1M
Americans spend more than 1 million days in the hospital each year from crash injuries.

$18B
Crash injuries in 2012 totaled $18 billion in lifetime medical costs. More than 75% of costs occur during the first 18 months following the crash injury.

$33B
Lifetime work lost because of 2012 crash injuries cost an estimated $33 billion.

Motor Vehicle Crash Injuries
Costly but Preventable

More than 2.5 million Americans went to the emergency department (ED)—and nearly 200,000 were then hospitalized—for crash injuries in 2012. On average, each crash-related ED visit costs about $3,300 and each hospitalization costs about $57,000 over a person’s lifetime. The best way to keep people safe and reduce medical costs is to prevent crashes from happening in the first place. But if a crash does occur, many injuries can still be avoided through the use of proven interventions. More can be done at every level to prevent crashes and reduce injuries, but state-level changes are especially effective.

State officials can:
- Consider using proven interventions that increase the use of car seats, booster seats, and seat belts; reduce drinking and driving; and improve teen driver safety.
- Support traffic safety laws with media campaigns and visible police presence, such as those used with sobriety checkpoints.
- Link medical and crash data to better understand why crashes happen, the economic cost of those crashes, and how to prevent future crashes.

See page 4
Want to learn more? Visit www.cdc.gov/vitalsigns
Problem

Motor vehicle crashes are a leading cause of injury in the US—harmful and expensive.

What works to prevent crash injuries?

◊ **Using primary enforcement seat belt laws** that cover everyone in the car. A primary enforcement law means a police officer can pull over and ticket a driver or passenger for not wearing a seat belt. A secondary enforcement law means a police officer can ticket a driver or passenger for not wearing a seat belt only if the driver has been pulled over for some other offense.

◊ **Having child passenger restraint laws** that require car seat or booster seat use for children age 8 and under, or until 57 inches tall, the recommended height for proper seat belt fit.

◊ **Using sobriety checkpoints**, where police systematically stop drivers to check if they are driving under the influence of alcohol.

◊ **Requiring ignition interlocks** for people convicted of drinking and driving, starting with their first conviction. Ignition interlocks check and analyze a driver’s breath and prevent the car from starting if alcohol is detected.

◊ **Using comprehensive graduated driver licensing (GDL) systems**, which help new drivers gain skills in low-risk conditions. As drivers move through the different stages, they receive more driving privileges, such as driving at night or with passengers. Every state has GDL, but the specific rules vary.

Each of these strategies can prevent injuries and save medical costs. Much has been done to help keep people safe on the road, but no state has fully implemented all of these proven interventions.

Learn more at: www.cdc.gov/psr/motorvehicle

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**The Full Impact of Motor Vehicle Crashes**

For every 1 person killed in a motor vehicle crash

8 people were hospitalized

100 people were treated and released from the ED

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**Preventing injuries saves money**

Crash injuries have gone down in recent years. There were almost 400,000 fewer ED visits and about 5,700 fewer hospitalizations in 2012 compared to 2002. This equals $1.7 billion in avoided medical costs and $2.3 billion in avoided work loss costs.
State policies protect John through every stage of his life

**AGE 3**
John’s family minivan is hit head-on. State **child passenger restraint laws** had motivated his parents to buckle him in a car seat, so he is protected from harm.

**AGE 16**
Through his state’s **graduated driver licensing (GDL)** system, John gets the time and practice he needs to become a safe driver.

**AGE 30**
John’s job requires him to drive long distances. Promotion of his state’s **primary enforcement seat belt law** and his company’s policies motivate him to buckle up on every trip.

**AGE 55**
John is caught driving while intoxicated at a **sobriety checkpoint.** An **ignition interlock** is installed and it saves him and others from serious injury.

**AGE 70**
John doesn’t drink and drive and makes sure everyone is buckled up on every trip.

Dollar amounts reflect lifetime medical costs for crash injuries that occurred in 2012

- **Children ages 0–14:** $1.1 Billion
- **Young people ages 15–29:** $6.5 Billion
- **Adults ages 30–49:** $5 Billion
- **Adults ages 50–69:** $3.8 Billion
- **Adults 70 and older:** $2 Billion

**SOURCE:** CDC Vital Signs, MMWR Oct. 2014
What Can Be Done

The Federal government is

◊ Evaluating and encouraging use of proven programs and policies. 
Learn more at: www.thecommunityguide.org/mvoi

◊ Educating the public about how to stay safe on the road, such as through Click It or Ticket campaigns.

◊ Encouraging states to monitor serious injuries from motor vehicle crashes.

◊ Tracking the nation’s progress in reducing crash injuries and deaths.

State officials can

◊ Consider using proven interventions to reduce crashes and injuries. These include:
  ■ Increasing seat belt use through primary enforcement seat belt laws that cover everyone in the car.
  ■ Improving child passenger safety with restraint laws that require car seat or booster seat use for children age 8 and under or until 57 inches tall, the recommended height for proper seat belt fit.
  ■ Reducing drinking and driving by using sobriety checkpoints and requiring ignition interlock use for people convicted of drinking and driving, starting with their first conviction.
  ■ Improving teen driver safety through the use of comprehensive GDL systems.

◊ Support traffic laws with media campaigns and visible police presence, such as those used with sobriety checkpoints.

◊ Link medical and crash data to better understand why crashes happen, the economic cost of those crashes, and how to prevent future crashes.

Employers can

◊ Require seat belt use at all times in company vehicles, and in personal cars and trucks while on company business.

◊ Monitor the costs and causes of crashes in their workforce to support and guide motor vehicle safety programs.

◊ Arrange work schedules to reduce distracted driving, fatigue, and speeding.

◊ Select company vehicles with advanced safety features such as electronic stability control, lane departure warning systems, and collision avoidance systems.

Everyone can

◊ Use seat belts on every trip, no matter how short. Make sure passengers buckle up too.

◊ Buckle children in age- and size-appropriate car seats, booster seats, and seat belts. Those 12 and under should be buckled in the back seat.

◊ Choose not to drive after drinking alcohol or using drugs, and help others do the same.

◊ Know your state’s GDL laws and consider using tools like parent-teen driving agreements, if you are the parent of a teen.

◊ Learn more about all of these tips at: www.cdc.gov/motorvehiclesafety

For more information, please contact
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Publication date: October 7, 2014