

§ 572.43

(LLR or RLR) not less than 37 g's and not more than 46 g's.

(3) For the lower thoracic spine (T12) not less than 15 g's and not more than 22 g's.

(b) Test Procedure. (1) Adjust the dummy legs as specified in § 572.44(f). Seat the dummy on a seating surface as specified in § 572.44(h) with the limbs extended horizontally forward.

(2) Place the longitudinal centerline of the test probe at the lateral side of the chest at the intersection of the centerlines of the third rib and the Rib Bar on the desired side of impact. This is the left side if the dummy is to be used on the driver's side of the vehicle and the right side if the dummy is to be used on the passenger side of the vehicle. The probe's centerline is perpendicular to thorax's midsagittal plane.

(3) Align the test probe so that its longitudinal centerline coincides with the line formed by the intersection of the transverse and frontal planes perpendicular to the chest's midsagittal plane passing through the designated impact point.

(4) Position the dummy as specified in § 572.44(h), so that the thorax's midsagittal plane and tangential plane to the Hinge Mounting Block (Drawing SID-034) are vertical.

(5) Impact the thorax with the test probe so that at the moment of impact at the designated impact point, the probe's longitudinal centerline falls within 2 degrees of a horizontal line perpendicular to the dummy's midsagittal plane and passing through the designated impact point.

(6) Guide the probe during impact so that it moves with no significant lateral, vertical or rotational movement.

(7) Allow a time period of at least 20 minutes between successive tests of the chest.

[59 FR 52091, Oct. 14, 1994, as amended at 59 FR 52091, Oct. 14, 1994]

§ 572.43 Lumbar spine and pelvis.

(a) When the pelvis of a fully assembled dummy (SA-SID-M001A revision B, dated September 12, 1996, (incorporated by reference; see § 572.40) is impacted laterally by a test probe conforming to § 572.44(a) at 14 fps in accordance with paragraph (b) of this section, the peak acceleration at the location of the ac-

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celerometer mounted in the pelvis cavity in accordance with § 572.44(c) shall be not less than 40g and not more than 60g. The acceleration-time curve for the test shall be unimodal and shall lie at or above the +20g level for an interval not less than 3 milliseconds and not more than 7 milliseconds.

(b) Test Procedure. (1) Adjust the dummy legs as specified in § 572.44(f). Seat the dummy on a seating surface as specified in § 572.44(h) with the limbs extended horizontally forward.

(2) Place the longitudinal centerline of the test probe at the lateral side of the pelvis at a point 3.9 inches vertical from the seating surface and 4.8 inches ventral to a transverse vertical plane which is tangent to the back of the dummy's buttocks.

(3) Align the test probe so that at impact its longitudinal centerline coincides with the line formed by intersection of the horizontal and vertical planes perpendicular to the midsagittal plane passing through the designated impact point.

(4) Adjust the dummy so that its midsagittal plane is vertical and the rear surfaces of the thorax and buttocks are tangent to a transverse vertical plane.

(5) Impact the pelvis with the test probe so that at the moment of impact the probe's longitudinal centerline falls within 2 degrees of the line specified in paragraph (b)(3) of this section.

(6) Guide the test probe during impact so that it moves with no significant lateral, vertical or rotational movement.

(7) Allow a time period of at least 2 hours between successive tests of the pelvis.

[55 FR 45766, Oct. 30, 1990, as amended at 59 FR 52091, Oct. 14, 1994; 63 FR 16140, Apr. 2, 1998]

§ 572.44 Instrumentation and test conditions.

(a) The test probe used for lateral thoracic and pelvis impact tests is a 6 inch diameter cylinder that weighs 51.5 pounds including instrumentation. Its impacting end has a flat right angle face that is rigid and has an edge radius of 0.5 inches.

(b) Three accelerometers are mounted in the thorax for measurement of