

CONSUMER PRODUCT INCIDENT REPORT

Region: CENTRAL

1. NAME OF RESPONDENT Maria Luttrell	2. PHONE NO. (HOME) (WORK) (b)(6)
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(b)(6) E

5. DESCRIBE INCIDENT OR HAZARD, INCLUDING DATA ON INJURIES:  
 death - Incident occurred at baby-sitter's house, (b)(6)  
 Louisville, KY area (current address & TEL# unknown, respondent said  
 -cont-

6. DATE OF INCIDENTS 2/24/1998	7. IF INJURY OR NEAR MISS OBTAIN AGE/SEX AND DESCRIBE INJURY: 6 W/F death by SIDS	8. IF VICTIM DIFFERENT FROM RESPONDENT, PROVIDE NAME (b)(6) RELATIONSHIP daughter
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CPSA (b)(1) CLEARED for PUBLIC  
 NO MFRS/PRVTLBLRS OR PRODUCTS IDENTIFIED  
 EXCEPTED BY: PETITION RULEMAKING ADMIN. PRCDG

9. DESCRIPTION OF PRODUCT comforter set for a full-size crib WITH PORTIONS REMOVED:	10. BRAND NAME unknown
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11. MFR/DISTRIBUTOR NAME, ADDR. & PHONE unknown  ISSUE 27  MAR 29 2000	12. MODEL, SERIAL NUMBERS unknown	13. DEALER'S NAME, ADDRESS & PHONE unknown
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14. WAS THE PRODUCT DAMAGED, REPAIRED OR MODIFIED? YES NO x IF YES, BEFORE OR AFTER THE INCIDENT? DESCRIBE:	15. PRODUCT PURCHASED NEW x USED DATE PURCHASED unknown AGE unknown
	16. DOES PRODUCT HAVE WARNING LABELS? IF SO, NOTE: unknown

17. HAVE YOU CONTACTED THE MANUFACTURER? YES NO x IF NOT, DO YOU PLAN TO CONTACT THEM? no	18. IS THE PRODUCT STILL AVAILABLE? YES NO x IF NOT, ITS DISPOSITION unknown if available	19. MAY WE USE YOUR NAME WITH THIS REPORT? YES x NO
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FOR ADMINISTRATION USE		
20. DATE RECEIVED 03/28/2000	21. RECEIVED BY (NAME & OFFICE) ldm/HL	22. DOCUMENT NO. H0030299A

23. FOLLOW-UP ACTION	24. PRODUCT CODE(S) 0667,1543
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25. DISTRIBUTION	26. ENDORSER'S NAME & TITLE LDM 03/28/2000
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CONSUMER PRODUCT INCIDENT REPORT

Region:CENTRAL

1. NAME OF RESPONDENT  
Maria Luttrell

2. PHONE NO. (HOME) (WORK)  
(b)(6)

3. STREET ADDRESS  
(b)(6)

4. CITY STATE ZIP CODE

5. DESCRIBE INCIDENT OR HAZARD, INCLUDING DATA ON INJURIES  
death - Incident occurred at baby-sitter's house, (b)(6)  
Louisville, KY area (current address & TEL# unknown, respondent said  
-cont-

6. DATE OF INCIDENTS  
2/24/1998

7. IF INJURY OR NEAR MISS OBTAIN AGE/SEX AND DESCRIBE INJURY:  
6 W/F  
death by SIDS

8. IF VICTIM DIFFERENT FROM RESPONDENT, PROVIDE NAME RELATIONSHIP  
(b)(6)  
daughter

9. DESCRIPTION OF PRODUCT  
comforter set for a full-size crib

10. BRAND NAME  
unknown

11. MFR/DISTRIBUTOR NAME, ADDR. & PHONE  
unknown

12. MODEL, SERIAL NUMBERS  
unknown

13. DEALER'S NAME, ADDRESS & PHONE  
unknown

ISSUE 27 -  
MAR 29 2000

14. WAS THE PRODUCT DAMAGED, REPAIRED OR MODIFIED? YES NO x IF YES, BEFORE OR AFTER THE INCIDENT? DESCRIBE:

15. PRODUCT PURCHASED NEW x USED DATE PURCHASED unknown AGE unknown

16. DOES PRODUCT HAVE WARNING LABELS? IF SO, NOTE: unknown

17. HAVE YOU CONTACTED THE MANUFACTURER? YES NO x IF NOT, DO YOU PLAN TO CONTACT THEM?  
no

18. IS THE PRODUCT STILL AVAILABLE? YES NO x IF NOT, ITS DISPOSITION  
unknown if available

19. MAY WE USE YOUR NAME WITH THIS REPORT?  
YES x NO

FOR ADMINISTRATION USE

20. DATE RECEIVED  
03/28/2000

21. RECEIVED BY (NAME & OFFICE)  
ldm/HL

22. DOCUMENT NO.  
H0030299A

23. FOLLOW-UP ACTION

24. PRODUCT CODE(S)  
0667,1543

25. DISTRIBUTION

26. ENDORSER'S NAME & TITLE  
LDM 03/28/2000

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**Narrative Continued**

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baby-sitter moves frequently).

(b)(6) put daughter on her stomach in her son's crib (8 to 9-months-old) to sleep. Respondent said she provided an infant carrier for her daughter to sleep in while at the baby-sitter. Respondent said a crib comforter was in the crib along with bumper pads, toys and the crib's head and foot board and sides rails were covered with blankets. 2 or more hours later, (b)(6) picked daughter up to feed her and daughter was not breathing, was unresponsive and she was still on her stomach. (b)(6) called 911 and then called respondent at work and said her daughter wasn't breathing.

Daughter was taken to Baptist East Hospital, Louisville, KY, daughter couldn't be revived and was pronounced dead.

Autopsy stated the cause of death as SIDS, but respondent spoke to the coroner later (date unknown), who said they couldn't prove if daughter died from suffocation, but it was possible. Respondent said (b)(6) wasn't charged with her daughter's death and (b)(6) is still baby-sitting children.

Date unknown, (b)(6) later told respondent that she wasn't aware that soft bedding and toys should never be placed in a crib and that infants shouldn't be placed on their stomachs to sleep.

Respondent feels labels should be placed on baby comforter sets and bedding stating that they are for decorative purposes only and poses a risk of suffocation with small children 2 years and under.

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CPSC Source: E-MAIL

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CONSUMER PRODUCT INCIDENT REPORT    - H0030299A  
 PRODUCT #2

9. DESCRIPTION OF PRODUCT full-size wooden crib	10. BRAND NAME unknown
11. MFR/DISTRIBUTOR NAME, ADDR. & PHONE unknown  unknown	12. MODEL, SERIAL NUMBERS unknown  13. DEALER'S NAME, ADDRESS & PHONE unknown
14. WAS THE PRODUCT DAMAGED, REPAIRED OR MODIFIED? YES    NO <input checked="" type="checkbox"/> IF YES, BEFORE OR AFTER THE INCIDENT?    DESCRIBE:	15. PRODUCT PURCHASED    NEW <input checked="" type="checkbox"/> USED DATE PURCHASED unknown    AGE unknown  16. DOES PRODUCT HAVE WARNING LABELS? IF SO, NOTE: unknown
17. HAVE YOU CONTACTED THE MANUFACTURER?    YES    NO <input checked="" type="checkbox"/> IF NOT, DO YOU PLAN TO CONTACT THEM? no	18. IS THE PRODUCT STILL AVAILABLE?    YES    NO <input checked="" type="checkbox"/> IF NOT, ITS DISPOSITION unknown if available

