

# Working with the Fatal Crashes

Last Modified on 08/17/2017 10:47 am CDT

**A Fatal Supplement Form is required whenever there is a traffic crash resulting in a fatality.**

The death must occur within 30 days of the crash to be considered a traffic fatality. A fetus must be 28 weeks developed to be counted as a traffic fatality.

This form replaces the paper and electronic MV3480 Fatal Supplement Form when submitted as part of a TraCS electronic crash report and is necessary to comply with the requirements of the federal Fatality Analysis Reporting System (FARS). This form is transmitted when validated.

If an electronic DT4000 (Crash report) has been completed for the crash but has not yet been end shifted, open the Crash report and click "Replicate" button on the menu bar, then select "Fatal Supplement". Using the Replicate button sets up the Fatal Supplement correctly. The following must be added and entered on the Fatal Supplement.

- Every unit.
- Every unit has at least one individual (usually the driver).
- Every individual that died as a result of the crash.
- Every individual that was transported to the hospital.


If the Fatal Supplement Form is submitted after the electronic crash is sent (e.g., a critically injured person dies two weeks after the crash), the **original** crash needs to be amended to reflect this information.

## Creating the Fatal Supplement Form

To create a fatal supplement.

1. Go to an Office Workstation.
  - a. Note: Can use a mobile computer if using Web Services.
2. Find Original Crash Form.


a. Note: The original might be in the Archive.

b. If the Original form is in **Archive** then  it.

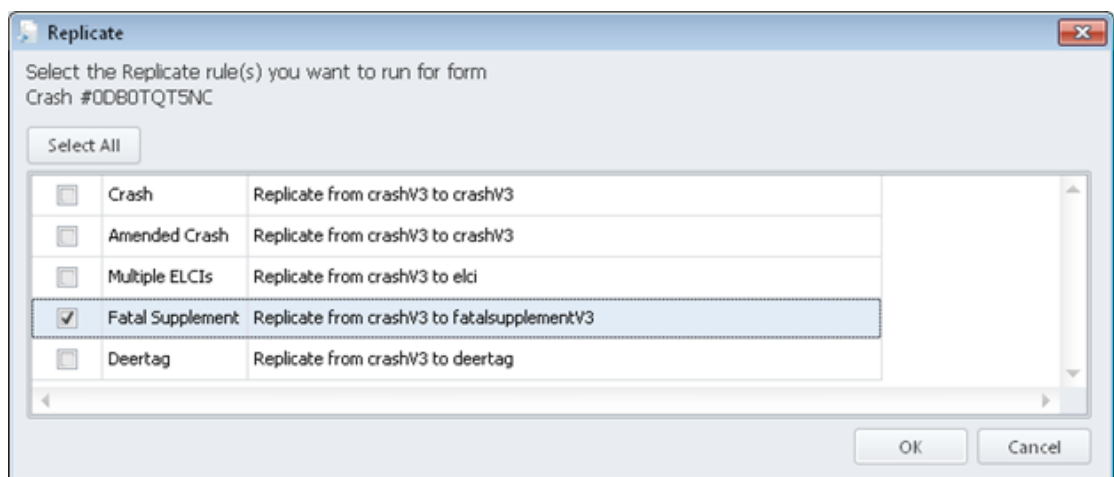
3. Replicate from Original. To Replicate:

a. Either → Highlight form and click  from the Forms Manager.

b. Or → Highlight form, right click choose  Open Form Ctrl+O ,

then click  from the Forms Viewer. Note: this option is better for Web Services Clients.

c. Choose:



d. A new Fatal Supplement form will be opened and placed in Edit mode. Quite a few fields have been disabled, these fields match the Crash form. Note: if you need to change them, see updating date of death.

e. Fill out the empty fields.

f. Validate.

g. Verify.

h. Transmit to the DOT.

## Updating date of death

If one of the following instances happen:

- One or more the grayed out fields needs updating.
- An individual died within the 30 day crash window.
- It was found that someone was transported to the hospital.

To update this items on the fatal supplement do the following:

1. Create an amended crash report (See working with 2017 amended crash form).
2. Transmit the crash form.
3. Open the Fatal supplement you are working on.
4. Place the fatal supplement form in Edit mode.



5. Click the  button in the  ribbon.



6. The grayed out fields will update to the latest amended form.
7. Finish the report
8. Validate.
9. Transmit.

## How to Send a Fatal Email to the DOT

All fatal accidents need to be reported to the FARS group in the DOT. The DOT needs to get notification of a fatal accident as soon as possible. Most agencies have dispatch send a teletype to the DOT, but now if wanted the officer who fills out the crash report can send an email to the FARS group.

To send an email from TraCS, use the Crash form. Once in the Crash Form:

1. In the  ribbon click  to disable all the fields not needed for a Fatal




Notification to be completed.

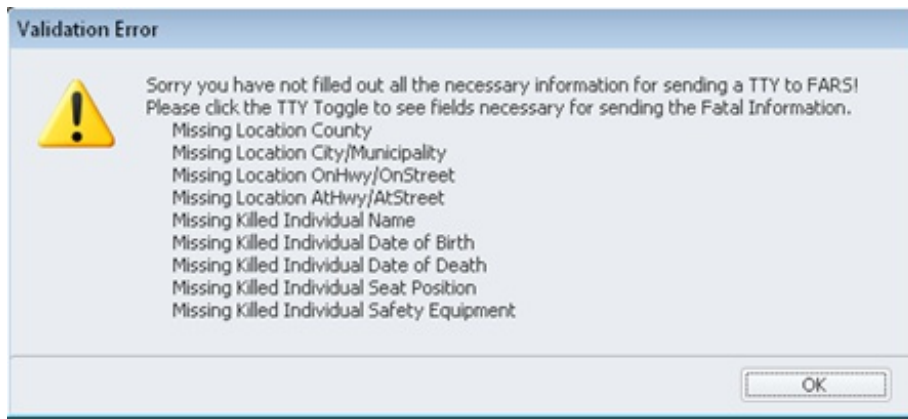
2. When entering the number killed, some fields will turn Yellow. These are the required fields for the notification to be sent. Note: Some fields that drive the form are still enabled because otherwise you would not be able to fill out the crash form correctly.

### Summary

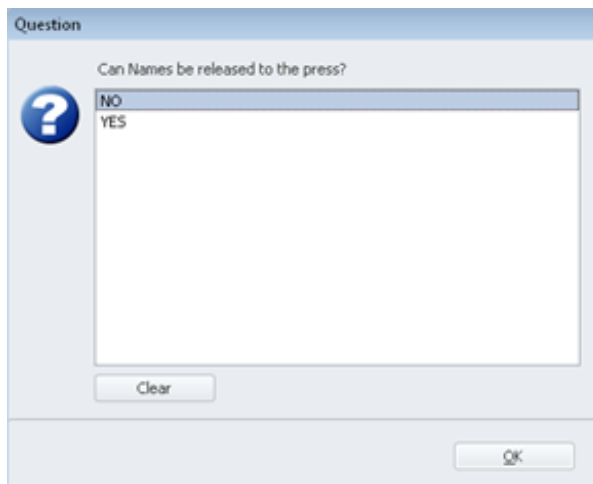
|  |                                      |   |                                    |                             |   |                           |                    |
|--|--------------------------------------|---|------------------------------------|-----------------------------|---|---------------------------|--------------------|
| Crash Date<br>05/10/2016                     |                                      | Crash Time<br>03:50 PM                                |                                    | Date Notified<br>05/10/2016 |   | Time Notified<br>03:50 PM |                    |
| Date Arrived<br>05/10/2016                   |                                      | Time Arrived<br>03:50 PM                              |                                    | Total Units<br>02           |   | Total Injured<br>01       | Total Killed<br>02 |
| <input type="checkbox"/> On Emergency        | <input type="checkbox"/> Hit and Run | <input type="checkbox"/> Lane Closure<br>Due to Crash | <input type="checkbox"/> Work Zone |                             | <input type="checkbox"/> Trailer or Towed |                           |                    |
| <input type="checkbox"/> Government Property |                                      | <input type="checkbox"/> Active School Zone           |                                    |                             | School Bus Related                        |                           |                    |

3. Fill out the fields.
  - a. Date, time and total units are required.
  - b. The Location of the crash.
  - c. In the Unit Summary Group fill out:
    - i. Unit status, vehicle operating as classification, Unit type, vehicle type → some are necessary for form design others are needed for the notification.
    - ii. Total Occs needs to be filled out otherwise your individuals in the unit will not appear.
  - d. In the Individual Groups with a Fatal Injury fill out the following fields.
    - i. Role is needed for the form design.
    - ii. Last Name, First Name, Middle Initial and suffix along with the Date of Birth and Sex are required.
    - iii. Seating position, Safety Equipment, and Date of Death are required.
    - iv. Injury Severity is needed for the form design.
    - v. Time of death is added if entered but not required.
4. After all the necessary fields have been entered. In the Crash ribbon click the  button.
 

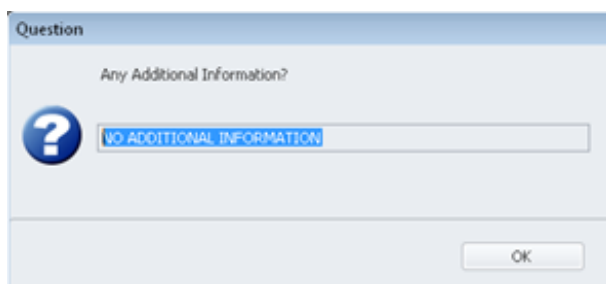
The icon is a circular logo with a stylized figure and the text "Fatal Notification" below it.
5. First it will look at your fields to make sure everything required if filled out. If not an error message will appear, detailing what fields need to be entered.



6. Enter the fields on the list.
7. Repeat 4 until you get a question and not an OK box.
8. Choose Yes or No.



9. Enter additional information if needed.



10. An email will be generated.

Microsoft Exchange

Send

From

To... DOT DSP Fars

Cc...

Subject FATAL NOTIFICATION 10DL13QB4

DATE AND TIME OF CRASH:  
05/09/17 08:48 AM

NAME/SEX/DATE OF BIRTH/DATE/TIME OF DEATH:  
ZZZANDERS ,JOHNNY Z M 02/12/52 - 05/16/17 AT 11:02 AM

CAN NAMES BE RELEASED TO THE PRESS?  
NO

LOCATION OF CRASH  
ON SCHNEIDER RD  
0.38 MI E  
OF CHURCH RD  
IN THE TOWN OF SPRINGFIELD  
IN DANE COUNTY

TOTAL NUMBER AND TYPE OF UNIT INVOLVED:  
2 UNITS  
Passenger Car  
Pedestrian

SEATING POSITION OF THE DECEASED:  
1--Front Seat-Left Side (Driver/Motorcycle/Bicycle) UNIT #1

SAFETY EQUIPMENT USED BY DECEASED:  
Shoulder & Lap Belt - Airbag: Non Deployed

ADDITIONAL INFORMATION  
NO ADDITIONAL INFORMATION

INVESTIGATING AGENCY  
TEST POLICE DEPARTMENT

AUTHORITY  
ASSISTANT CHIEF FRANCES WILLIAMS B333  
TEST POLICE DEPARTMENT  
(608) 267-1847

OPERATOR  
3333

11. Add your email in the CC field along with other emails as necessary.
12. Click Send.

More TraCS FAQs Here:

<http://wisconsindot.gov/Pages/safety/enforcement/agencies/tracs/faqs.aspx>

--GLP 5/16/2017