records)

JUMP - NO DATA FOUND

- NO DATA FOUND

CLIMB - DTCLIMB1817.TXT (2 records)

- DTCLIMB1829.TXT (1 record)

The following is a record layout for INDP:

FIELD NAME	LENGTH	
Task Number Date of Accident (yyyymmdd) Body Part Diagnosis Disposition Location Age Sex City State Product 1 Product 2	13 File # 8 ONTE 2 2 1 1 3 Age 1 Ser 30 2 4	
Document Number Date enter (yyyymmdd) Type Category ID Source	10 8 1 10 2	

## The following is a record layout for IPII:

FIELD NAME	LENGTH
Document Number	9
Age	3
Date entered (yyyymmdd)	8
Date injury (yyyymmdd)	8
Precision of date injury	3 8 8 1 8
Date received (yyyymmdd)	8
City	30
Zip	5
Confirmed	1
Hazard type	1
Disposition	1
Issue	2
Letter sent	1
Office	3
Source	• 3
Type	2
Number of victim	3
Work related	5 1 1 2 1 3 3 2 3 1 4 4
Product 1	4
Year acquired 1	4
Product 2	4
Year acquired 2	4

The following is a record layout for DEATH CERTIFICATES:

FIELD NAME		LENGTH
Document Number		10
Age		3
Date accident (yyyymmdd)	•	8
Date of death (yyyymmdd)		8
Date entered (yyyymmdd)		8
Ecode		4
Location		1
Lotnum		5
Race		1
Sex		1
State		2
City		30
Work related		1
Zip		5
Product 1		4
Product 2		4
Task Number		13
ICD Code 10		4

#### DEATH CERTIFICATES

Document No. Taken from death certificate

External Cause (E Code) and Nature of Injury (N code) are derived from the "International Classification of Diseases", indicated on printouts as Ninth Revision and Eighth Revision (1973-1978).

Age of deceased. Under 2 years is indicated by prefix 2 (i.e., 203 = 3 months, 002 = 2

years, 021 = 21 years, 099 = 99 years and

above)

Date of Death Year, month, and day on which death occurred

Sex Male, female, or unknown

Date Entered Year, month, and day on which certificate was

entered in the computer

Race of deceased

State USPS 2-letter abbreviation of state in which

death occurred

Work Related Entries are yes, no, or unknown to indicate

whether death occurred on the job

Location Designates the general location at which

death took place

Products Identifies up to four products associated

with the death

Remarks Gives verbatim details of death as noted on

death certificate. Lot number is used

internally for filing purposes.

Information contained in the printout is intended to be a concise report of the actual death certificate. Commission contracts with State Health Departments provide using the data for statistical purposes only. Original documents are not available to requestors.

### REPORTED INCIDENTS

Identifying number assigned to each incident Document Number (Originating office/year/month/sequential

number/victim)

Date Received Date received by CPSC (year, month, day)

Internal date to indicate week of fiscal year Issue

that incident received

USPS 2-letter state abbreviation State

City name (if unknown, use zero fill) City

Work Related

Entries are yes, no, or unknown to indicate whether the incident occurred on the job Indicates consumer contact with CPSC for

internal use

Source

Age

Sex

Defines type of input document such as MECAP Type of Contact

(Medical Examiners & Coroners Alert Program), UL (Underwriters Laboratory), ATLA (American Trial Lawyers Association), CU (Consumers Union), Compliance consumer complaints,

newsclips, etc.

Product Defined as 4-digit NEISS code for primary

product associated with incident

Date Injured

Date of incident, if known (year, month, day) Age of person in the incident; multiple victims are listed as separate incidents under same document number (i.e., A1, A2, A3). Under 2 years is indicated by prefix 2 (i.e., 203 = 3 months, 002 = 2 years, 021 =

21 years, 000 = no victim, 999 = age unknown

Sex of person in the incident:

0 = No victim

1 = Male

2 = Female

9 = Unknown

Defines extent of injury, if any: Injury

No inj = No injury

T & R = Injury occurred, outpatient

medical attention

Hosp

Hosp = Injury occurred, hospitalized Death = Injury resulted in death = Unknown, not stated, etc. Unk

Represents general nature of actual or Hazard

potential hazard presented by incident as a

whole

Narrative Short description of incident and additional

information not included in the above

Further information obtained from follow-up Screened

Information contained in the printout is intended to be a concise report of the actual complaint, newspaper clipping, or other source of incident information. Computer printouts are used to disseminate information in order to expedite service to requestors.

#### ACCIDENT INVESTIGATIONS

Task Number Identifying number assigned to each accident

investigation. The first 6 digits indicate the year, month, and day the investigation was assigned. (Investigations prior to 1974

bear a 6-digit number preceded by zeros) Year, month, day the incident occurred

Year, month, day the report was entered in

the computer

USPS 2-letter state abbreviation State

Indicates how the information was obtained Type

(by telephone or actual on-site visit)

Source Indicates the source reporting the incident

(fire report, newspaper clipping, etc.)

Sex

Date of Accident

Date Entered

Location

Male, female, or unknown C=Completed P=Purged T=Terminated Status

N=No name R=Reassigned L=Limited D=Deleted

A=Acknowledged (assignment received)

S=Screened but not completed

Defines extent of injury, if any: Disposition

No inj = No injury

T & R = Treated and released or examined but not treated

= Treated and admitted Hosp

= Fatalities, including DOA, died DOA in ER, died in hospital, etc.

= Unknown, not stated, etc.

Age of victim identified by a 2-digit number Age

preceded by a "2" indicating whether the age is in months or years (203 = 3 months, 214 = 14 months, 003 = 3 years, 024 = 24 years)

Identifies the area in which the incident

took place

Identifies the injury (lists the most severe Diagnosis

in cases of multiple injuries)

Identifies the part of the body to which the injury occurred, if any (lists the most severe in case of multiple injures) Body Part

Doc. Number Identifies the source document by number Products

Lists up to four product codes associated

with the incident

Synopsis Short description of incident and additional

information not included in the above

Information contained in the printout is intended to be a concise report of the actual accident investigation. Computer printouts are used to disseminate information in order to expedite service to requestors.