



Pedestrian and Motor Vehicle Fatalities

Kelly W. Kruse, MD, MPH

Associate State Medical Examiner

Iowa Office of the State Medical Examiner



Objectives

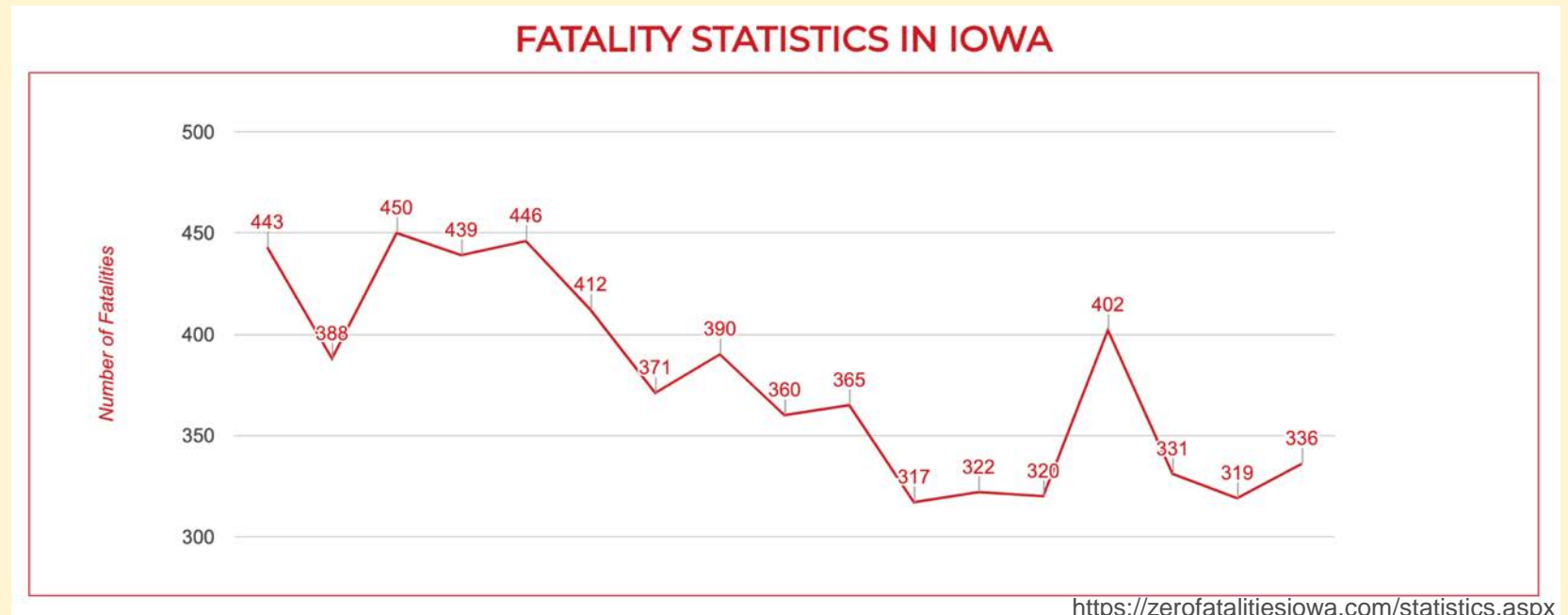
- Describe the prevalence of motor vehicle and pedestrian fatalities.
- Recognize common injury patterns seen in motor vehicle and pedestrian fatalities.
- Identify pertinent scene findings that will assist in determination of cause and manner of death.

The background of the image is a dark, textured surface resembling asphalt. It features several road markings: a yellow arrow pointing downwards on the left, a white arrow pointing upwards in the center, and several pairs of parallel yellow lines running vertically.

Motor Vehicle Fatalities

Motor Vehicle Fatalities

- Motor vehicle fatalities comprise a significant number of cases in medical examiners' offices
- More than 35,000 traffic fatalities per year in the United States
 - 336 deaths in Iowa in 2019 (including 22 pedestrian deaths)
 - 269 in 2020 (as of October 30th)





Why Autopsy?

- In motor vehicle fatalities, an autopsy examination is performed to:
 - Positively establish the identity of the deceased
 - Determine extent of injury
 - Identify any contributing or precipitating factor(s) which may have been present
 - Document findings for possible litigation
 - Determine the actual cause of death

Blunt Force vs. Thermal Injuries



Blunt Force vs. Thermal Injuries



Blunt Force vs. Thermal Injuries



Motor Vehicle Fatalities

- Causes of motor vehicle crashes include:

- **Impairment of the driver** by alcohol and/or drugs

- Speed

- Recklessness

- Falling asleep at the wheel

- **Natural disease** (e.g. myocardial infarct, stroke)

- Environmental factors (e.g. ice, wet pavement, gravel)

LIFE IN THE
FAST LANE
TAKE IT EASY

I SCREAM
YOU SCREAM
WE ALL SLOW DOWN

BUCKLE UP!
WINDSHIELDS HURT

IS THIS HEAVEN?
NO IT'S IOWA
DRIVE SAFELY



Categories of Motor Vehicle Collisions

- **Four** main categories of motor vehicle collisions:
 - **Frontal** collision
 - **Side/lateral** collision
 - **Rollover**
 - **Rear** collision



Frontal Collision

- Most common
- Two vehicles collide head-on or the front portion of a vehicle strikes a fixed object (e.g. wall, telephone pole, tree)
- Occupants of the motor vehicle will continue forward and impact the steering wheel, dashboard, windshield, or A-beam of the vehicle



Frontal Collision: Driver Injuries

- **Head:**

- May impact the windshield resulting in abrasions of the forehead, nose, and chin
- Internal injuries: basilar skull fractures, closed head injuries with diffuse axonal injury, and neck fractures (hyperflexion and extension)



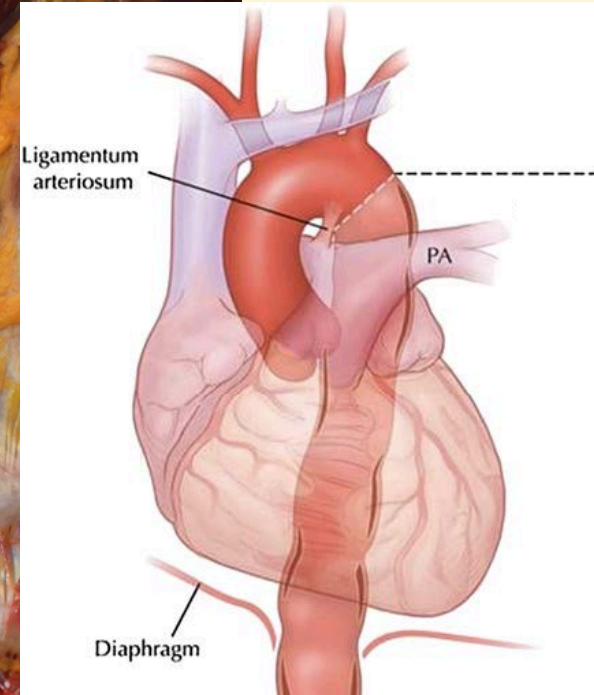
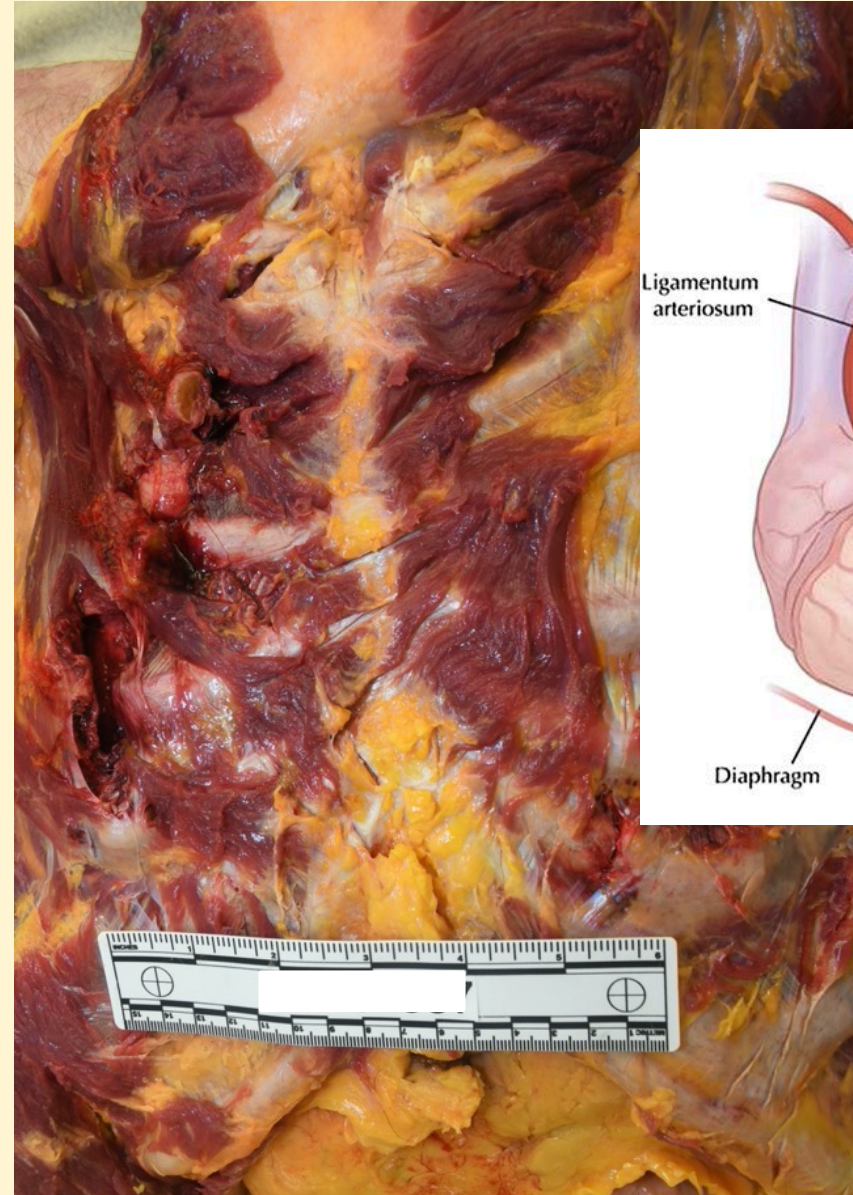
Frontal Collision: Driver Injuries

- **Torso:**
 - External injuries: chest may impact the steering wheel resulting in a patterned abrasion, contusion, or no visible injury at all



Frontal Collision: Driver Injuries

- **Torso:**
 - Internal injuries: fractures of the ribs and sternum, injury to lungs, pericardial sac, heart, aorta (laceration/transection), liver, and spleen (may have delayed rupture)



Elefteriades, J.. "Genetic testing in aortic aneurysm disease: CON." *Cardiology clinics* 28 2 (2010): 199-204 .

Frontal Collision: Driver Injuries

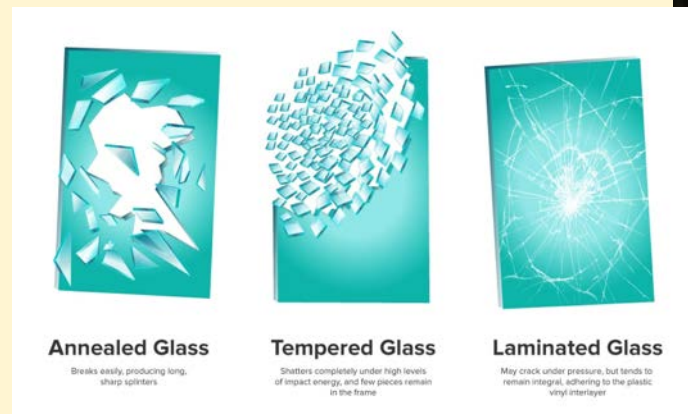
- **Extremities**

- **Upper extremities:** wrist and forearm fractures consistent with hands on the wheel at impact
- **Lower extremities:** ankle fractures if the foot/feet are braced against the floorboard or pressed firmly against the accelerator/brake pedal, or if the floor buckles upon impact



Frontal Collision: Driver Injuries

- **Dicing injuries:**
 - Injuries from tempered glass from side and rear windows – made to shatter into cubical fragments upon impact
 - Have a characteristic superficial, L-shaped, right angle, or linear pattern of cuts and abrasions
 - Usually on the left side of the body for drivers





Frontal Collision: Passenger Injuries

- **Front seat passengers:**
 - Injuries tend to be the same as those of the driver, except the unrestrained passenger will strike the dashboard and not the steering column
 - Dicing injuries tend to be on the right side of the body
- **Back seat passengers:**
 - If unrestrained, may be thrown forward, impacting the back of the front seat, the front seat passenger sun visor area, or windshield

Seatbelt Injuries

- Seatbelts have dramatically reduced the number of injuries that occur in motor vehicle crashes, especially in low-speed collisions
- Shoulder/lap belts may leave characteristic abrasions/contusions depending on position of the decedent
- Lap belts can cause internal injuries such as mesenteric tears, omental lacerations, and bowel contusions



Side/Lateral Collision

- Occurs at intersections when one vehicle impacts another or when a car skids sideways into a fixed object





Side/Lateral Collision

- May see the same injuries as those in a frontal impact collision, including aortic transection and basilar skull fractures
- If the impact is to the **left side of the vehicle**, the **driver** tends to have left-sided injuries and the front seat passenger may have fewer injuries
- If the impact is to the **right side of the vehicle**, the **passenger** will tend to right-sided injuries and the driver may also have right-sided injuries if no passenger is present



- Tends to be more lethal than a side/lateral impact collision, especially if no seatbelt is worn and the occupant is ejected or thrown about the passenger compartment

Rollover



Rollover

- If full ejection occurs, numerous injuries may result when the victim lands on a firm surface, or in some cases, may be found crushed or trapped beneath the vehicle



Compressional/Traumatic Asphyxia

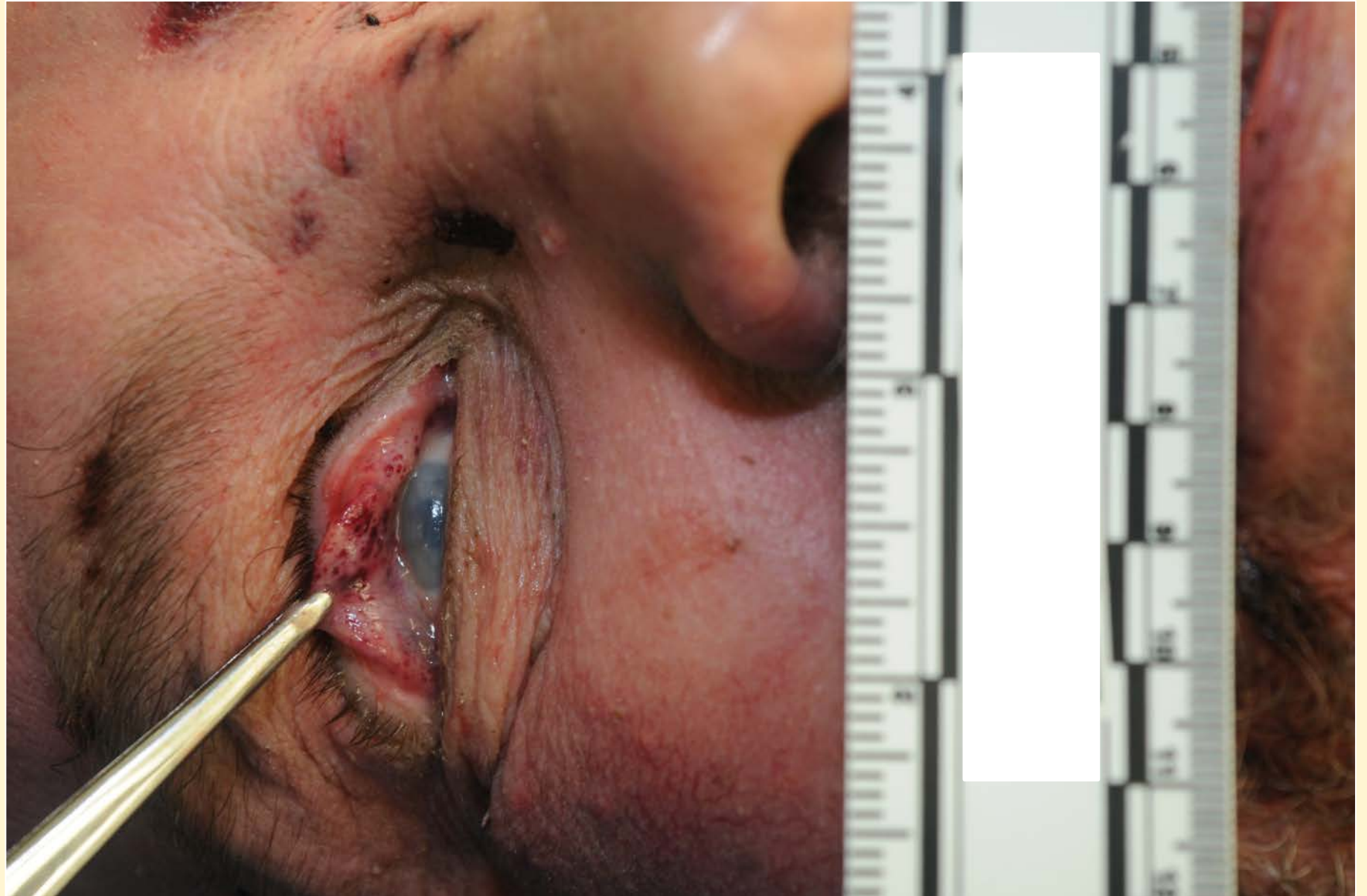
- May be the sole cause of death
- Photographs and/or description of body position play a pivotal role in determining cause of death



Compressional/Traumatic Asphyxia



Compressional/Traumatic Asphyxia





Rear Impact Collisions

- Rear impact collisions may cause “acceleration” injuries and are the least likely to result in death
 - Impact is reduced or absorbed to some degree by the trunk and rear seat compartment
- Most common injury is “whiplash” of the neck



Toxicology Testing

- Toxicology should ideally be performed on both the driver and passenger(s)
- Analyses should include alcohol, carbon monoxide, and illicit and prescription drugs
 - **16% of traffic fatalities in Iowa in 2018 involved a driver with a blood alcohol concentration > 0.08 g/100 mL.**



Accident or Suicide?

- Some motor vehicle crashes may be intentional – determination can be difficult, but there may be some clues:
 - Vehicle is noted to have left the roadway and driven directly into a fixed object or oncoming vehicle
 - Scene investigation reveals no evidence of braking
 - **Decedent has a prior history of suicide attempts or ideations**
 - Evidence within the vehicle indicating a desire to continue accelerating (e.g. rock on the gas pedal)
- Investigation crucial and an answer may not be obtained

Accident or Suicide?



The background of the image is a dark, textured asphalt road. On the left side, there are several yellow painted markings: a dashed line at the top left, a solid yellow arrow pointing downwards in the middle left, and two parallel yellow lines running vertically down the left side. In the upper middle area, there is a white painted arrow pointing upwards. The text 'Pedestrian Fatalities' is overlaid on the right side of the image in a white, sans-serif font.

Pedestrian Fatalities

Pedestrian Fatalities

- When individuals are traveling on foot are struck by a moving motor vehicle
- Injuries may be:
 - **Primary:** due to impact with the vehicle
 - **Secondary:** due to impact with the ground or other object after being thrown from the vehicle



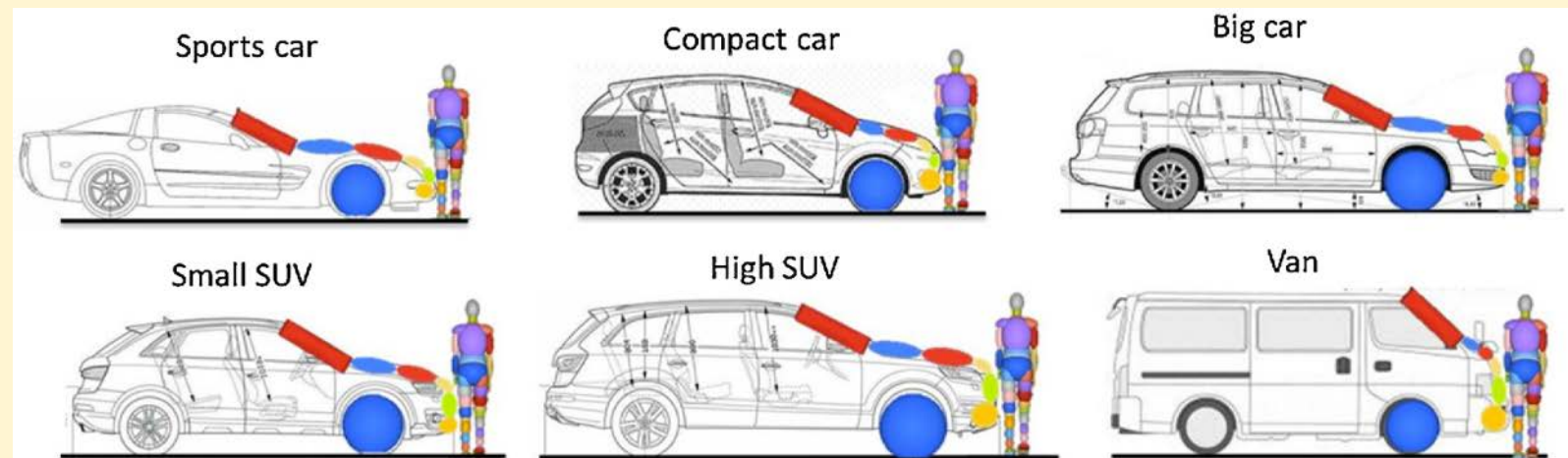


Pedestrian Fatalities

- Multiple factors influence the type and appearance of injuries:
 - **Speed** of the vehicle at the time of impact:
 - **High-speed:** pedestrian is picked up and thrown over the top of the car
 - **Low-speed:** pedestrian is picked up and as the vehicle continues forward, the he/she may land on the hood or continue backward to strike the windshield before sliding off the side of the vehicle

Pedestrian Fatalities

- Multiple factors influence the type and appearance of injuries:
 - **Type of vehicle:**
 - Vehicles with higher bumpers tend to impact the adult pedestrian at or above their center of gravity, knocking them down instead of picking them up





Pedestrian Fatalities

- Multiple factors influence the type and appearance of injuries:
 - **Braking:**
 - Braking will cause the front end of the vehicle to dip or lower and thus change the level of impact on the pedestrian
 - **Positioning of the decedent:**
 - Injuries at the same level suggest the person was standing still at the time of impact
 - Injuries at different levels may suggest the decedent was walking or running
 - Distance between the heel and injury site will be measured at autopsy

Pedestrian Fatalities



Patterned Injuries

- **Tire tread marks**
 - May or may not be present on the skin or clothing in cases where the tire of a vehicle has passed over the deceased
 - If present, tire tread marks should be carefully documented and photographed (ideally with a scale)



Patterned Injuries

- Imprints and injuries corresponding to parts of the vehicle (e.g. bumper, headlights)
- Should be carefully documented and photographed (ideally with a scale)





Pedestrian Fatalities

- When a pedestrian is struck by a motor vehicle, a chain of events is set into motion:
 1. As the bumper strikes the lower extremities of the pedestrian, fractures and soft tissue avulsion pockets can be produced at the point of impact
 - Injuries may be one-sided if the decedent was hit from the side

Pedestrian Fatalities



Pedestrian Fatalities

- When a pedestrian is struck by a motor vehicle, a chain of events is set into motion:
 1. The pedestrian is struck by the front of the vehicle
 2. The buttocks/thighs may then impact the front of the vehicle or hood



Pedestrian Fatalities

- When a pedestrian is struck by a motor vehicle, a chain of events is set into motion:
 3. As the body flexes, the skin within the inguinal folds (classically) becomes overstretched, leading to the superficial “stretch” lacerations, which appear dry, yellow, and bloodless



Pedestrian Fatalities

- When a pedestrian is struck by a motor vehicle, a chain of events is set into motion:
 4. The head and neck may impact the windshield of the vehicle, resulting in large scalp lacerations with or without avulsion, skull fractures, and neck fractures/injuries
 5. As a result of the impact, clothing may be torn



Collection of Evidence

- Trace evidence may be left on the decedent that can assist law enforcement in their investigation
 - On the vehicle: hair, skin, and blood from the decedent
 - On the decedent: paint chips, tire tread marks, or grease from the undercarriage



Pedestrian Fatalities: Manner

- “Hit-and-run” deaths: accident or homicide?
- Occasionally a pedestrian may step out in front of an oncoming vehicle in a suicide attempt
 - Investigation and witness accounts are important





Motor Vehicle and Pedestrian Fatalities: Scene Investigation



Important Variables

- Ask law enforcement and document:
 - **Type of crash**
 - Type of road
 - **If restraint used**
 - **Position in car**
 - **If decedent was ejected**
 - Estimated speed
 - If at an intersection
 - **Single vs. multiple vehicles involved**
 - Type of vehicle(s)
 - Weather conditions
 - **Concern for suicide or medical event?**

EMER



VEHICLES

Type of Road:

Estimated Speed:

Construction Zone:

At Intersection:

Intersection Street(s):

Intersection Control Present:

Intersection Control Type:

Crash Type

- ☐ Head On
- ☐ Angle
- ☐ Driver Side Impact
- ☐ Left Roadway
- ☐ Passenger Side Impact
- ☐ Rollover
- ☐ Rear End
- ☐ Other

Additional Crash Type Info:

Weather Condition:

Accident Description (Location Narrative):

Deceased Position in Vehicle:

Vehicle Type:

Vehicle:

Year:

Make:

Model:

Distractions Present during the Accident

- ☐ Cell Phone
- ☐ Changing Music
- ☐ Drag Racing:
- ☐ Alcohol Present in Vehicle
- ☐ Drugs Present in Vehicle
- ☐ Other:

If Decedent was Driver:

- ☐ Sleep Deprived

If under 18

of Vehicle Occupants:

List Age of Each Occupant:

Date License/Permit Issued:

License Type:

Other Vehicles:
Vehicle Type:

Vehicle:

Year:

Make:

Model:

Additional Vehicles:

Restraint Used in Vehicle

- ☐ Restrained in Vehicle
- ☐ Unrestrained in Vehicle
- ☐ Unknown if Restraint Used
- ☐ Ejected from Vehicle
- ☐ Partially Ejected from Vehicle

Restraint Type:

Additional Restraint Info:

- ☐ Air Bags in Vehicle
- ☐ Air Bags Deployed
- ☐ Child Restraint

Point of Impact:

Tire Marks Description:

Helmet Worn:
Helmet Damage:



EMER

PEDESTRIAN

Pedestrian Circumstances

☐ If Intentional - Suicide?

Describe the location and direction of the Pedestrian:

Pedestrian Activity/Location

- ☐ Standing or Otherwise Immobile
- ☐ Walking
- ☐ Running
- ☐ Playing
- ☐ Working on Vehicle
- ☐ Entering Vehicle
- ☐ Exiting Vehicle
- ☐ Crossing at Intersection
- ☐ Crossing at Non-intersection
- ☐ In Course of Employment
- ☐ On Sidewalk
- ☐ Cycling
- ☐ Unknown



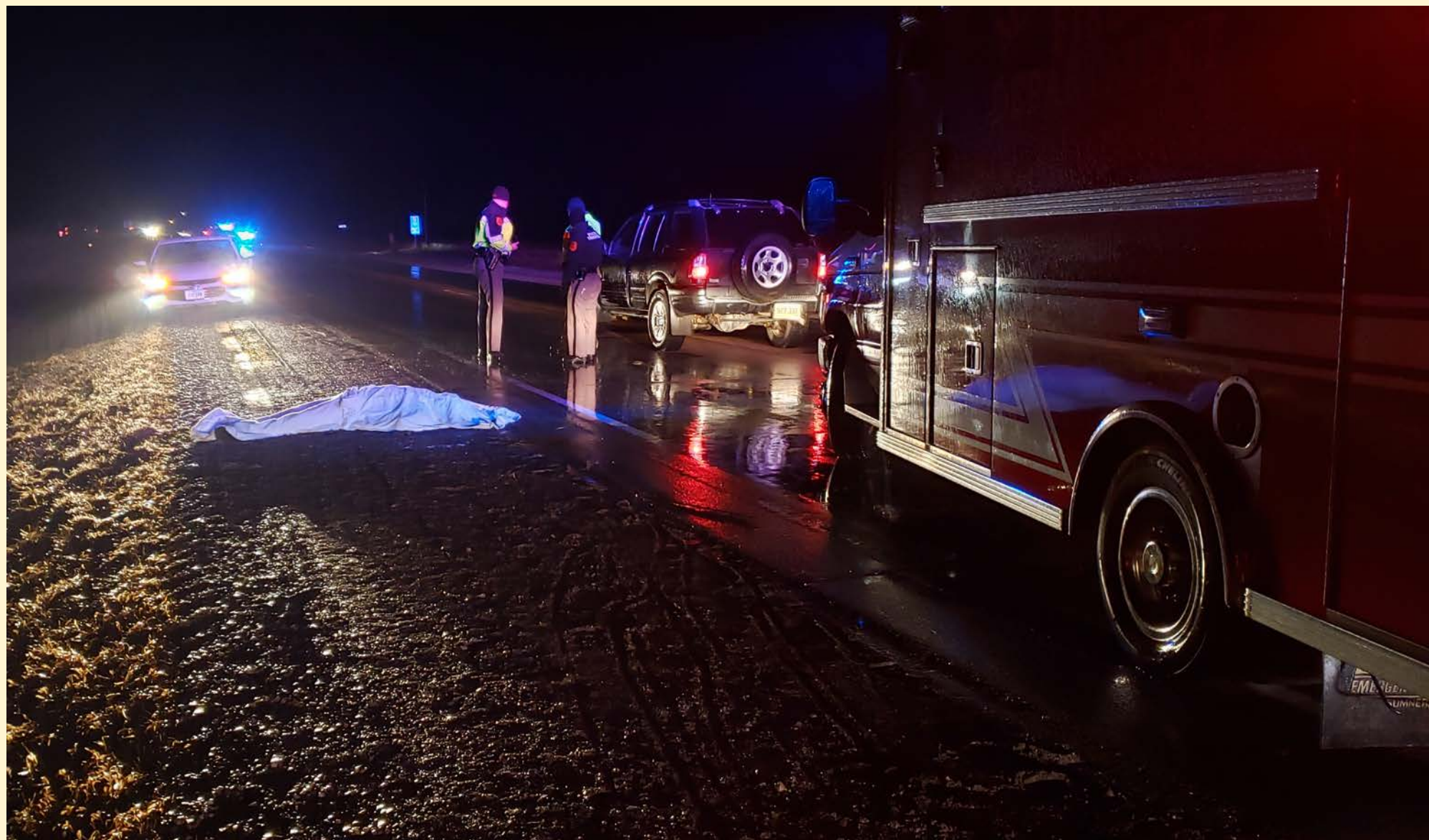
Scene Photography

- As with all other death scenes, photographs of the scene are indispensable
- In motor vehicle crashes, scene is often distorted by attempts to extricate the body
- Photographs to take:
 - Condition and position of the vehicle in its environment
 - Position of the body (especially if still in the vehicle)
- Diagrams may also prove useful















Scene Investigation

- Important questions to ask at the scene:
 - Type of crash? Single vehicle or multiple vehicles?
 - Seatbelt used or unrestrained?
 - Driver or passenger?
 - Decedent ejected?
 - Concern for medical event or suicide?
- Use EMER as a guide
- Photographs to take:
 - Vehicle(s) involved in crash
 - Location/position of decedent



Questions?