

UNITED STATES RAILROAD ADMINISTRATION
DIRECTOR GENERAL OF RAILROADS
HOCKING VALLEY RAILROAD

Form 209



Conductor's and Engineer's Report of Injury to Person

Send this Report to Train Master promptly with a full written statement from each member of the crew.

Date of Report Feb 5 1923

1. Name of Person injured HP Keenan 2. Age 30 years
3. Residence 382 Carpenter St 4. Occupation Switchman
5. Whether a Passenger, Traveler on Highway, Employee, or Trespasser (if an Employee, give the length of time he has been in the service of the Railway) 2 years 4 months

6. Married or single married 7. What family has the person wife
8. Date of accident Feb 5 1923 9. Hour 3:35 P.M. 10. Name of, distance and direction from nearest station

11. Number of nearest Telegraph Pole and estimated distance and direction from Telegraph Post named at X-over switch leading to main track at west end Parsons yard

12. Kind of Train yard 13. Train Number yard 14. Engine Number 215

15. Direction South 16. Conductor Geo H Spangler

17. Engineer F R Kullman 18. Fireman Jno Reine

19. Brakemen Joe Campbell M Jevikoff 20. Baggage man

21. Cause and circumstances relating to accident (state fully) Mr Keenan was riding on step of Eng 215 and Fireman Reine was turning Eng Hook so he could get it in cab and it caught on switch light injuring Switchman Keenan

22. Weather: clear, cloudy or foggy cloudy 23. Raining or snowing no

24. Daylight or dark Day light 25. If injury was because of contact with Engine, Cars, other Machinery or structure, make careful inspection thereof and state fully the conditions at the time of the accident

26. What signals were given? How and by whom? none

27. Nature and extent of injuries Back Hurt Bruised

28. Probable days of disability 2 to 3

29. Was injured person sent to Railway doctor (give name of doctor) S B Taylor

30. If not sent to Railway doctor, what was done with injured person?

31. Names and residences of all persons who can give any information as to the cause or result of accident
Jno Reine
Joe Campbell

Was handling 100 cars moving about 10 to 12 miles per hour

(Signature) Geo H Spangler (Signature) F R Kullman
Conductor. Engineer.

2

L. V. No. 19590

UNITED STATES RAILROAD ADMINISTRATION
DIRECTOR GENERAL OF RAILROADS
HOCKING VALLEY RAILROAD

REPORT OF INJURY TO PERSON

Name *A. J. Keenan*

Date *Feb. 5* 19*23*

All Trainmen are Required to Use this Report.

In all cases of personal injury make the inquiries which will enable you to furnish the within information, and you will also, in preparing this report, observe as closely as possible the following instructions, viz: Fix accurately the place at which it occurred by feet from some stationary object; if at crossing, state the spot at which the person was struck and where picked up, fixing the distance by stationary objects; give a detailed account of the cause of the accident; if you think the person was injured by his own fault state your reason for so thinking; if caused by defective machinery describe fully; give any other information not furnished by the requirement of the report; when information for this report is being collected draw the attention of others to the facts, in order that they may be able to testify to them of their own knowledge. Whenever distance from a point is to be reported, call the attention to the fact of those who will have to testify thereto, so that the statements may be accurate, and report the names of such persons. State how far the coming train that caused the accident can be seen from the point where it occurred. State who heard the whistle blow, or the bell ring, and why they remember it. Whenever possible the names, addresses and statements of persons not employees, who were witnesses, should be procured. All accidents of whatever nature must be promptly reported to the Superintendent.

Report of Inspection of Engines, Cars, Machinery and Track.

- 24. Number and initials of engines or cars
- 25. Where inspected.....
- 26. Date inspected.....
- 27. Time inspected.....
- 28. Condition, kind and height of draw-bars.....
- 29. Condition of dead-woods.....
- 30. Condition of end sills.....
- 31. Condition of draft timbers.....
- 32. Condition of recoil spring.....
- 33. Condition of truss rods and head of same.....
- 34. Condition of ladders, stirrups, grab-irons, etc.....
- 35. Condition of brake, wheels, staff, chain, etc.....
- 36. Was brake-beam inside or outside wheels?.....
- 37. Condition of machinery.....
- 38. Condition of track
- 39. Note in full any defects wherever found, about any part of car, track or machinery.....

When persons are injured while coupling or uncoupling cars, or in any way which an accident may have happened caused by appliances, machinery or track, the car must be immediately examined by person in charge to ascertain its condition, and a report made of the inspection by filling in the above blanks. This inspection must be made before the car or engine leaves the place where the accident occurred, and a full report on this form must be forwarded on first train to Trainmasters office. If accident occurs at a station or a point on the road where there is no car inspector, the conductor must make the inspection; if at a station where there is a car inspector, he must be called immediately to make the inspection. When an accident is caused by breakage of machinery, tools, appliances or rails, the broken parts must be marked as to be readily identified. The person making this inspection must sign his name on the line below provided for that purpose.

..... *Conductor.*

..... *Inspector.*

..... *Yard Master.*

..... *Foreman.*

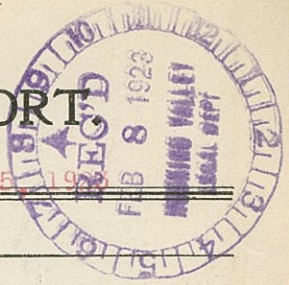
..... *Superintendent.*

THE
HOCKING VALLEY
RAILWAY CO.

Form 1202.

SURGEON'S INITIAL REPORT

70 S. Grant Ave. Feb. 5 1923



1. Name, Residence (street number) and P. O. address of person injured? H. P. Deenan
362 Carpenter St.
2. Age 30 Occupation Switchman Dep't Trains Nationality Amer.
3. Date of injury? Feb. 5, 1923 4:45 P.M. At or near what Station? Parsons
4. Employee, passenger, traveler on highway, or trespasser? Employee Married or single? Married
5. If employee, who was his immediate superior? F. L. Connors
6. Circumstances in life _____ Accident and life insurance, \$ _____
State name of Ins. Co.'s H.W.M.B.

7. Give description, stating the parts injured and supposed manner of infliction
Bruised back

8. What was done with and for the person? Hot foment and linament

9. Who called Surgeon? Patient came to office

10. Did you render first attention? If, not, who did, and what was done? Yes

11. What disability or deformity did injured person have which existed previous to this injury? None

12. What does injured person say as to the cause of his injuries, and what does he say he was doing at the time the accident occurred? (Give as near as possible the patient's own words) "Riding on engine 215 on left side and firman went to turn engine hook - around on outside of engine hook caught in switch stand and struck me in back."

13. Who does injured person say witnessed the accident? Members of crew

To whom was this said? A. B. Taylor

14. Prognosis _____

15. How long will patient be disabled? Four days

16. State any additional information which you may deem of interest or profit to the Company _____

Sign here Sterling B. Taylor
Columbus Surgeon at Colo

☞ Make report with least possible delay.

STATEMENT OF INJURED PERSON.

1. If employee, how long, and on what date did you last enter Company's service? Sept. 1920
2. If passenger, where from and destination? ✓
3. If married, name and residence of wife or husband, and names and ages of children? Mary
4. If single, names and address of father and mother, and nearest relatives ✓
5. State what, in your opinion, was the cause of the accident, and what were you doing at the time it occurred?
Riding on Egstone fireman engine fireman
turned to look back striking me
6. Could you, by more care on your part, have prevented your injury? No.
7. If there was any defect in track, bridges, buildings, rolling stock, machinery, tools or other appliances, that caused, or may have assisted in causing, the injury, how long had same existed, and had same been reported, and if so, by whom and to whom? No.
8. Did you know of defect prior to accident? No.
9. State all other particulars relative to the accident No.

The above is a true statement to the best of my knowledge and belief.

Witness:

S. B. Taylor

Signed

H. P. Keenan
382 Carpenter

Dated

Feb. 5, 1923

L. D. No.

The
Hocking Valley Railway
Company

SURGEON'S INITIAL REPORT.

Name H. P. Keenan

At

Date February 5-23

NOTICE TO SURGEONS.

Make out this report as complete as possible leaving no heading unanswered, and send to the Chief Surgeon, at Columbus, Ohio. All reports must be signed by the injured person, and when not so signed, the reason given therefor.

H-1-8-23

Mr S. L. Connors -

J. J. M.

In regards

of switchman Keenan's injuries
on Feb. 5. Fireman on engine
210 had to turn hook, did not
have room in cab + put it
down by side of engine + caught
Keenan between hook + engine
hook caught on switch stand.

Joe Campbell

Feb 5 1923

Mr. J. L. Connor J. J. M.

Dear Sir

In regards to W. Orem
getting injured this 3rd of Jan I do not know anything
about it as I did not see the accident

Yours Truly
G. R. Sullivan

2-5-23

Mr F. L. Connors
77.M.

In regard to accidental loss
spanner crew with Eng 215 at
prison yard I was on the rear
end of cut and didn't know
any thing about it until told
of it.

M. J. Witoff yard
superintendent

Parram. Feb 5 1923.

Mr F L Connors

Dear Sir

In regards to
injury to Switchman H P Keenan I did not
see this accident

yours Truly
Geo H Spangler
Conductor

Col. C. 2-5-23

Mr. F. L. Connors

F. L. M.

Sir

I was trying to turn clutch hook
on side of engine and brakeman
H. P. Keenan was standing on step the
hook caught the switch stand and
knock him off
Yours Truly
Geo H Spangler

THE HOCKING VALLEY RAILWAY COMPANY



Columbus, Ohio.

February 7, 1923.

Mr. W. W. Houston, Superintendent,
Columbus, Ohio.

Dear Sir:

Attached hereto please find report, form 209, covering injuries sustained by Switchman H. P. Keenan at 3:35PM on February. *5th*.

Mr. Keenan was standing on step of Engine 215 and Fireman Beine was turning clinker hook so he could get it in cab when end of hook caught on switch *Stand* ~~light~~, knocking Keenan off step, bruising his back. He called at the office of Doctor Taylor and will lose *two* or three days account of accident.

You will also find statements from each member of the crew advising all they know regarding accident.

Yours truly,

A. Conners
Terminal Train Master.

CRB/HW.

THE HOCKING VALLEY RAILWAY CO.

Memorandum of Personal Injury



Columbus, Ohio, February 8,

1923

Date of accident February 5, 1923 Time of day 3:35 P.M. A. M. or P. M.

I. C. C. class S-j Place of accident Columbus Yard Division -----

Nearest mile post ----- Estimated distance in rods and direction from mile post named -----

Kind of accident Train Service

Clear, cloudy or foggy Cloudy Raining or snowing Neither Daylight or dark Daylight

Cause (briefly) Clinker hook caught in switch stand & knocked Brakeman Keenan off step

Kind of train Yard (100 cars) Number ----- Engine Number 215

Direction South Speed 10 miles per hour

Name of person injured H. P. Keenan Residence Columbus

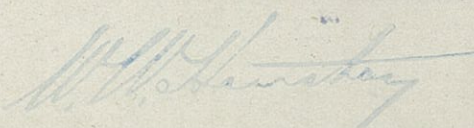
Class of person A-140 Occupation Yard Freight Brakeman

Nature and extent of injuries Back bruised

Days disability Actual Probable Three

Detail of cause and nature of accident:

Brakeman Keenan was standing on step of Engine 215 and Fireman Beine was turning clinker hook so he could get it in cab when end of hook caught on switch stand, knocking Keenan off step, bruising his back.

Signature  Title Superintendent

NOTE: This report must be furnished Superintendent in triplicate.

Copy - E R Cott