Alcohol and Drug Reporting on Fatal Crashes

OFFICERS:
You are lawfully responsible to report ALL required information about a fatal traffic crash to the Fatality Analysis Reporting System (FARS) within 10 days from the date of the crash.

TRAFFIC CRASHES THAT QUALIFY ARE:
Crashes that involve a motor vehicle traveling on a traffic way open to the public and resulting in the fatality of an occupant of a vehicle or a non-motorist. Also, any crash that involves a snowmobile or off-road vehicle, traffic or non-traffic related, that involves a fatality. The death must occur within 30 days of the crash.

1. INTERLOCK
You shall enter Yes or No as to whether or not an interlock device was installed in any vehicle involved in a fatal crash.

2. ALCOHOL
The Alcohol section has 3 fields that shall be completed.
   1. Officer’s opinion.
      a. Yes indicates your opinion is that alcohol was involved with this driver or non-motorist during the crash you are investigating.
      b. No indicates your opinion is that no alcohol was involved.
   2. Indicate the Type of Test that was given to come to your Yes or No opinion.
      (field sobriety, a PBT, a breath test, a blood test or a urine test). Check all boxes that apply if multiple tests are performed.
      a. If no test was offered indicate “not offered.”
      b. If a test was offered but refused indicate “refused.”
   3. You shall complete the Test Results field, when results are available.
   *Test Results are filled out for All PBT, breath, blood, and urine test results that involve this driver or non-motorist.

3. DRUGS
The Drug section has 3 fields that shall be completed.
   1. Officer’s opinion.
      a. Yes indicates your opinion is that drugs are involved with this driver or non-motorist during the crash you are investigating.
      b. No indicates your opinion is that no drug was involved.
   2. Indicate the Type of Test that was given (blood test or urine test). Check each box that applies.
   3. You shall complete the Test Results field, when test results are available.
   * Test Results are filled out for ALL blood, urine and other test results that involve this driver or non-motorist.
**DECEASED DRIVER TEST RESULTS:**
Deceased drivers or non-motorists involved in a crash will have alcohol or drug test results that come from blood or urine tests from the decedent’s autopsy or from the lab or medical facility. The law provides that medical examiners SHALL submit this information to the officer. Therefore, once you receive the results, they must be submitted to FARS.

**LIVING DRIVER TEST RESULTS:**
Living drivers or non-motorists involved in a crash will have alcohol or drug test results that come from blood, breath, or urine tests that either you submitted to the lab, or you will need to have the prosecutor send a letter (see examples below) to obtain blood or urine test results from the medical facility to which they were taken.

**SAMPLE LETTER TO MEDICAL FACILITIES:**
Each letter requesting medical facility blood or urine test results should be addressed to that particular medical facility with a section showing the driver it is regarding. Here are two state’s examples:

**MICHIGAN:**
Please provide to the (Your Department Name and Address) the entire blood (or urine) test analysis documentation, including HIV, HIB, and other communicable disease, pertaining to the condition of the above subject which was performed on (date of test). You are required to provide this pursuant to Michigan Statutes Annotated Section 9.2325 (1) as follows: “The medical facility of person performing the chemical analysis must provide to a Prosecuting Attorney who requests for use in a criminal prosecution as provided in this subsection.” We would appreciate this analysis as soon as possible.

**OHIO:**
Please provide to the (Your Department Name and Address) the entire blood test analysis documentation pertaining to the condition of the above subject which was performed on (date of test). You are required to provide this pursuant to Ohio Revised Code Division (B) (2) of Section 2317.02, which states in pertinent part, as follows: “the provided,…shall supply to the officer a copy of any of the requested records the provider possesses.” We would appreciate this analysis as soon as possible.

**REPORT ALCOHOL AND DRUG TEST RESULTS TO:**
Please fax test results to FARS at (517) 241-1644.
Contact Lorie Sierra at (517) 241-1749 or via email at sierral@michigan.gov, with any reporting questions.

**SUBMITTING PAPER CORRECTED COPY OR REVISED ELECTRONIC COPY OF A UD-10:**

**PAPER CORRECTED COPY:**
1. Pull out a new form and fill out your original serial number in the Override Box.
2. Fill out the bubbles for corrected copy and fatal (under special checks), crash date, ORI number, Department name, the number of units, county number, city/township number THEN the information you want to correct.
3. Submit the corrected copy through your chain as usual.

**REVISED ELECTRONIC COPY:**
1. Open the crash within the program used and complete the fields with the new data.
2. Resubmit the crash through your chain as usual.

**IMPORTANT REMINDERS:**
** Submission of your fatal crash report is required within 10 days from the date of the crash. Keep in mind, FARS knows that the form may not be complete. They understand you normally don’t like to turn in something that isn’t complete; however, fatal crash reports are different.

** A UD-10 crash report is only your OPINION. Therefore, these UD-10 forms are NOT available for use in any court action (MCL 257.624). They are used only for purposes of furnishing statistical information on crashes.