



Module 9: Examine Car Seat Misuse

Suggested Scenarios

(EXCERPT FROM THE INSTRUCTOR PREP GUIDE, P88-90)

Below are suggested scenarios for this activity.

- It is suggested to set up at least four scenarios in the classroom.
- Students are required to record observed misuse for at least two of the scenarios using *Technician Guide*, p247.

Infant Car Seats

	Scenario #1	Scenario #2
Child's Age	2 weeks	23 months
Child's Weight	8 lbs.	29 lbs.
Child's Height	21.5 inches	33 inches
1. What type of car seat is used?	<input checked="" type="checkbox"/> Infant Car Seat <input type="checkbox"/> Convertible <input type="checkbox"/> All-in-One <input type="checkbox"/> Combination	<input checked="" type="checkbox"/> Infant Car Seat <input type="checkbox"/> Convertible <input type="checkbox"/> All-in-One <input type="checkbox"/> Combination
2. Does the child meet the car seat age, weight and height requirements?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No – <i>Too Tall</i>
3. Is the harness routed correctly?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4. Is the harness snug enough?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No – <i>Too loose</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5. Is the chest clip positioned correctly on the child?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
6. Are any non-approved products used?	<input checked="" type="checkbox"/> Yes – <i>Extra insert</i> <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Rear-Facing Car Seats

	Scenario #1	Scenario #2
Child's Age	23 months	13 months
Child's Weight	29 lbs.	24 lbs.
Child's Height	33 inches	29 inches
1. What type of car seat is used?	<input type="checkbox"/> Infant Car Seat <input checked="" type="checkbox"/> Convertible <input type="checkbox"/> All-in-One <input type="checkbox"/> Combination	<input type="checkbox"/> Infant Car Seat <input type="checkbox"/> Convertible <input checked="" type="checkbox"/> All-in-One <input type="checkbox"/> Combination
2. Does the child meet the car seat age, weight and height requirements?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3. Is the harness routed correctly?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No – <i>Above shoulders</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4. Is the harness snug enough?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No – <i>Too loose</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5. Is the chest clip positioned correctly on the child?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No – <i>Too low</i>
6. Are any non-approved products used?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Forward Facing Car Seats

	Scenario #1	Scenario #2
Child's Age	11 months	4 years
Child's Weight	22 lbs.	40 lbs.
Child's Height	28 inches	40 inches
1. What type of car seat is used?	<input type="checkbox"/> Infant Car Seat <input checked="" type="checkbox"/> Convertible <input type="checkbox"/> All-in-One <input type="checkbox"/> Combination	<input type="checkbox"/> Infant Car Seat <input type="checkbox"/> Convertible <input type="checkbox"/> All-in-One <input checked="" type="checkbox"/> Combination
2. Does the child meet the car seat age, weight and height requirements?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No – <i>Too small to be forward-facing</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3. Is the harness routed correctly?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No – <i>Different harness slots</i>
4. Is the harness snug enough?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No – <i>Too loose</i>
5. Is the chest clip positioned correctly on the child?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
6. Are any non-approved products used?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No