

**Patient Information**

Element	Data
Name	Coded Pseudo-Name to ensure anonymity
Sex	Female
Race	White
City	Chicago
State	Illinois
Zip Code	60601
Country	UNITED STATES
County/Parish Code	
Patient Death Date and Time	07/17/2012 5:41 PM
Patient Death Indicator	Yes

**Visit Information**

Element	Data
Admit or Encounter Reason	Unspecified pedal cyclist injured in collision with car, pick-up truck or van in traffic accident, initial encounter
Admit Date and Time	07/17/2012 5:00 PM
Patient Class	Emergency
Discharge Disposition	Expired
Discharge Date/Time	07/17/2012 6:00 PM
Diagnosis Type	Final
Diagnosis	Concussion with LOC of any duration with death due to other cause prior to regaining consciousness
Diagnosis	Type III occipital condyle fracture, initial encounter for closed fracture

**Observations[\*]****Observation Results Information**

Element	Data
Observation Identifier	Facility / Visit Type
Observation Value	Emergency Care
Units	
Observation Results Status	Final results; Can only be changed with a corrected result.

**Observation Results Information**

Element	Data
Observation Identifier	Age Time Patient Reported
Observation Value	35
Units	year
Observation Results Status	Final results; Can only be changed with a corrected result.

### Observation Results Information

Element	Data
Observation Identifier	Height
Observation Value	65
Units	inch
Observation Results Status	Final results; Can only be changed with a corrected result.

### Observation Results Information

Element	Data
Observation Identifier	Weight
Observation Value	128
Units	pound
Observation Results Status	Final results; Can only be changed with a corrected result.

### Observation Results Information

Element	Data
Observation Identifier	Tobacco Smoking Status
Observation Value	Unknown if ever smoked
Units	
Observation Results Status	Final results; Can only be changed with a corrected result.