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Mayday Mayday Mayday!

Louis V. Lombardo

“Mayday Mayday Mayday” is the internationally recognized distress signal in voice communications. Mayday comes from the French word “m’aidez” which translates to “Help me!”

This Independence Day weekend about 300 more Americans will die of crash injuries and another 1,000 will suffer serious crash injuries. Many will die and many will be disabled for the rest of their lives because rescue and emergency medical care was too little, too late, for too many. About 56% will die without transport to **any** facility for emergency medical care. And about 44% will die after being transported to **some** facility for care – NHTSA does not know or care enough to count whether it was a Level 1 Trauma Center for optimal care or a local clinic – year after year after year.

Safety and Happiness

The Declaration of Independence states

We hold these truths to be self-evident, that all men are created equal, that they are endowed by their Creator with certain unalienable Rights, that among these are Life, Liberty and the pursuit of Happiness....

That whenever any Form of Government becomes destructive of these ends, it is the Right of the People to alter or to abolish it, and to institute new Government, laying its foundation on such principles and organizing its powers in such form, as to them shall seem most likely to effect their Safety and Happiness.

Our Safety and Happiness in NHTSA Hands

Last May I noted more than a decade of failures of NHTSA under its EMS chief, formerly head of Montana’s EMS. See

<http://www.careforcrashvictims.com/blog-celebrates.php>

In July 2013, I compiled Rankings of States by 2011 crash death rates. The State of Montana had a Grade of “F” and was the fourth worst. Only Wyoming, Mississippi, and Arkansas were worse. See

<http://www.careforcrashvictims.com/ranking-crash-deaths.php>

And see

<http://www.fairwarning.org/2012/11/traffic-deaths-a-surprising-dimension-of-the-red-state-blue-state-divide/>

This year NHTSA published data on the fatality rates of each State in 2013. The State with the worst fatality rate was Montana – Dead Last. See rankings of [States attached “2013 B-Crash Fatalities”](#).

In December of 2013, I petitioned NHTSA, a second time, to improve emergency care for crash victims. But that too was ignored. And it was just before NHTSA Administrator Strickland went through the NHTSA Revolving Door to represent auto company interests in the private sector.

See

<http://www.careforcrashvictims.com/assets/MR-Strickland-NEMSAC-FICE MS.pdf>

So now let’s look at the numbers for crash deaths by State and Congressional District since 2002. For Montana alone, each year it is about 200 (about 4 crash deaths per week) and now totals nearly 3,000 crash deaths. Data for each State and Congressional district are available at <http://www.careforcrashvictims.com/CrashDeathMappingTools.php>

Using DOT official Policy Guidance values of \$9.2 million per life the 3,000 lives lost amount to about \$27.6 Billion for Montana alone. [See attached VSL Guidance 2014](#).

NHTSA’s actions to weaken Triage Guidelines in concert with CDC and GM have been especially detrimental to rescue policies and practices since 2000. I documented the travesties of removal of “Rollover and Extrication” from the Triage Guidelines with funding (\$350,000) by GM to CDC in 2014. See

<http://www.careforcrashvictims.com/assets/CFCV-MonthlyReport-March2014.pdf>

But NHTSA still has not set any minimum Federal standards for URGENCY software and Automatic Crash Notification Systems for GM and other auto companies to meet. After years of research since 1997 showing the need and feasibility of such standards, NHTSA has failed to set standards and let people die needlessly. See <http://www.careforcrashvictims.com/urgency.php>

Since 1997, more than 700,000 Americans have died of crash injuries. And about 2,800,000 suffered serious injuries – many of which could have been ameliorated with timely, optimal, emergency medical care.

Our Safety and Happiness in Hands of GM and Other Auto Companies

The June 2015 issue of Vision Zero International is now out online with an article on Emergency Response that describes OnStar and Mercedes Benz systems. [See attached article.](#)

New GM Release announces an Injury Severity Prediction service study: *“OnStar’s Injury Severity Prediction service is accurately predicting the severity of crash victims’ injuries, allowing for improved on-scene treatment, according to findings of a recent study....”*

Over the past four years, General Motors, OnStar and the University of Michigan’s International Center for Automotive Medicine (ICAM), led by Dr. Stewart Wang, conducted research that illustrates how crash data can assist first responders. This was the first known study to match real-life injury outcomes with crash telemetry data....

“This service enables first responders to better treat injuries today, and in the long run, it will allow us to prevent certain injuries from occurring,” said Jeff Boyer, vice president, GM Global Vehicle Safety. “With access to this information, our engineers can analyze today’s safety systems to identify those features most effective in preventing severe injuries in the future.”

Now that the algorithm for predicting severe injuries has been validated, the next step is educating the emergency response community so it can adjust training and protocols. Recently, the National Highway Traffic Safety Administration (NHTSA), in conjunction with the American College of Emergency Physicians (ACEP) and National Association of EMS Physicians (NAEMSP), awarded a grant to develop online training to familiarize first

responders and medical directors with crash data and the associated Injury Severity Prediction. Pilot programs will be held in early summer. Taking input from the pilot sessions, the training will be adjusted and rolled out to all first responders in the fall.

OnStar Injury Severity Prediction is part of OnStar's Automatic Crash Response service, available as part of the OnStar Protection, Security and Guidance plans. OnStar responds to more than 5,000 vehicle crashes every month. OnStar emergency advisors are certified by the International Academies of Emergency Dispatch®, allowing them to provide medical guidance to vehicle occupants while they wait for first responders.” See <http://media.gm.com/media/us/en/gm/news.detail.html/content/Pages/news/us/en/2015/jun/0611-onstar.html>

NHTSA has just published a study by Dr. Wang and other GM researchers titled “Results of First Field Test of Telemetry Based Injury Severity Prediction”. Note: Rollover crashes were excluded. See

<http://www-esv.nhtsa.dot.gov/proceedings/24/files/24ESV-000388.PDF>

Note also: This is the same Dr. Wang previously funded by GM and Toyota in their successful effort to get CDC and NHTSA to remove “Rollover and Extrication” from the Triage Guidelines. See

<http://www.careforcrashvictims.com/assets/Sept2013-NHTSA-Ciren-Safety.pdf>

And see

<http://www.careforcrashvictims.com/assets/CFCV-MonthlyReport-March2014.pdf>

Last May, writing about the GM ignition switch defect, I noted how little information the public has “on how much OnStar crash data was transmitted to NHTSA, what was done with it and when?” See

<http://www.careforcrashvictims.com/assets/MonthlyReport-May2014.pdf>

The OnStar business pricing is described at

<https://www.onstar.com/us/en/plans-pricing.html>

GM vehicles are involved in about 30 crash deaths per day – 11,212 crash deaths recorded by NHTSA in 2012 involved GM vehicles. See <http://www.careforcrashvictims.com/assets/MonthlyReport-June-July-2014.pdf>

Since I presented our work on URGENCY to NHTSA top management in 1997, the number of Americans who have died of crash injuries now exceeds 700,000 people of all ages. See <http://www.careforcrashvictims.com/assets/MartinezBriefing3-27-97.pdf>
And see <http://www.careforcrashvictims.com/urgency.php>

How many more Americans must die before NHTSA sets a Federal minimum safety standard for ACN and URGENCY software to improve care for crash victims in serious crashes?

NHTSA is still a captive agency more responsive to GM than to the public, so unless people change at NHTSA, policies won't change.

The current NHTSA policies continue to allow more than 55% of all crash deaths each year to be “Not Taken” to any facility for emergency medical care. And continue to allow many of the remaining 45% to die of their crash injuries that were “Taken” somewhere only to receive emergency medical care that is too little, too late, for too many Americans. [See attached Data on Crash Deaths % Taken & Not Taken by State & Year](#)

“Heck of a Job!” NHTSA.