### Deceased Information

<table>
<thead>
<tr>
<th>Question</th>
<th>01.</th>
<th>02.</th>
<th>03.</th>
<th>04.</th>
<th>05.</th>
<th>06.</th>
<th>07.</th>
<th>08.</th>
<th>09.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. How long had the deceased done farm work? (Fill in days if less than one month)</td>
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<td>2. How long had the deceased worked on the farm where the accident occurred? (Fill in days if less than 1 month)</td>
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<tr>
<td>3. Was the deceased performing a task that was not a part of their normal work duties/tasks?</td>
<td>Yes</td>
<td>No</td>
<td></td>
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<tr>
<td>4. Was anyone within visual or verbal contact with deceased at the time of the accident?</td>
<td>Yes</td>
<td>No (Go to Q13)</td>
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<td>5. Was this contact maintained for safety purposes?</td>
<td>Yes</td>
<td>No</td>
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<td>6. How familiar was the deceased with the task being performed at the time of the accident?</td>
<td>Not familiar</td>
<td>Somewhat familiar</td>
<td>Very familiar</td>
<td>Unknown</td>
<td></td>
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<tr>
<td>7. How often did deceased do this task? (if variable amounts, ask about the month prior to the accident)</td>
<td>First time ever</td>
<td>Less than once per week</td>
<td>About once per month</td>
<td>Sporadically (during a month)</td>
<td>One or more times per week</td>
<td>Daily or almost daily</td>
<td>Other</td>
<td>Unknown</td>
<td></td>
</tr>
<tr>
<td>8. How long had it been since the task was last performed by the deceased?</td>
<td>&lt; 1 week before accident</td>
<td>&gt; 1 week before accident</td>
<td>1 month before accident</td>
<td>6 months to 1 year before accident</td>
<td>1 year before accident</td>
<td>Earlier in day</td>
<td>Other</td>
<td>Unknown</td>
<td></td>
</tr>
<tr>
<td>9. What was the deceased’s work schedule prior to the accident?</td>
<td>Worked 8 hour days, no extra hours</td>
<td>Worked 8 hour days, with extra hours</td>
<td>Worked 8 hours in afternoon, no extra hours</td>
<td>Worked 8 hours in afternoon, with extra hours</td>
<td>Worked 8 hours in evening, no extra hours</td>
<td>Worked 8 hours in evening, with extra hours</td>
<td>Worked variable days, afternoons, evenings</td>
<td>Unknown</td>
<td></td>
</tr>
</tbody>
</table>
10. How long had deceased been working on day of the accident?  
   01. Less than 1 hour  
   02. 1-4 hours  
   03. 5-8 hours  
   04. 9-10 hours  
   05. More than 10 hours  
   09. Unknown

### Accident Information

11. The deceased’s work area at the time of the accident was: (check all that apply)  
   01. Usual work area  
   02. Unfamiliar work area  
   03. Limited Access work area  
   04. Restricted work area  
   05. Unauthorized work area  
   06. Authorized work area  
   09. Unknown

12. Site of Accident  
   01. Hay field  
   02. Commercial orchard  
   03. Barn yard  
   04. House yard  
   05. Wooded Area  
   06. Irrigation or drainage ditch  
   07. Farm driveway or driveway ditch  
   08. Pasture field  
   09. Grain elevator, silo, etc.  
   10. Other (specify)  
   099. Unknown

13. Deceased’s activity at time of accident  
   01. Mowing hay  
   02. Mowing with cutter bar  
   03. Brush hogging  
   04. Plowing field  
   05. Pulling stumps  
   06. Positioning large rolls or bales of hay  
   07. Cultivating field (disc, harrow, etc.)  
   08. Baling hay  
   09. Pulling wagon with tractor (specify tractor type)  
   10. Harvesting seed crops (corn, oats, wheat, silage, etc)  
   11. Planting field  
   12. Filling silo  
   13. Applying pesticides  
   14. Spreading manure  
   15. Feeding livestock  
   16. Other (Specify)  
   099. Unknown

14. What type of accident was the deceased involved in? (Circle all that apply)  
   01. Machine (Supp A)  
   02. Tractor (Supp B)  
   03. Turnover (Supp C)  
   04. Drowning (Supp D)  
   05. Animal (Supp E)  
   06. Chemical (Supp F)  
   07. Other Vehicle (Supp G)  
   09. Unknown

### General Accident Description: (Provide a brief detailed description of the activities being performed by the deceased (pre-event, event, post-event))

### Employee Training Program

16. Identify the types of training/education the supervisor received related to the farm work being performed:  
   01. No supervisor  
   02. On the job  
   03. Vocational Education  
   04. College education  
   05. Jr. College  
   06. Employer conducted  
   07. Other training (specify)  
   08. NA  
   09. Unknown