



## Vote Sheet

**TO:** The Commission  
Alberta E. Mills, Secretary

**THROUGH:** Austin C. Schlick, General Counsel  
Jason K. Levine, Executive Director

**FROM:** Daniel R. Vice, Assistant General Counsel, Regulatory Affairs  
Charlotte G. Alton, Attorney, Regulatory Affairs

**SUBJECT:** Notice of Proposed Rulemaking: Safety Standard for Infant Rockers and Infant/Toddler Rockers

**DATE:** September 13, 2023

**THIS MATTER IS NOT SCHEDULED FOR A BALLOT VOTE.**

**A DECISIONAL MEETING FOR THIS MATTER IS SCHEDULED ON:** Wednesday, October 4, 2023

The Office of the General Counsel is forwarding for the Commission's consideration a staff briefing package recommending *Federal Register* publication of the attached draft notice of proposed rulemaking (NPR) to establish a consumer product safety standard for Infant and Infant/Toddler Rockers. Pursuant to section 104 of the Consumer Product Safety Improvement Act of 2008 (CPSIA), 15 U.S.C. § 2056a, the draft NPR would incorporate by reference the most recent voluntary standard, ASTM F3084 – 22, *Safety Standard for Infant and Infant/Toddler Rockers*, as the mandatory federal safety standard for infant and infant/toddler rockers, with modifications to make the standard more stringent, to further reduce the risk of injury and death associated with infant rockers.

The draft NPR also proposes to amend the consumer product registration rule, 16 CFR part 1130, to include the category of Infant and Infant/Toddler Rockers. Finally, the draft NPR proposes to amend the Commission's regulation at 16 CFR part 1112 to add Infant and Infant/Toddler Rockers to the list of products that require third party testing.

Please indicate your vote on the following options:

U.S. Consumer Product  
Safety Commission  
4330 East-West Highway  
Bethesda, MD 20814

National Product Testing  
and Evaluation Center  
5 Research Place  
Rockville, MD 20850

I. Approve publication of the attached notice in the *Federal Register*, as drafted.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

II. Approve publication of the attached notice in the *Federal Register*, with the specified changes.

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\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

III. Do not approve publication of the attached notice in the *Federal Register*.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

IV. Take other action specified below.

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\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

Attachment: Notice of Proposed Rulemaking: Safety Standard for Infant and Infant/Toddler Rockers

Billing Code 6355-01-P

**CONSUMER PRODUCT SAFETY COMMISSION**

**16 CFR Parts 1112, 1130, and 1240**

**[CPSC Docket No. XXXX]**

**Safety Standard for Infant and Infant/Toddler Rockers**

**AGENCY:** Consumer Product Safety Commission.

**ACTION:** Notice of proposed rulemaking.

**SUMMARY:** The Danny Keysar Child Product Safety Notification Act, section 104 of the Consumer Product Safety Improvement Act of 2008 (CPSIA), requires the U.S. Consumer Product Safety Commission (Commission or CPSC) to promulgate consumer product safety standards for durable infant or toddler products. These standards are to be substantially the same as applicable voluntary standards, or more stringent than the voluntary standards if the Commission concludes that more stringent requirements would further reduce the risk of injury associated with the product. The Commission is proposing a safety standard for Infant and Infant/Toddler Rockers (rockers<sup>1</sup>). The Commission is also proposing to amend CPSC's consumer registration requirements to add rockers as identified durable infant or toddler products and to amend CPSC's list of notice of requirements (NORs) to include rockers.

**DATES:** Submit comments by [INSERT DATE 60 DAYS AFTER DATE OF PUBLICATION IN THE FEDERAL REGISTER].

**ADDRESSES:** Comments related to the Paperwork Reduction Act aspects of the marking, labeling, and instructional literature requirements of the proposed rule should be directed to the

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<sup>1</sup> Referred to together as "rockers." Reference to "Infant Rockers" alone refers to products intended for use by infants up to approximately six months of age. Reference to "Infant/Toddler Rockers" alone refers to products intended for use by children up to approximately 2.5 years of age. See section II of the preamble for the full definitions of Infant Rockers and Infant/Toddler Rockers.

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DRAFT

Office of Information and Regulatory Affairs, the Office of Management and Budget, Attn: CPSC Desk Officer, FAX: 202-395-6974, or e-mailed to [oir\\_submission@omb.eop.gov](mailto:oir_submission@omb.eop.gov).

Other comments, identified by Docket No. CPSC-XXXX, may be submitted electronically or in writing:

*Electronic Submissions:* Submit electronic comments to the Federal eRulemaking Portal at: <https://www.regulations.gov/>. Follow the instructions for submitting comments. CPSC typically does not accept comments submitted by electronic mail (e-mail), except through <https://www.regulations.gov/>. CPSC encourages you to submit electronic comments by using the Federal eRulemaking Portal, as described above.

*Mail/Hand Delivery/Courier/Confidential Written Submissions:* Submit comments by mail, hand delivery, or courier to: Office of the Secretary, Consumer Product Safety Commission, 4330 East-West Highway, Bethesda, MD 20814; telephone: (301) 504-7479. If you wish to submit confidential business information, trade secret information, or other sensitive or protected information that you do not want to be available to the public, you may submit such comments by mail, hand delivery, or courier, or you may e-mail them to: [cpsc-os@cpsc.gov](mailto:cpsc-os@cpsc.gov).

*Instructions:* All submissions must include the agency name and docket number. CPSC may post all comments without change, including any personal identifiers, contact information, or other personal information provided, to <https://www.regulations.gov/>. Do not submit through this website: Confidential business information, trade secret information, or other sensitive or protected information that you do not want to be available to the public. If you wish to submit such information, please submit it according to the instructions for mail/hand delivery/courier/confidential written submissions.

*Docket:* For access to the docket to read background documents or comments received, go to: <https://www.regulations.gov/>, and insert the docket number, CPSC-XXXX, into the “Search” box, and follow the prompts.

**FOR FURTHER INFORMATION CONTACT:** Zachary S. Foster, Project Manager, Division of Human Factors, Directorate for Engineering Sciences, Consumer Product Safety Commission, 5 Research Place, Rockville, MD 20850; Telephone 301-987-2034; e-mail: zfoster@cpsc.gov.

**SUPPLEMENTARY INFORMATION:**

**I. Background**

Section 104(b) of the CPSIA, 15 U.S.C. 2056a(b), requires the Commission to: (1) examine and assess the effectiveness of voluntary consumer product safety standards for durable infant or toddler products in consultation with representatives of consumer groups, juvenile product manufacturers, and independent child product engineers and experts; and (2) promulgate consumer product safety standards for durable infant or toddler products. Standards issued under section 104 are to be “substantially the same as” the applicable voluntary standards or more stringent than the voluntary standards if the Commission determines that more stringent requirements would further reduce the risk of injury associated with the product. 15 U.S.C. 2056a(b)(1)(B).

Currently, no mandatory safety standard exists for infant rockers or infant/toddler rockers. There is a voluntary standard, however. In July 2014, ASTM International’s (ASTM) Committee F15 on Consumer Products first published a voluntary standard for rockers – ASTM F3084-14, *Standard Consumer Safety Specification for Infant and Infant/Toddler Rockers* (ASTM F3084), to minimize the risk of injury or death associated with children’s use of rockers.

The standard addressed hazards associated with product disassembly and collapse, stability, and falls from an elevated surface. Hazard mitigation strategies included performance requirements, warnings, and instructional literature. The ASTM standard has been revised four times since 2014, in 2016, 2018, 2020, and 2022. The most current version of the ASTM standard is ASTM F3084-22, published in May 2022.

Consistent with the consultation requirement in section 104(b)(1) of the CPSIA, CPSC staff has worked with the ASTM F15.18 subcommittee task group since 2013 to update the voluntary standard for rockers. This consultation, including staff's assessment of hazard patterns and suggested additional performance and labeling requirements, continued through publication and revision of ASTM F3084-22.

Section 104(d) of the CPSIA requires manufacturers of durable infant or toddler products to establish a product registration program and comply with CPSC's requirements under 16 CFR part 1130. Any product defined as a "durable infant or toddler product" in part 1130 must comply with the product registration requirements, as well as testing and certification requirements for children's products, as codified in 16 CFR parts 1107 and 1109. Section 104(f)(1) of the CPSIA defines a "durable infant or toddler product" as a "durable product intended for use, or that may be reasonably expected to be used, by children under the age of 5 years." 15 U.S.C. 2056a(f)(1). Section 104(f)(2) of the CPSIA includes a list of categories of products that are durable infant or toddler products, including products similar to rockers, such as various infant chairs (highchairs, booster chairs, and hook-on chairs) and swings. 15 U.S.C. 2056a(f)(2).

Rockers are not included in the statutory list of durable infant or toddler products. As set forth in section V of the preamble, the statutory product list is not exhaustive. The Commission

now proposes to amend part 1130 to include “Infant and Infant/Toddler Rockers” as durable infant or toddler products because they are intended for use, and may be reasonably expected to be used, by children under the age of 5 years; are analogous to other statutory and Commission-defined durable infant products, such as infant bouncers; and are commonly available for resale or “handed down” for use by other children.

## **II. The Product Category**

### *A. Products Within the Scope*

The scope of this notice of proposed rulemaking (NPR) includes all infant rockers and all infant/toddler rockers within the scope of ASTM F3084-22, including multi-mode products with a rocker mode, with the addition of weight limits for each product and terminology to define “rocking” pursuant to the Commission’s proposed modification to the standard definitions addressed below. The ASTM standard F3084-22 defines an infant rocker as a “freestanding product intended to support an occupant who has not developed the ability to sit up unassisted (approximately 0 to 6 months of age) in a seated, reclined position greater than 10° and to facilitate rocking by the occupant with the aid of the caregiver or by other means.” The ASTM standard defines an infant/toddler rocker as “a freestanding product intended to support an occupant in a seated, reclined position greater than 10° and to facilitate rocking by the occupant with the aid of the caregiver or by other means until the occupant is approximately 2 1/2 years.” The Commission proposes to modify the ASTM definitions of infant rockers and infant/toddler rockers by specifying a weight limit for each product so as to reflect the manufacturers’ maximum recommended weight listed in the product warning, and thereby clarifying which forward stability test is required for each product.<sup>2</sup> The Commission also proposes to add

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<sup>2</sup> See Tab F of Staff’s NPR Briefing Package for additional information on the scope of ASTM F3084-22, and Tab G of Staff’s NPR Briefing Package for the proposed changes to the definition and stability test.

terminology to define “rocking” as forward and backward motion via a nonstationary base. This clarification is intended to differentiate rockers from other infant and toddler seated products and prevent improper product classification. The Commission invites comments on the proposed definition of “rocking.”<sup>3</sup>

Products within scope of the NPR include:

- Infant rockers, marketed for infants up to approximately six months old,
- Infant/toddler rockers, marketed for children up to approximately 2.5 years old,
- Combination rocker/bouncers (bouncers with curved rocker legs),
- Combination swings/rockers (rockers that attach to a stationary swing base), and
- Other combination products, such as rocker/bouncer/stationary chair products.

Most rockers have a metal or plastic frame with a padded fabric seat. A few products, primarily from foreign direct shippers and hand crafters, have a wooden frame. Some products have a motorized rocking function, a vibration function, or sound functions, which are powered by batteries or an electrical cord with a plug. All rockers support a child in an inclined position (greater than 10 degrees from vertical) with certain infant/toddler rockers having adjustable seat backs to facilitate upright sitting as the child grows. Many products also feature an accessory bar with attached toys that are, or once the child has grown larger will be, within the child’s reach. Certain products also have secondary use modes. For example, some products have a kickstand that can be deployed to keep the product stationary, while other products can be converted into a

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<sup>3</sup> See Briefing Memo and Tab G of Staff’s NPR Briefing Package for the proposed addition.



bouncer or swing. Many rockers have three-point crotch restraints consisting of a wide cloth crotch and short adjustable waist straps with plastic buckles. Some infant/toddler rockers also utilize a shoulder restraint.

Some items marketed as “rockers” are subject to the swing mandatory standard, 16 CFR part 1223, rather than the rocker standard, based on how the product moves in relation to a base or stand. Rockers are reclined seated products that move in their entirety, most commonly on curved legs, so as to rock an occupant forward and backward, while swings have a stationary base. Multi-mode items, such as rockers with curved legs that attach to a swing base, are subject to both the swing mandatory standard and the rocker voluntary standard. Some conventional bouncer seats are advertised as “rockers” because they rock up and down, but those products would not meet the definition of a “rocker” in either the ASTM standard or the NPR if the base is stationary. Bouncer seats must meet the bouncer seat mandatory standard in 16 CFR part 1229, while multi-mode items that are both rockers and bouncers are subject to both standards.

Rocking horse toys and similar items are out of scope for this rule because they do not meet the definition of a “rocker” in the ASTM standard or the NPR; such toys do not support the occupant in a seated, reclined position. Similarly, traditional children’s rocking chairs with a straight, non-reclining back are not within the scope of the rule.

*B. Market Description*

CPSC staff estimates that rocker sales reach 567,500 units per year, although this estimate is uncertain due to the industry practice of grouping rockers and combination products with non-rocker products into a single survey category. In January 2023, staff found that 25 percent of the bestselling products within the “infant bouncers and rockers” category of a major internet retailer website were rockers or combination rocker/bouncer products within scope of

this proposed rule. *See* Tab F of Staff Briefing Package: Draft Notice of Proposed Rulemaking for Infant and Infant/Toddler Rockers (Sept. 13, 2023) (Staff’s NPR Briefing Package), available at: [\[include weblink\]](#).

While new rockers are available from online general retail sites, brick and mortar baby specialty stores, and brick and mortar general retail stores including “big box” stores, used items are widely available on second-hand online sites, as well as in some thrift stores. Rockers range in price from \$35 to \$250 with an average price of about \$110. The less expensive products tend to be smaller products without powered functions, while the more expensive rockers tend to be combination products (*e.g.*, rocker-swings or rocker-bouncers) or products with additional features. Using the estimate of approximately 567,500 units sold each year with the average price of \$110, CPSC estimates a \$62 million market in terms of annual sales. Approximately 80 models of rockers are available for sale on the U.S. market, from roughly 50 entities.

### **III. Incident Data**

Rockers are part of a broader group of products (which includes bouncers and swings) that provide support to infants who are initially unable to sit independently. Compared to other postures, sitting can provide infants an improved ability to explore objects with greater visual access to their environment, as well as increased social attention. While infants are sitting, as compared to other postures, caregivers also demonstrate a wider variety of interactions that allow infants to practice cognitive skills.<sup>4</sup>

However, incident data confirms that some caregivers use rockers for brief or extended infant or toddler sleep, despite warnings that these products should not be used for sleep. As Tab A of Staff’s NPR Briefing Package explains in greater detail, CPSC staff searched the Consumer

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<sup>4</sup> *See* Tab D of Staff’s NPR Briefing Package for additional information.

Product Safety Risk Management System (CPSRMS)<sup>5</sup> and the National Electronic Injury Surveillance System (NEISS)<sup>6</sup> for fatalities, incidents, and concerns associated with rockers reported to have occurred between January 1, 2011 and November 7, 2022. Staff identified 1,088 incidents from CPSRMS associated with rockers. Staff found too few emergency department-treated injuries associated with rockers to derive reportable national estimates. Therefore, staff was unable to provide injury estimates based on NEISS data but included NEISS injury cases in the total count of reported incidents.

Table 1 shows the number of incidents reported for each year during the period. Incident reporting is ongoing and the number of incidents—particularly for recent years— may change.

**Table 1: Reported Infant Rocker Incidents**

<i>Incident Year</i>	<i>Total Number of Reported Incidents</i>	<i>Number of Reported Fatalities</i>	<i>Number of Reported Nonfatal Injuries</i>
2011	164	1	29
2012	200	1	23
2013	158	1	11
2014	97	1	3
2015	82	1	3
2016	137	0	4
2017	86	1	5
2018	67	0	2
2019	42	2	4
2020	42	1	3
<b>2021*</b>	8	1	1
<b>2022*</b>	6	1	0
<b>Total</b>	<b>1,088</b>	<b>11</b>	<b>88</b>

Source: CPSC epidemiological databases CPSRMS and NEISS.

Note: \* indicates data collection is ongoing.

<sup>5</sup> CPSRMS is the epidemiological database that houses all anecdotal reports of incidents received by CPSC, “external cause”-based death certificates purchased by CPSC, all in-depth investigations of these anecdotal reports, as well as investigations of select NEISS injuries. Examples of documents in CPSRMS are: hotline reports, Internet reports, news reports, medical examiner’s reports, death certificates, retailer/manufacturer reports, and documents sent by state/local authorities, among others.

<sup>6</sup> NEISS is a statistically valid surveillance system for collecting injury data. NEISS is based on a nationally representative probability sample of hospitals in the U.S. and its territories. Each participating NEISS hospital reports patient information for every emergency department visit associated with a consumer product or a poisoning to a child younger than five years of age. The total number of product-related hospital emergency department visits nationwide can be estimated from the sample of cases reported in the NEISS. <https://www.cpsc.gov/Research--Statistics/NEISS-Injury-Data>.

Table 2 provides age information for the victims in the 1,088 incidents.

**Table 2: Age Distribution in Infant Rocker-Related Incident Reports**  
01/01/11 – 11/07/22

<i>Age</i>	<i>Total</i>	
	<i>Frequency</i>	<i>Percentage</i>
Unreported*	316	29
0 – 6 Months	418	38
7 Months – Less Than 1 Year	241	22
1 – Less Than 2 Years	81	8
2 – 4 Years	27	2
5 Years or Older	5	< 1
<b>Total</b>	<b>1,088</b>	<b>100</b>

Source: CPSC epidemiological databases CPRMS and NEISS.

Note: Percentages may not sum to 100 due to rounding.

\*In this table, age “unreported” implies age was unknown or age was not reported because the incident involved no injury.

Table 3 presents the age distribution of children under five years of age who suffered fatal or nonfatal injuries in the incidents from January 1, 2011 to November 7, 2022. All 11 fatalities and 70 nonfatal injuries involved victims less than one year old. Eight incidents involved victims less than four months old, including five of the 11 total fatalities.

**Table 3: Age Distribution in Infant Rocker-Related Incidents Reporting Fatalities and Nonfatal Injuries**  
among Children Under Five Years of Age 01/01/11 – 11/07/22

<i>Age of Child</i>	<i>Total</i>		<i>Fatalities</i>		<i>Injuries</i>	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
Unreported*	12	12	0	0	12	14
0 – 6 Months	33	33	10	91	23	26
7 – Less Than 1 Year	48	48	1	9	47	53
1 – Less Than 2 Years	5	5	0	0	5	6
2 – 4 Years	1	1	0	0	1	1
<b>Total</b>	<b>99</b>	<b>100</b>	<b>11</b>	<b>100</b>	<b>88</b>	<b>100</b>

Source: CPSC epidemiological databases CPRMS and NEISS.

Note: Percentages may not sum to 100 due to rounding.

\*In this table, age “unreported” implies age was unknown but victim is described as a child under five years of age.

Of the 11 fatalities during the period, nine involved infants being placed in the rocker for sleeping or napping. The incident reports indicate that in two of these incidents the infants were

placed on their side in the rocker, and in one incident the rocker was damaged and was being supported by a shoe box. One fatality involved an infant being placed in a rocker with the seat back in the “upright/toddler” position for approximately four hours. One fatality involved an infant being placed in a rocker on top of an adult bed without a caregiver present for approximately 20-30 minutes. Six of the 11 fatalities indicate that the restraints were not used. Six of the 11 fatalities indicate that pillows and/or blankets were placed in the product with the infant over the infant for warmth/comfort, under the infant for comfort/support, or both. In one of these incidents a blanket was found covering the infant’s face. Summaries of the fatalities are provided in Tab A of Staff’s NPR Briefing Package.

Staff identified hazard patterns for all 1,088 reported incidents associated with rockers. More than 700 of the incidents (64 percent) involved hardware-related problems such as issues related to lock and latch hardware, hinge hardware, seat mounting hardware, or other parts breaking.

Two hundred and seventy-five of the incidents (25 percent) cited rockers wobbling, collapsing, or tipping over. Tipover-related incidents comprised more than 64 percent of all reported injuries. At least 49 of the tipover-related incidents involved a rocker tipping forward. Sixty of the 275 stability-related incidents resulted in head injury. Four of the 275 stability-related incidents resulted in other upper body injuries.

Thirty-seven of the incidents (3 percent) cited rockers having electrical issues, mostly batteries leaking. Thirty-six of the incidents (3 percent), involving 17 injuries, cited issues

related to the rocker's design, such as toy bar positioning, slippery fabric seat pads, misaligned screws, pinch points, defective battery compartments, and seat back tubes not staying in sockets.

From January 1, 2011 through August 30, 2023, CPSC issued one recall of two multi-mode products in which four fatalities were reported and one issued warning regarding rockers. Incidents described in the press releases for the multi-mode product recall and the warning involved infants being placed to sleep on their backs and unrestrained in inclined rocking products but found on their stomachs.<sup>7</sup>

#### **IV. Overview of ASTM F3084<sup>8</sup>**

##### *A. History of ASTM F3084*

The ASTM F15.18 Subcommittee on Cribs, Toddler Beds, Play Yards, Bassinets, Cradles, and Changing Tables first published the voluntary standard for rockers in 2014, as ASTM F3084-14, *Standard Consumer Safety Specification for Infant and Infant/Toddler Rockers*.<sup>9</sup> The first publication addressed issues including seat angles, stability, structural integrity, other design issues, and marking and labeling.

Since 2014, ASTM has revised and updated the voluntary standard four times to address safety issues. In 2016, ASTM modified the warning requirements for use of shoulder straps provided as part of the restraint system. In 2018, ASTM made miscellaneous changes. In 2020, ASTM added language to the marking, labeling, and instructional literature requirement that addressed battery operated products and removed references to the CPSIA. In May 2022, ASTM modified warning language to state that rockers are not intended for sleep or unsupervised use, and to instruct consumers to move sleeping infants to a firm, flat sleep surface.<sup>10</sup>

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<sup>7</sup> See Tab E of Staff's NPR Briefing Package for additional information.

<sup>8</sup> See Tab C of Staff's NPR Briefing Package for additional information.

<sup>9</sup> The Commission is not aware of any international voluntary standards pertaining to rockers.

<sup>10</sup> See Briefing Memo of Staff's NPR Briefing Package for additional detail on ASTM F3084.

*B. Assessment of the ASTM F3084-22 Standard*

Based on CPSC staff's Engineering and Human Factors assessments, Tabs C and D of Staff's NPR Briefing Package, respectively, CPSC concludes that several ASTM F3084-22 tests are adequate to address rocker hazards, specifically: (1) the sideward and rearward stability tests for infant and infant/toddler rockers to address product sideward and rearward tipover; (2) the structural integrity test to address hardware failures and collapse hazard; (3) the toy bar integrity test to address toy bars snapping apart; and (4) the restraint system test to ensure the heaviest intended occupant is safely secure. Therefore, the Commission proposes in the NPR to adopt the following ASTM tests:<sup>11</sup>

1. Sideward and Rearward Stability

Section 6.3.2 of ASTM F3084-22 specifies performance requirements for rockers' sideward and rearward stability. In the test procedure, a CAMI Infant Dummy is placed in the rocker, which is then positioned in the most unfavorable sideward or rear position on a test surface inclined at 20 degrees. To pass the test, the rocker must not tip over in this position. CPSC testing indicates this test is adequate to address the risk to occupants from sideways or backwards tip-over of the rocker.

2. Structural Integrity

The ASTM standard includes a dynamic load test (see section 7.6.1), a static load test (see section 7.6.2), and a disassembly/collapse test (see section 6.6). Section 6.5 specifies that rockers shall not break or create a hazardous condition after these tests are applied. CPSC assess that these tests adequately test the structural strength of rockers.

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<sup>11</sup> See Tabs C and D of Staff NPR Briefing Package for additional details.

### 3. Toy Bars

To prevent caregivers from attempting to raise the rocker by the toy bar, section 6.7 of ASTM F3084-22 requires that toy bars must either be strong enough to not detach when used as a handle or must break free from the rocker when a caregiver attempts to use the toy bar as a handle. CPSC considers these requirements—which are identical to the ASTM F2167-22 toy bar attachment test requirements for infant bouncers, codified in 16 CFR part 1229—adequate to address the hazard of toy bars snapping due to use as a handle.

### 4. Restraints

Section 6.2 of ASTM F3084-22 requires both a waist and crotch restraint to secure a child in a rocker. The test requires that the restraint system anchors shall not separate from the attachment points when subjected to a force of 45 lb. that is maintained for 10 seconds. The force of 45 lb. is approximately 25 percent greater than the 36 lb. weight of a 2.5-year-old male child in the 95th percentile. These requirements are identical to the restraint system test requirements for infant bouncers under 16 CFR part 1229, and adequately ensure the safety of the heaviest intended occupant.

### 5. Concavity and Firmness

While the foregoing tests in ASTM F3084-22 appear adequate to address rocker hazards, CPSC finds, subject to public comment, that several revisions to the current voluntary standard are necessary to adequately address hazards to infants and toddlers associated with rockers.

First, no provision in ASTM F3084-22 addresses the risk of suffocation in rockers due to concavity or firmness issues. In 2022, CPSC contracted with Boise State University (BSU) to research and analyze the death or injury risks associated with infant seated products and to recommend possible requirements to improve safety. A research team led by Dr. Erin Mannen



submitted their report (BSU Report) to CPSC in June 2023. The BSU Report recommends that infant seated products should have a firmness similar to that of a crib mattress, should not envelop the infant's head or face, and should provide sufficient space for the infant's head to rotate without contacting the product side walls.<sup>12</sup>

(a) *Concavity and Conformity*

The BSU Report states that the concavity (*i.e.*, curvature of the seat back) and conformity (*i.e.*, the product enveloping the infant due to the infant's weight) of an infant rocker can affect the risk of mouth and nose contact with the sides of the product and poses a suffocation risk. The BSU research team found that rockers with a small pillow or no pillow posed a low risk for suffocation from nose and mouth contact, while products with larger and thicker pillows or inserts were deemed to create a high risk for mouth and nose contact and potential suffocation.

The BSU Report outlines a recommended concavity test. The test consists of calculating the concavity (radius) formed at the intended occupant's head position with a 7.65-pound newborn-sized test device in the seat. With the device in place, the width of the seat is then measured from side to side at the intended infant head position. The depth is also measured from the midline of the infant's head position to the seat back surface. With these measurements, the radius is then calculated to determine the concavity.

The BSU Report states that a seated product with a concavity radius greater than 22 cm (8.66 in.) would protect against mouth and nose contact with sides of the products during a normal head rotation. Therefore, the BSU Report recommends a concavity radius equal to or greater than 22 cm (8.66 in.), which would make it easier for infants to free their mouth and nose

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<sup>12</sup> Mannen, E. M., Siegel, D., Goldrod, S., Bossart, A., Lujan, T. J., Wilson, C., Whitaker, B., Carrol, J. (2023). *Seated Products Characterization and Testing*. Report available at <https://www.cpsc.gov/content/Report-Boise-State-Universitys-Seated-Products-Characterization-and-Testing> (BSU Report).

from face contact if they roll into a prone position within the product. After conducting testing, CPSC staff similarly found that a concavity radius of less than 22 cm (8.66 in) would increase the risk of an infant's mouth or nose coming into contact with the side of a product. The 22 cm (8.66 in) radius is three times the head radius of a 95<sup>th</sup> percentile six-month-old male. The minimum 22 cm (8.66 in) radius requirement therefore incorporates a three times safety factor to prevent the infant's face from contacting the side of the rocker. The Commission invites comment on the proposed concavity requirement to address the suffocation hazard by adopting the BSU Report's recommended concavity test for rockers.

*(b) Firmness*

The BSU Report states that all seated infant products should be sufficiently firm and flat to prevent the infant's mouth and nose from making contact with the product during supine lying with a normal head rotation. The BSU Report recommends that infant rocker firmness should be equivalent to the crib mattress firmness requirement, confirming that the minimum displacement of 11mm (0.43 in) with a 2.25-pound load would meet the crib mattress firmness requirement. Based on staff's own testing as well as the BSU Report, CPSC staff advises that adopting the BSU Report firmness test for rockers would address a suffocation risk. Staff further found that inserting a foam backing between the fabric of the rocker and the frame would allow the rocker to pass the firmness test, suggesting the feasibility of complying with the BSU Report's firmness recommendation. *See* Tab C of Staff's NPR Briefing Package for more detail.

The firmness requirement and test method recommended in the BSU Report addresses the hazards of soft surfaces designed into rockers, such as pillows or hammock designs, that can envelope an infant's face in the prone position or with the head turned to the side position. Providing equivalent firmness around the occupant's head will help to ensure that rockers have

the same baseline safety as crib mattresses in terms of preventing a child's nose and mouth from being obstructed by the support surface. The Commission proposes to adopt the BSU Report's recommended firmness test to strengthen the rockers standard to address a suffocation hazard that ASTM F3084-22 currently does not address and invites comment on this proposal.

#### 6. Forward Stability

Section 6.3 of ASTM F3084-22 specifies performance requirements for forward stability in infant rockers intended to support an occupant who has not developed the ability to sit up unassisted. The test procedure for forward stability applies a tipping moment to the product in its most upright position to simulate a 21 lb. infant leaning forward in the rocker.<sup>13</sup> A test fixture is then attached to the seat of a product with restraints that have been adjusted for a CAMI Infant Dummy. A 21-lb. vertical static force is applied for 60 seconds to the fixture five inches in front of the crotch post. To pass the test, the infant rocker must not tip over. *See* Tab A, Appendix, and Tab C of Staff NPR Briefing Package for additional details.

This forward stability requirement for infant rockers is not as stringent as the forward stability requirements for infant bouncers in 16 CFR part 1229, which provides greater protection for larger infants by applying the test weight one inch further from the crotch post (*i.e.*, six inches away instead of five inches away) and using the manufacturer's maximum recommended weight if greater than the 21-lb. weight application specified. Additionally, the infant rocker standard does not clearly specify a maximum weight limit for infant rockers in the product warnings and does not adequately indicate which forward stability tests are to be applied to each product type, whether it be an infant rocker or an infant/toddler rocker. To strengthen the

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<sup>13</sup> The 21-lb load is equivalent to the weight of a 95th percentile 6-month-old boy (Centers for Disease Control and Prevention, National Center for Health Statistics. CDC growth charts: United States, 2000. <http://www.cdc.gov/growthcharts/>).

standard, the Commission proposes modifying the forward stability requirement for infant rockers to match the more stringent test conditions specified in the mandatory standard for infant bouncers, revising the definitions for “infant rocker” and “infant/toddler rocker” to list a maximum weight limit, and revising the forward stability tests to offer additional clarification on which tests apply to which product category.

In addition, it appears the forward stability test for infant/toddler rockers in ASTM F3084-22 does not adequately address occupants larger than six-months-old, as most of the incidents of infant/toddler rockers tipping over involved an occupant that ranged from seven months to 12 months of age. *See* Tab C of Staff NPR Briefing Package. The Commission requests comments on this concern, and on methods to best test forward stability hazards for occupants older than six months of age.

#### 7. Electrical – Battery Leakage

As noted, 36 of the 1,088 reported rocker incidents within the study period involved leaking batteries. Twelve of the leaking battery incidents reported corroded or rusty battery compartments. *See* Tab A, Appendix, and Tab C of Staff’s NPR Briefing Package for additional information.

ASTM F3084-22 does not specify requirements to address battery or electrical issues associated with rockers. CPSC’s bouncer rule, codified at 16 CFR part 1229, does include requirements to address such electrical hazards. Specifically, the bouncer rule’s electrical requirements include: (1) each battery compartment or area around the battery compartment is marked to show the correct battery polarity, size, and voltage; (2) each battery compartment provides a means to contain battery leaks; (3) design protection from the possibility of a battery being charged when it is installed in the rocker; (4) the surfaces of any accessible electrical

component do not reach temperatures exceeding 160°F (71°C) at any time while in ordinary use; and (5) the product is only operable via an a/c power source and/or new batteries of the type recommended by the manufacturer. To address the battery-related hazards reflected in the reported incidents, the Commission proposes to add electrical requirements based on requirements in the bouncer rule.

#### 8. Drop Test

The bouncer rule in 16 CFR part 1229 includes a drop test to evaluate the durability of infant bouncers in instances of an inadvertent drop or the product impacting a hard surface. The test drops a bouncer from a height of 36 inches once on each of six different planes (top, bottom, front, rear, left side, and right side). ASTM F3084-22 does not contain a similar test, which reduces the protectiveness of its requirements. *See* Tab C of Staff's NPR Briefing Package. Accordingly, the Commission proposes to apply the drop test from the bouncer rule to rockers to ensure product durability.

#### 9. Strangulation on Tethered Straps

CPSC staff identified one near-strangulation incident involving a rocker in which an eight-month-old male crawled under the product, at which time his neck became entangled in the tethered straps located behind the rocker. *See* Tab A, Appendix, and Tab C of Staff's NPR Briefing Package for additional information. Because ASTM F3084-22 does not address a tethered strap strangulation hazard, the Commission proposes to strengthen the rocker standard by adding a test in section 7.11 of the NPR to address tethered strap strangulation hazards.

#### C. *Marking, Warning, and Labeling*

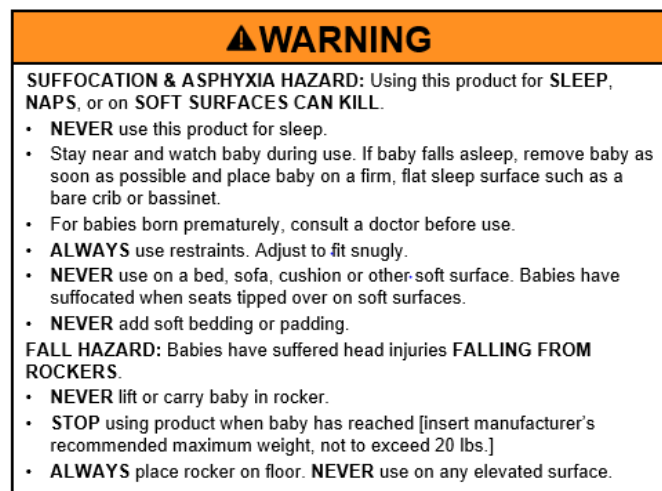
Warning about a hazard is a less effective method of addressing the hazard than either designing the hazard out of a product or guarding consumers from the hazard. Therefore, when a

standard relies on warnings to address a hazard, it is particularly important that the warning statements are noticeable, understandable, and motivational. The primary U.S. voluntary consensus standard for product safety signs and labels, ANSI Z535.4, *American National Standard for Product Safety Signs and Labels*, recommends that on-product warnings include content that addresses the following three elements:

- a description of the hazard;
- information about the consequences of exposure to the hazard; and
- instructions regarding appropriate hazard-avoidance behaviors.

CPSC staff analyzed literature, incident data, and consumer feedback, concluding that the rocker warnings specified in ASTM F3084-22 do not adequately address the identified product hazards because the warning requirements insufficiently address the use of soft bedding in rockers and the use of rockers for sleep, fail to address potential hazards of prematurely born infants using rockers, do not sufficiently outline label visibility and location requirements, and have typographical errors. *See* Tab D of Staff's NPR Briefing Package. To address these deficiencies, the Commission proposes inclusion of the warnings shown in Figure 1:

**Figure 1. Example warning label.**



*D. Instructional Literature*

Adding these warnings to the product literature is also necessary to address adequately the hazards associated with rockers. *See* Tab D of Staff's NPR Briefing Package. Further, the instructional literature language in the ASTM voluntary standard overbroadly states that instructions shall include the warnings listed in section 8.7, which contains four sets of warning statements with minor differences based on whether the product is an infant rocker or an infant/toddler rocker, and the type of restraint system used. The Commission proposes that the instructional literature requirements specify that only the applicable warning in section 8.7 needs to be included.

**V. Overview of the NPR**

*A. Performance Requirements*

In light of the substantial record of deaths and injuries with infant rockers and infant/toddler rockers, as summarized in section III above, the Commission issues the NPR under section 104 of the CPSIA to propose a mandatory consumer product safety standard for rockers. The Commission proposes to incorporate by reference ASTM F3084-22, with modifications to make the standard more stringent to further reduce the risk of injury associated with the use of rockers. The objective of this proposed rule is to address the known hazards of infant rockers and infant/toddler rockers, which include positional asphyxia, disassembly and collapse, hardware failures such as screws coming out and parts breaking off, and falls from elevated surfaces. The NPR contains more stringent performance and labeling requirements than the voluntary standard, improving the test requirements based on CPSC's assessment of incident reports, performance tests from the bouncer rule in 16 CFR part 1229, and the BSU Report.

Additionally, the NPR includes requirements for warning content and formatting. Proposed modifications to ASTM F3084-22 in the NPR address:

*Suffocation risks* posed by soft rocker surfaces and rocker features that can envelop a child's face, by adding firmness and concavity requirements as recommended in the BSU Report discussed in section IV of the preamble;<sup>14</sup>

*Tipover risk*, by modifying the terminology and forward stability requirements for rockers to match the more stringent test conditions listed in ASTM F2167-22, incorporated by reference into CPSC's *Safety Standard for Infant Bouncer Seats*, codified in 16 CFR part 1229, and to more clearly indicate which forward stability tests are to be performed on each product type, *i.e.*, the different testing for an infant rocker versus an infant/toddler rocker;

*Battery leakage risk*, by adding the more stringent electrical requirements from part 1229, including performance requirements and test methods requiring battery compartments to provide a means of containing battery leakage, preventing access to contained leakage, avoiding hazardous charging of batteries when installed in the product, and limiting the surface temperature of accessible electrical components to 160°F (71°C) or less at any time while in ordinary use;

*Strangulation risk* posed by tethered straps that are exposed below a product, by adding tethered straps accessibility requirements;

*Mechanical injury risks* associated with product design, by adding drop test requirements from part 1229 to ensure product durability;

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<sup>14</sup> Mannen, E. M., Siegel, D., Goldrod, S., Bossart, A., Lujan, T. J., Wilson, C., Whitaker, B., Carrol, J. (2023). *Seated Products Characterization and Testing*. Report available at <https://www.cpsc.gov/content/Report-Boise-State-Universities-Seated-Products-Characterization-and-Testing>. (BSU Report).



*Warning and literature requirements* to emphasize that rockers are not intended for sleep and that soft bedding is not to be used in rockers, and to ensure that on-product labels are prominently placed and conspicuous to the consumer.

*B. Certification*

Section 14 of the CPSA establishes requirements for product certification and testing. Products subject to a consumer product safety rule under the CPSA, or to a similar rule, ban, standard, or regulation under any other act enforced by the Commission, must be certified as complying with all applicable CPSC-enforced requirements. 15 U.S.C. 2063(a). Certification of children's products subject to a children's product safety rule must be based on testing conducted by a CPSC-accepted third party conformity assessment body. 15 U.S.C. 2063(a)(2). The Commission must publish a notice of requirements (NOR) for the accreditation of third-party conformity assessment bodies to assess conformity with a children's product safety rule to which a children's product is subject. 15 U.S.C. 2063(a)(3). The proposed rule for 16 CFR part 1240, *Safety Standard for Infant and Infant/Toddler Rockers*, if issued as a final rule, would be a children's product safety rule that requires the issuance of an NOR.

16 CFR part 1112 establishes requirements for accreditation of third-party conformity assessment bodies to test for conformity with a children's product safety rule in accordance with section 14(a)(2) of the CPSA. Part 1112 also codifies all of the NORs issued previously by the Commission. To meet the requirement that the Commission issue an NOR for the rocker standard, the Commission proposes as part of the NPR to add rockers to the list of children's product safety rules for which CPSC has issued an NOR.

Testing laboratories applying for acceptance as a CPSC-accepted third party conformity assessment body to test to the new standard for rockers would be required to meet the third-party

conformity assessment body accreditation requirements in part 1112. When a laboratory meets the requirements as a CPSC-accepted third party conformity assessment body, the laboratory can apply to CPSC to have 16 CFR part 1240, *Safety Standard for Infant and Infant/Toddler Rockers*, included within the laboratory's scope of accreditation of CPSC safety rules listed for the laboratory on the CPSC website at: <https://www.cpsc.gov/cgi-bin/labsearch/>.

*C. Product Registration*

In addition to requiring the Commission to issue safety standards for durable infant or toddler products, section 104 of the CPSIA directs the Commission to issue a rule requiring that manufacturers of durable infant or toddler products establish a program for consumer registration of those products. 15 U.S.C. 2056a(d).

Section 104(f) of the CPSIA defines the term “durable infant or toddler product” as “a durable product intended for use, or that may be reasonably expected to be used, by children under the age of 5 years,” and lists 12 product categories. 15 U.S.C. 2056a(f). The product categories listed in section 104(f)(2) of the CPSIA—which do not include rockers—represent a non-exhaustive list of durable infant or toddler product categories. 74 FR 68668, 68669 (Dec. 29, 2009).

As the CPSIA directs, CPSC's consumer registration rule at 16 CFR part 1130 requires each manufacturer of a durable infant or toddler product to provide a postage-paid consumer registration form with each product; keep records of consumers who register their products with the manufacturer; and permanently place the manufacturer's name and certain other identifying information on the product. The Commission here proposes to amend part 1130 to include “Infant and Infant/Toddler Rockers,” as defined in ASTM F3084-22 with modifications, as durable infant or toddler products because they are: (1) intended for use, and may be reasonably

expected to be used, by children under the age of 5 years; (2) similar to the other seated products listed in section 104(f)(2) of the CPSIA, such as swings, booster chairs, and activity centers; and (3) durable, as reflected by the fact that they are commonly available for resale or “handed down” for use by other children.

## **VI. Incorporation by Reference**

The Commission proposes incorporating ASTM F3084-22 by reference, with modifications to further reduce the risk of injury associated with rockers. The Office of the Federal Register (OFR) has regulations concerning incorporation by reference. 1 CFR part 51. For a proposed rule, agencies must discuss in the preamble of the NPR ways that the materials the agency proposes to incorporate by reference are reasonably available to interested persons or how the agency worked to make the materials reasonably available. In addition, the preamble of the proposed rule must summarize the material. 1 CFR 51.5(a).

In accordance with the OFR’s requirements, section IV.B of the preamble summarizes the provisions of ASTM F3084-22 that the Commission proposes to incorporate by reference. ASTM F3084-22 is copyrighted. By permission of ASTM, the standard can be viewed as a read-only document during the comment period of the NPR, at: <http://www.astm.org/cpsc.htm>. To download or print the standard, interested persons may purchase a copy of ASTM F3084-22 from ASTM, through its website (<http://www.astm.org>), or by mail from ASTM International, 100 Bar Harbor Drive, P.O. Box 0700, West Conshohocken, PA 19428. Alternatively, interested parties may inspect a copy of the standard at CPSC’s Office of the Secretary by contacting Alberta E. Mills, Secretary, U.S. Consumer Product Safety Commission, 4330 East West Highway, Bethesda, MD 20814; telephone: 301-504-7479; e-mail: [cpsc-os@cpsc.gov](mailto:cpsc-os@cpsc.gov).

## **VII. Effective Date**

The Administrative Procedure Act (APA) generally requires that the effective date of a rule be at least 30 days after publication of the final rule. 5 U.S.C. 553(d). The Commission proposes a 180-day effective date for this rule. The rule would apply to all rockers manufactured after the effective date. 15 U.S.C. 2058(g)(1). This amount of time is typical for other CPSIA section 104 rules.<sup>15</sup> Six months is also the period that the Juvenile Products Manufacturers Association (JPMA) typically allows for products in their certification program to shift to a new standard once that new standard is published. Therefore, juvenile product manufacturers are accustomed to adjusting to new standards within this timeframe. Given that the proposed rule largely uses test equipment that is already utilized to test rockers to ASTM F3084-22 for JPMA's program, and that any additional required test equipment is either already utilized for other regulated products (such as infant bouncer seats) or can easily be procured or produced by a testing laboratory, the Commission believes that additional time is unnecessary for the production or procurement of new test equipment. The Commission invites comments, particularly from small businesses, regarding the amount of time needed to come into compliance with a final rule.

## **VIII. Regulatory Flexibility Act (RFA)**

The RFA requires that agencies review a proposed rule for its potential economic impact on small entities, including small businesses. Section 603 of the RFA generally requires that agencies prepare an initial regulatory flexibility analysis (IRFA) and make the analysis available to the public for comment when the agency publishes an NPR. 5 U.S.C. 603. The IRFA must describe the impact of the proposed rule on small entities and identify significant alternatives that

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<sup>15</sup> See, e.g., Safety Standard for Infant Swings, 87 Fed. Reg. 44,307 (July 26, 2022); Safety Standard for Crib Mattresses, 87 Fed. Reg. 8640 (Feb. 15, 2022).

accomplish the statutory objectives and minimize any significant economic impact of the proposed rule on small entities. CPSC staff has addressed these issues in Tab F of Staff's NPR Briefing Package, and they are presented briefly below.

*A. Agency Action, NPR Objectives, Product Description, and Market Description*

Section I of the preamble explains why CPSC is considering issuing a mandatory rule for rockers and provides a statement of the objectives of, and legal basis for, the proposed rule. Section II of the preamble describes the types of products within the scope of the NPR, the market for rockers, and the use of rockers in the U.S.

The requirements in the NPR are more stringent than the ASTM voluntary standard for rockers. Relatively few rockers for sale in the U.S. are marketed as ASTM-compliant. Only two out of approximately 50 current suppliers to the U.S. market are members of the JPMA certification testing program for rockers, which provides third party testing for compliance with CPSC and ASTM standards. JPMA currently has four member companies that are certified specifically for rockers, two of which do not currently have a rocker for sale in the U.S. *See* Tab F of Staff's NPR Briefing Package.

*B. Small Entities to Which the NPR Would Apply*

Of the 13 U.S. manufacturers and importers of rockers that currently supply the U.S. market, four are small U.S. manufacturers and five are small U.S. importers based on Small Business Administration (SBA) size standards, for a total of nine small U.S. entities to which the NPR would apply. The rest of the suppliers, about 37, are foreign-based manufacturers and direct shippers.

The NPR would not mandate any requirements or have direct economic impact on retailers of any size because products manufactured or imported before the effective date of the

final rule could still be sold. Indirect impacts on retailers could occur in the longer term if rockers are removed from the market rather than redesigned to meet the requirements of this standard, or if an increased price of compliant rockers reduces demand.

*C. Impact of the Proposed Rule on Small Manufacturers and Importers*

The NPR could have a significant impact on nine small U.S. importers and manufacturers whose products may not be consistent with the NPR requirements. CPSC considers one percent of annual revenue from sales to be a potentially “significant” economic impact.

Most rocker products on the market would require redesign to meet the proposed rule and would need new labeling. The extent of the required modifications would depend on whether the products already meet the ASTM standard for rockers or, for multi-mode products, the similar mandatory standards for bouncer chairs or swings. Manufacturers whose products do not meet the performance requirements in the NPR will need to redesign the products at a cost that CPSC staff estimates to be approximately \$80,000 per model or remove the products from the market.

Staff anticipates that most models would require at least some redesign to meet the requirements of the standard. However, some redesigns could be relatively inexpensive, such as changing the seat angle or modifying the restraints. Products that currently meet all physical performance requirements might only need the new warning sticker or a stamped-on label. Combination products that are compliant with the mandatory bouncer chair standard or the swing standard and have no hanging restraint straps may require minimal redesign or none at all.

Staff estimates the total cost of redesign for the 17 models supplied by U.S. small businesses to be \$1.36 million (17 models × \$80,000), though the cost could be less if some models do not require redesign, or only modest redesign. The cost of redesign could also be spread across multiple models because models from the same manufacturer can be similar in

structural design and dimensions with different fabrics or toy bars. Similarly, one model from a foreign manufacturer may be sold by multiple direct shippers and small importers under different brand names. The ongoing cost of compliance after the first year that the rule is in effect is expected to be minimal for materials and labor because the redesigned products would likely use the same types of materials and production methods as current products.

Substitutes for rockers are available, so if the costs of compliance were to raise the price of rockers above the price of what parents perceive as reasonable substitutes, such as swings or bouncer seats, there could be a decline in rocker sales as a result of this rule. However, the impact on suppliers of reduced rocker sales could be offset by an increase in sales of these competing products if sold by the same companies. The impact of the redesign cost could also be reduced if suppliers are able to increase the retail price to cover some or all of the cost without significantly impacting overall demand for rockers.

Based on staff's analysis, additional testing costs beyond what suppliers are already spending to comply with other CPSC standards would be less than \$1,000 per year per model. Testing costs would likely vary depending on where the testing takes place and whether volume discounts apply. If products are sold to a global market, those products would require testing to satisfy both U.S. and foreign standards at the same time, for a bundled test price. Multi-mode products that are already required to demonstrate compliance with the bouncer or swing mandatory standard through third-party testing may experience a smaller incremental cost for testing only the rocker mode. Overall, staff estimates the testing costs for the industry as a whole, including foreign and large businesses supplying the U.S. market, to be \$80,000 per year (80 models  $\times$  \$1,000 per model for testing).

*D. Impact on Testing Labs*

No adverse impact on testing laboratories should occur as a result of a final rule for rockers. CPSC estimates the required testing instruments and devices to cost in the range of \$500 to \$1,000. The cost will be on the lower end of this range if the laboratory already has devices such as force gauges, which are common. The 22 labs that are currently accredited to test to the mandatory bouncer standard would likely easily meet the accreditation requirements to test rockers given the similarity of the requirements and test methods. Furthermore, most laboratories are not small businesses. Companies in the lab testing industry include companies with hundreds of locations, including Asia and Europe, and thousands of employees.

*E. Alternatives Considered to Reduce the Impact on Small Entities*

The Commission considered several alternatives to reduce burden on small entities. Exempting small entities from this rule or parts of this rule would not be consistent with the applicable statutes; the CPSA allows CPSC to provide “small batch” exemptions to testing requirements or alternative requirements for some mandatory safety standards, such as the standard for bicycle helmets (16 CFR part 1203), but the CPSIA section 104 requirements for durable infant or toddler products do not provide for such exemptions. Nevertheless, several alternatives to the NPR could have a different impact on small businesses. The Commission requests comment on these alternatives or other alternatives that could reduce the potential burden on small entities.

1. Not Establishing a Mandatory Standard

While not establishing a safety standard for rockers would minimize the regulatory impact on small businesses, failing to establish a mandatory standard would fail to reduce injuries and deaths from the known hazards. Establishing a mandatory standard satisfies the



mandate in section 104 of the CPSIA requiring the Commission to create mandatory safety standards for all durable infant or toddler products.

2. Only Including Infant Rockers in the Scope

The incident data for rockers, discussed in section III of the preamble, reflect that all of the fatalities and most of the injuries were to children less than one year old. While CPSC could consider excluding from the scope of the rule those rockers that are marketed for use only by children over one year old, this would not significantly reduce the impact on small businesses, as there are very few rockers on the market solely for toddlers. Such limitation in scope also would not effectively address the hazards because rockers marketed for older children foreseeably could still be used for infants. Further, the incident data reflects some non-fatal injuries to children over one year old.

3. Incorporating ASTM F3084-22 Without Modifications

The Commission considered proposing to incorporate by reference ASTM F3084-22, without any modifications. While this would reduce the impact on two U.S. small businesses that claim to be compliant with the ASTM standard, the overall impact on U.S. small businesses, as compared to the Commission's proposed rule, would not be significant. Further, as discussed above, ASTM F3084-22 does not adequately address the suffocation and fall hazards rockers present.

4. A Different Effective Date of the Requirements

An effective date earlier than 180 days after publication could provide the benefits of the NPR more quickly but would increase the burden on small businesses by requiring them to more quickly redesign and test products. An earlier effective date could result in temporary shortages of rockers because the testing labs would need to receive accreditation before they could test for

compliance to the new performance requirements. A later effective date could reduce impact on small businesses but would delay addressing the known hazards, including life-threatening risks.

## **IX. Environmental Consideration**

The Commission's regulations address whether the agency is required to prepare an environmental assessment or an environmental impact statement. Under these regulations, certain categories of CPSC actions normally have "little or no potential for affecting the human environment," and therefore do not require an environmental assessment or an environmental impact statement. Safety standards providing requirements for products come under this categorical exclusion. 16 CFR 1021.5(c)(1). The NPR falls within the categorical exclusion.

## **X. Paperwork Reduction Act**

This proposed rule for infant rockers contains information collection requirements that are subject to public comment and review by the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995 (44 U.S.C. 3501–3521). In this document, pursuant to 44 U.S.C. 3507(a)(1)(D), we set forth:

- a title for the collection of information;
- a summary of the collection of information;
- a brief description of the need for the information and the proposed use of the information;
- a description of the likely respondents and proposed frequency of response to the collection of information;
- an estimate of the burden that shall result from the collection of information; and
- notice that comments may be submitted to the OMB.

*Title:* Safety Standard for Infant and Infant/Toddler Rockers

*Description:* The proposed rule would require each rocker within the scope of the rule to comply with ASTM F3084-22, *Standard Consumer Safety Specification for Infant and Infant/Toddler Rockers*, modified by the proposed additional requirements summarized in the preamble. Sections 8 and 9 of ASTM F3084-22 contain requirements for marking, labeling, and instructional literature. These requirements fall within the definition of “collection of information,” as defined in 44 U.S.C. 3502(3).

*Description of Respondents:* Persons who manufacture or import rockers.

*Estimated Burden:* We estimate the burden of this collection of information as follows:

**Table 4 – Estimated Annual Reporting Burden**

16 CFR Section	Number of Respondents	Frequency of Responses	Total Annual Responses	Hours per Response	Total Burden Hours
1240	50	1.6	80	1	80

Our estimate is based on the following:

ASTM F3084-22 requires that the name and the place of business (city, state, and mailing address, including zip code) or telephone number of the manufacturer, distributor, or seller be marked clearly and legibly on each product and its retail package. It also requires a code mark or other means that identifies the date (month and year, as a minimum) of manufacture.

An estimated 13 U.S. firms supply rockers to the domestic market, as well as seven foreign manufacturers and about 30 foreign direct shippers, for a total of about 50 suppliers. We estimate the time required to respond to the collection is about one hour per model.

Approximately 80 models of rockers were available for sale on the U.S. market as of March 2023. Therefore, each supplier is estimated to respond 1.6 times (80 models / 50 suppliers = 1.6

responses). The estimated annual burden associated with the collection is  $50 \text{ respondents} \times 1.6 \text{ responses} \times 1 \text{ hour per response} = 80 \text{ hours}$ .

CPSC estimates that the hourly compensation for the time required to respond to the collection is \$37.41 (U.S. Bureau of Labor Statistics, “Employer Costs for Employee Compensation,” March 2023, total compensation for all sales and office workers in goods-producing private industries: [https://www.bls.gov/news.release/archives/ecec\\_06162023.pdf](https://www.bls.gov/news.release/archives/ecec_06162023.pdf)). The estimated annual cost to industry associated with the collection accordingly is \$2,993 ( $\$37.41 \text{ per hour} \times 80 \text{ hours} = \$2,992.80$ ). No operating, maintenance, or capital costs are associated with the collection.

The NPR requires instructions to be supplied with rockers. Under the OMB’s regulations (5 CFR 1320.3(b)(2)), the time, effort, and financial resources necessary to comply with a collection of information that would be incurred by persons in the “normal course of their activities” are excluded from a burden estimate, where an agency demonstrates that the disclosure activities required to comply are “usual and customary.” Firms that supply rockers to the U.S. market typically provide instructional literature to consumers. Therefore, we tentatively estimate that no burden hours are associated with supplying instructional literature because any burden associated with supplying instructions would be “usual and customary” and not within the definition of “burden” under the OMB’s regulations.

Based on this analysis, the proposed standard for rockers would impose a burden to industry of 80 hours at a cost of \$2,993 annually.

In compliance with the Paperwork Reduction Act of 1995 (44 U.S.C. 3507(d)), CPSC has submitted the information collection requirements of this rule to the OMB for review. Interested

persons are requested to submit comments (see the ADDRESSES section at the beginning of this document).

Pursuant to 44 U.S.C. 3506(c)(2)(A), we invite comments on:

- whether the collection of information is necessary for the proper performance of CPSC's functions, including whether the information will have practical utility;
- the accuracy of CPSC's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;
- ways to enhance the quality, utility, and clarity of the information to be collected;
- ways to reduce the burden of the collection of information on respondents, including the use of automated collection techniques, when appropriate, and other forms of information technology; and
- the estimated burden hours associated with label modification, including any alternative estimates.

## **XI. Preemption**

Section 26(a) of the CPSA, 15 U.S.C. 2075(a), states that when a consumer product safety standard is in effect and applies to a product, no state or political subdivision of a state may either establish or continue in effect a standard or regulation that prescribes requirements for the performance, composition, contents, design, finish, construction, packaging, or labeling of such product dealing with the same risk of injury unless the state requirement is identical to the federal standard. Section 26(c) of the CPSA also provides that states or political subdivisions of

states may apply to the Commission for an exemption from this preemption under certain circumstances. Section 104(b) of the CPSIA refers to the rules to be issued under that section as “consumer product safety rules.” Therefore, the preemption provision of section 26(a) of the CPSA would apply to a rule issued under section 104.

## **XII. Request for Comments**

The Commission proposes a rule under section 104(b) of the CPSIA to issue a consumer product safety standard for Infant and Infant/Toddler Rockers, to amend part 1112 to add Infant and Infant/Toddler Rockers to the list of children’s product safety rules for which CPSC has issued an NOR, and to amend part 1130 to identify Infant and Infant/Toddler Rockers as a durable infant or toddler product subject to CPSC consumer registration requirements. The Commission requests comments on any aspect of these proposals, including the proposed effective date and the costs of compliance with, and testing to, the proposed *Safety Standard for Infant and Infant/Toddler Rockers*. During the comment period, the ASTM F3084-22, *Standard Consumer Safety Specification for Infant and Infant/Toddler Rockers*, is available as a read-only document at: <http://www.astm.org/cpsc.htm>.

Submit comments in accordance with the instructions in the **ADDRESSES** section at the beginning of this document.

## **List of Subjects**

### **16 CFR Part 1112**

Administrative practice and procedure, Audit, Consumer protection, Reporting and recordkeeping requirements, Third party conformity assessment body.

**16 CFR Part 1130**

Administrative practice and procedure, Business and industry, Consumer protection,  
Reporting and recordkeeping requirements.

**16 CFR Part 1240**

Consumer protection, Incorporation by reference, Infants and children, Labeling, Law  
enforcement, Seats, Toys.

For the reasons discussed in the preamble, the Commission proposes to amend Title 16 of  
the Code of Federal Regulations as follows:

**PART 1112—REQUIREMENTS PERTAINING TO THIRD PARTY CONFORMITY  
ASSESSMENT BODIES**

1. The authority citation for part 1112 continues to read as follows:

**Authority:** Pub. L. 110-314, section 3, 122 Stat. 3016, 3017 (2008); 15 U.S.C. 2063.

2. Amend § 1112.15 by adding paragraph (b)(51) to read as follows:

**§ 1112.15 When can a third party conformity assessment body apply for CPSC acceptance  
for a particular CPSC rule and/or test method?**

\* \* \* \* \*

(b) \* \* \*

(51) 16 CFR part 1240, Safety Standard for Infant and Infant/Toddler Rockers.

\* \* \* \* \*

3. The authority citation for part 1130 continues to read as follows:

**Authority:** 15 U.S.C. 2056a(d).

4. Amend § 1130.2 by adding paragraph (a)(20) to read as follows:

**PART 1130—REQUIREMENTS FOR CONSUMER REGISTRATION OF DURABLE  
INFANT OR TODDLER PRODUCTS**

**§ 1130.2 Definitions.**

\* \* \* \* \*

(a) \* \* \*

(20) Infant and Infant/Toddler Rockers.

\* \* \* \* \*

5. Add part 1240 to read as follows:

**PART 1240-SAFETY STANDARD FOR INFANT AND INFANT/TODDLER ROCKERS**

Sec.

1240.1 Scope.

1240.2 Requirements for infant and infant/toddler rockers.

**Authority:** 15 U.S.C. 2056a.

**§ 1240.1 Scope.**

This part establishes a consumer product safety standard for Infant and Infant/Toddler Rockers.

**§ 1240.2 Requirements for infant and infant/toddler rockers.**

(a) Except as provided in paragraph (b) of this section, each infant and infant/toddler rocker must comply with all applicable provisions of ASTM F3084-22, *Standard Consumer Safety Specification for Infant and Infant/Toddler Rockers* (approved May 1, 2022). The Director of the Federal Register approves this incorporation by reference in accordance with 5 U.S.C. 552(a) and 1 CFR part 51. This material is available for inspection at the U.S. Consumer Product Safety Commission and at the National Archives and Records Administration (NARA). Contact the



U.S. Consumer Product Safety Commission at: the Office of the Secretary, U.S. Consumer Product Safety Commission, 4330 East West Highway, Bethesda, MD 20814, telephone (301) 504-7479, email: [cpsc-os@cpsc.gov](mailto:cpsc-os@cpsc.gov). For information on the availability of this material at NARA, email [fr.inspection@nara.gov](mailto:fr.inspection@nara.gov), or go to: [www.archives.gov/federal-register/cfr/ibr-locations.html](http://www.archives.gov/federal-register/cfr/ibr-locations.html). A free, read-only copy of the standard is available for viewing on the ASTM website at <https://www.astm.org/READINGLIBRARY/>. You may also obtain a copy from ASTM International, 100 Barr Harbor Drive, PO Box C700, West Conshohocken, PA 19428-2959; phone: (610) 832-9585; [www.astm.org](http://www.astm.org).

(b) Comply with the ASTM F3084-22 standard with the following additions or exclusions:

(1) Instead of complying with section 3.1.6 and 3.1.7 of ASTM F3084-22, comply with the following:

(i) 3.1.6 *infant rocker, n*—a freestanding product intended to support an occupant who has not developed the ability to sit up unassisted, up to 20 lb. (approximately 0 through 6 months of age), in a seated, reclined position greater than 10° and to facilitate rocking by the occupant with the aid of the caregiver or by other means.

(ii) 3.1.7 *infant/toddler rocker, n*—a freestanding product intended to support an occupant in a seated, reclined position greater than 10° and to facilitate rocking by the occupant with the aid of the caregiver or by other means until the occupant is approximately age 2.5 years, up to 40 lb.

(2) In addition to complying with sections 3.1.1 through 3.1.17 of ASTM F3084-22, comply with the following:

(i) 3.1.18 *tethered strap, n* – an exposed strap underneath or behind the occupant support surface with both ends secured to the product (see 6.8).

(ii) 3.1.18.1 *Discussion* – This specifically excludes straps that are loose or hanging from a product that are not intended to be attached to another component according to the manufacturer’s instructions.

(iii) 3.1.18.2 *Discussion* – The strap may consist of monofilaments, rope, woven and twisted cord, plastic and textile tapes, or ribbon.

(3) Add section 3.1.19 to ASTM F3084-22:

3.1.19 *rocking*, *v* – forward and backward motion via a nonstationary base.

(4) Instead of complying with sections 6.3.1 and 6.3.1.1 of ASTM F3084-22, comply with the following:

(i) 6.3.1 *Forward Stability*—The rocker shall not tip over when tested in accordance with 7.4.1. This shall be for all infant rockers and infant/toddler rockers in the infant rocker use, mode, or position.

(ii) 6.3.1.1 *Forward Stability Infant/Toddler Rockers*—If the product is intended for use after the occupant can sit upright unassisted with a manufacturer’s recommended weight above 20 lb., the rocker shall not tip over when tested in accordance with 7.4.2.

(5) Add sections 6.8, 6.8.1, and 6.8.2 to ASTM F3084-22:

(i) 6.8 *Tethered Strap Accessibility for Non-Occupants* – Any products that have a tethered strap (see 3.1.18) shall meet either 6.8.1 or 6.8.2 when tested in accordance with 7.11.

(ii) 6.8.1 A bounded opening formed by tethered strap(s), alone or in conjunction with the product, shall not allow the passage of the small head probe (Figure 2 to paragraph (b)(9)(ix)) when tested in accordance with 7.11.

(iii) 6.8.2 A bounded opening formed by tethered strap(s), alone or in conjunction with the product, shall allow the passage of the large head probe (Figure 3 to Paragraph (b)(9)(xii)), and

the tethered strap portion of the bounded opening shall not be greater than 7.4 in. (188 mm) long when tested in accordance with 7.11.

(6) Add section 6.9 to ASTM F3084-22:

*6.9 Drop Test*—The rocker shall not create a hazardous condition as defined in section 5 when tested in accordance with 7.12.

(7) Add sections 6.10, 6.11, and 6.12 to ASTM F3084-22:

(i) *6.10 Battery Compartments (remote control devices are exempt from these requirements):*

(ii) 6.10.1 Each battery compartment shall provide a means to contain the electrolytic material in the event of a battery leakage. This containment means shall not be accessible to the occupant.

(iii) 6.10.2 Positive protection from the possibility of charging any primary (non-rechargeable) battery shall be achieved either through physical design of the battery compartment or through the use of appropriate electrical circuit design. This applies to situations in which a battery may be installed incorrectly (reversed), and in which a battery charger may be applied to a product containing primary batteries. This section does not apply to a circuit having one or two batteries as the only source of power.

(iv) 6.10.3 The surfaces of any accessible electrical component, including batteries, shall not achieve temperatures exceeding 160°F (71°C) when tested in accordance with 7.13. At the conclusion of the test, there shall be no battery leakage or, explosion or a fire to any electrical component. This test shall be performed prior to conducting any other testing within the performance requirements section.

(v) 6.11 *Firmness* – The surface of the rocker that supports the infants head shall displace less than 11mm (0.43 in.) for a 10N (2.25 lb.) force when tested in accordance with 7.14.

(vi) 6.12 *Concavity* – The radius of surface of the rocker that supports the infant’s head shall be greater than 22 cm (8.66 in.) when tested in accordance with 7.15.

(8) Instead of complying with section 7.4.1.6 of ASTM F3084-22, comply with the following:

7.4.1.6 Apply a static load of 21 lbf. (93 N) vertically downward on the stability test fixture in the location designated in Figure 15 to paragraph (b)(17) (6-in. (152.4-mm) in front of the crotch post) within a period of 5 s and maintain for an additional 60 s (Figure 9 to section 7 of ASTM F3084-22). If the stability test fixture touches the test surface and prevents the product from tipping over, retest the product near the edge of an elevated test surface to allow the product to tip.

(9) Add section 7.11 to ASTM F3084-22:

(i) 7.11 *Tethered Strap Accessibility Testing*:

(ii) 7.11.1 Assemble the product in one of the manufacturer’s recommended use positions.

(iii) 7.11.2 Adjust any strap underneath or behind the occupant support surface to its full-length configuration. This includes adjusting any sliding buckle and/or other hardware.

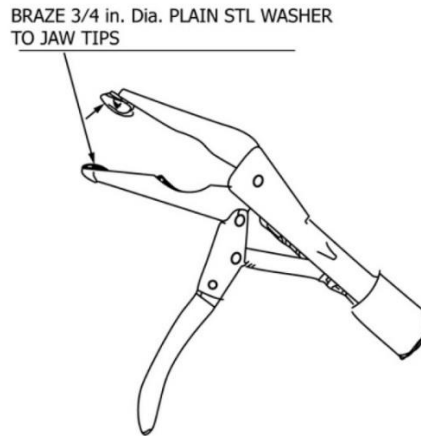
(iv) 7.11.3 For straps that are part of the restraint system, unbuckle the restraint system to allow for the maximum strap length underneath or behind the occupant support surface.

(v) 7.11.4 Where applicable, orient any fasteners, buckles, clips, or other hardware in the position most likely to prevent them from being pulled through any opening.

(vi) 7.11.5 Using a 3/4 in. (19 mm) diameter clamping surface (Figure 1 to paragraph (b)(9)(vi)), gradually pull on the tethered strap from underneath or behind the occupant support surface in the most onerous direction most likely to release the strap through the opening with a

force of 5 lbf. (22 N). Apply the force over a period of 5 s and maintain for an additional 10 s or until the strap releases, whichever comes first.

**Figure 1 to Paragraph (b)(9)(vi) - A 3/4-in. (19-mm) Diameter Clamp<sup>16</sup>**



(vii) 7.11.5.1 If during the test procedure in 7.11.5, the strap remains does not release at a force of 5 lbf. (22 N) or less, proceed to 7.11.6.

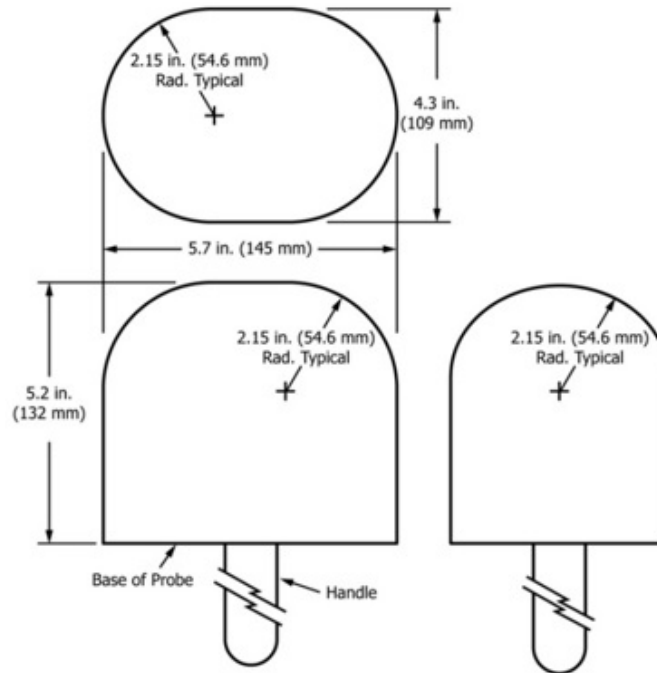
(viii) 7.11.5.2 If during the test procedure in 7.11.5, the tethered strap releases, replace the strap through the opening into its original test position described in 7.11.3 and 7.11.4. Repeat the force application in 7.11.5 four more times for a total of five times. If the strap releases during every one of the five individual tests, this strap is exempt from 7.11.6, 7.11.7, and 7.11.8. If the strap remains attached during any of the five force applications, proceed to 7.11.6.

(ix) 7.11.6 Rotate the small head probe (Figure 2 to paragraph (b)(9)(ix)) to the orientation most likely to fail and gradually apply a force of 25 lb. (111 N) in the bounded opening. Apply the force perpendicular to the base of the probe in the direction most likely to fail within a period of 5 s and maintain it for an additional 10 s.

---

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**Figure 2 to Paragraph (b)(9)(ix) - Small Head Test Probe<sup>17</sup>**



Dimensions are based on a 5th percentile 6-month-old child.

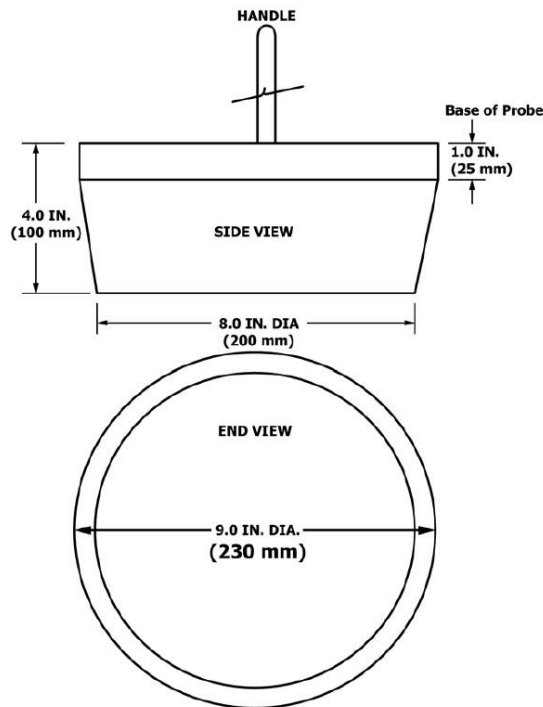
(x) 7.11.6.1 If the small head probe (Figure 2 to paragraph (b)(9)(ix)) cannot pass entirely through the opening in any orientation, this bounded opening passes 6.8.1.

(xi) 7.11.6.2 If the small head probe (Figure 2 to paragraph (b)(9)(ix)) can pass entirely through the opening in any orientation, proceed to 7.11.7.

(xii) 7.11.7 Determine if the large head probe (Figure 3 to paragraph (b)(9)(xii)) can be freely inserted through the bounded opening.

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**Figure 3 to Paragraph (b)(9)(xii) - Large Head Test Probe<sup>18</sup>**



The 9.0 in. diameter is based on the back-of-head to tip-of-chin dimension for a 97th percentile 3-year-old.

(xiii) 7.11.7.1 If the large head probe (Figure 3 to paragraph (b)(9)(xii)) cannot pass entirely through the opening in any orientation, this bounded opening fails 6.8.2.

(xiv) 7.11.7.2 If the large head probe (Figure 3 to paragraph (b)(9)(xii)) can pass entirely through the opening in any orientation, proceed to 7.11.8.

(xv) 7.11.8 Measure the available length of the tethered strap from its two attachment points on the product under a load of 5 lb. (2.27 kg).

(xvi) 7.11.8.1 If the tethered strap is greater than 7.4 in. (188 mm), this tethered strap fails 6.8.2.

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(xvii) 7.11.8.2 If the tethered strap is less than or equal to 7.4 in. (188 mm), this tethered strap passes 6.8.2.

(xviii) 7.11.9 Repeat for each bounded opening formed with tethered strap(s), in all manufacturer's recommended use positions.

(10) Add section 7.12 through 7.16 to ASTM F3084-22:

(i) 7.12 *Drop Test:*

(ii) 7.12.1 The rocker shall be dropped from a height of 36 in. (910 mm).

(iii) 7.12.1.1 If the rocker does not fold, drop the rocker once on each of six different planes (top, bottom, front, rear, left side, and right side).

(iv) 7.12.1.2 If the rocker does fold, drop the rocker once on each of six different planes, both in the folded and erect configurations.

(v) 7.13 *Battery Compartment Test*

(vi) 7.13.1 The battery compartment shall be tested using fresh alkaline batteries or an a/c power source. If the function powered by the compartment can be operated using both, then both batteries and a/c power must be tested separately. If another battery chemistry is specifically recommended for use in the rocker by the manufacturer, repeat the test using the batteries specified by the manufacturer. If the rocker will not operate using alkaline batteries, then test with the type of battery recommended by the manufacturer at the specified voltage. The test is to be carried out in a draft-free location, at an ambient temperature of  $68 \pm 9^{\circ}\text{F}$  ( $20 \pm 5^{\circ}\text{C}$ ).

(vii) 7.13.1.1 Operate the function powered by the battery compartment at the maximum speed or highest intensity. Do not disable any mechanical or electrical protective device, such as clutches or fuses. Operate the function powered by the battery compartment continuously, and record peak temperature. The test shall be discontinued 60 min after the peak temperature is



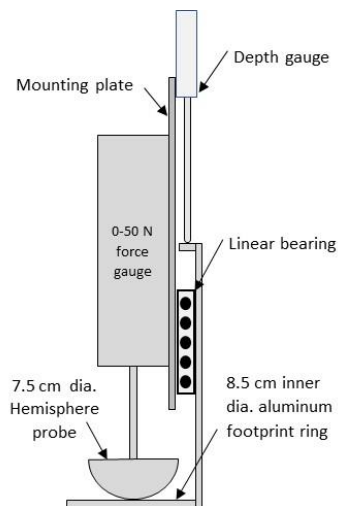
recorded. If the function shuts off automatically or must be kept “on” by hand or foot, monitor temperatures for 30 s, resetting the function as many times as necessary to complete the 30 s of operation. If the function shuts off automatically after an operating time of greater than 30 s, continue the test until the function shuts off.

(viii) 7.14 *Firmness Test*

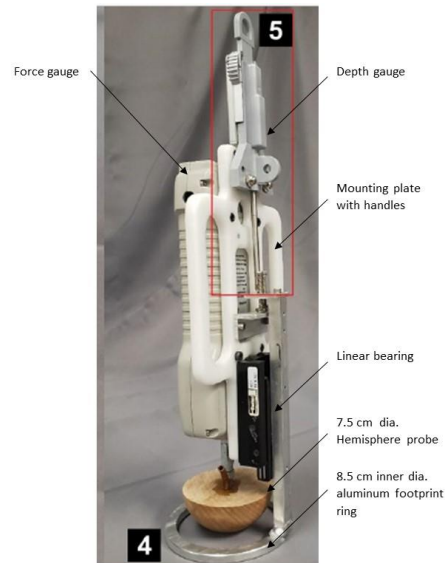
(ix) 7.14.1 *Hand-Held Firmness Test Device:*

(x) 7.14.1.1 The test device (Figure 4 to paragraph (b)(10)(x)) shall consist of a 7.5 cm (2.95 in.) diameter hemisphere (made of a rigid material such as wood, metal, or plastic) attached to a compression force gauge with a range of 0 to 50 N;  $\pm 0.2\%$  accuracy and a depth gauge with sufficient travel to measure displacement of the hemisphere relative to the footprint ring.

**Figure 4 to Paragraph (b)(10)(x) - Hand-Held Firmness Test Device**



Schematic of the firmness test device



Example of test device using a commercially available force gauge, depth gauge and linear bearing. The hemisphere probe, mounting plate and aluminum footprint ring are fabricated to accommodate gauges.

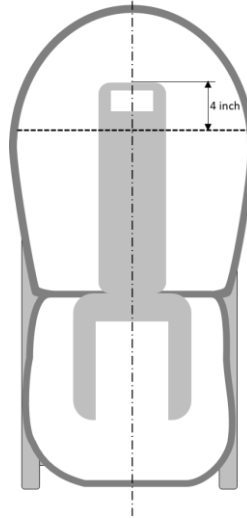
(Fabrication drawings in Appendix B, Handheld Firmness Tester Details in *Seated Product Characterization and Testing* report).

(xi) 7.14.2 *Test Point Location*

(xii) 7.14.2.1 Place the Hinged Weight Gauge-Infant in the rocker with the hinged edge into the seat bight.

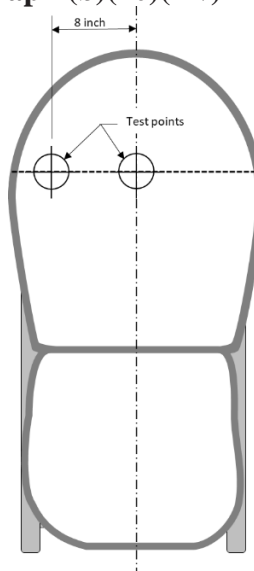
(xiii) 7.14.2.2 Mark a line on the seat back 4 in. (10.2 cm) from the top of the gauge (Figure 5 to paragraph (b)(10)(xiii)).

**Figure 5 to Paragraph (b)(10)(xiii) - Location of Head Support Line**



(xiv) 7.14.2.3 Remove the hinged weight gauge and mark the test points at the center line and 8 in. (20.3 cm) to the either side of the center line (Figure 6 to paragraph (b)(10)(xiv)).

**Figure 6 to Paragraph (b)(10)(xiv) - Test Point Location**



(xv) 7.14.3 Position the Hand-Held Test Device (Figure 4 to paragraph (b)(10)(x)) on a test location, with the footprint ring of the fixture centered on the location.

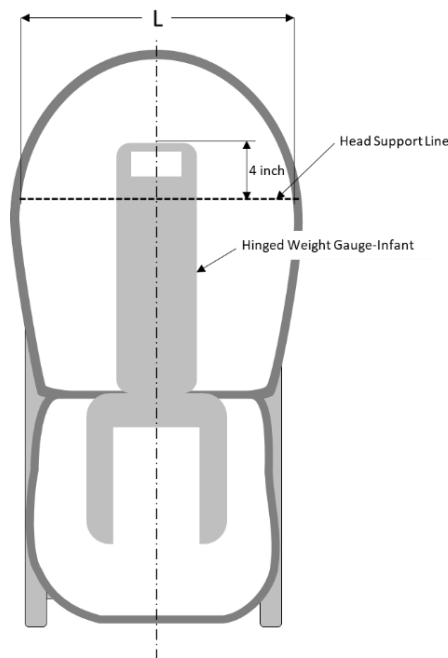
(xvi) 7.14.4 Apply a 10N (2.25 lb.) force for at least 30 seconds and record the peak deflection. The product meets the requirements if the deflection is less than 11 mm (0.43 in.).

(xvii) 7.14.5 Repeat the test on the remaining location.

(xviii) 7.15 Concavity Measurement

(xiv) 7.15.1 Configure the rocker with the Hinged Weight Gauge-Infant installed and locate the head support line as shown in Figure 7 to paragraph (b)(10)(xiv).

**Figure 7 to Paragraph (b)(10)(xiv) - Width L Measurement**



(xx) 7.15.2 Measure the width L, along the head support line and the interior of the side supports as shown in Figure 7 to paragraph (b)(10)(xiv).

(xxi) 7.15.3 Place a rigid bar between the side support and over the head support line. Measure the maximum vertical distance **d**, from the bottom of the bar to the hinged weight gauge (Figure 8 to paragraph (b)(10)(xxi)). Calculate the depth **D** by adding the thickness of the Hinged

Weight Gauge-Infant to the vertical distance from the bottom of the bar to the top of the Hinged Weight Gauge-Infant.

**Figure 8 to Paragraph (b)(10)(xxi) - Depth  $D = d + \text{Thickness of the Gauge}$**



(xxii) 7.15.4 Using the equation shown in Figure 9 to this paragraph (b)(10)(xxii), calculate the concavity  $r$  by inputting the width  $L$  and depth  $D$  into the equation below.  $r$  values greater than 22 cm (8.66 in.) meet the concavity requirement.

**Figure 9 to Paragraph (b)(10)(xxii) - Concavity Equation**

$$r = \frac{D}{2} + \frac{L^2}{8D}$$

(The larger the radius, the flatter the product, and vice versa)

(xxiii) 7.16 *Warning Label Visibility Test:*

(xxiv) 7.16.1 Place rocker on the floor.

(xxv) 7.16.2 Place and secure the Newborn CAMI dummy (Figure 2 to section 2 of ASTM F3084-22) in the rocker.

(xxvi) 7.16.3 *Visibility Tests with and Without Accessories and Toy Bars:*

(xxvii) 7.16.3.1 *Visibility with CAMI Dummy Restrained in Seat*—Place the CAMI Newborn Dummy in the product with the restraint system engaged according to the manufacturer’s instructions. While standing in front of the product with the Newborn CAMI dummy installed, verify that the required warnings are visible and placed above an imaginary horizontal line that crosses through the junctions of under arm and side of the torso armpits on both left and right sides and not obscured by any part of the dummy (Figure 10 to paragraph (b)(10)(xxvii)).

**Figure 10 to Paragraph (b)(10)(xxvii) - Allowable Area for Warning Label Placement Starts from the Dotted Line that Crosses the Junctions of Underarm and Both Sides of the Torso**



Note 1 to paragraph (b)(10)(xxvii)—The placement of the warnings is only applicable to the English language portions of the warning label.

(xxviii) 7.16.3.2 *Visibility with Accessories (Excluding Toy Bars)*— Rockers that include any accessory(ies) that could potentially obscure the warnings shall comply with visibility

requirements of 7.16 both with such accessory(ies) in place (in all configurations and combinations) and with the accessory(ies) removed.

(xxix) 7.16.3.3 *Visibility with Toy Bar*—If any part of the required warnings is obscured by a toy bar or its attached toys but is visible with a shift of the observer’s head position, then this is considered acceptable.

(11) Remove section 8.6.7, with Figure 14 and Figure 15 in ASTM F3084-22, from ASTM F3084-22.

(12) Add section 8.6.8 to ASTM F3084-22:

8.6.8 *Warning Location*—The applicable warnings as specified in 8.7 shall be on the front surface of the rocker seat back so as to comply with the visibility requirements in 7.16.

(13) Instead of complying with section 8.7.1 of ASTM F3084-22, comply with the following:

*Warning Statements* – Each product shall have warning statements. The text must address the warnings as shown in Figure 11 to paragraph (b)(13).

Note 2 to paragraphs 13, 14, and 15 - “Address” means that verbiage other than what is shown can be used as long as the meaning is the same or information that is product-specific is presented.

**Figure 11 to Paragraph (b)(13)**



(14) Instead of complying with section 8.7.2 of ASTM F3084-22, comply with the following:

*Warning Statements* – Each product shall have warning statements. The text must address the warnings as shown in Figure 12 to paragraph (b)(14):

**Figure 12 to Paragraph (b)(14)**



(15) Instead of complying with section 8.7.3 of ASTM F3084-22, comply with the following:

(i) *Warning Statements* – Each product shall have warning statements. The text must address the warnings as shown in Figure 13 to paragraph (b)(15)(ii) or Figure 14 to paragraph (b)(15)(ii):

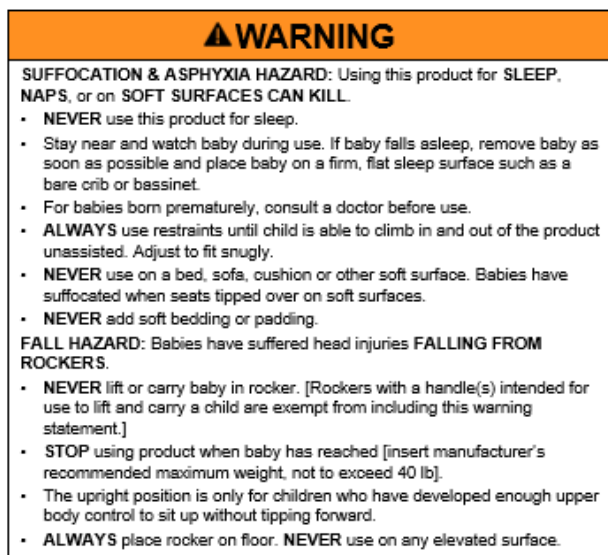
(ii) 8.7.3 *Infant/toddler Rockers with Shoulder Straps as Part of the Restraint System may use either 8.7.3.1 or 8.7.3.2.*

**Figure 13 to Paragraph (b)(15)(ii)**





Figure 14 to Paragraph (b)(15)(ii)



(16) In addition to complying with section 8.8 of ASTM F3084-22, comply with the following:

8.8 Manufacturers may present the SUFFOCATION & ASPHYXIA HAZARD and FALL HAZARD warning information on separate labels. If presented separately, both labels shall still meet the requirements set forth in sections 7.16 and 8.6.

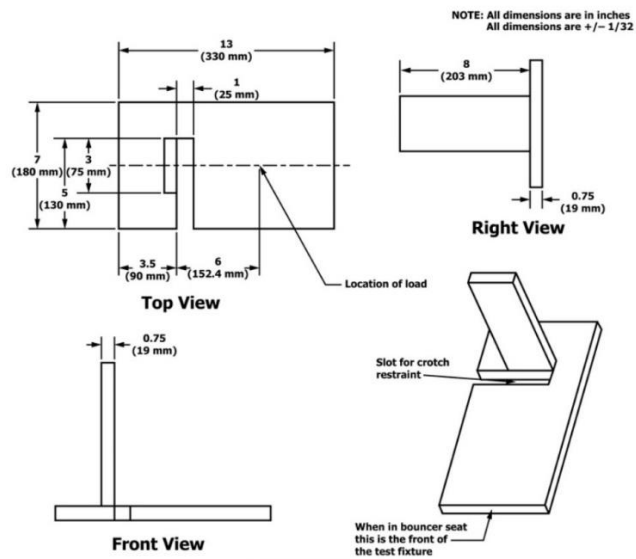
(17) Instead of complying with section X1.2 of ASTM F3084-22, comply with the following:

X1.2 Subsection 6.3.1.1—The forward stability test is required if the rocker is to be used after a child can sit up unassisted due to incident data showing injuries because of occupants leaning forward between the ages of 6 and 9 months.

(18) Replace Figure 8 in ASTM F3084-22 with the following:



Figure 15 to Paragraph (b)(18) - Forward Stability Test Fixture<sup>19</sup>



Alberta E. Mills  
Secretary, Consumer Product Safety Commission

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United States  
**Consumer Product Safety Commission**

## **Staff Draft Notice of Proposed Rulemaking for Infant and Infant/Toddler Rockers**

September 13, 2023

For additional information, contact:

Zachary S. Foster, Industrial Engineer,  
Infant and Infant/Toddler Rockers Project Manager,  
Division of Human Factors  
Directorate for Engineering Sciences  
Office of Hazard Identification and Reduction  
Email: [zfoster@cpsc.gov](mailto:zfoster@cpsc.gov)

This report was prepared by the CPSC staff. It  
has not been reviewed or approved by, and may  
not necessarily reflect the views of, the  
Commission.

# Table of Contents

<b>Briefing Memorandum.....</b>	<b>4</b>
I. Introduction .....	5
II. Background .....	6
III. Incident Data and Hazard Analysis (Tab A).....	8
IV. History of ASTM F3084 Standard to Present .....	10
V. Adequacy of ASTM F3084-22 Requirements .....	12
VI. Compliance Recalls (Tab E) .....	15
VII. Assessment of Small Business Impact of the Draft Proposed Rule (Tab F).....	15
VIII. Notice of Requirements .....	16
IX. Product Registration Rule Amendment .....	16
X. Effective Date .....	17
XI. Staff Conclusion and Recommendations .....	18
<b>Tab A: Memorandum by The Directorate for Epidemiology, Division of Hazard Analysis.20</b>	
I. Introduction .....	21
II. Incident Data .....	21
III. Hazard Pattern Identification .....	24
III. Appendix .....	27
<b>Tab B: Memorandum by The Directorate for Health Sciences, Division of Pharmacology and Physiology Assessment.....</b>	<b>63</b>
I. Introduction .....	64
II. Discussion .....	64
1. Fatal Incidents Overview.....	65
2. Non-Fatal Incidents .....	68
III. References .....	70
<b>Tab C: Memorandum by The Directorate for Engineering Sciences, Division of Mechanical and Combustion Engineering.....</b>	<b>71</b>
I. Introduction .....	72
II. Product .....	72
III. History of ASTM F3084 Standard.....	73
IV. Hazard Patterns .....	74

V. Adequacy of ASTM F3084-22 .....	74
VI. Additional Requirements for Concavity and Firmness .....	82
VII. Recommendation .....	91
<b>Tab D: Memorandum by The Directorate for Engineering Sciences, Division of Human Factors .....</b>	<b>92</b>
I. Introduction .....	93
II. Products .....	93
III. Incident Data Review .....	95
IV. Consumer Use of Rockers .....	97
V. Labeling & Warning Requirements .....	98
VI. Instructional Literature Requirements .....	104
VII. Conclusion .....	105
VIII. References .....	107
<b>Tab E: Memorandum by The Office of Compliance and Field Operations, Division of Regulatory Enforcement .....</b>	<b>108</b>
I. Introduction .....	109
II. Summary of Recalls .....	109
<b>Tab F: Initial Regulatory Flexibility Analysis .....</b>	<b>110</b>
I. Introduction .....	111
II. Reason for Agency Action .....	112
III. Objectives and Legal Basis of the Proposed Rule .....	112
V. Compliance, Reporting, Paperwork & Record Keeping Requirements for the Draft Proposed Rule .....	117
VI. Federal and State Rules That May Overlap with the Proposed Rule .....	118
VII. Potential Impact on Small Entities .....	118
VIII. Efforts to Minimize Impact – Alternatives Considered .....	123
IX. Impact on Testing Labs .....	125
X. Conclusion .....	126
<b>Tab G: Proposed Changes to ASTM F3084-22 .....</b>	<b>127</b>
I. Introduction .....	128
II. Requirements for Infant and Infant/Toddler Rockers .....	129

# Briefing Memorandum



# Memorandum

**TO:** The Commission  
Alberta Mills, Secretary

**DATE:** September 13, 2023

**THROUGH:** Austin C. Schlick, General Counsel  
Jason K. Levine, Executive Director  
DeWane Ray, Deputy Executive Director for Operations

**FROM:** Duane Boniface, Assistant Executive Director  
Office of Hazard Identification and Reduction

Zachary S. Foster, Project Manager,  
Division of Human Factors  
Directorate of Engineering Sciences

**SUBJECT:** Staff Draft Notice of Proposed Rulemaking for Infant and Infant/Toddler Rockers

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## I. Introduction

The Danny Keysar Child Product Safety Notification Act, *i.e.*, section 104 of the Consumer Product Safety Improvement Act of 2008 (CPSIA), requires the U.S. Consumer Product Safety Commission (CPSC) to: (1) examine and assess voluntary safety standards for durable infant or toddler products, and (2) promulgate mandatory consumer product safety standards that are substantially the same as, or more stringent than, the voluntary standards if the Commission determines that more stringent standards would further reduce the risk of injury associated with these products (15 U.S.C. § 2056a(b)).

Infant rockers are reclined support products that facilitate rocking, generally for infants up to 6 months old, while infant/toddler rockers are intended for children up to about 2 ½ years old. Rockers support a child in an inclined position (greater than 10°) with some infant/toddler rockers having adjustable seat backs to facilitate upright sitting as the child grows. ASTM F3084 – 22 provides performance and labeling standards for infant rockers and infant/toddler rockers.

This briefing package recommends that the Commission issue a notice of proposed rulemaking (NPR) to protect against hazards posed by infant and infant/toddler rockers. The package reviews the incident data associated with both of these types of rockers, assesses the effectiveness of ASTM F3084 – 22, examines recent recalls associated with rockers and discusses the potential impact of the draft NPR on small businesses. The draft NPR proposes creating a mandatory standard for infant and infant/toddler rockers, incorporating by reference ASTM F3084 – 22, with modifications to further reduce the risk of injury or death.

## II. Background

### A. Product Review

The draft NPR proposes creating a mandatory standard for infant and infant/toddler rockers, incorporating by reference ASTM F3084 – 22, with additional modifications to further reduce the risk of injury. ASTM F3084 – 22 provides performance and labeling standards for infant rockers and infant/toddler rockers. ASTM F3084 – 22 defines “infant rocker” as “a freestanding product intended to support an occupant who has not developed the ability to sit up unassisted (approximately 0 to 6 months of age) in a seated, reclined position greater than 10° and to facilitate rocking by the occupant with the aid of the caregiver or by other means” (section 3.1.6). ASTM F3084 – 22 defines “infant/toddler rocker” as a “freestanding product intended to support an occupant in a seated, reclined position greater than 10° and to facilitate rocking by the occupant with the aid of the caregiver or by other means until the occupant is approximately 2 ½ years” (section 3.1.7). CPSC staff is not aware of any other safety standards for infant rockers or infant/toddler rockers.

Rockers vary in style and complexity, but typically consist of a cloth seat affixed to a metal, wood, or plastic frame. All rockers support the child in an inclined position (greater than 10°) with certain infant/toddler rockers having adjustable seat backs to facilitate upright sitting as the child grows. Various products include a “soothing unit” that vibrates the chair and that may play music or other sounds. Many products also feature an accessory bar with attached toys that are, or at some point will be, within the child’s reach. Certain products also have secondary use modes. For example, some products have a kickstand that can be deployed to keep the product stationary, and other products can be converted into a bouncer or swing. Of the rocker models staff examined or viewed on websites, many have three-point restraints consisting of wide cloth crotch restraints, and short adjustable waist straps with plastic buckles. Some infant/toddler rockers also utilize a shoulder restraint. Figure 1 displays images of products shown on manufacturer and retail websites.

ASTM F3084-22 specifies the product’s sole use as a reclined support that facilitates rocking. Manufacturers promote certain features of their products as providing stimulation and entertainment, and others as soothing and calming. Consumer reviews and incident data indicate that caregivers use rockers as a place to contain their baby while the caregiver is relaxing or performing household tasks, including caretaking for other children. In some cases, caregivers allow the infant to sleep or nap in the product. Rockers are part of a broader category of products that provide support to infants who are initially unable to sit independently (e.g., bouncers, swings). Sitting is beneficial to improving cognitive outcomes such as object perception, language development, spatial memory, visual processing, and overall cognition, as sitting provides infants with an improved ability to explore objects and a greater visual access to their environment as well as increased social attention. While infants are sitting, caregivers also demonstrate a wider variety of interaction with infants to practice cognitive skills compared to other postures. In the report *Seated Products Characterization and Testing*<sup>1</sup>, researchers indicate that seated products offer infants a unique visual perspective and body position which

<sup>1</sup> *Seated Products Characterization and Testing*. Report available at <https://www.cpsc.gov/content/Report-Boise-State-Universitys-Seated-Products-Characterization-and-Testing>

could offer certain opportunities for learning and social interaction that infants may not receive from supine lying. The report's findings indicate that, among infants less than 4 months old, overall muscle activation was lower in seated products than on a firm, flat surface, indicating that younger infants (<4 months) may not have the muscle strength and coordination to control their body positions within seated products. The report emphasized the importance of using restraints and concluded that benefits of using seating products for younger infants would be limited primarily to visual stimulation and infant-caregiver interaction. However, among infants 4 months and older, overall muscle activation was greater in seated products than on a firm, flat surface, indicating that seated products, such as rockers, may be beneficial for physical development and the development of motor skills, as well as the aforementioned benefits regarding visual stimulation and infant-caregiver interaction.



**Figure 1: Examples of Infant Rockers and Infant/Toddler Rockers**

### *B. Market Description*

Rocker sales are estimated at 567,500 units per year, based on 2018 market analysis data and CPSC staff analysis. However, annual sales may be lower than this estimate due to the prevalence of combination products and rockers being grouped together with other products into a single category in market surveys.

Rockers range in price from \$35 to \$250 with an average price about \$110. The cheaper products tend to be smaller products with no powered functions, while the more expensive rockers tend to be combination products (ex: rocker/swing or rocker/bouncer) or products with



additional features. Rockers are supplied by approximately 18 manufacturers and importers, including foreign manufacturers, as well as approximately 30 foreign direct shippers.

### **III. Incident Data and Hazard Analysis (Tab A)**

Staff from the Commission's Directorate for Epidemiology's Division of Hazard Analysis (EPHA) provided national estimates for rocker-related emergency department visits from CPSC's National Electronic Injury Surveillance System (NEISS) and searched the Commission's Consumer Product Safety Risk Management System (CPSRMS)—which combines the data from the Injury or Potential Injury Incident file (IPII), Death Certificate file (DTHS), and In-Depth Investigation file (INDP) into one searchable incident database—for incidents involving infant rockers and infant/toddler rockers. EPHA staff reported 1,088 incidents/complaints retrieved from CPSRMS sources between January 1, 2011 and November 7, 2022. There were too few emergency department (ED)-treated injuries associated with infant rockers to derive reportable national estimates. Therefore, EPHA staff was unable to provide injury estimates based on NEISS data.

#### **A. Fatalities**

CPSC staff is aware of 11 fatalities associated with rockers that were reported to have occurred between January 1, 2011 and November 7, 2022, all of which were retrieved from CPSRMS. Additionally, staff is aware of a recall involving two multi-mode products in which four fatalities were reported (see Tab E). However, since staff could not determine whether the product was being used in a "rocker mode" at the time of the incident, those incidents were excluded from the scope of this analysis. Due to potential differences in reporting policies by firms and other factors, the number of incidents identified in connection with different rockers may not reflect their relative risk.

Nine of the 11 incidents involved infants placed in rockers for sleeping/napping; one involved an infant placed in a rocker in the "upright position" for approximately 4 hours without a caregiver present; and one involved an infant placed in a rocker on top of an adult bed for approximately 20-30 minutes without a caregiver present. Six incidents report that blankets and/or pillows were placed in the product, either under the infant for comfort/support, over the infant for warmth/comfort, or both. The reports for one of these incidents indicate that the victim was found with a blanket covering their face. For six incidents, the reports indicate that restraints were not used or that restraint use was unlikely due to the nature of the incident. In two incidents, there were indications that the victims were placed on their sides in the product. In one incident, the product was broken and was being supported with a shoe box.

#### **B. Nonfatal Incidents**

Of 1,077 reported nonfatal incidents, 88 incidents involved an injury to a child (younger than 5 years of age), including 9 injuries which required non-emergency medical treatment, 2 injuries reporting hospitalization, and 4 injuries resulting in an emergency department visit.

Head-related injuries, primarily associated with rocker tip-over, comprise the majority of injuries, accounting for 75 of 88 incidents where injury was reported. Injury severity varied widely among these incidents, ranging from skull fractures (two incidents), lost teeth, mouth lacerations, rug burns, and minor bumps/bruises. 10 of the 88 incidents involved an injury to the back, torso, fingers, or legs. One additional incident involved a victim who experienced neck pain due to lack of a neck support in the infant rocker. In one incident, an infant suffered a seizure in a rocker. One incident involved an infant “turning blue” while in the rocker but returning to normal after being removed. One incident involved a child’s neck becoming entangled in a strap.

### ***C. Hazard Patterns***

CPSC staff reviewed the 1,088 incident reports to identify hazard patterns associated with infant and infant/toddler rockers. Staff grouped the hazard patterns into the following categories and listed them in order of the frequency they were reported:

#### **1. Hardware Issues**

More than seven hundred (700) of the 1,088 incidents (64 percent) involved hardware-related problems, including issues related to lock/latch hardware breaking, straps fraying or tearing, hinge hardware breaking, seat mounting hardware falling out or coming loose, product components breaking. Two fall-related head injuries due to a liberated screw and one facial injury due to a toy bar breaking were reported in this category.

#### **2. Stability Issues**

Two hundred seventy-five (275) of the 1,088 incidents (25 percent) involved infant rockers collapsing or tipping over, 61 of which resulted in head injury and 4 of which resulted in other upper body injuries.

#### **3. Electrical Issues**

Thirty-seven (37) of the 1,088 incidents (3 percent) involved electrical issues with infant rockers. Of these incidents, 36 specifically involved leaking batteries, and one incident involved a charred motor. In 12 of the incidents with leaking batteries, the infant rockers had corroded or rusty battery compartments. One incident resulted in a minor burn to an adult.

#### **4. Design Issues**

Thirty-six (36) of the 1,088 incidents (3 percent) involved issues relating to the rocker’s design. These issues include toy bar positioning, slippery fabric seat pads, misaligned screws, pinch points, defective battery compartments, and seat back tubes not staying in their sockets. Among these incidents, 17 resulted in injury. One incident involved a toy bar “snapping back” and hitting

a child in the eyelid while the child was pulling on the toy bar, requiring stitches. One incident involved a child suffering a seizure in a rocker (note: there is no indication as to what caused the seizure). Two incidents involved infants developing flat spots on their head. One incident involved a child's thumb getting caught between the toy bar and its socket. One incident involved a child's neck becoming entangled in a strap after crawling under a rocker.

## 5. Multiple Issues

Twenty-eight (28) of the 1,088 incidents (3 percent) involved two or more of the preceding product-related issues. Three deaths, including two that were attributed to positional asphyxia, and four injuries were reported in this category. Among the injuries, two were attributed to a product collapse resulting from screws falling out of the rocker, one was attributed to the seat back collapsing, and one was attributed to the rocker portion of a multi-use product (a swing/rocker combination product) detaching from the base and tipping over.

## 6. Unknown

Ten (10) of the 1,088 incidents (<1 percent), including 8 of the 11 fatal incidents, did not involve a specific product-related issue. Of the 8 fatalities in this category, 5 were attributed to positional asphyxia. One injury was reported in this category.

# IV. History of ASTM F3084 Standard to Present

The ASTM Committee F15 on Consumer Products first published the voluntary standard for rockers in 2014, as ASTM F3084-14, *Standard Consumer Safety Specification for Infant and Infant/Toddler Rockers*. The first publication established requirements for the standard and addressed the following issues:

- Sharp points and sharp edges
- Small parts
- Lead in paint
- Wood parts
- Latching or locking mechanisms
- Scissoring, shearing, and pinching
- Openings
- Exposed coil springs
- Protective components

- Permanency of labeling and warnings
- Toy accessories
- Seat angles
- Forward stability
- Forward stability for infant/toddler rockers
- Sideward and rearward stability
- Static slip resistance
- Structural Integrity (static/dynamic load)
- Disassembly/collapse
- Toy bar attachment integrity
- Marking and labeling
- Instructional literature

Since 2014, ASTM has revised and updated the voluntary standard four times to address safety issues, as outlined below:

ASTM F3084-16 (Approved April 1, 2016):

- Modified warning requirements to allow manufacturers of infant/toddler rockers utilizing shoulder straps as part of the restraint system to specify whether the restraints should be used at all times or until the child is able to climb in and out of the product unassisted (F3084-14 allowed for only the latter).

ASTM F3084-18 (Approved October 1, 2018):

- Definitions for “infant rocker” and “infant/toddler rocker” added to the Terminology section (were previously defined in the scope).
- Replaced “conspicuous label” with “conspicuous” in the Terminology section, made minor revisions to definition.
- Definition for “protective component” added to the Terminology section.
- Definition for “static load” modified to include “other means” of applying a downward vertical load.
- General requirements for scissoring, shearing, and pinching modified to more clearly indicate when such a hazard exists.
- Figure showing typical seat bight added.

- General requirements for protective components modified to state that all protective components accessible to the child shall be evaluated.
- Statement that products must comply with the applicable requirements of the CPSIA added to the General Requirements.
- Requirements for convertible product added to the General Requirements, stating that rockers that can be converted into a different product for which another ASTM safety specification exists must meet the applicable requirements of that standard when in that use mode.
- Torque test modified to clarify specific torque requirements for infant rockers and infant/toddler rockers.
- Tension test modified to increase applied force from 10lb to 15lb for all product types (ASTM F3084-16 required 10lb for infant rockers and 15lb for infant/toddler rockers).
- Marking and labeling requirements modified to require products and retail packaging to be marked with both the place of business *and* telephone number of the manufacturer, distributor, or seller (ASTM F3084-16 required only one).
- Removed a requirement for manufacturers to change a product's model number when the product undergoes a significant structural or design change or change that affects its conformance to ASTM F3084.
- Modified formatting, layout, and language of warning labels to emphasize suffocation and fall hazards more strongly.
- Modified warning and instructional literature requirements to align with recommendations from the ASTM Ad Hoc Wording Task Group.

ASTM F3084-20 (Approved October 1, 2020):

- Added language addressing battery-operated products to the marking/labeling and instructional literature requirements.
- Removed references to Consumer Product Safety Improvement Act.

ASTM F3084-22 (Approved May 1, 2022):

- Modified warning language to state that rockers are not intended for sleep or unsupervised use and instruct consumers to move sleeping infants to a firm, flat sleep surface (F3084-20 warned against unsupervised use and *unattended* sleep).

## V. Adequacy of ASTM F3084-22 Requirements

ASTM developed ASTM F3084 to mitigate the risk of injury or death by addressing the hazard patterns associated with the use of infant and infant/toddler rockers. Hazard mitigation

strategies include performance requirements, warnings, and instructional literature. CPSC staff evaluated the adequacy of the voluntary standard and, in April 2023, sent a letter to the ASTM Subcommittee for Infant Rockers recommending revisions to the standard to adequately address hazards associated with infant and infant/toddler rockers.<sup>2</sup> Staff's assessment of ASTM F3084-22 and recommended revisions are discussed in the Health Sciences (Tab B), Engineering (Tab C), and Human Factors (Tab D) memoranda. Specifically, staff recommends the following revisions:

- Add terminology, performance requirements, and test methods to evaluate the accessibility of tethered straps exposed below rockers, requiring that bounded openings on rockers either (a) do not allow the passage of the small head probe, or (b) allow the passage of the large head probe and a tethered strap length no greater than 7.4 inches. This is intended to address strangulation hazards associated with tethered straps. Staff is aware of an incident in which a child crawled under a rocker, upon which their neck became entangled in a strap.
- Add performance requirements and test methods requiring that battery compartments provide a means of containing battery leakage and to prevent occupant access to said means of containment, and that the surfaces of accessible electrical components do not exceed 160°F (71°C). This is intended to address hazards associated with battery leakage, as staff's review of incident data revealed multiple instances of battery leakage. Such requirements have been incorporated into several established mandatory standards, such as 16 C.F.R. part 1229 – Safety Standard for Infant Bouncer Seats (the bouncer rule).
- Add performance requirements and test methods requiring rockers to be subject to a drop from a height of 36 inches, during which the product will not create a hazardous condition. This is intended to ensure product durability and is used in several established mandatory standards. Staff is aware of multiple incidents involving product components breaking and/or loosening and one incident of a rocker falling from a countertop.
- Add performance requirements and test methods for firmness to address the suffocation hazard associated with soft surfaces that can envelop an infant's face. The minimum firmness would ensure rockers to have a firmness in the head area equivalent to a crib mattress to prevent a child's nose and mouth from being obstructed by soft products such as pillows or hammock type designs that can envelop an infant's face in the prone or head turned to the side position. A report from Boise State University for CPSC<sup>3</sup> evaluated 47 in-depth incident investigations, tested 24 infant seated products and

<sup>2</sup> <https://www.cpsc.gov/s3fs-public/May-2023-Infant-Rocker-Letter-to-ASTM-for-meetings-FINAL.pdf?VersionId=S3YdPIGMNVClavnt88sASO6N1E7gYW5v>

<sup>3</sup> Mannen, E. M., Siegel, D., Goldrod, S., Bossart, A., Lujan, T. J., Wilson, C., Whitaker, B., Carrol, J. (2023). *Seated Products Characterization and Testing*. Report available at <https://www.cpsc.gov/content/Report-Boise-State-Universitys-Seated-Products-Characterization-and-Testing>

reviewed past research and provided evidence supporting recommendations that seated products have a firmness similar to a crib mattresses, to address a risk of suffocation.

- Add performance requirements and test methods for the concavity (curvature of the seat back) to ensure rockers do not envelop the infant's head and to minimize suffocation due to contact of an infant's mouth/nose against the side of the products during normal supine lying with a head rotation. A report from Boise State University for CPSC evaluated 47 in-depth incident investigations, tested 24 infant seated products and reviewed past research and provided evidence supporting recommendations that seated products do not envelop an infant's head and face and provide sufficient space for the infant's head to rotate without contacting the side walls, to address a risk of suffocation.
- Revise the forward stability test, which is intended to address hazards associated with forward tipover, so that the load is applied 6 inches from the front of the crotch post, rather than 5 inches. This is intended to make the forward stability test more stringent and address tipover hazards, as staff's review of incident data revealed multiple instances of product tipover. These revisions also harmonize the forward stability requirements with those found in 16 CFR part 1229, the bouncer rule. Additionally, revise the definitions for "infant rocker" and "infant/toddler rocker" to list a maximum weight limit, and revise the forward stability tests to offer additional clarification on which tests apply to which product category.
- Revise the warning requirements to emphasize messaging against using rockers for sleeping/napping. These revisions include moving language warning against sleep to the beginning of the warning label, adding language warning against the use of soft bedding in rockers, and adding language communicating that use of rockers for sleep, naps, or on soft surfaces can kill infants. This is intended to address hazards associated with rockers being used for sleep, as staff is aware of several fatalities involving infants sleeping in rockers, some of which also involved the use of soft bedding.
- Add warning label visibility requirements to ensure that warning labels are prominently placed on products and are conspicuous to consumers. This recommendation is adopted from 16 CFR part 1229, the bouncer rule, which contains such requirements for fall hazard warnings. However, staff recommends that, for rockers, these requirements be applied to all warning language.
- Add terminology to define "rocking" as forward and backward motion via a nonstationary base. This is intended to differentiate rockers from other infant seated products and prevent improper product classification. As an alternative, CPSC staff considered removing "by other means" from the definitions for infant rocker and infant/toddler rocker, which would effectively prohibit products with a powered rocking mechanism, but staff determined that defining "rocking" was less design-restrictive. Staff invites comments on this proposal.
- Correct typographical errors found in the current warning language.



Discussions of the rationales for these revisions can be found in the Engineering (Tab C) and Human Factors (Tab D) memos, as well as the Redline memo (Tab G). The specific changes can be found in the Redline memo (Tab G).

## **VI. Compliance Recalls (Tab E)**

Compliance staff provided a summary of infant and infant/toddler rocker recalls from January 1, 2011 to August 29, 2023. During that time, CPSC administered one recall of two multi-mode products from a single firm in which 4 fatalities were reported.<sup>4</sup> Additionally, CPSC issued a warning press release addressing 13 fatalities reported in infant/toddler rockers.

## **VII. Assessment of Small Business Impact of the Draft Proposed Rule (Tab F)**

As described in Tab F, staff identified approximately 50 firms supplying infant and infant/toddler rockers to the U.S. market. Of these firms, 9 are small U.S. entities, including four small U.S. manufacturers and five small U.S.-based importers. The rule could have a significant impact on the nine small U.S. importers and manufacturers; most products would likely require modifications to meet the performance requirements and warning/labeling requirements in the proposed rule.

Multi-mode products that are already required to be tested to the bouncer or swing mandatory safety standard may meet the performance requirements proposed in the draft NPR. However, products that are not firm or that are highly concave may not meet the firmness or concavity requirements in this draft NPR, even if they meet some of the performance requirements in the safety standards for other types of products.<sup>5</sup> Multi-mode products would still require modifications to meet the warning/labeling requirements in the proposed rule.

Manufacturers whose products do not meet the performance requirements in the draft NPR will need to redesign their products, at a cost of approximately \$80,000 per model for a full redesign, or remove the products from the market. However, some redesigns could be relatively inexpensive, such as changing the seat angle or modifying restraints. The impact of a redesign cost on small businesses could be reduced if suppliers can increase their retail price to cover costs, which is likely. Since all suppliers would be subject to the proposed rule, it is likely that large companies would raise their retail price to cover costs, so small companies would not necessarily be at a competitive disadvantage if they also raise their retail prices.

The proposed rule requires some new testing equipment for testing laboratories, estimated to cost about \$500 to \$1000. Laboratories are not required to provide testing services and are expected to certify to this standard only if they anticipate that the demand for their testing

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<sup>4</sup> Note: Staff could not determine whether the products were in “rocker mode” at the time of the incident. Therefore, they were excluded from the scope of staff’s analysis.

<sup>5</sup> See 16 C.F.R. part 1229 – Safety Standard for Infant Bouncer Seats and 16 C.F.R. part 1223 – Safety Standard for Infant Swings.



services will cover their costs for testing equipment and labor. For suppliers, the additional performance requirements are substantively similar to requirements in the mandatory bouncer standard. Staff anticipates that testing costs for suppliers would be less than \$1,000 per year per model, similar to testing costs for other children's products, and will be bundled with existing required tests for small parts, lead, phthalates, etc. Costs associated with the proposed revisions to the warning label are expected to be minimal.

## VIII. Notice of Requirements

Section 14(a) of the CPSA requires that any children's product subject to a consumer product safety rule under the CPSA must be certified as complying with all applicable CPSC-enforced children's products safety rules. The children's product certification must be based on testing conducted by a CPSC-accepted third party conformity assessment body (test laboratory). The CPSA requires the Commission to publish a notice of requirements (NOR) for the accreditation of third-party test laboratories to determine compliance with a children's product safety rule to which a children's product is subject. A proposed rule for infant and infant/toddler rockers, if issued as a final rule, would be a children's product safety rule that requires the issuance of an NOR.

The Commission published a final rule, *Requirements Pertaining to Third Party Conformity Assessment Bodies*, 16 C.F.R. part 1112. Part 1112 establishes the requirements for accreditation of third-party testing laboratories to test for compliance with a children's product safety rule. The final rule also codifies all of the NORs that the CPSC has published, to date, for children's product safety rules. All new children's product safety rules, such as the proposed rocker standard, would require an amendment to part 1112 to include infant and infant/toddler rockers in the list of children's product safety rules for which the CPSC has issued NORs.

## IX. Product Registration Rule Amendment

In addition to requiring the Commission to issue safety standards for durable infant or toddler products, section 104 of the CPSIA directed the Commission to issue a rule requiring that manufacturers of durable infant or toddler products establish a program for consumer registration of those products. Section 104(f) of the CPSIA defines the phrase "durable infant or toddler product" and lists examples of such products:

(f) DEFINITION OF DURABLE INFANT OR TODDLER PRODUCT. —As used in this section, the term "durable infant or toddler product"—

(1) means a durable product intended for use, or that may be reasonably expected to be used, by children under the age of 5 years; and

(2) includes—

(A) full-size cribs and non-full size cribs;

(B) toddler beds;

(C) high chairs, booster chairs, and hook-on chairs;

(D) bath seats;

(E) gates and other enclosures for confining a child;

- (F) play yards;
- (G) stationary activity centers;
- (H) infant carriers;
- (I) strollers;
- (J) walkers;
- (K) swings; and
- (L) bassinets and cradles.

In 2009, the Commission issued a rule, referred to as the “product registration card rule,” as required under section 104 (16 C.F.R. part 1130). As part of that rule, the Commission added six products—children’s folding chairs, changing tables, infant bouncers, infant bath tubs, bed rails, and infant slings—to the list of durable infant or toddler products that the CPSIA specifically identified. In 2022, the Commission added crib mattresses to the list of products in part 1130.

Infant rockers and infant/toddler rockers were not included in the statutory list, nor were they included in the Commission’s revised list of “durable infant or toddler products” in the 2009 rule. However, the preamble to the product registration card rule stated that the specified statutory categories of durable infant or toddler products are not exhaustive, and that the Commission will explicitly identify the product categories that are covered under the definition of “durable infant or toddler product.” Specifically, the preamble stated: “Because the statute has a broad definition of a durable infant or toddler product but also includes 12 specific product categories, additional items can and should be included in the definition, but should also be specifically listed in the rule.... The Commission could add other products in the future through notice and comment rulemaking.” (74 Fed. Reg. 68,668 (Dec. 29, 2009)).

Staff recommends that “infant rocker” and “infant/toddler rocker,” which include all rockers within the scope of ASTM F3084-22, be added to part 1130 as a durable infant or toddler product. The statute defines “durable infant or toddler product” as “a durable product intended for use, or that may be reasonably expected to be used, by children under the age of 5 years”, and provides a list of such products that includes booster chairs, walkers, stationary activity centers, and swings. Infant and infant/toddler rockers meet the CPSA definition of a “durable infant or toddler product” because they are intended for use, and may be reasonably expected to be used, by children under the age of 5 years. Infant rockers, like several other durable infant or toddler products, are typically made of metal and plastic, and are commonly available for resale or “handed down” for use by multiple children.

## **X. Effective Date**

The Administrative Procedure Act (APA) generally requires that the effective date of a rule be at least 30 days after publication of the final rule (5 U.S.C § 553(d)). Staff recommends an effective date of 180 days after the publication of the final rule. Barring evidence to the contrary, staff generally considers 6 months (approximately 180 days) sufficient time for suppliers to come into compliance with a new standard, and this amount of time is typical for other CPSIA section 104 rules. Given that the proposed rule largely utilizes test equipment that is already utilized to meet ASTM F3084-22, and that any additional required test equipment is either

already utilized for other regulated products (*i.e.*, Infant Bouncer Seats) or can easily be produced/procured by a CPSC-accepted testing laboratory (see Tab C), staff concludes that additional time is not necessary for the production or procurement of new test equipment. Six months is also the period that the Juvenile Products Manufacturers Association (JPMA) typically allows for products in their certification program to shift to a new standard once that new standard is published. Therefore, juvenile product manufacturers are accustomed to adjusting to new standards within this time. Staff invites comments, particularly from small businesses, regarding the amount of time they will need to come into compliance.

## **XI. Staff Conclusion and Recommendations**

Staff recommends that the Commission issue a proposed rule for infant and infant/toddler rockers that incorporates by reference ASTM F3084-22, *Standard Consumer Safety Specification for Infant and Infant/Toddler Rockers*, with the modifications listed below to further reduce the risk of injury:

- Addition of performance requirements and test methods for the accessibility of tethered straps to address strangulation hazards associated with straps.
- Addition of performance requirements and test methods for battery compartments to address hazards associated with battery leakage.
- Addition of a drop test to ensure product durability and address hazards associated with product falling and hardware/components breaking or coming loose.
- Addition of performance requirements and test methods for firmness to address the suffocation hazard associated with soft surfaces that can envelop an infant's face.
- Addition of performance requirements and test methods for the concavity (curvature of the seat back) to ensure rockers do not envelop the infant's head and to minimize suffocation due to contact of an infant's mouth/nose against the side of the products during normal supine lying with a head rotation.
- Revision to forward stability test to make test more stringent, addressing tip-over hazards. Revisions to terminology and forward stability test to clarify what tests infant rockers and infant/toddler rockers are subject to.
- Revisions to warning requirements to emphasize that rockers are not intended for sleep and that soft bedding is not to be used in rockers.
- Addition of warning location/visibility requirements to ensure that on-product labels are prominently placed and conspicuous to the consumer.
- Addition of definition for "rocking" to differentiate rockers from other seated infant products.
- Corrections of typographical errors.

Staff also recommends updating 16 CFR part 1130 to include “infant rocker” and “infant/toddler rocker” as durable infant or toddler products that require a product registration card and updating 16 CFR part 1112 to include a Notice of Requirements for infant rockers and infant/toddler rockers.

Lastly, staff recommends an effective date of 180 days after publication of the final rule to allow time for manufacturers to bring their products into compliance and to arrange for third party testing. Staff requests public comments on the proposed modifications and the appropriate effective date for the staff-recommended rule.

## **Tab A: Memorandum by The Directorate for Epidemiology, Division of Hazard Analysis**



# Memorandum

**TO:** Zachary S. Foster, Project Manager,  
Division of Human Factors  
Directorate of Engineering Sciences

**DATE:** September 13, 2023

**THROUGH:** Stephen Hanway  
Associate Executive Director  
Directorate for Epidemiology

**FROM:** Ted Yang  
Division of Hazard Analysis  
Directorate for Epidemiology

**SUBJECT:** Infant and Infant/Toddler Rocker-Related Deaths, Injuries, and Potential Injuries;  
January 1, 2011 – November 7, 2022

## I. Introduction

This memorandum characterizes the number and types of incidents involving infant and infant/toddler rockers from January 1, 2011 to November 7, 2022. Staff reviewed incident reports involving rockers and based hazard pattern characterizations on reports found in CPSC's incident databases. During this period, there were too few emergency department (ED)-treated injuries associated with rockers to derive reportable national estimates.<sup>6</sup> As such, staff cannot provide injury estimates, but includes in this memorandum NEISS injury cases in the total count of reported incidents.

## II. Incident Data<sup>7</sup>

CPSC staff is aware of 1,088 incidents involving infant rockers from January 1, 2011 to November 7, 2022. The total number of incidents includes 11 reported fatalities and 88

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<sup>6</sup> According to the National Electronic Injury Surveillance System (NEISS) publication criteria, an estimate must be 1,200 or greater, the sample size must be 20 or greater, and the coefficient of variation must be 33% or smaller to derive reportable national estimates.

<sup>7</sup> Staff searched the CPSC database, Consumer Product Safety Risk Management System (CPSRMS), which contains submitted voluntary information such as consumer reports from SaferProducts.gov, newspaper clippings, and records from state/local authorities. Reported incidents in the findings do not provide a complete count of all that occurred during this period. However, they do provide a minimum number of deaths and incidents occurring during this timeframe and illustrate the circumstances involved in the incidents related to infant rockers.

Staff extracted data for reported incidents on 11/07/22. Staff extracted all data, coded under product codes 1527 (Baby Carriers or Slings), 1548 (Baby Carriers, not Specified), 1549 (Other Baby Carriers), and 1558 (Baby Bouncer Seats). Upon careful joint review with CPSC's Directorates for Engineering Sciences staff, staff considered some cases out-of-scope for the purposes of this memorandum. For example, staff excluded incident reports where products were incorrectly coded as infant rockers; staff also excluded a report of an adult tripping on a rocker which

reported injuries. Because reporting is ongoing, the number of reported incidents during this period may change in the future; CPSC staff strongly discourages drawing inferences based on the year-to-year increase or decrease shown in the reported data, particularly for more recent years. Table 1 shows the number of incidents reported to CPSC for each year from January 1, 2011 to November 7, 2022.

**Table 1: Reported Infant Rocker Incidents**

<b>Incident Year</b>	<b>Total Number of Reported Incidents</b>	<b>Number of Reported Fatalities</b>	<b>Number of Reported Nonfatal Injuries</b>
2011	164	1	29
2012	200	1	23
2013	158	1	11
2014	97	1	3
2015	82	1	3
2016	137	0	4
2017	86	1	5
2018	67	0	2
2019	42	2	4
2020	42	1	3
<b>2021*</b>	8	1	1
<b>2022*</b>	6	1	0
<b>Total</b>	<b>1,088</b>	<b>11</b>	<b>88</b>

Source: CPSC epidemiological databases CPSRMS and NEISS.

Note: \* indicates data collection is ongoing.

Table 2 provides the age breakdown for the 1,088 total incidents from January 1, 2011 to November 7, 2022.

**Table 2: Age Distribution in Infant Rocker-Related Incident Reports**  
01/01/11 – 11/07/22

<b>Age</b>	<b>Total</b>	
	<b>Frequency</b>	<b>Percentage</b>
Unreported*	316	29
0 – 6 Months	418	38
7 Months – Less Than 1 Year	241	22
1 – Less Than 2 Years	81	8
2 – 4 Years	27	2

subsequently crashed on a child. With the exception of incidents occurring on U.S. military bases, staff excluded all incidents that occurred outside of the United States. To prevent any double-counting, staff consolidated and counted as one incident when staff identified multiple reports of the same incident.

5 Years or Older	5	< 1
<b>Total</b>	<b>1,088</b>	<b>100</b>

Source: CPSC epidemiological databases CPSRMS and NEISS.

Note: Percentages may not sum to 100 due to rounding.

\*In this table, age "unreported" implies age was unknown or age was not reported because the incident involved no injury.

Table 3 presents the age distribution of children under 5 years of age who suffered fatal or nonfatal injuries from January 1, 2011 to November 7, 2022. All 11 fatalities and 70 nonfatal injuries involved victims less than one year old. Eight incidents involved victims less than 4 months old, including 5 of the 11 total fatalities. All age unreported incidents involved a victim whose specific age was unknown, but strongly inferred to be a child less than 5 years old.

**Table 3: Age Distribution in Infant Rocker-Related Incidents Reporting Fatalities and Nonfatal Injuries among Children Under 5 Years of Age 01/01/11 – 11/07/22**

<i>Age of Child</i>	<i>Total</i>		<i>Fatalities</i>		<i>Injuries</i>	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
Unreported*	12	12	0	0	12	14
0 – 6 Months	33	33	10	91	23	26
7 – Less Than 1 Year	48	48	1	9	47	53
1 – Less Than 2 Years	5	5	0	0	5	6
2 – 4 Years	1	1	0	0	1	1
<b>Total</b>	<b>99</b>	<b>100</b>	<b>11</b>	<b>100</b>	<b>88</b>	<b>100</b>

Source: CPSC epidemiological databases CPSRMS and NEISS.

Note: Percentages may not sum to 100 due to rounding.

\*In this table, age "unreported" implies age was unknown but victim is described as a child under 5 years of age.

### *A. Fatalities*

CPSC staff identified 11 fatal incidents involving an infant rocker from January 1, 2011 to November 7, 2022. Staff is also aware of a recalled multi-mode product involving four fatal incidents (see Tab E). However, staff could not determine if the incidents occurred while the product was in the rocker mode. Therefore, those incidents were not included in the scope of staff's analysis.

Two of the 11 fatal incidents suggest the cause of death as positional asphyxia:

- IDI# 110715CAA3921: A mother placed her one-month-old son in a rocker, unrestrained, on top of a blanket and with other blankets placed over him. He was later found with his face turned to the side not breathing. The medical examiner did not make a finding of asphyxia.



- I1920011A (IDI# 190205CBB3151): A 4-month-old female infant placed on top of a heavy blanket in a rocker, unrestrained for overnight sleep. The next morning, she was found rolled onto her side in the seat and not moving.

Additionally, 4 incidents confirmed the cause of death as positional asphyxia:

- IDI# 121001HCC2003: A two-month-old female infant died from positional asphyxia after she was found face down in soft bedding unrestrained facing in the wrong direction in a damaged rocker propped up by a shoebox.
- IDI# 140604CCC1664: A two-month-old male infant was placed in a rocker set to toddler mode, which meant he was pitched forward in the seat instead of reclined backwards. He was later found unresponsive with his chin in his chest.
- IDI# 180319CCC2544: A three-month-old male infant with acute bronchiolitis died from positional asphyxia after being placed down to sleep unrestrained in a rocker with a blanket. The victim was found face down and unresponsive.
- IDI# 200504HCC2450: A mother placed her 4-month-old child in an infant rocker on his back on top of a small blanket, and another baby blanket was placed over his body. Later, he was found deceased still in supine position with the baby blanket over his face.

Out of the remaining incidents, 2 incidents concluded that the victim died from Sudden Unexplained Infant Death (Y226005YA and IDI# 190926CBB1745), one incident was due to respiratory failure (IDI# 210714HCC3286) while the cause of death could not be determined in 2 other incidents (IDI# 160203CCC3373 and IDI# 220720CBB3191).

### *B. Nonfatal Incidents*

CPSC staff is aware of 1,077 nonfatal incidents related to infant rockers which occurred between January 1, 2011 and November 7, 2022. Out of the 1,077 nonfatal incidents, 88 incidents reported an injury to a child (younger than 5 years of age), including 9 injuries which required non-emergency medical treatment, 2 injuries requiring hospitalization, and 4 injuries resulting in an emergency department visit.

Head-related injuries comprised the majority of incidents. Specifically, victims in 75 incidents sustained injury to the head such as forehead contusions, skull fractures, mouth lacerations, and rug burns. One additional incident involved a victim who experienced neck pain due to lack of a neck support in the infant rocker. Another 10 incidents involved victims that sustained injuries to their back, torso, fingers, or legs. The remaining 2 incidents involved a victim who suffered a seizure and another who was asphyxiating due to their position in the infant rocker.

## **III. Hazard Pattern Identification**

In total, staff identified hazard patterns for 1,088 reported incidents (11 fatal and 1,077 nonfatal) associated with the use of infant rockers. The specific hazard patterns staff identified in the incident data include the following categories including injuries, in order of descending frequency:

- **Hardware issues:** More than 700 of the 1,088 incidents (64 percent) reported hardware-related problems. These problems included issues related to:
  - lock/latch hardware (e.g., prong on restraint buckles breaking, restraint straps fraying or tearing off, buckles coming apart)
  - hinge hardware (sockets breaking off from infant rocker frame rails)
  - seat mounting hardware (screws falling out or coming loose near the user)
  - other hardware (toy bars snapping, kickstand parts breaking off).
 Two fall-related head injuries due to a liberated screw were reported in this category.
- **Stability issues:** Two hundred seventy-five out of 1,088 incidents (25 percent) reported infant rockers wobbling, collapsing, or tipping over. Sixty of the 275 rocker incidents with stability issues resulted in a head injury, and 4 of the 275 stability-related rocker incidents resulted in other upper body injuries. Overall, tip over-related incidents comprised more than 64 percent of all reported injuries. At least 49 of the 57 identified tip over-related incidents that resulted in an injury specifically involved a rocker tipping forward.
- **Electrical issues:** Thirty-seven of the 1,088 incidents (3 percent) reported infant rockers with electrical issues. Out of the 37 incidents, 36 incidents specifically involved leaking batteries, and one incident involved a charred motor. In 12 of the incidents with leaking batteries, the infant rockers had corroded or rusty battery compartments. One minor burn to an adult was reported.
- **Design issues:** Thirty-six of the 1,088 incidents (3 percent) reported problems with the design of the infant rocker. The reported problems consisted of issues with:
  - toy bar positioning, which could result in a child sustaining facial injuries;
  - slippery fabric seat pads, which may cause a child to slide or twist out of position;
  - misaligned screws, which could lead to crooked rocker frames;
  - children being pinched between the bottom bars, fabric covers of the chair, or plastic covers of the battery pack;
  - a defective battery compartment, which involved a gaping hole near where a child would sit;
  - seat back tubes failing to stay inside rail sockets.
 Seventeen injuries related to design issues were reported in this category. In one incident, a child was treated in the emergency department as he pulled on the toy bar from near the product that snapped back and hit him on the eyelid with resulting stitches. One hospital admission was due to a seizure while the child was in the rocker; three children were seen by medical professionals, two of which were related alleged flathead and in the other, a child's thumb got caught between the toy bar and its socket. In another incident, a child crawled under the chair and got the strap attached to the pad and the cross brace wrapped around his neck.
- **Multiple problems from among the above:** Twenty-eight of the 1,088 incidents (3 percent) described two or more problems from the preceding product-related issues. Three deaths (including 2 due to positional asphyxia) and four injuries were reported in this category. Among the injuries, two were due to a collapsed side resulting from screws coming out, one was due to the back collapsing, and one was due to the rocker portion of the swing detaching, falling, and tipping over with the child causing a head injury.

- **Unknown:** Ten of the 1,088 incidents (< 1 percent) did not report a specific problem with an infant rocker. However, eight deaths (including 5 due to positional asphyxia) and one injury were reported in this category.

### III. Appendix

<p style="text-align: center;"><b>Infant Rocker Incidents</b>  <b>1/1/2011 - 11/7/2022*</b></p> <p style="text-align: center;">*Based on reports entered into CPSC's CPSRMS database no later than 11/7/2022.  *Disclaimer: CPSC does not guarantee the accuracy, completeness, or adequacy of these data particularly with respect to information submitted by people outside of CPSC. This spreadsheet was prepared by CPSC staff, has not been reviewed or approved by, and may not necessarily reflect the views of the Commission. Pursuant to 17 U.S.C. § 105, there is no copyright in works of the U.S. government. Therefore, this material is in the public domain and may be freely copied or reprinted.  <b>Fatalities shown in bold.</b></p>								
Index	Documents	Date	State	Age/Sex	Narrative	Hazard	Tip Over (Y-Forward/Y/N)	Severity
1	Mfr/retailer report	2/2011	NJ	6 MOM	THE CONSUMER STATED THAT HER SON'S HEAD GOES SIDE TO SIDE WHILE RECLINED IN THE SEAT DUE TO THE LACK OF A NECK SUPPORT. AS A RESULT, HE HAS PAIN IN HIS NECK. THE CHILD IS 6 1/2 MONTHS OLD AND WEIGHS ABOUT 16 POUNDS. THIS WAS NOTICED IN FEBRUARY OF 2011.	Design	N	Level of care not known
2	Mfr/retailer report	2/2011	AZ	Unk	THE CONSUMER STATED THAT THE BATTERIES LEAKED IN THE VIBRATING UNIT. AS A RESULT, SOME OF THE BATTERY ACID STAINED THE SEAT PAD.	Electrical	N	Incident, No Injury
3	Mfr/retailer report	2/2011	MI	2 MOM	THE CONSUMER STATED THAT WHEN HIS SON WAS 2 1/2 MONTHS OLD, HE NOTICED THAT THE CHILD WAS DEVELOPING A FLAT SPOT ON THE SIDE OF HIS HEAD. THE CHILD WAS TAKEN TO THE DOCTOR WHERE THEY WERE ASKED ABOUT THE BABY'S ENVIRONMENT. HE STATED THAT THEY INFORMED THE DOCTOR THAT THE BABY SITS IN THE ROCKER AND TURNS HIS HEAD TO THE RIGHT TO LOOK AT THE TOYS THAT HANG OVER THE SEAT. THE DOCTOR STATED THAT THIS MUST HAVE CAUSED THE FLAT SPOT. THEY NOW NEED THE CHILD FITTED FOR A HELMET, WHICH THEIR INSURANCE WILL NOT PAY AND IT WILL COST \$3800.	Design	N	Seen by Medical Professional
4	Mfr/retailer report 110711CBB3905	2/2011	TX	9 MOF	THE CONSUMER STATED THAT ON TWO OCCASIONS, THE ROCKER TIPPED ALL THE WAY FORWARD WHEN HER DAUGHTER ATTEMPTED TO STAND UP WHILE RESTRAINED IN THE SEAT. THE SECOND INCIDENT RESULTED IN THE CHILD RECEIVING A	Stability	Y-Forward	Level of care not known

**Staff Briefing Package: Draft NPR for Infant and Infant/Toddler Rockers | September 13, 2023 |**

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					Bruise on her right cheek. The baby is 9 months old.			
5	Mfr/retailer report 110303CBB3461	2/2011	CA	9 MO	DETECTIVE REPORTS 9 MONTH OLD CHILD SUFFERED BRAIN INJURY, PARENTS ALLEGE ROCKER TIPPING FORWARD TO BE THE CAUSE.	Stability	Y-Forward	Seen by Medical Professional
6	Mfr/retailer report	2/2011	NY	4 MOF	THE CONSUMER STATED THAT HER DAUGHTER KICKS HER FEET WHILE PLAYING IN THE SEAT. WHEN SHE KICKS, HER FEET HIT THE SIDE RAILS. AS A RESULT, SHE HAS RECEIVED BRUSIES ON BOTH OF HER PINKY TOES. THIS HAS HAPPENED IN FEBRUARY OF 2011.	Design	N	Level of care not known
7	Mfr/retailer report	3/2011	IL	Unk	THE CONSUMER STATED THAT THE BATTERIES IN THE MOTOR UNIT LEAKED. THIS HAPPENED IN MARCH OF 2011.	Electrical	N	Incident, No Injury
8	Mfr/retailer report	3/2011	MO	Unk	THE CONSUMER STATED THAT SHE WENT TO CHANGE THE BATTERIES AND ONE HAD LEAKED. THIS WAS NOTICED ON MARCH 17, 2011.	Electrical	N	Incident, No Injury
9	Mfr/retailer report	3/2011	MD	8 MOM	THE CONSUMER STATED THAT HER SON WAS ROCKING IN THE PRODUCT WHEN HE SAT FORWARD. AS A RESULT, THE ENTIRE SEAT TIPPED OVER FORWARD AND THE BABY HIT HIS HEAD ON THE FLOOR. HE IS 8 MONTHS OLD. THIS HAPPENED IN MARCH 2011.	Stability	Y-Forward	Level of care not known
10	Mfr/retailer report	3/2011	PA	6 MOM	THE CONSUMER STATED THAT HER SON SAT UP TO GRAB HIS TOES WHILE THE PRODUCT WAS IN ROCKER MODE. THE ENTIRE SEAT TIPPED FORWARD, CAUSING THE CHILD TO HIT HIS HEAD ON THE FLOOR. HE RECEIVED A COUPLE OF BUMPS ON HIS HEAD AND A BRUSH BURN ON HIS NOSE.	Stability	Y-Forward	Level of care not known
11	Mfr/retailer report	3/2011	AR	UnkM	THE CONSUMER STATED THAT HER CHILD WAS RESTRAINED IN THE CHAIR WHEN HE DROPPED A TOY AND LEANED FORWARD TO RETRIEVE IT. AS A RESULT, THE CHAIR TIPPED FORWARD AND HER CHILD'S HEAD HIT THE CARPETED FLOOR. THE KICKSTAND WAS NOT BEING USED AT THE TIME.	Stability	Y-Forward	Level of care not known
12	Mfr/retailer report	5/2011	WI	UnkF	THE CONSUMER STATED THAT HER DAUGHTER TIPPED ALL THE WAY FORWARD ON 2 DIFFERENT OCCASIONS. SHE WAS RESTRAINED AT THE TIME & THE KICKSTAND WAS	Stability	Y-Forward	Level of care not known

					NOT IN USE. AS A RESULT, SHE RECEIVED A BRUISE ON HER CHEEK.			
13	Mfr/retailer report	6/2011	CA	UnkF	THE CONSUMER STATED THAT HER DAUGHTER LEANED FORWARD AND THE CHAIR TIPPED OVER ON HER WHILE SHE WAS RESTRAINED. SHE RECEIVED A BUMP AND BRUISE ON HER FOREHEAD.	Stability	Y-Forward	Level of care not known
14	Mfr/retailer report	6/2011	NC	Unk	THE CONSUMER STATED THAT WHEN SHE WENT TO CHANGE THE BATTERIES ONE HAD LEAKED. THIS HAS HAPPENED TWICE, ONCE WITH DURACELL AND THE OTHER WITH A GENERIC ALKALINE BATTERY.	Electrical	N	Incident, No Injury
15	Mfr/retailer report	6/2011	WI	UnkM	CONSUMER STATED THAT HER SON WENT TO GET INTO THE CHAIR & HAD HIS HANDS ON THE BACK OF THE CHAIR TO TURN AROUND. THIS RESULTED IN HIM FALLING OVER THE BACK OF THE CHAIR HITTING HIS HEAD ON THE FLOOR. HE RECEIVED A BUMP ON HIS FOREHEAD & RED MARKS AROUND HIS eyes.	Unknown	N	Level of care not known
16	Mfr/retailer report	6/2011	MO	UnkM	THE CONSUMER STATED THAT THE ROCKER TIPPED ALL THE WAY FORWARD WHEN HER SON SAT UP IN THE SEAT. AS A RESULT, HE RECEIVED A SCRATCH ON HIS NOSE. THEY WERE ON A CONCRETE PORCH SURFACE. THE KICKSTAND AND TOYBAR WERE NOT IN USE AT THE TIME.	Stability	Y-Forward	Level of care not known
17	I1170298A 110715CAA3921	6/2011	CA	1 MOM	REGULATORY CONTACT I1170298A. CPSC REPORT STATED THAT THE MOTHER POSITIONED HER SON ON HIS SIDE WITH A BLANKET BEHIND HIS BACK TO HOLD HIM IN PLACE. APPROXIMATELY THREE HOURS LATER SHE FOUND HIM FACE DOWN IN THE ROCKER AND NOT BREATHING. THE MOTHER REPORTED THAT THERE WAS BLOOD ON A BLANKET THAT WAS UNDERNEATH THE INFANT WHERE HIS MOUTH HAD BEEN LOCATED. SHE SUCTIONED OUT SOME BLOODY MUCUS WITH AN UNKNOWN OBJECT. HE WAS TRANSPORTED TO THE HOSPITAL WHERE HE WAS PRONOUNCED DECEASED.	Unknown	N	Death
18	Mfr/retailer report	6/2011	CO	8 MOM	THE CONSUMER STATED THAT HER GRANDSON WAS RESTRAINED IN THE ROCKER AND HE LEANED FORWARD CAUSING THE ROCKER TO TIP OVER. HE HIT HIS MOUTH ON THE	Stability	Y-Forward	Seen by Medical Professional

					TELEVISION STAND. AS A RESULT, HE LOST ONE OF HIS BOTTOM TEETH AND THE OTHER ONE WAS PUSHED DOWN INTO HIS GUM. HE WAS TAKEN TO HOSPITAL TO BE EXAMINED.			
19	Mfr/retailer report	7/2011	AR	UnkM	THE CONSUMER STATED THAT HER GRANDSON LEANED FORWARD WHILE RESTRAINED IN THE SEAT. AS A RESULT, THE SEAT TIPPED FORWARD AND THE CHILD HIT HIS HEAD ON THE FLOOR. THE CHILD SUSTAINED A BRUISE ON HIS FOREHEAD.	Stability	Y-Forward	Level of care not known
20	Mfr/retailer report	7/2011	NJ	UnkF	THE CONSUMER STATED THAT HER DAUGHTER'S HEAD HITS INTO THE TOYBAR SOCKETS ON THE SEAT BACK TUBE.	Design	N	Level of care not known
21	Mfr/retailer report	8/2011	OH	Unk	THE CONSUMER STATED THAT THE DIFFERENT SETS OF BATTERIES LEAKED WITHIN THE BATTERY COMPARTMENT.	Electrical	N	Incident, No Injury
22	Mfr/retailer report	8/2011	WV	Unk	THE CONSUMER STATED THAT THE [redacted] BATTERIES LEAKED IN THE [redacted] TOY.	Electrical	N	Incident, No Injury
23	Mfr/retailer report 121219CCC2270	8/2011	AL	8 MOF	THE CONSUMER STATED THAT THE INFANT TO TODDLER ROCKER TIPPED OVER FORWARD WITH HER DAUGHTER RESTRAINED IN THE SEAT. HER DAUGHTER RECEIVED A BUMP AND BRUISE ON HER FOREHEAD.	Stability	Y-Forward	Level of care not known
24	Mfr/retailer report	8/2011	VT	4 MOM	CONSUMER STATED THAT WHILE HER SON WAS RESTRAINED IN THE SEAT, THE SCREWS CAME OUT OF THE CROSS BRACE CAUSING THE SIDE RAIL TO COLLAPSE. AS A RESULT, THE 4 mom FELL SIDEWAYS IN THE SEAT, HITTING HIS HEAD ON FLOOR. HE SUSTAINED BRUSH BURN ON HIS head.	Multiple	N	Level of care not known
25	Mfr/retailer report	9/2011	VA	11 MOM	THE CONSUMER STATED THAT HER SON LEANED FORWARD AND THE SEAT TIPPED FORWARD ON TOP OF HIM. AS A RESULT HE HIT HIS HEAD ON THE FLOOR. HE WAS RESTRAINED AT THE TIME.	Stability	Y-Forward	Level of care not known
26	Mfr/retailer report	10/2011	MI	Unk	THE CONSUMER STATED THAT THE BATTERY LEAKED INSIDE THE MOTOR UNIT. AS A RESULT, THE PRODUCT NO LONGER WORKS.	Electrical	N	Incident, No Injury
27	Mfr/retailer report	10/2011	OK	8 MOF	THE CONSUMER STATED THAT THE SEAT TIPPED BACKWARDS WITH HER CHILD RESTRAINED IN THE SEAT. THE SEAT WAS IN THE UPRIGHT POSITION	Stability	Y	Level of care not known

					AND THE KICKSTAND WAS OUT. AS A RESULT HER DAUGHTER HIT HER HEAD ON THE FLOOR.			
28	Mfr/retailer report	10/2011	MI	8 MOM	THE CONSUMER STATED THAT HER SON TIPPED FORWARD WHEN HE SAT UPRIGHT IN THE SEAT. AS A RESULT, THE PRODUCT TIPPED FORWARD WITH THE CHILD STILL RESTRAINED IN THE SEAT. THE CHILD RECEIVED A BUMP AND BRUISE ON HIS HEAD.	Stability	Y-Forward	Level of care not known
29	Mfr/retailer report	10/2011	IL	UnkF	THE FOLLOWING WAS REPORTED TO US BY E-MAIL. THE CONSUMER STATED THAT HER CHILD KEEPS BUMPING HER HEAD ON THE HOUSING WHERE THE TOYBAR ATTACHES.	Design	N	Level of care not known
30	Mfr/retailer report	11/2011	FL	6 MOM	THE CONSUMER STATED THAT THE ROCKER TIPPED ALL THE WAY FORWARD. AS A RESULT, HER SON LANDED FACE DOWN ON THE TILE FLOOR AND HIS UPPER GUMS WERE BLEEDING. THE KICKSTAND WAS NOT IN USE AT THE TIME. THIS OCCURRED IN NOVEMBER OF 2011. IN JANUARY 2012, THE ROCKER TIPPED ALL THE WAY SIDEWAYS WHICH ALSO RESULTED IN HER SON HITTING HIS MOUTH ON THE FLOOR CAUSING HIS UPPER GUMS TO BLEED. THE KICKSTAND WAS IN USE AT THE TIME.	Stability	Y	Level of care not known
31	Mfr/retailer report	11/2011	MD	11 MOM	THE CONSUMER STATED THAT HIS SON REACHED FOR THE FAMILY DOG WHILE SITTING IN THE SEAT. AS A RESULT, THE ROCKER TIPPED FORWARD, CAUSING THE CHILD TO HIT HIS HEAD ON THE FLOOR. THE CHILD RECEIVED A BUMP ON THE RIGHT SIDE OF HIS HEAD. THE NEXT DAY, CONSUMER NOTICED THAT THE CHILD HAD BLOOD BLISTER ON THE LEFT SIDE OF HIS HEAD. THE CHILD WAS TAKEN TO THE DOCTOR WHO STATED THAT CHILD WAS OKAY. THE CONSUMER REQUESTED TO BE COMPENSATED FOR THE CHILD'S INJURY, PAIN, AND SUFFERING.	Stability	Y-Forward	Seen by Medical Professional
32	I11B0261A	11/2011	CA	7 MOM	THE CONSUMER STATED THAT WHILE RESTRAINED, HER CHILD LEANED FORWARD AND TIPPED FORWARD ONTO THE BATHROOM RUG. AS A RESULT, HE SUSTAINED A BUMP AND ABRASIONS ON THE LEFT SIDE OF HIS FOREHEAD ABOVE HIS EYEBROW. UPDATE 11/2011 JR RECEIVED REGULATORY CONTACT #20111111-FC09E-2147473404. THE CONSUMER REPORTED TO THE CPSC PUBLIC	Stability	Y-Forward	Seen by Medical Professional



					DATABASE THAT THE CHILD WAS TAKEN TO A DOCTOR'S OFFICE TO BE CHECKED FOR A CONCUSSION WITHIN HOURS OF THE INCIDENT.			
33	Mfr/retailer report	11/2011	IA	6 MOM	THE CONSUMER STATED THAT HER SON SAT UPRIGHT AND HIT THE CORNER OF HIS RIGHT EYE ON THE EMPTY TOYBAR SOCKET. AS A RESULT, HE SUSTAINED A RED MARK TO THE RIGHT SIDE OF HIS RIGHT EYE.	Design	N	Level of care not known
34	Mfr/retailer report	11/2011		15 MOM	CPSC REPORT STATED THAT THE CONSUMER'S 15 MONTH OLD CHILD WAS RESTRAINED INTO THE SEAT AND LEANED FORWARD TO RETRIEVE A BOOK HE HAD DROPPED WHEN THE CHAIR TIPPED OVER. THE CHILD RECEIVED A BUMP ON HIS FOREHEAD. THE NEXT DAY, HE LEANED BACK SUDDENLY, CAUSING THE CHAIR TO TIP BACKWARD AND HE BUMPED THE BACK OF HIS HEAD ON THE FLOOR.	Stability	Y-Forward	Level of care not known
35	I11B0683A	11/2011	FL	15 MOM	My 15 month old son was sitting in a rocker when he dropped his book, when he tried to lean forward to get it since he was strapped to the chair the chair lost balance and he fell with the rocking chair landing on top of him. He got a bump on his forehead.  The next day he went to sit in the same chair and leaned back too suddenly making the chair tilt back and he bumped the back of his head on the floor.	Stability	Y-Forward	First Aid Received by Non-Medical Professional
36	Mfr/retailer report	1/2012	NY	UnkF	THE CONSUMER EXPRESSED CONCERN THAT HER DAUGHTER HITS HER LEGS ON THE FOOTREST TUBE EVERY TIME SHE KICKS HER LEGS.	Design	N	Level of care not known
37	Mfr/retailer report 131031CCC3091	1/2012	CA	7 MOM	AGE AT THE TIME OF INCIDENT: 0YEAR(S) 7MONTH(S); WEIGHT AT THE TIME OF INCIDENT: 16LBS 0OZ; GENDER: MALE; DATE OF INCIDENT: 01/2012; INJURY FLAG : YES; INJURY # 1 INJURY TYPE : BUMPS/CONTUSION/BRUISE; INJURY LOCATION : HEAD/NECK : HEAD/NECK; COURSE OF ACTION TYPE : NO FIRST AID; COURSE OF ACTION DESCRIPTION : NO FIRST AID; EVENT DESCRIPTION : THE CONSUMER STATED THAT WHILE HER SON WAS RESTRAINED IN THE PRODUCT HE LEANED FORWARD, HIS UPPER BODY WENT OVER THE FRONT OF THE PRODUCT, AND HIS HEAD HIT THE LINOLEUM FLOOR. AS A RESULT, HE	Stability	N	Level of care not known

					RECEIVED A BRUISE ON HIS FOREHEAD. SHE STATED THAT THE PAD WAS EXTENDED COMPLETELY FORWARD AND THE PRODUCT REMAINED UPRIGHT. THE CHILD WAS HELD INTO THE PRODUCT BY THE RESTRAINT STRAPS, WHICH HELD HIM IN AT THE THIGHS.			
38	Mfr/retailer report	1/2012	NY	10 MOM	THE CONSUMER STATED THAT HER SON'S UPPER BODY WENT OVER THE SIDE OF THE SEAT. AS A RESULT, HE HIT HIS CHIN AND SUSTAINED A CUT. THE SEAT WAS IN THE UPRIGHT POSITION, THE CHILD WAS RESTRAINED AND THE KICKSTAND WAS NOT IN USE.	Design	N	Level of care not known
39	H1230012A 120302CNE0003	1/2012		14 MOM	She put her grandson in the rocker. At 14 months old, the baby was rocking on the product when it flipped over backwards. The baby hit his head and got a bump. The consumer says that the baby only weighs 25 lbs. The consumer sent the manufacturer an email three weeks ago and they have yet to respond. The consumer says that the rocker leg should have more of an arch to it to prevent a fall hazard.	Stability	Y	Level of care not known
40	Mfr/retailer report	2/2012	PA	7 MOM	THE CONSUMER STATED THAT HIS SON SWIVELED THE MOBILE AWAY AND REACHED FOR THE TOYS. AS A RESULT, HIS UPPER BODY FELL OVER THE LEFT SIDE OF THE SEAT WHILE HIS LOWER HALF WAS STILL RESTRAINED TO THE PAD. HIS BODY HAD ALSO TURNED TO FACE THE OPPOSITE DIRECTION. THE CHILD RECEIVED A RED MARK ON THE RIGHT SIDE OF HIS HEAD NEAR HIS TEMPLE.	Design	N	Level of care not known
41	Mfr/retailer report	3/2012	CO	Unk	THE CONSUMER STATED THAT THEIR [redacted] BATTERIES LEAKED INSIDE THE MOTOR HOUSING WHILE IN STORAGE.	Electrical	N	Incident, No Injury
42	Mfr/retailer report	3/2012	KY	6 MOM	THE CONSUMER STATED THAT HER SON FELL FORWARD WHILE RESTRAINED IN THE PRODUCT AND HIT HIS HEAD ON A CARPETED SURFACE. THE PRODUCT WAS BEING USED IN THE ROCKER MODE AT THE TIME. HE RECEIVED A RED MARK ON HIS FOREHEAD.	Stability	Y-Forward	Level of care not known

43	I1140149A 110408CBB2452	3/2011	MI	5 MOF	My infant was in the rocker with the kickstand up (so it can rock), she was properly strapped in and the rocker was sitting on a level carpeted surface. She cannot sit up by herself, she needs support. I left the room for approximately 2-3 minutes. I heard a quiet cough that didn't sound right so I ran back into the room to see if anything was wrong. She was dangling over the edge of the front of the rocker by one of her thighs, held in the strap. The rocker was not tipped over, but balancing on the front. She was bright red, turning blue and not breathing well because she was doubled over on herself. I quickly untangled her and checked her over. Her leg had red strap burns, but no bruising. I think I'm more traumatized emotionally, especially because she can't really move about yet and this happened. I just wanted to pass this along so others are aware that this could happen.	Stability	N	No First Aid or Medical Attention Received
44	Mfr/retailer report	4/2012	LA	Unk	THE CONSUMER STATED THAT THE BATTERY LEAKED IN THE VIBRATING UNIT. THE DETAILS AND DATE OF INCIDENT WERE UNKNOWN.	Electrical	N	Incident, No Injury
45	Mfr/retailer report	4/2012	FL	UnkF	THE FOLLOWING WAS REPORTED TO US BY E-MAIL. THE CONSUMER STATED THAT THE CHILD WAS RESTRAINED IN THE PRODUCT IN ROCKER MODE AND SHE LEANED FORWARD CAUSING IT TO TIP OVER FORWARD. THE CHILD HIT HER FACE ON THE FLOOR.	Stability	Y-Forward	Level of care not known
46	Mfr/retailer report 121001HCC2003	4/2012		2 MOF	AGE AT THE TIME OF INCIDENT: 0YEAR(S) 1MONTH(S); WEIGHT AT THE TIME OF INCIDENT: 0LBS 0OZ; GENDER: FEMALE; DATE OF INCIDENT: 04/2012; INJURY FLAG : YES; INJURY # 1 INJURY TYPE : NO INJURY; INJURY LOCATION : NO LOCATION : NO DETAIL; COURSE OF Action Description : Other : Alleged death; Event Description : Regulatory contact 121001HCC2003. CPSC Report stated that an eleven-week-old female dies from positional asphyxia when she was found face down in soft bedding within an infant bouncer/ rocker seat. The bouncer/rocker was covered with soft bedding materials, including two infant pillows, a folded sheet and fleece infant blankets. In addition, the bouncer seat was damaged and was being propped up with a cardboard shoe box. The infant was unrestrained while sleeping in the seat.	Multiple	N	Death

Staff Briefing Package: Draft NPR for Infant and Infant/Toddler Rockers | September 13, 2023 |

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47	Mfr/retailer report	4/2012	NY	7 MOF	THE CONSUMER EXPRESSED CONCERN THAT HER DAUGHTER HAS HIT HER HEAD ON THE PLASTIC THAT THE TOY BAR ATTACHES TO. THIS HAS HAPPENED THREE TIMES.	Design	N	Level of care not known
48	Mfr/retailer report 121206HCC1301	4/2012	FL	7 MOF	THE CONSUMER STATED THAT HER DAUGHTER LEANED FORWARD IN THE SEAT. AS A RESULT, THE INFANT TO TODDLER ROCKER TIPPED FORWARD ON TOP OF HER AND SHE HIT HER HEAD ON THE FLOOR, RECEIVING A BRUISE. SHE WAS RESTRAINED AT THE TIME. THE CONSUMER MIGHT TAKE HER TO THE DOCTOR TO BE EXAMINED.	Stability	Y-Forward	Level of care not known
49	Mfr/retailer report	5/2012	IL	Unk	THE CONSUMER STATED THAT BATTERIES SHE WAS USING IN THE ROCKER'S VIBRATING UNIT LEAKED OUTSIDE THE BATTERY COMPARTMENT AND ONTO HER CARPET. SHE IS UNABLE TO REMEMBER WHEN SHE FIRST NOTICED THE LEAKAGE.	Electrical	N	Incident, No Injury
50	Mfr/retailer report 121217HCC1341	5/2012	FL	8 MOM	THE CONSUMER STATED THAT THE SEAT TIPPED FORWARD WHILE HER SON WAS IN THE PRODUCT. THE PRODUCT WAS BEING USED IN THE ROCKER MODE AND THE CHILD WAS RESTRAINED AT THE TIME. AS A RESULT, THE CHILD RECEIVED A CUT ON THE INSIDE OF HIS TOP LIP. HE ALSO HAS A BRUISE ON THE AREA.	Stability	Y-Forward	Level of care not known
51	Mfr/retailer report	5/2012	WI	10 MOM	THE FOLLOWING WAS REPORTED TO US BY E-MAIL. THE CONSUMER STATED THAT THE CHILD WAS RESTRAINED IN THE SEAT AND LEANED FORWARD CAUSING THE CHAIR TO TIP OVER. THE CHILD HAD A BLOODY LIP. UPDATE 5/2012 AG THE CONSUMER CALLED BACK IN RESPONSE TO OUR E-MAIL. SHE STATED THAT WHEN THE CHAIR TIPPED FORWARD THE CHILD FELL FACE FIRST ONTO A HARDWOOD FLOOR. HIS PACIFIER WAS IN HIS MOUTH AND SHE WAS UNSURE IF HIS TOOTH OR THE PACIFIER HAD CUT HIS UPPER LIP.	Stability	Y-Forward	Level of care not known
52	Mfr/retailer report 220324CAA1263	5/2012	KY	11 MOM	THE CONSUMER STATED THAT HER SON WAS NAPPING IN THE ROCKER AND SHE LEFT THE ROOM TO USE THE RESTROOM. WHEN SHE CAME BACK, SHE FOUND THAT THE CHILD HAD AWAKENED AND SAT UP IN THE SEAT AND HAD SLUMPED FORWARD, WITH HIS HEAD POSITIONED OVER THE FRONT OF THE SEAT. THE CHILD HAD	Stability	N	Level of care not known

					TURNED DARK RED AND WAS MAKING GRUNTING NOISES BUT WAS UNABLE TO MOVE OR LIFT HIMSELF BACK UP. THE SEAT WAS BEING USED IN ROCKER MODE AT THE TIME. THE CHILD WAS RESTRAINED TO THE SEAT WHICH CAUSED THE FABRIC PAD TO LIFT UPWARD.			
53	Mfr/retailer report	6/2012	NJ	Unk	THE CONSUMER STATED THAT WHEN SHE OPENED THE BATTERY COMPARTMENT SHE DISCOVERED THAT THE [redacted] BATTERY HAD LEAKED AND CORRODED INSIDE THE COMPARTMENT AND THAT SOME OF THE SUBSTANCE HAD ALSO LEAKED OUTSIDE THE COMPARTMENT. SHE DISCARDED THE BATTERY.	Electrical	N	Incident, No Injury
54	Mfr/retailer report	7/2012	UT	10 MOM	Product in consumer possession : Yes; Age at the time of incident: 0Year(s) 10Month(s); Weight at the time of incident: 20lbs 10oz; Gender: Male; Date Of Incident: 07/2012; Injury flag : Yes; Injury # 1 Injury Type : Other : bloody nose; Injury Location : Head/Neck : Nose; Course Of Action Type : No First Aid; Course Of Action Description : No First Aid; Event Description : The consumer stated that the product tipped over forward while her son was restrained in the rocker mode. He was reaching forward at the time for a toy that he had dropped. He hit his nose when his face landed on the floor.	Stability	Y-Forward	No First Aid or Medical Attention Received
55	Mfr/retailer report	7/2012	RI	7 MOF	Product in consumer possession : Yes; Age at the time of incident: 0Year(s) 7Month(s); Weightat the time of incident: 19lbs 6oz; Gender: Female; Date Of Incident: 07/2012; Injuryflag : Yes; Injury # 1 Injury Type : Bumps/Contusion/Bruise; Injury Location : Head/Neck :Head/Neck; Course Of Action Type : No First Aid; Course Of Action Description : No First Aid;Event Description : The consumer stated that her daughter leaned forward while restrained inthe seat. The seat stayed upright but the seat pad pulled away from the frame and her daughterwas face down on the floor. She received a bump on her forehead. The kickstand was not in useat the time.	Stability	N	No First Aid or Medical Attention Received

56	Mfr/retailer report 150608CCC3662	8/2012	KS	6 MOF	Age at the time of incident: 0Year(s) 6Month(s) / Weight at the time of incident: 19lbs 0oz / Gender: Female / Date Of Incident: 08/2012 / Injury flag : Yes / Injury # 1 / Injury Type : Abrasion/Scratch/Scrape / Injury Location : Head/Neck : Lip / Course Of Action Type : No First Aid / Course Of Action Description : No First Aid / Event Description : The consumer stated that the Infant to Toddler Rocker has tipped over on its side, forward and backwards on numerous occasions since 08/2012. She stated that in one instance the baby received a cut on her lip.	Stability	Y	No First Aid or Medical Attention Received
57	Mfr/retailer report	8/2012	CA	Unk	PRODUCT IN CONSUMER POSSESSION ; ; AGE AT THE TIME OF INCIDENT: YEAR(S) MONTH(S); WEIGHT AT THE TIME OF INCIDENT: 0LBS 0OZ; GENDER: ; DATE OF INCIDENT: ; INJURY FLAG : NO; EVENT DESCRIPTION : THE CONSUMER STATED THAT A BATTERY HAD LEAKED IN THE BATTERY COMPARTMENT.	Electrical	N	Incident, No Injury
58	Mfr/retailer report	9/2011	VA	2 MOF	THE CONSUMER STATED THAT HER 2 MONTH OLD CHILD WAS RESTRAINED IN THE ROCKER SEAT WHEN THE BACK COLLAPSED AND THE CHILD FELL BACKWARDS. THE CHILD WAS TAKEN TO THE EMERGENCY ROOM WHERE SHE WAS EXAMINED AND RELEASED. WHILE AT THE HOSPITAL, AN X-RAY WAS TAKEN OF THE CHILD'S BACK.	Multiple	N	Emergency Department Treatment Received
59	Mfr/retailer report	8/2012	FL	UnkM	PRODUCT IN CONSUMER POSSESSION : YES; AGE AT THE TIME OF INCIDENT: YEAR(S) MONTH(S); WEIGHT AT THE TIME OF INCIDENT: 0LBS 0OZ; GENDER: MALE; DATE OF INCIDENT: ; INJURY FLAG : NO; EVENT DESCRIPTION : THE FOLLOWING WAS REPORTED TO US BY E-MAIL. THE CONSUMER STATED THAT THE BATTERY IN THE VIBRATING UNIT LEAKED. THE BATTERY FLUID LEAKED OUT OF THE BATTERY COMPARTMENT ONTO OTHER TOYS IN HER PLAYROOM.	Electrical	N	Incident, No Injury

60	Mfr/retailer report	8/2012	NY	11 MOM	Product in consumer possession : Yes; Age at the time of incident: 0Year(s) 11Month(s); Weight at the time of incident: 25lbs 0oz; Gender: Male; Date Of Incident: 08/2012; Injury flag : Yes; Injury # 1 Injury Type : Bumps/Contusion/Bruise; Injury Location : Head/Neck : Eye; Course Of Action Type : No First Aid; Course Of Action Description : No First Aid; Event Description : The following report was received via email: The consumer stated that her son was in the Infant to Toddler Rocker with the kickstand in place. He leaned forward and the chair tipped all the way forward. As a result, he landed face first on the ground and received an injury under his eye. Update 9/2012 AG The consumer called back in response to our e-mail. She stated that when the product tipped forward with her son in it, he fell onto a carpeted surface and received a bruise under his right eye.	Stability	Y-Forward	No First Aid or Medical Attention Received
61	Mfr/retailer report	9/2012	OK	Unk	AGE AT THE TIME OF INCIDENT: 0YEAR(S) 0MONTH(S); WEIGHT AT THE TIME OF INCIDENT: 0LBS 0OZ; GENDER: ; DATE OF INCIDENT: 09/2012; INJURY FLAG : NO; EVENT DESCRIPTION : THE CONSUMER STATED THAT HE BELIEVES HIS DAUGHTER STORED THE PRODUCT IN A HOT CAR WITH THE BATTERIES INSIDE THE VIBRATING MOTOR. THE BATTERIES LEAKED INSIDE THE COMPARTMENT.	Electrical	N	Incident, No Injury
62	Mfr/retailer report	10/2012	IL	7 MOF	AGE AT THE TIME OF INCIDENT: YEAR(S) 7MONTH(S); WEIGHT AT THE TIME OF INCIDENT: 18LBS 0OZ; GENDER: FEMALE; DATE OF INCIDENT: 10/2012; INJURY FLAG : NO; EVENT DESCRIPTION : THE CONSUMER STATED THAT HER DAUGHTER WAS ROCKING IN THE SEAT WHEN THE ENTIRE ROCKER TIPPED ALL THE WAY FORWARD. SHE LANDED FACE DOWN ON THE CARPETED FLOOR. THE RESTRAINTS WERE IN USE BUT THE KICKSTAND WAS NOT.	Stability	Y-Forward	Level of care not known

63	Mfr/retailer report	10/2012	MD	Unk	AGE AT THE TIME OF INCIDENT: 0YEAR(S) 0MONTH(S); WEIGHT AT THE TIME OF INCIDENT: 0LBS 0OZ; GENDER: ; DATE OF INCIDENT: 10/2012; INJURY FLAG : NO; EVENT DESCRIPTION : THE CONSUMER STATED THAT SHE RECEIVED THE PRODUCT SECONDHAND. WHEN SHE OPENED THE BATTERY COMPARTMENT SHE DISCOVERED THAT THE PRODUCT HAD BEEN STORED WITH A BATTERY IN IT AND THE COMPARTMENT HAD CORRODED.	Electrical	N	Incident, No Injury
64	I1310813A	11/2012	MD	5 MOM	The [redacted] rocker has metal parts that hold the toy bar in place. These two metal parts stick out on the side of the seat, despite pictures showing otherwise. My infant son who likes to try to sit up has hit his head several times on these metal parts often hurting himself. As infants learn to sit they often tend to lean to one side or another and then try to regain their balance. Again, in doing so, my infant son has hit his head several times against the metal parts on the sides of this seat, and pretty hard in some cases that it left a mark on his head. They should have designed the seat similar to the original infant to toddler seat which poses no such danger to infants.	Design	N	No First Aid or Medical Attention Received
65	I12B0391A	11/2012		5 MOM	My 5mth old (19lbs) was playing in the rocker beside me while I bathed our older child in the bathroom. Next thing I know, I hear a bang and look to find the rocker chair flipped with my son under neath it, still strapped in, face down, arms out.	Stability	Y	No First Aid or Medical Attention Received
66	Mfr/retailer report	11/2012	NY	10 MOM	Age at the time of incident: Year(s) 10Month(s); Weight at the time of incident: 21lbs 0oz; Gender: Male; Date Of Incident: 11/2012; Injury flag : No; Event Description : The consumer stated that while her son was restrained in the rocker he leaned forward and the product tipped forward with him in it. As a result, he hit his head on the floor and the rocker fell on top of him. She was upset because she saw other incidents with the product on [redacted]. She put her son back in the product and he leaned forward causing the product to tip forward again. She immediately took him out of the product.	Stability	Y-Forward	Level of care not known



67	Mfr/retailer report 131101CCC3094	11/2012	CA	9 MOM	Age at the time of incident: 0Year(s) 9Month(s); Weight at the time of incident: 18lbs 0oz; Gender: Male; Date Of Incident: 11/2012; Injury flag : No; Injury # 1 Injury Type :Laceration/Cut; Injury Location : Head/Neck : Lip; Course Of Action Type : First Aid; CourseOf Action Description : Cleaning, flushing or soaking wounds on the surface of the skin.;Event Description : The consumer stated that when his son leaned forward while restrained inthe seat, the seat tipped over forward onto the carpet. His upper, inner lip was cut by histeeth. The consumer cleaned the cut and stated that it was continuing to bleed.	Stability	Y-Forward	First Aid Received by Non-Medical Professional
68	Mfr/retailer report	11/2012		UnkM	HER INFANT SON WAS BUCKLED IN AND ON A FLAT TILE SURFACE. HE LEANED FORWARD AND THE CHAIR FLIPPED FORWARD CAUSING HIM TO HIT HIS FACE ON SHOWER DOOR AND PINNING HIM UNDER THE CHAIR FACE- DOWN. / DAMAGES CLAIMED: HE WAS BRUISED AND TERRIFIED. / PRODUCT: INFANTS FURNITURE	Stability	Y-Forward	No First Aid or Medical Attention Received
69	Mfr/retailer report	12/2012	IA	1 MOM	AGE AT THE TIME OF INCIDENT: 0YEAR(S) 1MONTH(S); WEIGHT AT THE TIME OF INCIDENT: 9LBS 0OZ; GENDER: MALE; DATE OF INCIDENT: 12/2012; INJURY FLAG : NO; EVENT DESCRIPTION : THE CONSUMER STATED THAT THE BATTERY COMPARTMENT IS RUSTY. SHE WAS USING A [redacted] BATTERY.	Electrical	N	Incident, No Injury
70	Mfr/retailer report 140311CCC2445	12/2012	IN	8 MOF	AGE AT THE TIME OF INCIDENT: 0YEAR(S) 8MONTH(S); WEIGHT AT THE TIME OF INCIDENT: 17LBS 0OZ; GENDER: FEMALE; DATE OF INCIDENT: 12/2012; INJURY FLAG : YES; INJURY # 1 INJURY TYPE : RED MARK; INJURY LOCATION : HEAD/NECK : FACE; COURSE OF ACTION TYPE : NO FIRST AID; COURSE OF ACTION DESCRIPTION : NO FIRST AID; EVENT DESCRIPTION : THE CONSUMER STATED THAT HER DAUGHTER FELL FORWARD IN THE CHAIR AND LANDED WITH HER FACE ON THE GROUND. THE CHAIR STAYED UPRIGHT AND SHE REMAINED RESTRAINED. HER DAUGHTER SUSTAINED A RED MARK ON HER RIGHT CHEEK.	Stability	Y-Forward	No First Aid or Medical Attention Received

71	Mfr/retailer report	1/2013	WV	Unk	Age at the time of incident: 0Year(s) 0Month(s) / Weight at the time of incident: 0lbs 0oz /Gender: / Date Of Incident: 01/2013 / Injury flag : No / / Event Description : Theconsumer stated that she stored the product with batteries in the battery compartment. Whenshe removed it from storage, she noticed that the batteries had leaked in the compartment andthe springs had corroded. She is unsure what type of batteries were in the product. // Thebaby was not born at the time of the incident.	Electrical	N	Incident, No Injury
72	I1310097A 130114CCC3319	1/2013	CA	7 MOM	My 7 month old infant son plays in his [redacted] rocker almost everyday. In 01/2013 he was sitting as he usually does wearing his seat belt. He found something interesting that he wanted to catch and started sitting up and leaned forward to grab and eventually fell face down on hard wood flooring bumping his still to mature skull to the ground . Needless to say that this incident was painful for him and more so for us as parents.  It seems [redacted] did not invest enough time and resources in the design of this baby gear as it is certainly not suitable for babies who are learning to sit up and get attracted to every thing around them.  I have tried contacting the manufacturer with the details of this incident but have not seen a response as yet from their side.  I would strongly recommend a recall of this product and compensation for all affected parents / families as there have been complaints from other parents as well of babies falling down. One of the customers has even commented this on [redacted]'s webpage where this product is listed.  Here is a link for reference : [redacted]	Stability	Y-Forward	First Aid Received by Non-Medical Professional
73	Mfr/retailer report	1/2013		UnkM	Age at the time of incident: 0Year(s) 0Month(s); Weight at the time of incident: 0lbs 0oz;Gender: ; Date Of Incident: ; Injury flag : Yes; Injury # 1 Injury Type :Bumps/Contusion/Bruise; Injury Location : No Location : No Detail; Course Of Action Type : NoFirst Aid; Course Of Action Description : No First Aid; Event Description : The followingreport was received via email from a [redacted]. The consumer statedthat the product tipped over forward while her son was restrained in the product. He hit hisface on the	Stability	Y-Forward	No First Aid or Medical Attention Received

					shower door and was pinned under the product face down. He received a bruise, however no location was noted. The date of incident was not disclosed.			
74	H1310253A 130204CBB1513	1/2013	NJ	8 MOF	<p>The consumer stated that her 8 months old daughter (18 lbs) on the Infant to toddler rocker and the rocker turned over. The consumer stated that her daughter was sitting on the rocker and sat forward which made the rocker flipped over landing on top of her.</p> <p>The consumer stated that she immediately grab the baby and took her off out from the rocker. The consumer stated that the baby hit her head on the carpet. She stated that baby only suffered a red mark on her forehead which came off approximately 1 hour later. The consumer stated that she did not have to take the baby to the hospital.</p> <p>She stated that she had not used the rocker since the incident. The consumer stated that she those not feel safe placing her daughter on the rocker since it advertized that it holds up to 40 pounds and it could not hold her 18lbs baby.</p> <p>The consumer stated that this was not the first time the incident happened.</p> <p>The consumer believes this product should be investigated for the safety hazard that it poses to the children.</p>	Stability	Y-Forward	First Aid Received by Non-Medical Professional
75	Mfr/retailer report	2/2013	GA	8 MOF	<p>AGE AT THE TIME OF INCIDENT: YEAR(S) 8MONTH(S); WEIGHT AT THE TIME OF INCIDENT: 15LBS 0OZ; GENDER: FEMALE; DATE OF INCIDENT: 02/2013; INJURY FLAG : NO; EVENT DESCRIPTION : THE CONSUMER STATED THAT THE VIBRATING UNIT HAS MELTED INSIDE THE BATTERY COMPARTMENT AND AROUND THE ON/OFF SWITCH. [redacted] BATTERIES WERE BEING USED IN THE PRODUCT. THIS WAS NOTICED WHEN THE PRODUCT WAS TURNED OFF. N/A</p>	Electrical	N	Incident, No Injury

76	Mfr/retailer report 140311CCC2443	1/2013	IL	5 MOM	AGE AT THE TIME OF INCIDENT: YEAR(S) 5MONTH(S); WEIGHT AT THE TIME OF INCIDENT: 16LBS 0OZ; GENDER: MALE; DATE OF INCIDENT: 01/2013; INJURY FLAG : YES; INJURY # 1 INJURY TYPE : ABRASION/SCRATCH/SCRAPE; INJURY LOCATION : HEAD/NECK : FACE; COURSE OF ACTION TYPE : NO FIRST AID; COURSE OF ACTION DESCRIPTION : NO FIRST AID; EVENT DESCRIPTION : THE FOLLOWING REPORT WAS RECEIVED VIA EMAIL: THE CONSUMER STATED THAT HER 5 MONTH OLD SON FLIPPED OUT OF THE INFANT TO TODDLER ROCKER AND LANDED ON THE FLOOR. SHE STATED HE SUSTAINED RUG BURN FROM THE INCIDENT. UPDATE 01/2013 TS THE CONSUMER CALLED US BACK IN RESPONSE TO OUR EMAIL. SHE STATED THAT HER SON SUSTAINED A RUG BURN ON HIS FACE. THE RESTRAINT STRAPS WERE IN USE AT THE TIME AND THE CONSUMER STATED THAT THE KICK STAND WAS UP WHILE HER SON WAS USING IT.	Stability	Y	No First Aid or Medical Attention Received
77	Mfr/retailer report 131101CCC1114	2/2013	NY	10 MOM	Age at the time of incident: 0Year(s) 10Month(s); Weight at the time of incident: 25lbs 0oz; Gender: Male; Date Of Incident: 02/2013; Injury flag : Yes; Injury # 1 Injury Type : Red Mark; Injury Location : Torso : Front; Course Of Action Type : First Aid; Course Of Action Description : Preliminary examination.; Event Description : The consumer stated that his son's head was on the floor when the seat tipped forward. Update - SMK: The consumer told me that the child had a red mark on his stomach and took him to the doctor, who confirmed there were no further injuries.	Stability	Y-Forward	Seen by Medical Professional
78	Mfr/retailer report	2/2013	AR	2 YOF	Age at the time of incident: 2Year(s) 9Month(s) / Weight at the time of incident: 18lbs 11oz / Gender: Female / Date Of Incident: 02/2013 / Injury flag : Yes / / / Injury # 1 / Injury Type : Bumps/Contusion/Bruise / Injury Location : Head/Neck : Head/Neck / Course Of Action Type : No First Aid / Course Of Action Description : No First Aid / / Event Description :	Stability	Y-Forward	No First Aid or Medical Attention Received

					The consumer stated that his daughter with special needs was in the rocker and it tipped over forward. She received a bruise on her forehead.			
79	Mfr/retailer report	3/2013	TX	5 MOM	Age at the time of incident: 0Year(s) 5Month(s); Weight at the time of incident: 0lbs 0oz; Gender: Male; Date Of Incident: 03/2013; Injury flag : Yes; Injury # 1 Injury Type: Other : no details provided; Injury Location : Head/Neck : Face; Course OfAction Type : No First Aid; Course Of Action Description : No First Aid; Event Description: Received regulatory contact 20130523-4B314-2147455828 . The CPSC report stated that thechild, who is learning to sit up unassisted, was restrained in the product and it tipped overfrontwards. The child received a minor injury on his face. No other details were provided aboutthe injury. Updated 8/2013: Received Regulatory Contact # 130605CCC1846 regarding theincident described in safety summary.	Stability	Y-Forward	Level of care not known
80	Mfr/retailer report	3/2013	OH	Unk	AGE AT THE TIME OF INCIDENT: 0YEAR(S) 0MONTH(S); WEIGHT AT THE TIME OF INCIDENT: 0LBS 0OZ; GENDER: ; DATE OF INCIDENT: 03/2013; INJURY FLAG : NO; EVENT DESCRIPTION : THE CONSUMER STATED THAT BATTERIES LEAKED IN THE VIBRATING UNIT.	Electrical	N	Incident, No Injury
81	Mfr/retailer report	3/2013	IL	Unk	Age at the time of incident: Year(s) Month(s); Weight at the time of incident: 0lbs 0oz; Gender: ; Date Of Incident: 03/2013; Injury flag : No; Event Description : The following report was received via email: The consumer stated that the motor burned out on the rocker; he found black soot at the end of the motor and said it was not responsive to fresh batteries.	Electrical	N	Incident, No Injury
82	Mfr/retailer report 220720CBB3191	4/2013	AZ	2 MOM	CONSUMER REPORTED TO CONSUMER SERVICES THAT HER SON WAS FED AND THEN PLACED IN THE INFANT TO TODDLER ROCKER. THE RESTRAINT WAS NOT IN USE. AFTER AN UNKNOWN AMOUNT OF TIME, THEY FOUND HIM IN THE PRODUCT, AND HE HAD PASSED AWAY. THE CONSUMER DID NOT KNOW WHAT POSITION HE WAS IN OR HOW LONG HE HAD BEEN IN THE PRODUCT.	Unknown	N	Death

83	I1340173A	4/2013	NC	9 MOM	My son leaned too far forward in his [redacted] rocker and fell out, pulling the chair down on top of him because he was buckled in. He was very startled and seemed to have lightly bumped his head in the front (on the floor?) and in the back (from struggling under the chair and/or the metal bar which forms the top frame of the chair swinging down onto him? We are uncertain because it happened very quickly and my husband did not see the actual flip occur, and as soon as he turned his head, our son seemed to be entirely under the chair rather than having the top part on top of his head or anything). There was a quickly fading red spot in both the front and the back of his head, which is why we assume he bumped it. We did not seek medical attention because he did not seem to have a lasting bump or bruise, was not knocked out, and didn't seem to be acting funny afterwards. The chair was in the stationary seat position at the time (not rocker position) and the seat back was upright. The instructions say to buckle a child in until s/he is old enough to get in and out of the chair on his/her own. My son is 9 mo. old and can sit independently but cannot yet walk or get in and out of a chair, so we were using the buckle, as instructed. Interestingly BOUNCERS say not to use them after the child can sit independently--but this chair is supposed to be safe from birth all the way through toddlerhood to 40 lbs. We are now putting the chair away until our son is old enough to use without the belt.	Stability	Y-Forward	No First Aid or Medical Attention Received
84	Mfr/retailer report	4/2013	WA	5 MO	AGE AT THE TIME OF INCIDENT: YEAR(S) 5MONTH(S); WEIGHT AT THE TIME OF INCIDENT: 0LBS 0OZ; GENDER: MALE; DATE OF INCIDENT: 04/2013; INJURY FLAG : NO; EVENT DESCRIPTION : THE FOLLOWING REPORT WAS RECEIVED VIA EMAIL: THE CONSUMER STATED THAT THE INSIDE OF THE BATTERY COMPARTMENT IS RUSTED. SHE SAID THE BATTERY COMPARTMENT WAS EMPTY WHILE IN STORAGE. UPDATE 4/2013 TM THE CONSUMER CALLED US BACK IN RESPONSE TO OUR EMAIL. SHE STATED THAT THE BATTERY COMPARTMENT WAS CLEAN WHEN REMOVED FROM STORAGE. SHE THEN PUT FRESH BATTERIES IN AND BEGAN USE. WHEN THE PRODUCT STOPPED TURNING ON, SHE OPENED THE	Electrical	N	Incident, No Injury

					COMPARTMENT AND FOUND THE RUST.			
85	Mfr/retailer report	4/2013	PA	Unk	Age at the time of incident: Year(s) Month(s) / Weight at the time of incident: 0lbs 0oz / Gender: / Date Of Incident: / Injury flag : No /// Event Description : The consumer stated that the battery included with the product leaked. // Update 05/2013 // The consumer stated that the battery in the toy component leaked.	Electrical	N	Incident, No Injury
86	Mfr/retailer report	5/2013	OH	Unk	AGE AT THE TIME OF INCIDENT: 0YEAR(S) 0MONTH(S); WEIGHT AT THE TIME OF INCIDENT: 0LBS 0OZ; GENDER: ; DATE OF INCIDENT: 05/2013; INJURY FLAG : NO; EVENT DESCRIPTION : THE CONSUMER STATED THAT THE BATTERIES WERE STORED IN THE COMPARTMENT AND AND LEAKED CAUSING THE SPRINGS TO CORRODE AND BREAK OFF.	Electrical	N	Incident, No Injury
87	I1350349A	5/2013	NY	36 YOF	I purchased the [redacted] from [redacted] in May 2013 and assembled it. Two watch sized batteries came pre-installed in the turtle which is supposed to play music when you pull the ribbon. However, the batteries were weak and music stopped playing almost immediately so I removed them and set aside. Later, one of the batteries that was just sitting on a counter literally exploded with such force it hit the ceiling and broke in half. The room they were in is temperature controlled. Thankfully the batteries were not inside the turtle, which hangs from a toy bar inches from baby's face. I have kept both batteries and removed them to a safe place for now.	Electrical	N	Incident, No Injury
88	Mfr/retailer report	7/2013	NC	UnkM	AGE AT THE TIME OF INCIDENT: 0YEAR(S) 0MONTH(S); WEIGHT AT THE TIME OF INCIDENT: 0LBS 0OZ; GENDER: ; DATE OF INCIDENT: 07/2013; INJURY FLAG : NO; EVENT DESCRIPTION : THE CONSUMER STATED THAT HE TOOK THE PRODUCT OUT OF STORAGE AND SAID THE BATTERY COMPARTMENT WAS RUSTED. HE SAID A [redacted]	Electrical	N	Incident, No Injury

					BATTERY WAS LEFT IN THE COMPARTMENT.			
89	Mfr/retailer report 150304CCC2355	7/2013	AR	3 MOF	<p>Age at the time of incident: 0Year(s) 3Month(s) / Weight at the time of incident: 13lbs 0oz / Gender: Female / Date Of Incident: 07/2013 / Injury flag : Yes / / Injury # 1 / Injury Type : Other : knot and bruise / Injury Location : Head/Neck : Head/Neck / Course Of Action Type : No First Aid / Course Of Action Description : No First Aid / / / Injury # 2 / Injury Type : Bumps/Contusion/Bruise / Injury Location : Arm : Shoulder / Course Of Action Type : No First Aid / Course Of Action Description : No First Aid / / Event Description : The consumer stated that the rocker tipped to the side when her daughter began stretching in it. She remained restrained but landed on the floor on her right side. She sustained a knot and bruise on her head and a bruise on her right shoulder.</p>	Stability	Y	No First Aid or Medical Attention Received



90	Mfr/retailer report	7/2013	MA	8 MOF	Age at the time of incident: 0Year(s) 8Month(s); Weight at the time of incident: 20lbs 0oz; Gender: Female; Date Of Incident: 07/2013; Injury flag : Yes; Injury # 1 Injury Type :Red Mark; Injury Location : Head/Neck : Eye; Course Of Action Type : No First Aid; Course OfAction Description : No First Aid; Injury # 2 Injury Type : Red Mark; Injury Location : Other: forehead; Course Of Action Type : No First Aid; Course Of Action Description : No FirstAid; Injury # 3 Injury Type : Red Mark; Injury Location : Head/Neck : Eye; Course Of ActionType : No First Aid; Course Of Action Description : No First Aid; Injury # 4 Injury Type :Red Mark; Injury Location : Other : forehead; Course Of Action Type : No First Aid; CourseOf Action Description : No First Aid; Event Description : The consumer stated that herdaughter leaned over in the rocker to pick up a toy and the rocker tipped over forward with herin it. She bumped her head and had marks on her forehead and eye. She is not sure if they arebruises or red marks as her daughter has been at daycare. She was not using the kickstand, andher daughter was restrained in the seat.	Stability	Y-Forward	No First Aid or Medical Attention Received
91	Mfr/retailer report	10/2013	MA	8 MOM	Age at the time of incident: 0Year(s) 8Month(s); Weight at the time of incident: 22lbs 0oz; Gender: Male; Date Of Incident: 10/2013; Injury flag : Yes; Injury # 1 Injury Type : Laceration/Cut; Injury Location : Head/Neck : Nose; Course Of Action Type : No First Aid; Course Of Action Description : No First Aid; Injury # 2 Injury Type : Bumps/Contusion/Bruise; Injury Location : Other : eyebrow above left eye; Course Of Action Type : No First Aid; Course Of Action Description : No First Aid; Event Description : The consumer's son leaned forward while restrained in the seat. He fell forward and hit his face on the ground.	Stability	Y-Forward	No First Aid or Medical Attention Received
92	Mfr/retailer report 150608CCC1618	1/2014	VA	6 MOF	Age at the time of incident: Year(s) 6Month(s) / Weight at the time of incident: 20lbs 0oz /Gender: Female / Date Of Incident: 01/2014 / Injury flag : Yes / / / Injury # 1 / InjuryType : Laceration/Cut / Injury Location : Other : tongue / Course Of Action Type : No First Aid/ Course Of Action Description : No First Aid / / Event Description : The product tippedover forward while the child was reaching for a toy.	Stability	Y-Forward	No First Aid or Medical Attention Received

93	Mfr/retailer report	12/2013	PA	1 YO	AGE AT THE TIME OF INCIDENT: 1YEAR(S) MONTH(S) / WEIGHT AT THE TIME OF INCIDENT: 20LBS 0OZ / GENDER: MALE / DATE OF INCIDENT: 12/2013 / INJURY FLAG : NO / / / EVENT DESCRIPTION : THE BATTERIES LEAKED IN THE VIBRATING UNIT.	Electrical	N	Incident, No Injury
94	Mfr/retailer report	7/2014	IL	4 MOM	AGE AT THE TIME OF INCIDENT: 0YEAR(S) 4MONTH(S) / WEIGHT AT THE TIME OF INCIDENT: 16LBS 8OZ / GENDER: MALE / DATE OF INCIDENT: 07/2014 / INJURY FLAG : YES / / / INJURY # 1 / INJURY TYPE : PLAGIOCEPHALY/FLATHEAD / INJURY LOCATION : HEAD/NECK : HEAD/NECK / COURSE OF ACTION TYPE : EXCEEDED FIRST AID / COURSE OF ACTION DESCRIPTION : IMMOBILIZATION DEVICES (E.G: SPLINTS, SLINGS, NECK COLLARS, BACKBOARDS) / / EVENT DESCRIPTION : THE CHILD WAS SEEN BY A SPECIALIST AND HAS BEEN DIAGNOSED WITH PLAGIOCEPHALY. THERE IS A MEASURED 9 MM DIFFERENCE ON HIS SKULL REQUIRING THE USE OF A HELMET. N/A	Design	N	Seen by Medical Professional
95	Mfr/retailer report	1/2014	NH	Unk	Age at the time of incident: 0Year(s) 0Month(s) / Weight at the time of incident: 0lbs 0oz / Gender: / Date Of Incident: 01/2014 / Injury flag : No / / / Event Description : The batteries leaked inside the battery compartment. The battery compartment is corroded.	Electrical	N	Incident, No Injury
96	Mfr/retailer report	2/2014	NJ	Unk	AGE AT THE TIME OF INCIDENT: 0YEAR(S) 0MONTH(S); WEIGHT AT THE TIME OF INCIDENT: 0LBS 0OZ; GENDER: ; DATE OF INCIDENT: 02/2014; INJURY FLAG : NO; EVENT DESCRIPTION : THE CONSUMER NOTICED THAT THE BATTERIES HAD LEAKED INTO THE BATTERY COMPARTMENT WHEN SHE CHANGED THE BATTERIES.	Electrical	N	Incident, No Injury

97	H1430074A 140313CCC1487	3/2014	MA	8 MOF	3/2014- The consumer stated that she had her 8 month daughter strapped in the infant rocker when she heard her scream. The consumer noticed that her left leg was trapped in between the fabric cover of the chair and the plastic cover of the battery pack of the rocker. The consumer removed the straps and pulled the infant out of the chair. She had to pull the fabric and then pull the child's leg in order to dislodge it. The consumer noticed a red mark on the top part of her leg, in between her knee and her ankle. Three hours after, she noticed that the red mark had turned into a bruise. The consumer did not seek medical attention for her child. The consumer discontinued the use of the chair. 3/2014 The consumer contacted the manufacturer by phone, but was not able to speak with them. The consumer posted a picture of the product showing (using a stuffed animal) how her daughter's leg got caught in the manufacturer's [redacted] page. They have not yet replied. 3/2014- The consumer contacted the retailer. They informed her that there was nothing they could provide because this item was not recalled. The consumer thinks this product poses a safety hazard to infants.	Design	N	No First Aid or Medical Attention Received
98	Mfr/retailer report	3/2014	MI	Unk	AGE AT THE TIME OF INCIDENT: 0YEAR(S) 0MONTH(S) / WEIGHT AT THE TIME OF INCIDENT: 0LBS 0OZ / GENDER: / DATE OF INCIDENT: 03/2014 / INJURY FLAG : NO / / / EVENT DESCRIPTION : BATTERIES LEAKED IN THE VIBRATING UNIT.	Electrical	N	Incident, No Injury
99	I1450484A 140604CCC1664	4/2014	NY	2 MOM	A 2 month old male infant was placed to sleep in a [redacted]. The rocker was in toddler mode such that the infant was pitched forward in the seat instead of being reclined backwards. He was found dead with his chin into his chest approximately 4-5 hours later. I reviewed the safety instructions for the seat and although there is mention of an infant mode and a toddler mode, there is no specific mention that it could be dangerous to allow an infant to sit in a seat in toddler mode for an extended period of time. The cause of death was positional asphyxia. The manner of death was accident.	Unknown	N	Death

100	Mfr/retailer report 150701CCC2647	6/2015	KY	6 MOM	Age at the time of incident: 0Year(s) 6Month(s) / Weight at the time of incident: 16lbs 0oz / Gender: Male / Date Of Incident: 06/2015 / Injury flag : Yes / / / Injury # 1 / Injury Type : Bumps/Contusion/Bruise / Injury Location : Head/Neck : Head/Neck / Course Of Action Type : First Aid / Course Of Action Description : Hot and Cold Therapy / : Preliminary examination. / / Event Description : The screw attaching the vibration unit came out while the child was in the seat. The seat fell to the floor and the child hit his head.	Structural integrity	N	Level of care not known
101	Mfr/retailer report	7/2014	MI	Unk	Age at the time of incident: 0Year(s) 0Month(s)/Weight at the time of incident: 0lbs 0oz/Gender: /Date Of Incident: 07/2014/Injury flag : No///Event Description : The consumer took the product out of storage and opened up the battery compartment to put in new batteries and noticed that the inside of the battery compartment was blackened due to overheating. She had the product in storage with [redacted] batteries for a year.	Electrical	N	Incident, No Injury
102	Mfr/retailer report	9/2014	SC	Unk	AGE AT THE TIME OF INCIDENT: YEAR(S) MONTH(S) / WEIGHT AT THE TIME OF INCIDENT: 0LBS 0OZ / GENDER: / DATE OF INCIDENT: / INJURY FLAG : NO / / / EVENT DESCRIPTION : EMAIL - THE BATTERY COMPARTMENT IS RUSTY.	Electrical	N	Incident, No Injury
103	Mfr/retailer report	12/2014	NY	Unk	AGE AT THE TIME OF INCIDENT: YEAR(S) MONTH(S) / WEIGHT AT THE TIME OF INCIDENT: 0LBS 0OZ / GENDER: / DATE OF INCIDENT: 12/2014 / INJURY FLAG : NO / / / EVENT DESCRIPTION : THE BATTERY LEAKED IN THE VIBRATING UNIT CAUSING THE SPRING TO CORRODE OFF.	Electrical	N	Incident, No Injury
104	Mfr/retailer report	4/2015	MO	3 MOM	AGE AT THE TIME OF INCIDENT: 0YEAR(S) 3MONTH(S) / WEIGHT AT THE TIME OF INCIDENT: 12LBS 0OZ / GENDER: MALE / DATE OF INCIDENT: 04/2015 / INJURY FLAG : NO / / / EVENT DESCRIPTION : THE BATTERIES LEAKED IN THE VIBRATING UNIT AND CAME OUT ON THE PAD.	Electrical	N	Incident, No Injury
105	Mfr/retailer report	5/2015	NJ	2 MOF	AGE AT THE TIME OF INCIDENT: YEAR(S) 2MONTH(S) / WEIGHT AT THE TIME OF INCIDENT: 0LBS 0OZ / GENDER: FEMALE / DATE OF INCIDENT: 05/2015 / INJURY FLAG : NO /	Electrical	N	Incident, No Injury

					// EVENT DESCRIPTION : THE BATTERY IS CORRODED.			
106	Mfr/retailer report	5/2015	IL	3 MOF	AGE AT THE TIME OF INCIDENT: 0YEAR(S) 3MONTH(S) / WEIGHT AT THE TIME OF INCIDENT: 15LBS 0OZ / GENDER: FEMALE / DATE OF INCIDENT: 05/2015 / INJURY FLAG : NO / // EVENT DESCRIPTION : THE CONSUMER WENT TO CHANGE THE BATTERIES AND SAW CORROSION IN THE BATTERY COMPARTMENT.	Electrical	N	Incident, No Injury
107	I1570207A 150717CCC2676	7/2015	OH	7 MOM	I received the [redacted] rocking chair from [redacted] yesterday. We put it together and were sitting on our back patio. My son was sitting in his new chair and it flipped over face first while he was strapped in. As I ran to him in panic while he was trapped under the seat I was worried about his face on the cement. Thankfully he only had a large goose egg. However he was so shaken up he cried for several hours last night. This item should be recalled. I am a long time fisher price customer and have never had any safety issues. The outcome could have been much worse. This item appears to be a newer model and does not include a bar to keep it from tipping.	Stability	Y-Forward	No First Aid or Medical Attention Received
108	Mfr/retailer report 151026CBB2078	10/2015	MI	8 MOF	Age at the time of incident: 0Year(s) 8Month(s) / Weight at the time of incident: 19lbs 0oz / Gender: Female / Date Of Incident: 10/2015 / Injury flag : Yes / // Injury # 1 / Injury Type : Laceration/Cut / Injury Location : Other : side of eye and lower lid / Course Of Action Type : Exceeded first aid / Course Of Action Description : Use of prescription medications. // Event Description : The consumer's daughter fell and hit her eye on the tab where the toy bar attaches to the frame.	Stability	N	Seen by Medical Professional
109	Mfr/retailer report 170621CBB1971	6/2016	NJ	4 MOM	THE ROCKER SEAT PORTION OF THE SWING DETACHED WHILE A 4 MONTH-OLD CHILD WAS IN IT WITH THE MOTOR RUNNING. WHEN THE SEAT DETACHED, IT FELL TO THE FLOOR AND TIPPED OVER, CAUSING THE BOY TO HIT HIS HEAD ON THE METAL FRAME. THE BOY RECEIVED A BRUISE ON HIS HEAD AS A RESULT OF THE INCIDENT. THE FAMILY CALLED 911 AFTER THE INCIDENT AND THE BOY WAS EVALUATED BY EMTS BUT HE WAS NOT TAKEN TO THE HOSPITAL FOR ANY FURTHER TREATMENT.	Multiple	N	Level of care not known

110	Mfr/retailer report 160203CCC3373	11/2015	TX	11 MOF	AN 11-MONTH OLD GIRL WAS FOUND UNRESPONSIVE IN HER [redacted] ROCKER AT HER RESIDENCE AND WAS LATER PRONOUNCED DECEASED AT THE HOSPITAL. THE MEDICAL EXAMINER CONCLUDED THAT THE CAUSE OF DEATH COULD NOT BE DETERMINED WITH CERTAINTY AND THE MANNER OF DEATH WAS UNDETERMINED.	Unknown	N	Death
111	Mfr/retailer report 160401CCC2468	3/2016	OH	41 YOF	THE CONSUMER'S BABY BOUNCER FAILED TO WORK AFTER THE CONSUMER INSERTED SIX AA ALKALINE BATTERIES AND TURNED IT ON. THE CONSUMER RETURNED TO THE PRODUCT APPROXIMATELY TEN MINUTES LATER AND FOUND THE PRODUCT'S BATTERY COMPARTMENT EXTREMELY HOT AND THE BATTERIES APPEARING TO MELT. THE 41 YEAR OLD FEMALE CONSUMER SUSTAINED MINOR BURNS TO TWO FINGERS BUT DID NOT SEEK MEDICAL ATTENTION.	Electrical	N	Level of care not known, Injury to Adult
112	Mfr/retailer report 160502HCC1643	4/2016	NY	8 MOM	AGE AT THE TIME OF INCIDENT: 0YEAR(S) 8MONTH(S) / WEIGHT AT THE TIME OF INCIDENT: 16LBS 0OZ / GENDER: MALE / DATE OF INCIDENT: 04/2016 / INJURY FLAG : NO /// EVENT DESCRIPTION : THE CHILD CRAWLED UNDER THE CHAIR AND GOT THE STRAP THAT IS ATTACHED TO THE PAD AND THE CROSSBRACE WRAPPED AROUND HIS NECK. THE CHILD WAS TURNING BLUE. ONCE THEY GOT HIM OUT HIS COLOR RETURNED AND HE VOMITTED. N/A	Design	N	First Aid Received by Non-Medical Professional
113	Mfr/retailer report 160610CCC1751	5/2016	NJ	7 MOF	Age at the time of incident: 0Year(s) 7Month(s) / Weight at the time of incident: 17lbs 0oz / Gender: Female / Date Of Incident: 05/2016 / Injury flag : Yes /// Injury # 1 / Injury Type : Laceration/Cut / Injury Location : Hand : Finger / Course Of Action Type : No First Aid / Course Of Action Description : No First Aid // Event Description : The M5 X 50 mm screw came out of the left side rail and the vibrating unit and the seat collapsed to the side. N/A	Multiple	N	No First Aid or Medical Attention Received

114	H16C0031A	12/2016	KS	4 MOM	<p>The consumer indicates that her son was sitting in his rocker/ walker for approximately five minutes when the chair unsnapped and he fell backwards, hitting his head. The consumer states that her son began crying immediately.</p> <p>Although this is the only incident the consumer has had, she states that the seat comes apart every time she removes her son from the rocker/ walker as the unit unsnaps.</p> <p>The consumer indicates that she uses her unit at least twice a week for about thirty minutes at a time.</p> <p>The consumer plans on keeping her unit for at least the next thirty days in case an investigation ensues.</p>	Stability	N	No First Aid or Medical Attention Received
115	Mfr/retailer report	4/2017	FL	1 YO	<p>Age at the time of incident: 1Year(s) 0Month(s) / Weight at the time of incident: 19lbs 0oz / Gender: Female / Date Of Incident: 04/2017 / Injury flag : Yes / / / Injury # 1 / InjuryType : Bumps/Contusion/Bruise / Injury Location : Other : Middle of her forehead. / Course OfAction Type : First Aid / Course Of Action Description : Preliminary examination. / / EventDescription : The child reached over to grab something off the floor and the chair tipped overforward. She hit her forehead when it tipped over. This happened twice. She was restrained inthe seat with the kickstand up. / / Updated 6/2017: Received Regulatory Contact20170425-CF784-2147404044 describing incident above.</p>	Stability	Y-Forward	Emergency Department Treatment Received
116	Mfr/retailer report	12/2016	WI	23 MOF	<p>AGE AT THE TIME OF INCIDENT: 1YEAR(S) 11MONTH(S) / WEIGHT AT THE TIME OF INCIDENT: 27LBS 0OZ / GENDER: FEMALE / DATE OF INCIDENT: 12/2016 / INJURY FLAG : NO / / / EVENT DESCRIPTION : THE CONSUMER TOOK THE PAD OFF OF THE PRODUCT AND FOUND CHARRING ON THE ON THE VIBRATING MOTOR AND ON THE BACK OF THE PAD. SHE SAID SHE RARELY USED THE VIBRATION FEATURE FOR HER DAUGHTER, SO SHE DOESN'T KNOW HOW LONG IT WAS IN USE WHEN THIS OCCURRED.</p>	Electrical	N	Incident, No Injury

117	1717021426 180319CCC2544	2/2017	IL	3 MOM	A 3-MONTH-OLD MALE DIED FROM POSITIONAL ASPHYXIATION AFTER BEING PLACED IN A BABY BOUNCER SEAT TO SLEEP WITHOUT BEING SECURED IN THE RESTRAINT SYSTEM. THE VICTIM WAS FOUND LYING FACE DOWN IN THE BOUNCER SEAT AND UNRESPONSIVE. THE FATHER CALLED 911 AND STARTED CPR. THE VICTIM WAS TRANSPORTED TO THE HOSPITAL BUT WAS PRONOUNCED DECEASED.	Unknown	N	Death
118	Mfr/retailer report	5/2017	DC	< 5 MOF	AGE AT THE TIME OF INCIDENT: YEAR(S) MONTH(S) / WEIGHT AT THE TIME OF INCIDENT: 0LBS 0OZ / GENDER: FEMALE / DATE OF INCIDENT: 05/2017 / INJURY FLAG : YES / / INJURY # 1 / INJURY TYPE: OTHER : LINEAR SKULL FRACTURE / INJURY LOCATION: HEAD/NECK : HEAD/NECK / COURSE OF ACTION TYPE: EXCEEDED FIRST AID / COURSE OF ACTION DESCRIPTION: ADMISSION INTO A HOSPITAL // EVENT DESCRIPTION : REGULATORY CONTACT 20170610-0AABC-2147399814 / / CPSC REPORT STATED THAT THE CONSUMER'S DAUGHTER WAS RESTRAINED IN THE ROCKER WHICH WAS ON A KITCHEN COUNTER. THE ROCKER FELL OFF OF THE COUNTER WITH THE CHILD IN IT. THE CHILD'S AGE WAS INDICATED AS BEING BETWEEN 0 AND 5 MONTHS. N/A	Stability	Y	Hospital Admission
119	Mfr/retailer report	8/2017	GA	7 MOM	Age at the time of incident: 0Year(s) 7Month(s) / Weight at the time of incident: 24lbs 0oz /Gender: Male / Date Of Incident: 08/2017 / Injury flag : Yes / / / Injury # 1 / Injury Type: Other : bump and cut / Injury Location : Other : forehead / Course Of Action Type : First Aid/ Course Of Action Description : Preliminary examination. // Event Description : The child wasstrapped into the [redacted] and he leaned forward. The chair tipped overforwards and he hit his forehead on the sidewalk.	Stability	Y-Forward	First Aid Received by Non-Medical Professional
120	Mfr/retailer report	10/2017	FL	10 MOM	Age at the time of incident: 0Year(s) 10Month(s) / Weight at the time of incident: 15lbs 0oz / Gender: Male / Date Of Incident: 10/2017 / Injury flag : Yes / / / Injury # 1 / Injury Type: Bumps/Contusion/Bruise / Injury Location: Head/Neck : Head/Neck / Course Of Action Type: No First Aid / Course Of Action Description: No First Aid // Event	Stability	N	No First Aid or Medical Attention Received



					Description : Email: The child arched his back and fell backwards.			
121	Mfr/retailer report	12/2017		7 MOF	I am searingly disappointed by this chair. My seven-month-old daughter was bucked into this seat and it flipped forward and resulted in my baby falling face-first onto out hardwood floors! She had dropped a toy and was straining forward to reach it, and the chair wasn't stable enough to stay upright.  I am livid. If Fisher Price doesn't make arrangements to take this thing back, I am going to set it on fire and call it good riddance.	Stability	Y-Forward	Level of care not known
122	Mfr/retailer report	4/2018	MI	5 MOM	AGE AT THE TIME OF INCIDENT: 0YEAR(S) 5MONTH(S) / WEIGHT AT THE TIME OF INCIDENT: 17LBS 0OZ / GENDER: MALE / DATE OF INCIDENT: 04/2018 / INJURY FLAG : YES /// INJURY # 1 / INJURY TYPE : BUMPS/CONTUSION/BRUISE / INJURY LOCATION : HEAD/NECK : NOSE / COURSE OF ACTION TYPE : NO FIRST AID / COURSE OF ACTION DESCRIPTION : NO FIRST AID // EVENT DESCRIPTION : THE CHILD WAS RESTRAINED IN THE CHAIR, AND THE CHAIR TIPPED FORWARD AND OVER. THE CHILD LANDED ON THE FLOOR,WITH THE CHAIR ON TOP OF HIM.	Stability	Y-Forward	Level of care not known
123	I18A0058A	10/2018	NY	8 MOF	8 m/o baby fully restrained in [redacted] chair, fell forward in chair with chair flipping over and baby got bump on forehead.	Stability	Y-Forward	First Aid Received by Non-Medical Professional
124	Mfr/retailer report	2/2019	CT	10 MOM	AGE AT THE TIME OF INCIDENT: 0YEAR(S) 10MONTH(S) / WEIGHT AT THE TIME OF INCIDENT: 20LBS 0OZ / GENDER: MALE / DATE OF INCIDENT: / INJURY FLAG : YES /// INJURY # 1 / INJURY TYPE : BUMPS/CONTUSION/BRUISE / INJURY LOCATION : HEAD/NECK : HEAD/NECK /COURSE OF ACTION TYPE: NO FIRST AID / COURSE OF ACTION DESCRIPTION: NO FIRST AID // EVENT DESCRIPTION: THE SCREW ON THE REAR OF THE LEFT SIDE RAIL LIBERATED, AND THE BABY FELL FORWARD ONTO THE FLOOR. HIS HEAD HAD CONTACT WITH THE FLOOR. N/A	Structural integrity	N	No First Aid or Medical Attention Received

125	I1920011A 190205CBB3151	1/2019	TX	4 MOF	My 4 month old granddaughter died in January 2019 while sleeping in the [redacted] rocker. She was perfectly healthy when she was place in this seat. The next morning, she was found dead by her father. She had rolled onto her side in this seat and was found in this position. The rocker is stated on the [redacted] website as "soothing and snoozing...keeps babies cozy and secure." This is not a safe place for infants to be sleeping. Autopsy showed nothing abnormal with her body. This was my daughters only child and my only grandchild.	Unknown	N	Death
126	Mfr/retailer report	6/2019	MA	14 MOM	AGE AT THE TIME OF INCIDENT: 1YEAR(S) 2MONTH(S) / WEIGHT AT THE TIME OF INCIDENT: 30LBS 0OZ / GENDER: MALE / DATE OF INCIDENT: 06/2019 / INJURY FLAG : YES /// INJURY # 1 / INJURY TYPE : LACERATION/CUT / INJURY LOCATION : OTHER : EYE LID / COURSE OF ACTION TYPE : EXCEEDED FIRST AID / COURSE OF ACTION DESCRIPTION : USE OF PRESCRIPTION MEDICATIONS. / : USE OF WOUND CLOSING DEVICES: SUTURES/STITCHES. // EVENT DESCRIPTION : THE CHILD WAS OUTSIDE STANDING NEAR THE PRODUCT AND HE PULLED ON THE TOYBAR AND IT SNAPPED BACK AND HIT HIM ON THE EYELID. HE WAS TAKEN TO THE EMERGENCY ROOM WHERE THEY HAD TO USE 3 STITCHES TO CLOSE THE WOUND. N/A	Design	N	Emergency Department Treatment Received
127	Mfr/retailer report 190926CBB1745	3/2019	DC	4 MOF	AGE AT THE TIME OF INCIDENT: YEAR(S) 4MONTH(S) / WEIGHT AT THE TIME OF INCIDENT: 0LBS 0OZ / GENDER: FEMALE / DATE OF INCIDENT: 03/2019 / INJURY FLAG : NO /// INJURY # 1 / INJURY TYPE : NO INJURY / INJURY LOCATION : NO LOCATION : NO DETAIL / COURSE OF ACTION TYPE : EXCEEDED FIRST AID / COURSE OF ACTION DESCRIPTION : ADMISSION INTO A HOSPITAL // EVENT DESCRIPTION : RECEIVED REGULATORY IDI CONTACT 190926CBB1745 // THE CPSC IDI REPORT STATED THE BABYSITTER PLACED THE CHILD IN A BOUNCY SEAT FOR A NAP WITH A FLEECE BLANKET UNDER HER. THE BABY WAS IN THE SEAT FOR ABOUT 20 MINUTES WHEN THE BABYSITTER NOTICED WHAT APPEARED TO BLOOD COMING FROM THE INFANTS NOSE	Unknown	N	Death

					AND THE CHILD WAS UNRESPONSIVE. THE BABYSITTER PICKED UP THE CHILD AND RAN TO A NEIGHBORS HOUSE WHO WAS A PARAMEDIC. THE NEIGHBOR BEGAN CPR AND EMERGENCY SERVICES WERE CALLED. THE CHILD WAS TRANSPORTED TO A LOCAL HOSPITAL, THEN TRANSFERRED TO ANOTHER LOCAL HOSPITAL WHERE SHE DIES 3 DAYS LATER. THE MEDICAL EXAMINER LISTED CAUSE OF DEATH AS "SUDDEN UNEXPECTED DEATH IN INFANCY." N/A			
128	Mfr/retailer report	7/2019	SC	< 1 YOM	AGE AT THE TIME OF INCIDENT: 0YEAR(S) 0MONTH(S) / WEIGHT AT THE TIME OF INCIDENT: 12LBS 0OZ / GENDER: MALE / DATE OF INCIDENT: 07/2019 / INJURY FLAG : YES /// INJURY # 1 / INJURY TYPE : FRACTURE / INJURY LOCATION : OTHER : SKULL / COURSE OF ACTION TYPE : EXCEEDED FIRST AID / COURSE OF ACTION DESCRIPTION : DIAGNOSTIC TESTING (E.G: MRI, X-RAYS, CAT SCAN, ETC.) // EVENT DESCRIPTION : THE CONSUMER STATED WHILE THE CHILD WAS RESTRAINED IN THE ROCKER IT TIPPED OVER FORWARD AND HE HIT HIS HEAD ON THE FLOOR. HE WAS TAKEN TO THE EMERGENCY ROOM WHERE AN X-RAY WAS TAKEN AND HE WAS MONITORED. N/A	Stability	Y-Forward	Emergency Department Treatment Received

129	Mfr/retailer report 220324CAA1262	7/2019	FL	7 MOM	<p>AGE AT THE TIME OF INCIDENT: 0YEAR(S) 7MONTH(S) / WEIGHT AT THE TIME OF INCIDENT: 19LBS 8OZ / GENDER: MALE / DATE OF INCIDENT: 07/2019 / INJURY FLAG : NO / / INJURY # 1 / INJURY TYPE : NO INJURY / INJURY LOCATION : NO LOCATION : NO DETAIL / COURSE OF ACTION TYPE : EXCEEDED FIRST AID / COURSE OF ACTION DESCRIPTION : ADMISSION INTO A HOSPITAL / : DIAGNOSTIC TESTING (E.G: MRI, X-RAYS, CAT SCAN, ETC.) / / EVENT DESCRIPTION : EMAIL: THE CONSUMER REPORTED THAT HER BABY HAD A SEIZURE ON THE INFANT TO TODDLER ROCKER AND HER DOCTOR SAID IT COULD BE ASSOCIATED WITH THE POSITION OF THE ROCKER. / / UPDATE 7/2019: THE CONSUMER REPORTED THAT THE CHILD WAS RESTRAINED IN THE SEAT, AND IN THE RECLINE POSITION FOR ABOUT A HALF HOUR. HE WAS IN POSITION, ON HIS BACK AND HIS HEAD WAS IN THE CENTER OF THE PAD. HE NAPPED FOR A HALF HOUR. THE VIBRATION WAS NOT IN USE. AFTER 30 MINUTES, HE HAD A SEIZURE WHICH LASTED 17 MINUTES. THE CONSUMER CALLED HER PEDIATRICIAN'S OFFICE WHEN THIS HAPPENED, AND THEY TOLD HER TO LAY THE CHILD ON THE FLOOR ON HIS BACK. SHE DID THIS. WHEN THE SEIZURE WAS OVER, SHE TOOK HIM TO THE EMERGENCY ROOM. ONE OF THE EMERGENCY ROOM DOCTORS TOLD HER THAT THE PRODUCT COULD HAVE CAUSED THE SEIZURE. SHE SAID SHE SHOWED HIM A VIDEO OF THE PRODUCT. THE CHILD WAS ADMITTED TO THE HOSPITAL FOR OBSERVATION FOR TWO DAYS, AND AN EKG WAS DONE. SHE DIDN'T KNOW WHAT OTHER TESTS WERE DONE, AND SAID HE HAD OTHER TESTS. THE CHILD WAS RELEASED FROM THE HOSPITAL. THE CONSUMER TOOK THE CHILD TO HER PEDIATRICIAN THIS WEEK, AND SHE SAID THEY DIDN'T DISCUSS THE CHAIR. THE DOCTOR ADVISED HER TO KEEP AN EYE ON HER SON. N/A</p>	Design	N	Hospital Admission
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130	Mfr/retailer report	1/2020	VA	10 MOM	AGE AT THE TIME OF INCIDENT: 0YEAR(S) 10MONTH(S) / WEIGHT AT THE TIME OF INCIDENT: 23LBS 0OZ / GENDER: MALE / DATE OF INCIDENT: 01/2020 / INJURY FLAG : YES /// INJURY # 1 / INJURY TYPE : ABRASION/SCRATCH/SCRAPE / INJURY LOCATION : HEAD/NECK : NOSE / COURSE OF ACTION TYPE : NO FIRST AID / COURSE OF ACTION DESCRIPTION : NO FIRST AID // EVENT DESCRIPTION : THE CONSUMER STATED THAT THE PRODUCT TIPPED OVER FORWARD ONTO A TILED FLOOR. THE CHILD HAD BEEN RESTRAINED IN THE ROCKER MODE AT THE TIME.	Stability	Y-Forward	Level of care not known
131	Mfr/retailer report	9/2020	FL	9 MOM	AGE AT THE TIME OF INCIDENT: 0YEAR(S) 9MONTH(S) / WEIGHT AT THE TIME OF INCIDENT: 17LBS 0OZ / GENDER: MALE / DATE OF INCIDENT: 09/2020 / INJURY FLAG : YES /// INJURY # 1 / INJURY TYPE : RED MARK / INJURY LOCATION : OTHER : FOREHEAD / COURSE OF ACTION TYPE : NO FIRST AID / COURSE OF ACTION DESCRIPTION : NO FIRST AID / / EVENT DESCRIPTION : THE CONSUMER STATED THAT THE PRODUCT TIPPED OVER FORWARD WITH THE CHILD IN IT WITH THE KICKSTAND IN USE. HE WAS RESTRAINED AT THE TIME, SHE FELT HE MOVED FORWARD CAUSING THE PRODUCT TO TIP OVER.	Stability	Y-Forward	Level of care not known
132	Mfr/retailer report 200504HCC2450	3/2020	DC	4 MOM	AGE AT THE TIME OF INCIDENT: YEAR(S) 4MONTH(S) / WEIGHT AT THE TIME OF INCIDENT: 0LBS 0OZ / GENDER: MALE / DATE OF INCIDENT: 03/2020 / INJURY FLAG : NO /// INJURY # 1 / INJURY TYPE : NO INJURY / INJURY LOCATION : NO LOCATION : NO DETAIL / COURSE OF ACTION TYPE : NO FIRST AID / COURSE OF ACTION DESCRIPTION : NO FIRST AID // EVENT DESCRIPTION : RECEIVED REGULATORY IDI 200504HCC2450 // SAFERPRODUCTS.GOV IDI STATED A MOTHER PLACED HER CHILD ONTO AN INFANT ROCKER ON HIS BACK, ON TOP OF A SMALL BLANKET. SHE PLACED A GREY, BABY BLANKET OVER HIS BODY. WHEN THE MOTHER AWOKE, SHE FOUND HER BABY WITH THE GREY BLANKET OVER HIS FACE AND HE WAS UNRESPONSIVE. EFFORTS TO REVIVE THE BABY WERE UNSUCCESSFUL. THE CAUSE OF	Unknown	N	Death

					DEATH WAS ASPHYXIATION DUE TO AN UNSAFE SLEEP ENVIRONMENT. A CONTRIBUTING FACTOR TO HIS DEATH WAS RHINOVIRUS UPPER RESPIRATORY TRACT INFECTION, AS THIS MAY HAVE HASTENED HIS HYPOXIA WHILE UNDER THE BLANKET. N/A			
133	Mfr/retailer report	6/2020	IN	10 MOF	AGE AT THE TIME OF INCIDENT: 0YEAR(S) 10MONTH(S) / WEIGHT AT THE TIME OF INCIDENT: 27LBS 0OZ / GENDER: FEMALE / DATE OF INCIDENT: 06/2020 / INJURY FLAG : YES / / INJURY # 1 / INJURY TYPE : LACERATION/CUT / INJURY LOCATION : HAND : FINGER / COURSE OF ACTION TYPE : EXCEEDED FIRST AID / COURSE OF ACTION DESCRIPTION : USE OF WOUND CLOSING DEVICES: SURGICAL GLUE. / / EVENT DESCRIPTION : THE CONSUMER STATED THAT HER DAUGHTER GOT HER LEFT THUMB CAUGHT BETWEEN THE TOYBAR AND THE SOCKET WHERE IT LATCHES IN PLACE. THE CHILD WAS TAKEN TO A LOCAL WALK IN CLINIC TO BE SEEN AND TREATED. N/A	Design	N	Seen by Medical Professional
134	Mfr/retailer report	1/2021	AZ	9 MOM	AGE AT THE TIME OF INCIDENT: 0YEAR(S) 9MONTH(S) / WEIGHT AT THE TIME OF INCIDENT: 22LBS 0OZ / GENDER: MALE / DATE OF INCIDENT: 01/2021 / INJURY FLAG : YES / / INJURY # 1 / INJURY TYPE : BUMPS/CONTUSION/BRUISE / INJURY LOCATION : HEAD/NECK : HEAD/NECK / COURSE OF ACTION TYPE : NO FIRST AID / COURSE OF ACTION DESCRIPTION : NO FIRST AID / / EVENT DESCRIPTION : THE CONSUMER STATED THAT THE CHILD WAS RESTRAINED IN THE SEAT AND WAS ABLE TO SIT UP AND TIP THE SEAT FORWARD HITTING HIS HEAD ON THE FLOOR.	Stability	Y-Forward	Level of care not known
135	I2170228A 210714HCC3286	2/2021	LA	5 MOF	A 5-MONTH-OLD FEMALE WAS PLACED IN AN INFANT ROCKER/SEAT, UNRESTRAINED, ON AN ADULT SIZED BED. SHE WAS FOUND FACE DOWN, UNRESPONSIVE, ON THE BED APPROXIMATELY TWENTY MINUTES LATER. SHE WAS TRANSPORTED TO THE HOSPITAL WHERE SHE DIED A FEW DAYS LATER AFTER BEING TAKEN OFF OF LIFE SUPPORT. HER CAUSE OF DEATH WAS DETERMINED TO BE RESPIRATORY FAILURE.	Multiple	N	Death

136	Mfr/retailer report	5/2022	DC	5 MOF	<p>AGE AT THE TIME OF INCIDENT:  0YEAR(S) 5MONTH(S) / WEIGHT AT  THE TIME OF INCIDENT: 18LBS 0OZ /  GENDER: FEMALE / DATE OF  INCIDENT: / INJURY FLAG : NO ///  INJURY # 1 / INJURY TYPE : NO INJURY  / INJURY LOCATION : NO LOCATION :  NO DETAIL / COURSE OF ACTION TYPE  : NO FIRST AID / COURSE OF ACTION  DESCRIPTION : NO FIRST AID // EVENT  DESCRIPTION : RECEIVED  REGULATORY IDI CONTACT  210428HCC1798. // CPSC IDI REPORT  STATED THAT THE MOTHER WOKE  HER 5 MONTH OLD DAUGHTER TO  FEED HER AT 2 A.M. SHE THEN  PLACED THE CHILD BACK INTO THE  SEAT TO SLEEP THE REST OF THE  NIGHT. THE MOTHER WOKE UP AT 6  A.M. AND OBSERVED HER DAUGHTER  HAD MUCOUS AND BLOOD COMING  FROM HER NOSE AND MOUTH, WAS  VERY COLD AND NOT BREATHING.  EMT PERSONNEL RESPONDED AND  DETERMINED THAT THE INFANT WAS  DECEASED. A POLICE OFFICER  OBSERVED THAT THE FOOT OF THE  CHAIR APPEARED TO BE HIGHER  THAN WHERE THE HEAD WOULD BE. /  / THE CORONER CONCLUDED THAT  THE CHILD DIED DUE TO SUDDEN  UNEXPLAINED INFANT DEATH  SYNDROME. N/A</p>	Multiple	N	Death
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## **Tab B: Memorandum by The Directorate for Health Sciences, Division of Pharmacology and Physiology Assessment**

**Staff Briefing Package: Draft NPR for Infant and Infant/Toddler Rockers** | September 13, 2023 |

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# Memorandum

**TO:** Zachary S. Foster, Project Manager,  
Division of Human Factors  
Directorate of Engineering Sciences

**DATE:** September 13, 2023

**THROUGH:** Mary Kelleher, Associate Executive Director  
Directorate for Health Sciences

Stefanie Marques, Ph.D.,  
Division Director of Pharmacology and Physiology

**FROM:** Suad Wanna-Nakamura, Ph.D., Physiologist  
Division of Pharmacology and Physiology  
Directorate for Health Sciences

**SUBJECT:** Health Sciences Analysis of Infant Rockers and Infant/Toddler Rocker fatalities and injuries from January 1, 2011, to November 7, 2023.

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## I. Introduction

This memorandum provides a Health Sciences (HS) assessment of fatal and non-fatal incidents associated with infant rockers and infant/toddler rocker use.

## II. Discussion

### A. Product Description

An “infant rocker” is defined in ASTM F3084-22 (3.1.6) as a “freestanding product intended to support an occupant who has not developed the ability to sit up unassisted (approximately 0 to 6 months of age) in a seated, reclined position greater than 10° and to facilitate rocking by the occupant with the aid of the caregiver or by other means”. An “infant/toddler rocker” is defined in section (3.1.7) of the standard as “a freestanding product intended to support an occupant in a seated, reclined position greater than 10° and to facilitate rocking by the occupant with the aid of the caregiver or by other means until the occupant is approximately 2 1/2 years,” (Figure 1).



**Figure 1: Examples of infant rockers, with various frame designs. Images are copied from retailer and manufacturer websites.**

## *B. Deaths and Injuries*

### **1. Fatal Incidents Overview**

Health Sciences (“HS”) staff reviewed the data involving fatal and non-fatal incidents associated with infant rocker and infant/toddler rocker use to assess the possible contribution of the rocker in those deaths and injuries. According to the Directorate for Epidemiology, Division of Hazard Analysis (EPHA staff (Tab A), from January 1, 2011, to November 7, 2022, 11 fatalities and 88 reported injuries were associated with the use of an infant rocker.

HS staff analyzed all the incidents to determine the extent that product characteristics and/or product use played a role in the deaths/injuries.

Fatal incidents involved infants ages 1-11 months who were reportedly placed in a rocker to “nap” or to sleep for extended periods in the product, up to 9 hours. Several reports involve infants who were placed to sleep in a rocker that was placed on top of an adult bed or on other soft or uneven surface. Placement of a rocking product on elevated or soft surface creates a hazard because it increases the likelihood of the product tipping over and falling onto a hard surface or soft bedding.

- **Case 1 (IDI# 110715CAA3921).** A 1-month-old boy was placed to sleep at about 10 pm on his side in a rocker on top of a blanket for comfort as well as being covered by a blanket for warmth. The rocker was his usual sleeping place. There were conflicting reports regarding who placed the infant to sleep. According to the IDI, the mother said at one point during the night that she put the infant with her to sleep. A photograph of the rocker at the time of the incident shows a heavy quilt like blanket on top of the rocker. There is no indication that the infant was restrained. The mother woke up five hours later and found the boy unresponsive. The infant was transported to the hospital, but efforts to revive him failed. The coroner ruled the cause as sudden unexpected

death, although the cause of death could not be unequivocally established because of the general lack of evidence in suffocation deaths.

- Case # 2 (IDI#121001HCC2003):** A 3-month-old girl was placed to sleep in a broken rocker supported by a shoe box. She was placed on her side with her head propped by a pillow. Under the baby were two infant pillows, a folded twin sized sheet, and two fleece blankets used as a mattress. The following morning the infant was found face-down in the product. The ME reported the cause of death as probable positional asphyxia caused “by extreme and or restricted position” involving prone sleeping on an unsafe surface with an obstruction of the nose and mouth.
- Case # 3 (IDI# 220720CBB3191):** A 2-month-old boy was fed by his father and placed in a rocker. Shortly after being fed, the infant appeared to begin choking on formula and became unresponsive. The infant was transported to a hospital, but later died. The cause of death was initially reported as being due to head trauma. The head injury as cause of death was subsequently disputed by a pediatric forensic pathologist, who stated that multifocal subarachnoid blood and subdural and subarachnoid bleeding usually a consequence of head trauma could be due to asphyxia. The pathologist concluded that the cause of death was brain damage/bleed associated with asphyxia death caused by choking on the infant formula. The infant was diagnosed with gastro esophageal reflux. During the infant’s first week pediatric visit, he was suffering from cephalohematoma, but it seemed to be getting smaller with time. Staff cannot discern from the report and manner in which the product contributed to the death or if product restraints were used.
- Case # 4 (IDI# 140604CCC1664):** A 2-month-old boy was placed in a rocker with the seat set in the “upright position” *i.e.*, in toddler and not infant mode position, for approximately four hours. Details surrounding the incident are limited. Staff has insufficient information from the report to determine whether the infant fell asleep in the product. According to the coroner the cause of death was determined to be positional asphyxia, with the coroner opining that “after a while, the infant likely would have become fatigued holding his head up, such that the head would move forward with the chin into the chest so that the infant could no longer breathe.” At the time of review, staff was not in possession of the ME or police report.
- Case # 5 (IDI# 160203CCC3373):** An 11-month-old girl was placed in a rocker in a supine position for a nap with a blanket and a pacifier. The restraints were reportedly used. The girl’s father fell asleep on a sofa in the same room for approximately two hours. When he woke up, he found his daughter unresponsive in the product with fluid coming out of her mouth and a pacifier on her lips. The ME reported cause of death as “undetermined”. The report also notes that the child had been diagnosed with an upper respiratory infection, and that “livor mortis was present in the dorsal dependent portions of the body,” indicating settlement of blood to the back and confirming she was supine at time of death.
- Case # 6 (IDI# 180319CCC2544):** A 3-month-old male was fed and placed in a rocker to sleep on his back. The infant’s parents then fell asleep on a sofa in the same room. Approximately 3 hours later, the infant was found face-down in the product. The incident

report states that the restraints were not used, and that the infant had just recently started to roll over. The autopsy report notes a recent diagnosis of acute bronchitis with respiratory syncytial virus (RSV). The autopsy report also notes the presence of intrathoracic hemorrhages in lungs and heart, and pulmonary edema. The ME determined the cause of death to be positional asphyxia due to airway obstruction.

- **Case # 7 (IDI# 190205CBB3151):** A 4-month-old girl was placed in a rocker with a blanket and slept in the product without the use of restraints and with soft bedding in the product. Nine hours later, the infant was found unresponsive in the product. The victim's father reported that he found the victim face-down in the product. However, the victim's grandmother reported that the victim was found on her side. The cause of death was listed by the ME as "probable positional asphyxiation".
- **Case # 8 (IDI# 190926CBB1745):** A 4-month-old girl was born premature at 37 weeks due to maternal preeclampsia. The infant was placed in a rocker for a nap with a blanket underneath her. The infant was reportedly restrained in the product. Approximately 20 minutes later, the infant was found unresponsive with blood coming from her nose. Cardiopulmonary resuscitation (CPR) was initiated by a neighbor and the victim was transported to a local hospital and was later transferred to second hospital where she died three days later. The cause of death was listed as sudden unexpected death in infancy<sup>8</sup> (SUDI) with an undetermined manner of death. The autopsy report stated that "rigor was complete and fixed to an equal degree in all extremities."
- **Case # 9 (IDI# 200504HCC2450):** A 4-month-old boy was placed to sleep in a rocker on top of a blanket, with another blanket placed over the baby's body. The rocker was the infant's normal sleeping place because his crib was broken. The infant was later found unresponsive with a blanket covering his face. The cause of death was determined to be asphyxia due to an unsafe sleep environment. A rhinovirus upper respiratory tract infection was listed as a contributing factor. A few days prior to the incident, the infant had been taken to a hospital because of symptoms related to the flu. He spent a few days in the intensive care unit and was discharged with instructions to use a nebulizer a few times a day. The boy also suffered water emesis after feeding.
- **Case# 10 (IDI# 210714HCC3286):** A 5-month-old girl was placed in a rocker on top of an adult bed. The infant was not restrained in the product. Approximately 20-30 minutes later, the infant's mother found the infant out of the rocker and face down on the bed. The infant was transported to a hospital, where she later died. The autopsy report lists the cause of death as bilateral bronchopneumonia. This incident was reported to CPSC by a health professional.
- **Case # 11 (Y226005YA):** A 5-month-old female was placed in a rocker to sleep. The victim was later found unresponsive, cold, and not breathing. The cause of death was listed as SUDI.

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<sup>8</sup> The term SUDI and SUID (Sudden Unexpected Infant Death) and SIDS (sudden infant death syndrome, which is a subset of SUID), are sometimes used interchangeably by MEs and coroners to mean death in infancy with no determined or known cause of death.

Based on the review of the 11 fatal incidents, HS staff assesses that in 6 of the 11 fatalities, blankets and pillows were located under the infant. In 9 of the 11 fatalities, restraints were not used. In 9 of 11 incidents, an infant rocker was indicated to be the usual sleeping place for the infant. Two incidents reported restraint use; however, in one of the two incidents, the infant was swaddled with a blanket and then restrained.

Most suffocation deaths occur in infants under four months of age, a critical stage in the maturation of organ and homeostatic control systems. An infant born prematurely faces even greater vulnerability. While the chronological age of an infant is based on the date of birth, an infant who is born premature can differ from a full-term infant in significant ways that makes them more vulnerable, because critical systems have had less time to develop before birth. The length of gestation is correlated with the development to maturity of the organ systems responsible for maintaining homeostatic control of major physiological and neurological functions that includes respiration, heart rate, and arousal response. Organs and control systems in babies born earlier than 35 weeks of gestation may not have had time to fully develop, which increases the infant's vulnerability in many situations (Malloy et al., 1995, Malloy, 2013, Moon et.al. 2016, and Sowter et.al., 1999). As such, HS staff recommends that parents of babies who are born prematurely consult with their physician before using a rocker.

## 2. Non-Fatal Incidents

Eighty-eight (88) incidents involved a non-fatal injury to a child younger than 5 years of age. Many of the incidents were related to falls from elevated surfaces resulting in head and appendage injuries. In 75 incidents, the child sustained head injuries, a broad term that refers to several types of injuries that affect the scalp, underlying tissues and can range from mild to severe, including skull fracture and closed head injuries (CHI).

The injury potential of any fall is dependent on several factors including height of the fall, nature of the impact surface, and orientation of the body at impact. The orientation of the body at impact is one of the most important factors in determining injury severity, and injuries can range from minor abrasions, lacerations and contusions to facial injuries including the fracture of facial bones and dental injuries to more severe injuries such as bone fractures, concussions, extremity fractures which are common injuries in falls (Tibbs et.al., 1998), skull fractures, and CHI. CHI can happen when the brain undergoes rapid forward and backward movements that can cause brain tissue damage and is the result of a non-penetrating head injury. CHI are considered serious head injuries because they require medical attention and even prolonged treatment.

Head injuries, such as skull fractures and intracranial injuries, occur when the head is the point of fall impact on an unyielding hard surface. It can result in extensive brain damage that may impact motor skills and interfere with speech development and have an impact on the overall quality of life long after the incident has occurred. Such injuries require professional medical treatment and may result in permanent impairment or even death (Ghajar et.al., 1992, Mansfield, 1997, Tarantino et. Al., 1999). Although it cannot be ruled out, the likelihood of head injury to an infant is low if the rocker is at ground level (low impact, low severity injury). HS staff

advises that elevated placement of the rocker at the time of fall can greatly influence the severity of the injury suffered.

CHI and skull fractures were reported in 20 incidents that included:

- an orbital fracture
- two skull fractures
- Two concussions

Injuries to the face were reported in 12 incidents

- forehead contusions
- mouth lacerations
- rug burn
- dental injury (one child suffered a broken tooth and gum impaction)

Other injuries were reported in 8 incidents that involved the back, torso, fingers, and legs. A fracture to the appendages was reported in 4 cases.

One incident reported as BRUE (“brief resolved unexplained event”), associated with a baby that seemed to stop breathing while using the product. BRUE is often due to an underlying health issue and is unlikely to be product related.

One infant suffered a seizure while using the product and was admitted to a hospital for two days. CPSC staff is not in possession of the infant’s hospital medical record or post follow up treatment, if any. Based on available information, staff states that the incident was unlikely to be product related.

One incident reported a non-fatal strangulation in the restraint system of the product that was dangling below the rocker base. The child crawled under the product and became entangled around the neck in the strap. The infant turned blue and vomited, but no medical attention was sought.

Two consumers alleged that product use led to a flat head.

### III. References

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## **Tab C: Memorandum by The Directorate for Engineering Sciences, Division of Mechanical and Combustion Engineering**





## Memorandum

**TO:** Zachary S. Foster, Project Manager  
Division of Human Factors  
Directorate for Engineering Sciences

**DATE:** September 13, 2023

**THROUGH:** Mark Kumagai, Associate Executive Director  
Directorate for Engineering Sciences

**FROM:** Caroleene Paul, Division Director  
Division of Mechanical and Combustion Engineering  
Directorate for Engineering Sciences

Carlos G. Torres, Mechanical Engineer  
Division of Mechanical and Combustion Engineering  
Directorate for Engineering Sciences

**SUBJECT:** Draft Proposed Rule to Establish a Safety Standard for Infant Rockers and Infant/Toddler Rockers

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### I. Introduction

To issue a mandatory children's safety standard for infant rockers and infant/toddler rockers under section 104 of the Consumer Product Safety Improvement Act of 2008 (CPSIA), staff must evaluate the current voluntary standard for infant rockers, ASTM F 3084 *Standard Consumer Safety Specification for Infant and Infant/Toddler Rockers*, and determine whether to adopt a mandatory standard substantially the same as a voluntary standard or whether a more stringent standard would further reduce the risk of injury.

This memorandum outlines staff's review of the product, hazards associated with the product, assessment of the current voluntary standard for infant rockers (ASTM F3084-22), and recommendation to incorporate by reference the ASTM F 3084 *Standard Consumer Safety Specification for Infant and Infant/Toddler Rockers* with modifications as the CPSC mandatory standard for infant rockers.

### II. Product

ASTM F3084-22 defines an infant rocker as "a freestanding product intended to support an occupant who has not developed the ability to sit up unassisted (approximately 0 to 6 months of age) in a seated, reclined position greater than 10° and to facilitate rocking by the occupant with the aid of the caregiver or by other means." The voluntary standard defines an infant/toddler rocker as "a freestanding product intended to support an occupant in a seated, reclined position greater than 10° and to facilitate rocking by the occupant with the aid of the caregiver or by

other means until the occupant is approximately 2 ½ years.” Essentially, infant/toddler rockers are larger than infant rockers because they are intended for use by older occupants up to 2.5 years of age compared to the 6-month age limit of infant rockers, see Figure 1.

Rockers are a similar product to infant bouncers in terms of construction; typically, a rigid frame that supports a fabric surface at an incline greater than 10 degrees from vertical. The convex legs of a rocker allow the product to rock longitudinally, and typically have a kickstand feature to disable the rocking function. A locked rocker is equivalent to a bouncer.



**Figure 1: Examples of Infant and Infant/Toddler Rockers**

### III. History of ASTM F3084 Standard

The ASTM F15.18 Subcommittee on Cribs, Toddler Beds, Play Yards, Bassinets, Cradles, and Changing tables developed ASTM F3084 to minimize the risk of injury or death associated with a child’s use of infant or infant/toddler rockers. The specific hazards the standard is intended to address are product disassembly/collapse, stability, and falls from an elevated surface. ASTM F3084 was first published in July 2014 and the standard has been revised four times since then (2016, 2018, 2020, and 2022). The most current version is ASTM F3084-22.

ASTM F3084-14 contained requirements to address product disassembly/collapse, stability, and falls from elevated surfaces. The scope included infant rockers for occupants up to 6 months of age and infant/toddler rockers for occupants up to 2.5 years of age. The standard specified requirements in Section 6.3 Stability, Sections 6.4 Static Slip Resistance, 6.5 Structural Integrity, Section 6.6 Disassembly/Collapse, and Section 6.7 Toy Bar Attachment Release to address the hazards. The requirements for stability, slip resistance, structural integrity, and toy bars are almost identical to those in ASTM F2167-22, which is incorporated by reference as a mandatory standard in 16 C.F.R. part 1229 – Safety Standard for Infant Bouncers (the bouncer rule).

#### IV. Hazard Patterns

CPSC staff reviewed incident reports involving infant rockers that occurred from January 1, 2011, to November 7, 2022 (see Tab A). The incident data included 1,088 incidents, of which 11 were fatalities. Of the 1,077 reported nonfatal incidents, 88 incidents reported an injury to a child (younger than 5 years of age), including 9 injuries which required non-emergency medical treatment, 2 injuries reporting hospitalization, and 4 injuries resulting in an emergency department visit.

The majority of fatal incidents involved infants being placed in the product for sleep, with 6 of 11 associated with the use of soft bedding (blankets/pillows).

From the 1,077 non-fatal incidents, the majority involved tipover of the product. Staff also identified the following hazard patterns: hardware issues including lock/latches, hinges, and seat mounting hardware; stability issues related to products collapsing or tipping over; electrical issues related to leaking batteries; and design issues.

#### V. Adequacy of ASTM F3084-22

General requirements in ASTM F3084-22 include:

- Hazardous sharp points and edges
- Small Parts
- Lead
- Wood Parts
- Latching or Locking Mechanisms
- Scissoring, Shearing, and Pinching
- Openings
- Exposed Coil Springs
- Protective Components
- Labels and Warnings
- Toys
- Conversion to juvenile product

Performance requirements in ASTM F3084-22 include:

- Seat Angles
- Restraint Systems
- Stability
- Static Slip Resistance
- Structural Integrity
- Disassembly/Collapse
- Toy Bar Attachment

Below, staff discusses the hazard patterns identified in Tab A, and staff's assessment of the adequacy of ASTM F3084 to address those hazards.

**Staff Briefing Package: Draft NPR for Infant and Infant/Toddler Rockers | September 13, 2023 |**

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## 1. Stability – Product Tipover

Stability issues related to infant rockers include 275 incidents reports in which an occupant infant rocker tipped over in the forward, sideways, or rearward directions.

### a) Forward Stability – Infant Rockers (intended to support an occupant who has not developed the ability to sit up unassisted)

Section 6.3 *Stability* of ASTM F3084-22 specifies performance requirements for forward stability in infant rockers. It also includes additional requirements, discussed below, for infant/toddler rockers if the product is intended for use after the occupant can sit upright unassisted. The test procedure for forward stability applies a moment<sup>9</sup> to the product in its most upright position to simulate a 21 lb. child<sup>10</sup> leaning forward in the rocker. A test fixture is then attached in the seat of a product with restraints that have been adjusted for an infant CAMI dummy. A 21-lb. vertical static force (weight of a 95<sup>th</sup> percentile 6-month-old boy) is applied for 60 seconds to the fixture 5 inches in front of the crotch post. The test is conducted on a level surface and the rocker must not tip over, Figure 2.

The forward stability requirement for infant rockers is similar to the forward stability requirements for infant bouncers in ASTM F2167-22, which is incorporated by reference in the bouncer rule, 16 C.F.R. part 1229. The test simulates a child leaning forward in the product and is based on the center of mass of the CAMI Infant Dummy when bent forward to where the head touches the toes. The center of mass is approximately 3 inches in front of the crotch, and the test protocol applies force (simulating the child's weight) an extra 2 inches from the crotch as a factor of safety.

In 2014, however, ASTM modified the forward stability requirement in the bouncer voluntary standard, ASTM F2167, to be more protective of larger children by applying the test weight 1 inch further out from the crotch post (6 inches<sup>11</sup> out instead of 5 inches) and using the manufacturer's maximum recommended weight if greater than the 21-lb. weight application specified. This modification to the bouncer standard addressed use of bouncers by larger children. The infant rocker standard did not adopt the modification in the infant bouncer standard and is not protective of larger infants that use infant rockers. Additionally, the infant rocker standard does not clearly specify a maximum weight limit for infant rockers or infant toddler rockers (weight limits are listed in warnings, but not the scope or terminology) and does not adequately indicate which forward stability tests are to be applied to each product type. Therefore, the current forward stability requirement for infant rockers in ASTM F3084-22 is less stringent than the same requirements for infant bouncers in 16 C.F.R. Part 1229 and ASTM F2167-22.

<sup>9</sup> A tipping moment causes the product to rotate about the fulcrum point. The magnitude of the moment is the distance between the fulcrum and the perpendicular application of the force. If the tipping moment is higher than the stabilizing moment (produced by the weight of the child), the rocker will tip over.

<sup>10</sup> The 21-lb load is equivalent to the weight of a 95<sup>th</sup> percentile 6-month-old boy (Centers for Disease Control and Prevention, National Center for Health Statistics. CDC growth charts: United States, 2000. <http://www.cdc.gov/growthcharts/>)

<sup>11</sup> According to the rationale X1.4.2 in ASTM F2167-22 Standard Consumer Safety Specification for Infant Bouncer Seats, "It is believed that forward tip overs occur when the child is leaning forward. The test calls for the weight to be placed 6 in. (152.4 mm) in front of the crotch post. When the CAMI Infant Dummy, Mark II, is bent forward to where the head touches the toes, the center of mass is approximately 3 in. (76.2 mm) in front of the crotch. Three additional inches were added as a factor of safety."

CPSC technical staff performed the forward stability test on infant rockers (Figure 2). Applying a higher force or applying the force 1 inch further from the crotch is a more stringent test that would better address the tipover hazard in the incident reports; therefore, staff recommends that the forward stability requirement for infant rockers be modified to address the 95<sup>th</sup> percentile 6-month-old and to match the more stringent test conditions specified in the mandatory standard for infant bouncers.



Figure 2: Infant Rocker Stability Test

**b) Forward Stability – Infant/Toddler Rockers (if the product is intended for use after the occupant can sit upright unassisted)**

In 2013, CPSC staff worked with the ASTM F15.18 Subcommittee task group to develop stability requirements for infant/toddler rockers if the product is intended for use after the occupant can sit upright unassisted. Staff provided rocker incident data to ASTM (based on reports in CPSRMS) of incidents that occurred from January 1, 2006, to January 31, 2015; at least 36 incidents involved a restrained child occupant leaning forward and causing the infant/toddler rocker to flip forward with the child still within the product. The performance requirements that were developed for the 2014 edition of ASTM F3084 to address this scenario remain in ASTM F3084-22. Recently, CPSC staff provided rocker incident data to ASTM of incidents received from June 8, 2016, to March 15, 2022. Four incidents involved a restrained child occupant leaning forward and causing the infant/toddler rocker to flip forward with the child still within the product.

For infant/toddler rockers, the forward stability test requires the product be placed on a surface that is inclined 18 degrees from horizontal. The test fixture for infant/toddler rockers consists of a 5-inch diameter cylinder attached to a 17.3-inch long by 4.44-inch plate and weighs 17.5 lb. as shown in Figure 3. The 17.3-inch plate length for the rocker forward stability gauge is the average rump to crown height of a 6-month-old and the fixture is intended to approximate the weight cantilever when a child is leaning all the way forward. The incline plane angle of 18-degree incline is based on the most forward rock angle of existing rockers.

The test fixture is placed in the seat of the infant/toddler rocker such that the product's restraint system can be adjusted around the test fixture cylinder. While holding the product, a 10-lb. pull force, parallel to the test fixture plate, is gradually applied to the waist restraint and maintained



for 10 seconds to induce any potential forward displacement allowed by the seat or restraint. The rocker must not tip over when the pull force is released.

Staff performed the forward stability test on two exemplar infant/toddler rockers (Figure 3) and compared the results to a similar test using a 6-month CAMI dummy to confirm that the test adequately simulates a 6-month-old child leaning forward in the product. However, most of the incidents on infant/toddler rockers involved an occupant that ranged from 7 months to 12 months in age.

In 2015, data provided to ASTM included 36 reported incidents of product tip over caused by the occupant leaning forward that occurred from 2006 to 2015; a rough average of 3.6 incidents a year. The most recent data provided to ASTM included 4 reported incidents of product tip over caused by the occupant leaning over that occurred from June 2016 to March 2022; a rough average of 0.8 incidents a year. The 4 reported incidents in the latest data provided to ASTM include the following descriptions:

- product with 12 month-old female occupant tipped completely forward
- 8 month-old male flipped over in infant rocker, consumer stated “once sitting up and leaning forward, the weight of his body, even being strapped in, would cause [the rocker] to flip over on top of him.”
- 8 month-old male fully restrained in rocker fell forward with rocker flipping over
- 12-month old male went forward falling on his face and stomach

Based on the descriptions of the latest incidents, staff concludes the forward stability test does not fully address the risk of a restrained child occupant that is older than 6 months old, leaning forward and causing the infant/toddler rocker to flip forward with the child still within the product.



Figure 3: Infant/Toddler Rocker Stability Test

### c) Sideward and Rearward Stability

Section 6.3.2 specifies performance requirements for sideward and rearward stability for both infant and infant/toddler rockers. The test procedure places a CAMI Infant Dummy in the product. The rocker is then positioned in the most unfavorable sideward or rear position on a test surface inclined at 20 degrees to cause tip over. The most *unfavorable position* is determined by the tester by placing the rocker/CAMI on the 20-degree test surface in an

orientation between the true sideward and rearward positions that would most likely cause tip over. The product must not tip over in this position on the 20-degree inclined test surface. The forward stability and sideward/rearward stability requirements for infant rockers are almost identical to the stability requirements for infant bouncers in ASTM F2167-22, incorporated into the bouncer rule. The only difference is that for rockers, the test is repeated with the kickstand (that prevents the rocking motion) retracted and deployed, and for rockers with an adjustable seat back, the test is also repeated with the seat back in both the most upward and reclined positions. Testing in both seat back configurations verifies the product's stability when the center of mass (rocker and occupant) is changed.

CPSC technical staff performed the sideward/rearward stability test on an infant rocker and infant/toddler rocker, Figure 4. The test simulates a 6-month-old child leaning over against the side of the product or farther back against seat back. Staff lacks data to show that any more stringent standard for sideward/rearward stability is necessary at this point. Staff will continue to monitor incidents.

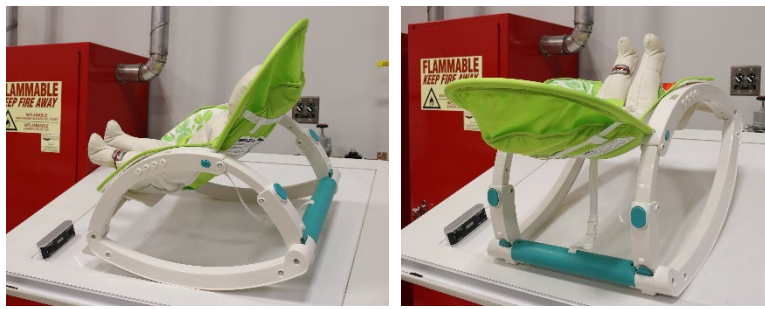


Figure 4: Sideward and Rearward Stability Test

## 2. *Structural Integrity – Hardware Failures, Product Collapse*

Among the 28 incidents related to structural integrity problems, staff identified incidents associated with products collapsing or portions of the product detaching.

Section 6.5 *Structural Integrity* applies to infant rockers and infant/toddler rockers. The requirement specifies that the product shall not break or create a hazardous condition after a dynamic and static load is applied.

The test procedure in section 7.6.1 *Dynamic Load* applies a 33 lb. load onto the product's seat from a height of 1 inch for 100 cycles.

The test procedure in section 7.6.2 *Static Load* applies a load distributed over a 6 square inch block onto the seat of the product for 10 seconds. The static load for infant rockers is 60 lb. or three times the maximum manufacturer's recommended weight, whichever is greater; the static load for infant/toddler rockers is 105 lb. or three times the maximum manufacturer's recommended weight, whichever is greater.

Section 6.6 *Disassembly/Collapse* specifies that the product shall not disassemble or collapse when a 15 lb. force is applied, to a product occupied by a CAMI newborn infant dummy, at all points on the frame associated with disassembly.

The three structural tests, dynamic load, static load, and disassembly/collapse, subject infant and infant/toddler rockers to reasonable forces that could be applied to the product during the normal life of the product. Staff assesses that these tests adequately test the structural strength of both infant and infant/toddler rockers. The dynamic load test simulates a child being placed in the seat and removed, as well as the forces applied to the rocker while the child is in the seat. The static load ensures that the rocker is designed to hold the weight of a child that is likely to use the product (a 21 lb. load represents a 95<sup>th</sup> percentile 6-month-old for infant rockers). The disassembly/collapse test is intended to exceed the forces the attachment points would see while the product is sliding across a surface while the product is carried.

Based on staff's assessment above of sections 6.5 and 6.6, staff advises they are adequate to address the structural integrity of the product.

### 3. *Toy Bars*

Among the 700 incidents hardware related issues identified in Tab A, fifty included toy bars snapping apart.

Section 6.7 *Toy Bar Attachment Integrity* requires that the toy bar must either be strong enough to be used as a handle (must not detach) when the product is statically and dynamically tested, or the toy bar must break free or deform to prevent the product from being raised by the toy bar. These requirements are identical to the toy bar attachment test requirements for infant bouncers. The toy bar attachment tests were developed to address infant bouncer incidents in which consumers would lift the seat by the toy bar, and the toy bar would bend or break, and the bouncer seat would shift or fall, resulting in injuries to the occupant.

Because the toy bars in the infant rocker incident reports performed as intended (broke to prevent its use as a handle), staff assesses the toy bar integrity requirements are adequate to address the hazard.

### 4. *Restraints*

Among the 700 incidents hardware related issues identified in Tab A, seventy-eight included restraint buckles breaking.

Section 6.2 *Restraint System* requires both a waist and crotch restraint be provided with infant and infant/toddler products to secure a child in any manufacturer's recommended use position. The anchorages for the restraint system shall not separate from their attachment points when subjected to a force of 45 lb. and maintained for 10 seconds. These requirements are identical to the restraint system test requirements for the bouncer rule. Additionally, the force application is also identical to other juvenile product safety standards (e.g., strollers, high chairs) to verify the integrity of the restraint system components



Infant/Toddler rockers are intended for children up to approximately 2 ½ years old. The force of 45 lb. is about 25 percent (9 lb.) higher than the weight of a 95 percentile 2.5-year-old male child (36 lb.). Children are normally seated in the rocker where their weight is concentrated on the seat. It is only when the child leans forward that portion of their weight is transferred to the restraint system and its components. Because their full body weight is not transferred to the restraint system, and the margin of safety is 25 percent (9 lb.) higher than the heaviest intended occupant, staff assesses that the pull force in the restraint system requirements is adequate to address the restraint system issues.

The restraint system test for infant and infant/toddler rockers is identical to the restraint system test requirements for infant bouncers and other juvenile products which have addressed breaking restraints in these standards. Therefore, staff assesses they are also adequate to address the hazard for infant and infant/toddler rockers.

## 5. *Electrical – Battery Leakage*

Thirty-seven of the 1,088 incidents (3 percent) reported infant rockers with electrical issues. Out of the 37 incidents, 36 incidents specifically involved leaking batteries, and one incident involved a charred motor. In 12 of the incidents with leaking batteries, the infant rockers had corroded or rusty battery compartments.

ASTM F3084-22 does not specify requirements to address battery/electrical issues associated with infant rockers. However, ASTM F2167-22, incorporated into the bouncer rule, 16 C.F.R. part 1229, includes requirements to address such electrical hazards. Section 6.8 *Battery Compartments* specifies the following:

Section 6.8.1 requires that each battery compartment or area around the battery compartment be marked to show the correct battery polarity, size, and voltage.

Section 6.8.2 requires that each battery compartment provide a means to contain the electrolytic material if the battery leaks. Requiring containment of the material means that it will not be accessible to the infant using the product.

Section 6.8.3 requires positive protection from the possibility of charging any primary (non-rechargeable) battery using either the physical design of the battery compartment or an appropriate electrical circuit. This requirement applies to situations such as incorrectly installed batteries, and when attempting to use a battery charger with non-rechargeable batteries. This requirement does not apply to a product having one or two batteries as the only source of power.

Section 6.8.4 requires that the surfaces of any accessible electrical component, including batteries, shall not achieve temperatures exceeding 160°F (71°C), nor shall there be battery leakage, explosion, or a fire to any electrical component.

Section 7.1 requires the product to be operated using the a/c power source and/or new batteries of the type recommended by the manufacturer. Testing is performed by operating the product at the highest setting for 60 minutes.

Staff assesses that these requirements to have battery compartments and electrical circuitry similar to bouncers and other juvenile products will reduce the likelihood of overheating and battery leakage incidents. Therefore, staff recommends that the proposed rule for infant rockers adopt the same electrical requirements in ASTM F2167 (the bouncer rule) that address battery leakage.

## 6. *Product Design*

Product design incidents include 36 reports of product failures with:

- toy bar positioning, which could result in a child sustaining facial injuries;
- slippery fabric seat pads, which may cause a child to slide or twist out of position.
- misaligned screws, which could lead to crooked rocker frames.
- children being pinched between the bottom bars, fabric covers of the chair, or plastic covers of the battery pack.
- a defective battery compartment, which involved a gaping hole near where a child would sit; seat back tubes failing to stay inside rail sockets.

ASTM F3084-22 specifies performance requirements to test for hazards related to design of the product, which include: no sharp points/edges that pose laceration hazards, no small parts which pose choking hazards, no wood parts with splinters, locking/latches that remain engaged, no scissoring/pinching or openings which pose laceration/amputation hazards, no exposure of coil springs, and no liberation of components that a child can grasp. To pass, none of the preceding product related hazards can manifest after the product has been subjected to the dynamic and static load test for structural integrity.

However, when assessing the product's general safety requirements, ASTM F2167-22, incorporated into the bouncer rule, includes a drop test in addition to the structural integrity test to evaluate the durability of the infant bouncers in instances of inadvertently dropping or impacting the product against a hard surface. ASTM F2167-22 specifies drop tests for infant bouncers in which bouncers are dropped from a height of 36 inches once on each of six different planes (top, bottom, front, rear, left side, and right side). Because a locked infant rocker is essentially an infant bouncer seat, staff expects the products will be used similarly; therefore, staff recommends adopting the drop tests from ASTM F2197-22 to ensure compliance with general safety requirements related to product design. To address incidents related to product design, staff recommends including a drop test, in addition to the general requirements already listed in ASTM F3084-22.

## 7. *Strangulation on Tethered Straps*

Staff identified a near-strangulation incident on infant rockers in which an 8-month-old male crawled under the product and became entangled around the neck on the tethered straps located behind the product. Similar incidents have occurred on infant swing products in which the necks of non-occupants became entangled in the tethered straps located underneath or behind the product. The ASTM F15.21 Subcommittee for Infant and Cradle Swings, in

conjunction with CPSC staff, are currently developing performance and test requirements to address the hazard. On March 2, 2023, staff presented the latest proposal to the swing strangulation task group. In general, the performance requirement evaluates the size of bounded openings formed in conjunction with tethered straps, and sets specific maximum or minimum dimensions, to ensure that openings are either too small for a child's head to enter, or openings are large enough for an infant's head to escape. The bounded openings formed in conjunction with tethered straps shall meet either of these two options:

- (1) the size of a bounded opening formed in conjunction with tethered straps shall not allow the passage of the small head probe.<sup>12</sup> This would prevent the infant's head from entering the opening and get entangled, or
- (2) the size of the bounded opening formed in conjunction with tethered straps shall allow the free passage of the large head probe, but the tethered strap portion of the bounded opening shall not be greater than 7.4 inches.<sup>13</sup> The large opening would allow the infant's head to escape. Additionally, limiting the length of the tethered strap portion associated with the opening would prevent the strap from wrapping around the infant's neck.

Staff recommends adding the tethered straps accessibility requirements developed by the ASTM F15.21 Subcommittee for Infant and Cradle Swings to a mandatory children's safety standard for infant rockers and infant/toddler, to address strangulation hazard posed by tethered straps (restraint system or any other) that are exposed below the product.

## VI. Additional Requirements for Concavity and Firmness

Based on CPSC's annual report for nursery product-related injury estimates, titled "Injuries and Deaths Associated with Nursery Products Among Children Younger than Age Five" (Yang, 2022<sup>14</sup>), staff identified fatalities associated with infant seated products (*i.e.*, infant carriers, bouncer seats, strollers/carriages, rockers). CPSC staff contracted<sup>15</sup> with Dr. Erin Mannen at Boise State University to research and analyze the death or injury risks associated with infant seated products and recommend possible requirements to improve safety. The report titled, *Seated Product Characterization and Testing*, was submitted to the CPSC in June 2023.<sup>16</sup> The findings in the report suggest that infant seated products should have firmness similar to a crib mattress and should not envelop the infant's head/face and should provide sufficient space for the infant's head to rotate without contacting the side walls. Based on the testing of infants in various infant seated products, a review of 47 in-depth incident investigations, the testing of 24 products representing various infant seated product categories, and a review of past research,

<sup>12</sup> The small head probe represents the 5th percentile 6-month-old child because that is the youngest child having the developmental abilities to become entrapped.

<sup>13</sup> The average neck circumference of a 5th percentile 3-to-6-month-old infant is approximately 8.3 inches. A shorter length of 7.4 inch was selected as a factor of safety and to be consistent with the ASTM F406-22 Play Yard standard cord length requirement.

<sup>14</sup> "Injuries and Deaths Associated with Nursery Products Among Children Younger than Age Five" (Yang, 2022) <https://cpsc.gov/s3fs-public/Nursery-Products-Annual-Report-2022.pdf?VersionId=48HfEaAG2znYilGMU6I9EC.z8UMAe4Oy>

<sup>15</sup> Contract 61320620D0002, Task 61320621F1014

<sup>16</sup> Mannen, E. M., Siegel, D., Goldrod, S., Bossart, A., Lujan, T. J., Wilson, C., Whitaker, B., Carrol, J. (2023). *Seated Products Characterization and Testing*. Report available at <https://www.cpsc.gov/content/Report-Boise-State-Universitys-Seated-Products-Characterization-and-Testing>

the researchers recommended a concavity test and firmness tests to minimize the risk of suffocation related to occlusion, airflow resistance, and/or an abnormal exchange of gases.

### 1. Concavity and Conformity

Currently, no provisions in ASTM F3084-22 address the risk of suffocation due to concavity identified in the *Seated Products Characterization and Testing* report. The report states that the concavity (curvature of the seat back) and conformity (how the product conforms and envelops the infant due to the infant's weight) can affect the risk of mouth/nose contact. For infants in the supine position, the researcher team considered product with a small or no pillow to be a low risk for suffocation related to mouth/nose contact during a normal head rotation as shown in Figure 5. Products with larger and thicker pillows or inserts, were considered a high risk for mouth/nose contact as shown in Figure 6 (Figure 27 of the report).



**Figure 5 – low risk of suffocation due to head rotation**

**Figure 6 – high risk of suffocation due to head rotation**

The concavity test recommended in the *Seated Product Characterization and Testing* report consists of calculating the concavity (radius) formed at the intended occupant head position with a 7.65-pound (3.47 kg) newborn-sized five segment sagittal plane device (developed by the seated product research team) on the seat. The test method involves placing the Sagittal Plane Device on the seat and measuring the width of the seat from side to side (measurement **L** as shown in Figure 7) just directly above the shoulder harness and at the intended head position. With a Sagittal Plane Device still in place, the depth (measurement **D** as shown in Figure 7) is measured from the midline of measurement **L** to the seat back surface. The concavity radius **r** is calculated as shown in Figure 8 which is an equation to calculate the radius of a best-fit circle.



**Figure 7 – Seat Measurements**

$$r = \frac{D}{2} + \frac{L^2}{8D}$$

**Figure 8. Concavity Equation**

(The larger the radius, the flatter the product)

The *Seated Products Characterization and Testing* report showed that an infant's face would be in direct contact with the side of a seated product with a concavity radius less than 7.3 cm (2.87 in.)<sup>17</sup> during a head rotation as shown in Figure 9. The report showed seated product with a concavity radius greater than 22 cm (8.66 in.)<sup>18</sup> would prevent mouth/nose contact with sides of the products during a head rotation as shown in Figure 10. Based on this analysis the report recommended a concavity radius (*r*) equal to or greater than 22 cm (8.66 in.). The report noted that a 22 cm (8.66 in.) or greater concavity would make it easier for infants to free their mouth/nose for breathing if they rolled into a prone position within the product.

<sup>17</sup> 7.3 cm radius is based on the 97th percentile 6-month-old male infant head circumference (46 cm)

<sup>18</sup> 22 cm is based on 3 times the radius of a 6-month-old male infant head. Page 75 of the *Seated Products Characterization and Testing* states, "Since the interaction of the mouth/nose with the soft goods of a product introduces suffocation-related hazards, we suggest that the threshold for the concavity radius should be triple the amount of the infant's head radius (7.3 cm), resulting in a 22 cm threshold."



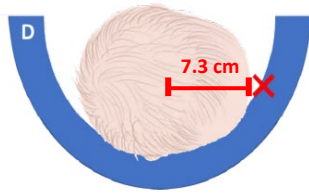


Figure 9. Infant's face contacts side for a 7.3 cm (2.87 in.) concavity radius during a 90-degree head rotation.

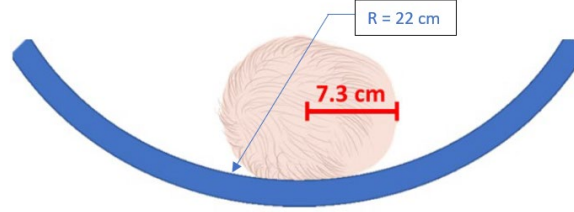


Figure 10. Infant face does not contact the side for a 22 cm (8.66 in.) concavity radius during a 90-degree head rotation.

CPSC staff performed the recommended concavity test on one infant/toddler rocker, Figure 11. Staff used the 17.4-pound (7.89 kg) Hinged Weight Gauge-Infant<sup>19</sup> as opposed to the 7.65-pound (3.47 kg) Sagittal Plane Device in *Seated Product Characterization and Testing* report, because the 17.4-pound (7.89 kg) gauge (weight of a 50<sup>th</sup> percentile 6 month) is more representative of the occupants identified in the Yang 2022 report (5 months).



Side-Side L = 40.6 cm (16 in.)

Depth D = 3.2 cm (1.25 in.) + 2.2 cm (0.875 in.) =  
5.4 cm (2.125 in)

<sup>19</sup> The 17.4-pound hinged weight gauge represents the weight of a 50<sup>th</sup> percentile 6 month old. The gauge is specified in section 7.1 of the ASTM F3084-22 Standard Consumer Safety Specification for Infant and Infant/Toddler Rockers. The gauge is used to measure the tilt angle of the seat back.

$$r = \frac{D}{2} + \frac{L^2}{8D}$$

$$r = \frac{5.4}{2} + \frac{(40.6)^2}{8(5.4)} = 40.86 \text{ cm (16 in.)}$$

Figure 11: Concavity Test and Calculation

Staff assesses that a concavity requirement for infant rockers and infant/toddler rockers as recommended in the *Seated Product Characterization and Testing* report is necessary to improve safety to address the suffocation risk which can be presented by a more concave product resulting in direct contact between nose/mouth and the product. Products with concavity of less than 22 cm (8.66 in) would increase the risk for the infant's mouth/nose to contact the side of the product. The 22 cm (8.66 in) radius is three times the head radius of a 95<sup>th</sup> percentile 6-month-old male; therefore, the minimum 22 cm (8.66 in) radius requirement incorporates a three times safety factor [3 x 7.3 cm, (3 x 2.87 in.)] to prevent the infant's face from contacting the side of the rocker. Staff considers using a three times safety factor to ensure that the infant's face remains at a safe distance from the sidewall is reasonable since the position of the infant can vary in the rocker. Staff specifically proposes that the Commission request comments from the public on this proposal.

Staff also agrees with the conclusion in *Seated Products Characterization and Testing* report that the concavity requirements would minimize mouth/nose contact with the product during supine lying with a normal head rotation and would also make it easier for infants to free their mouth/nose for breathing if they rolled into a prone position within the product.

## 2. Firmness

Currently, no provisions in ASTM F3084-22 address the risk of suffocation due to a soft surface in contact with an infant's nose and mouth. The *Seated Product Characterization and Testing* report concluded that all seated products should be firm to prevent suffocation, and sufficiently flat to prevent mouth/nose contact with seated products during supine lying with a normal head rotation. The report recommends a test fixture and test method to measure the firmness of a seated product including rockers. The minimum displacement of 11mm (0.43 in.) with a 10 N (2.25 lb.) load would result in an equivalent firmness for a crib mattress that meets 16 C.F.R. 1241, crib mattress rule, (section 6.2 of the report). The *Seated Product Characterization and Testing* report showed:

*All bouncers and rockers failed our proposed firmness test, meaning the deformation of the products under a load similar to the weight of an infant's head greatly exceeds the deformation of that same load on a crib mattress. This means that the product introduces a greater risk for hazardous mouth/nose interactions with the product. Common characteristics of products which failed firmness testing are slung or hammock types of designs, which featured a metal or plastic frame with soft goods fixed to the frame but no structural support underneath the infant's head or body other than the soft goods. Other products that failed feature large body inserts and pillows.*

The firmness test method, test fixture and pass/fail criteria consisted of measuring the deflection of the product using a test fixture as shown in Figure 12 (figure 31 from the report). A passing product will have a firmness equivalent to the crib mattress firmness requirement.

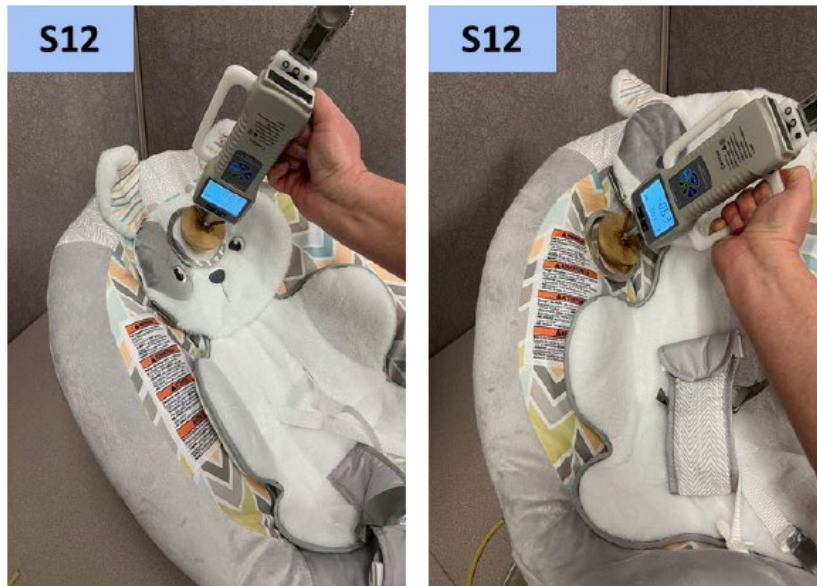


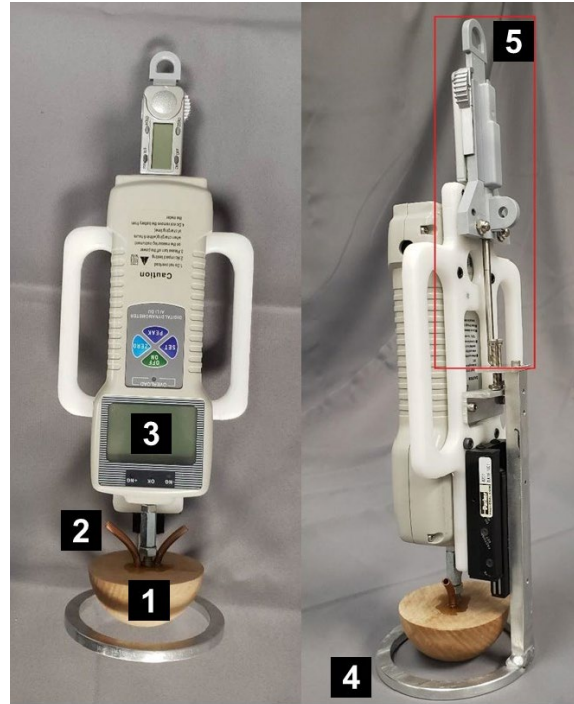
Figure 31. Firmness testing on bouncer S12 with handheld device at (Left) the prone position, and (Right) the first contact supine position. During testing, we used both hands to apply force. Only one hand is used in these photos to better visualize the testing location.

Figure 12: Handheld Firmness Tester

The firmness tester, Figure 13, is comprised of a wooden hemisphere and an aluminum circular footprint attached to the end of a force gauge. A digital depth gauge is fixed to the device to measure vertical displacement. The size of the wooden hemisphere (part 1) corresponds to infant anthropometric data of the diameter of an infant face. The circular footprint (part 4) allows to measure the relative displacement of the hemisphere with respect to the footprint. The 10 N (2.25 lb.) force is based on data from safe crib mattresses.

The firmness tester is an assembly of off-the-shelf components (force and depth gauges) and machined aluminum and wood parts. The contractor produced a firmness tester within a day for CPSC staff to use to evaluate the test methods.





- (1) wooden hemisphere.
- (2) copper tubing used for airflow testing (not used for firmness test).
- (3) force gauge.
- (4) circular aluminum footprint.
- (5) depth gauge.

Figure 13: Handheld Firmness Tester

Based on test data and analysis presented in the *Seated Product Characterization and Testing* report, the researchers recommend a maximum displacement threshold of 11 mm (0.43 in.) when the wooden hemisphere is pressed against the product with 10 N (2.25 lb.) load. This is based on crib mattress test data that resulted in a threshold for a safe displacement of 11 mm (0.43 in.) with the handheld firmness tester at 10 N (2.25 lb.).

CPSC technical staff performed the recommended firmness test on an infant/toddler rocker, Figure 14. Staff's testing showed the rocker did not meet the recommended firmness criteria and deflected 11.8 mm at the head position and 16 mm on the side when a 10 N force was applied. CPSC staff observed that the hammock like design contributed to the lack of firmness as indicated in the *Seated Product Characterization and Testing* report.



Firmness test at head position. Force = 10.03 N,  
displacement = 11.88 mm



Firmness test on side. Force = 10.07 N,  
displacement = 16 mm

Figure 14: Firmness Test

To demonstrate the feasibility of addressing this requirement, staff modified the rocker by inserting a foam backing between the fabric and the wire frame as shown in Figure 15 and retested it as shown in figure 16. The rocker passed the firmness test in this configuration with a deflection of 9.76 mm at the head position and 9.11 mm on side under a 10 N load.



Figure 15: Modified Rocker





Firmness test with foam insert at head position.  
Force = 10.05 N, displacement = 9.76 mm



Firmness test with foam insert, on side. Force =  
10.06N, displacement = 9.11 mm

Figure 16: Firmness Test on Modified Rocker with Foam Insert

Staff assesses that the conclusions and recommendation of a firmness test for infant rockers and infant/toddler rockers are necessary to improve safety to address the suffocation risk which can be presented by soft padding conforming to an infant face. The firmness requirements verifies that the firmness of the infant rockers and infant/toddler rockers is comparable to the firmness of a safe crib mattress. The firmness test would reduce the potential for suffocation should the infant mouth/nose contact the product.

Staff's analysis indicates that the firmness requirement and test method recommended in the *Seated Product Characterization and Testing* report would address soft products such as pillows or hammock type designs that can envelope an infant's face in the prone position or head turned to the side position. The minimum firmness would ensure rockers provide firmness in the area of the occupant's head that is equivalent to the firmness of a crib mattress. This helps ensure that products in which newborns and infants will be placed will have the same baseline safety as crib mattresses in terms of preventing a child's nose and mouth from being obstructed by the surface supporting the child's head. Staff demonstrated that simple modifications to a typical rocker can provide a firm surface that would meet the firmness

recommendations. Staff assesses that a firmness requirement specified in the *Seated Product Characterization and Testing* report recommendations are feasible with minor modifications to existing rockers.

## VII. Recommendation

Staff recommends that the proposed rule for infant and infant/toddler rockers should incorporate by reference the requirements contained in ASTM F3084-22, with modifications to make the standard more stringent, to further reduce the risk of injury associated with infant and infant/toddler rockers. Staff recommends the following modifications (Tab G):

- To address the risk of tipovers, modify the terminology and forward stability requirements for infant rockers to match more stringent test conditions in ASTM F2167-22 (16 C.F.R. part 1229) and to more clearly indicate which forward stability tests are to be performed on each product type (infant rocker or infant/toddler rocker)
- To address the risk of battery leakage, add electrical requirements from ASTM F2167-22 (16 C.F.R. part 1229)
- To address the risk of mechanical injuries associated with product design, add drop test requirements from ASTM F2167-22 (16 C.F.R. part 1229)
- To address the strangulation hazard posed by tethered straps exposed below a product, add tethered straps accessibility requirements developed by the ASTM F15.21 Subcommittee for Infant and Cradle Swings.
- To address the suffocation hazard posed by soft surfaces and features of the rocker that can envelop an infant's face, add firmness and concavity requirements as recommended in the *Seated Products Characterization and Testing* report.

## **Tab D: Memorandum by The Directorate for Engineering Sciences, Division of Human Factors**



## Memorandum

**TO:** The Infant and Infant/Toddler Rockers Rulemaking File

**DATE:** September 13, 2023

**THROUGH:** Mark Kumagai, Associate Executive Director  
Directorate for Engineering Sciences

Rana Balci-Sinha, Division Director  
Division of Human Factors  
Directorate for Engineering Sciences

**FROM:** Zachary S. Foster, Industrial Engineer  
Division of Human Factors  
Directorate for Engineering Sciences

**SUBJECT:** Human Factors Assessment of Hazards Associated with Infant and Infant/Toddler Rockers and of ASTM F3084-22 Requirements of Infant and Infant/Toddler Rockers

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### I. Introduction

This memorandum summarizes the Human Factors assessment of the hazard patterns associated with infant rockers and infant/toddler rockers (collectively referred to in this memorandum as “rockers”), and the adequacy of the existing voluntary standard to mitigate those hazards.

The applicable voluntary standard, ASTM F3084, *Standard Consumer Safety Specification for Infant and Infant/Toddler Rockers* (ASTM F3084) establishes “requirements, test methods, and marking & labeling requirements to promote safe use of the rocker by an occupant and a caregiver.” Per sections 3.1.6-3.1.7, an infant rocker is defined as “a freestanding product intended to support an occupant who has not developed the ability to sit up unassisted (approximately 0 to 6 months of age) in a seated, reclined position greater than 10° and to facilitate rocking by the occupant with the aid of the caregiver or by other means.”, and an infant/toddler rocker is defined as “freestanding product intended to support an occupant in a seated, reclined position greater than 10° and to facilitate rocking by the occupant with the aid of the caregiver or by other means until the occupant is approximately 2 ½ years.”

This memorandum, prepared by staff of the CPSC Division of Human Factors (ESHF), presents (a) an assessment of factors affecting adult and intended child user interaction with the product; (b) an assessment of the adequacy of the requirements for warnings on the product and in the instructional literature in the current voluntary standard; and (c) recommendations regarding the warnings and instructions for normal use and foreseeable misuse and abuse.

### II. Products

Rockers vary in style and complexity, but typically consist of a cloth seat affixed to a metal, wooden, or plastic frame. All rockers support the child in an inclined position (greater than 10°)

with certain infant/toddler rockers having adjustable seat backs to facilitate upright sitting as the child grows. Rockers are part of infant sitting devices (e.g., bouncers, swings), which provide support to infants who are initially unable to sit independently. Research indicates that sitting is beneficial to improving cognitive outcomes such as object perception, language development, spatial memory, visual processing, and overall cognition (Kretch et al 2022). The reason is that while sitting, infants have an improved ability to explore objects and a greater visual access to their environment as well as increased social attention. While infants are sitting, caregivers also demonstrate a wider variety of interaction with infants to practice cognitive skills compared to other postures (Kretch et al 2022).

In a report prepared for CPSC, titled *Seated Products Characterization and Testing*, researchers performed *in vivo* human testing with various seated products, including rockers. In the report, the researchers discuss the importance of offering infants a wide variety of body positions and opportunities to move in unique ways in order to provide sufficient physical stimulation, visual stimulation, and infant-caregiver interaction and to avoid developmental delays and certain medical conditions such as shoulder retraction or torticollis. The report's findings indicate that seated products offer infants a unique visual perspective and body position which could offer certain opportunities for learning and social interaction that infants may not receive from supine lying. The report's findings indicate that, among infants less than 4 months old, overall muscle activation was lower in seated products than on a firm, flat surface, indicating that younger infants (<4 months) may not have the muscle strength and coordination to control their body positions within seated products. The report emphasized the importance of using restraints and concluded that benefits of using seating products for younger infants would be limited primarily to visual stimulation and infant-caregiver interaction. However, among infants 4 months and older, overall muscle activation was greater in seated products than on a firm, flat surface, indicating that seated products, such as rockers, may be beneficial for physical development and the development of motor skills, as well as the aforementioned benefits regarding visual stimulation and infant-caregiver interaction.

Some products include a "soothing unit" that vibrates the chair, and that may play music or other sounds. Many products also feature an accessory bar with attached toys that are, or at some point will be, within the child's reach. Certain products also have secondary use modes. For example, some products have a kickstand that can be deployed to keep the product stationary, and other products can be converted into a bouncer or swing. Of the models that staff examined or saw on websites, all had three-point restraints, primarily utilizing wide cloth crotch restraints and short adjustable waist straps with plastic buckles. Some infant/toddler rockers also utilize a shoulder restraint. ASTM F3084-22 specifies the product's sole use as a reclined support that facilitates rocking. Manufacturers promote certain features of their products as providing stimulation and entertainment, and others as soothing and calming. Based on consumer reviews on retail websites, as well as incident reports, staff concludes that caregivers use the products as a place to contain the baby while the caregiver is relaxing or performing household tasks. In some cases, caregivers use rockers as a sleep product. Staff recommends strengthening warnings requirements to dissuade consumers from using rockers as a sleep product.

### III. Incident Data Review

In its memorandum, EPHA staff reported 1,088 incidents/complaints retrieved from CPSRMS sources between 1/1/2011 and 11/7/2022 (Yang, 2023). EPHA staff notes that the number of emergency department (ED)-treated injuries associated with infant rockers was insufficient to derive reportable national estimates. Therefore, EPHA staff was unable to provide injury estimates based on NEISS data.

As part of its assessment of the adequacy of warnings, ESHF staff reviewed incident data provided by EPHA staff and focused on reports that were suggestive of child or caregiver behavior as a factor in the incidents. Incidents involving other issues (e.g., battery leakage, structural failures such as screws separating and joints breaking) are addressed in the Division of Mechanical and Combustion Engineering (ESMC) memo in Tab C (Torres & Paul, 2023).

#### A. Fatalities

According to EPHA's analysis, 11 in-scope rocker-related fatalities occurred during the period reviewed, all of which were reported in the CPSRMS incident database. Of the 11 fatalities, nine involved infants being placed in the rocker for sleeping/napping. Two of these incidents indicate that the infants were placed on their side in the product, and one indicates that the product was broken/damaged and was being supported by a shoe box. One fatality involved an infant being placed in an infant rocker with the seat back in the "upright/toddler" position for approximately four hours. One fatality involved an infant being placed in a rocker on top of an adult bed without a caregiver present for approximately 20-30 minutes. Six of the 11 fatalities indicate that the restraints were not used.<sup>20</sup> Six of the 11 fatalities indicate that pillows and/or blankets were placed in the product with the infant, being placed either over the infant for warmth/comfort, under the infant for comfort/support, or both. One of these incidents indicate that a blanket was found covering the infant's face. Summaries of the fatalities and staff's determination of restraint use can be seen below.

- 1) IDI# 110715CAA3921: A 1-month-old male was placed on his side in a rocker with blankets under him and covering him and was left to sleep. The victim was later found with his face turned to the side, not breathing. It is unclear if the restraints were used, though the nature of the incident indicates that it is unlikely.
- 2) IDI# 121001HCC2003: A 3-month-old female was placed on her side in a rocker with two infant pillows, a folded sheet, and two fleece blankets and was left to sleep (the restraints were not used). The victim was later found face-down in the product. The rocker was reported to have been broken and was being propped up with a shoe box.
- 3) IDI #220720CBB3191: A 2-month-old male was placed in a rocker after a feeding and fell asleep in the product. Shortly after, the victim appeared to begin choking on formula and became unresponsive. Emergency medical technicians were unable to intubate the infant due to formula continuing to block his airway. Staff cannot determine whether the caregiver used the product restraints.

<sup>20</sup> Reports either explicitly state that restraints were not used, or the nature of the incidents indicate that restraint use was unlikely (ex: infants placed on their sides in the product, infants rolling over in the product, blankets being placed between the rocker and the infant, etc.).



- 4) IDI #140604CCC1664: A 2-month-old male was placed in a rocker with the seat set in the “upright/toddler” position. The report does not specify if the infant fell asleep in the product but indicates that the infant had been in the product for approximately 4 hours leading up to the incident. Staff cannot determine whether the restraints were used.
- 5) IDI# 160203CCC3373: An 11-month-old female was placed in a rocker for a nap with a blanket. The victim’s father fell asleep on a sofa in the same room. Upon waking, the father found the victim unresponsive in the product. The medical examiner found the cause of death was “undetermined”. The restraints were reportedly used.
- 6) IDI# 180319CCC2544: A 3-month-old male was fed and placed in a rocker to sleep on his back. The victim’s parents then fell asleep on a sofa in the same room. Approximately 3 hours later, the victim was found face-down in the product. The incident report states that the restraints were not used and that the victim had recently begun rolling. The report notes that acute bronchiolitis was a factor in the fatality.
- 7) IDI# 190205CBB3151: A 4-month-old female was placed in a rocker with a blanket and was left to sleep. The victim was later found face-down in the product. Staff cannot determine whether the restraints were used, though the nature of the incident indicate that it is unlikely.
- 8) IDI# 190926CBB1745: A 4-month-old female was placed in a rocker for a nap with a blanket placed under her; restraints appear to have been used. Approximately 20 minutes later, the victim was found unresponsive with blood coming from her nose. The medical examiner found the cause to be “sudden unexpected death in infancy” with manner of death “undetermined.”
- 9) IDI# 200504HCC2450: A 4-month-old male was placed in a rocker with blankets under him and covering him and was left to sleep. The victim was later found still supine unresponsive with a blanket covering his face. Staff cannot determine whether the restraints were used, though the nature of the incident indicates that it is unlikely.
- 10) IDI# 210714HCC3286: A 5-month-old female was placed in a rocker on top of an adult bed. The victim was left unsupervised and was not restrained in the product. Approximately 20-30 minutes later, the victim’s mother found the victim out of the rocker, face down on the bed.
- 11) Y226005YA: A 5-month-old female was placed in a rocker to sleep. The victim was later found unresponsive, cold, and not breathing. The coroner concluded the child died due to Sudden Infant Death Syndrome. Staff cannot determine whether the restraints were used.

### *B. Non-Fatal Incidents & Complaints*

According to EPHA's analysis, in the period reviewed, staff found 88 incidents in the CPSRMS database which reported an injury to a child (younger than 5 years of age). Of these incidents, head injuries were the most common, comprising 75 of 88 incidents. Injury severity varied widely among these incidents, ranging between skull fractures (two incidents), lost tooth, mouth lacerations, rug burns, and bruises. Ten of the 88 incidents reported injuries to the back, torso, fingers, or legs. One incident reported an infant suffering a seizure in a rocker, though the cause of the seizure is unclear. One incident involving an infant sleeping in a rocker reported that the infant began to turn blue but was removed from the rocker and returned to a normal color. Lastly, one incident reported neck pain. Staff cannot determine whether the restraints were used.

ESHF staff notes a significant number of incidents in which rockers tipped over while occupants were sitting in the product, accounting for 61 head injuries. ESHF staff also notes one incident in which an infant in a rocker fell from a kitchen counter resulting in a skull fracture. Incident reports indicate that tip-over incidents occurred when restraints were used, weren't used, or when restraint use was unspecified. Most of the tip-over incidents indicate that the product tipped forward, though several indicate that the product tipped backward. Multiple incident reports indicate that the occupant was leaning/reaching for something nearby when the tip-over occurred. ESHF staff also notes 36 incidents reporting leaking batteries, one of which reported a minor burn injury.

#### IV. Consumer Use of Rockers

Rockers are primarily used as a place for infants and/or toddlers to lay/sit while caregivers relax or perform tasks around the house (Fors Marsh Group 2022) in addition to interacting with the infant in a wide variety of ways. This is evidenced by both incident data and consumer reviews indicating use when the caregiver is performing tasks such as cooking, eating, working, taking a shower, or watching television, as well as the fact that most of the incident data indicates that the occupants were awake in the product. However, staff's review of incident data and consumer reviews and caregiver feedback also indicate that some caregivers intentionally utilize rockers for either extended, unsupervised sleep (*i.e.*, overnight) or for a short nap. Despite warnings that these products should not be used for infant sleep, it is foreseeable that some caregivers may perceive that rockers can be used for infant rest or sleep.

Young infants spend much of the day sleeping, with varying amount of daytime sleep and nighttime sleep for newborns; infants at three months spend about 13 hours sleeping, of which 4.5 hours are during the day; and at six months they sleep about 3.5 hours during the day.<sup>21</sup> Incident data and consumer reviews also indicate that infants may be placed in rockers for varying periods of time without a caregiver present and that it is foreseeable that some infants may fall asleep in that time. Given that 9 of the 11 fatal incidents discussed above involved infants sleeping or napping in a rocker,<sup>22</sup> and the remaining two incidents involve infants in a rocker without a caregiver present in the same room, ESHF concludes that these foreseeable use scenarios are issues of concern. However, ESHF staff notes that these scenarios are

<sup>21</sup> Sweet dreams: A guide to infant sleep - Boston Children's Answers ([childrenshospital.org](https://childrenshospital.org))

<sup>22</sup> Note: 220720CBB3191 involves an infant who fell asleep in a rocker, but the incident narrative indicates that the fatality was not attributed to sleeping in a rocker.

prevalent across a range of infant products and are not, to staff's knowledge, disproportionately high for infant rockers. For example, infant bouncer seats share many similarities to rockers in terms of their intended use, age range, product features/functionality, and allowing opportunities for infant development due to increased and varied ways of caregiver interaction. As mentioned above, some infant rockers on the market also have a bouncer functionality. In a previous memorandum prepared for infant bouncer seats (Yang, 2015), EPHA staff found 9 fatal incidents involving infants sleeping in bouncer seats dating between January 2006 and February 2015.

Additionally, research examining people's ability to maintain attention (Wickens & Hollands, 2000) concluded that people cannot be perfectly attentive, particularly for extended periods of time, regardless of their desire to do so.

## V. Labeling & Warning Requirements

As discussed in a prior ESHF staff memorandum assessing labeling and warning requirements (Smith, 2019), warning about hazards is viewed universally as less effective at addressing hazards than either designing the hazard out of a product or guarding the consumer from the hazard. Use of warnings is lower in the hazard-control hierarchy than design-based approaches because the effectiveness of a warning depends on persuading consumers to alter their behavior in some way to avoid hazards, rather than eliminating hazards, or inhibiting exposure to hazards. Therefore, when standards rely on warnings to address a hazard, warning statements must be as strong as possible, *i.e.*, the warnings must be noticeable, understandable, and motivating. The primary U.S. voluntary consensus standard for product safety signs and labels, ANSI Z535.4, *American National Standard for Product Safety Signs and Labels*, and other literature and guidelines on warnings (*e.g.*, Robinson, 2009; Wogalter, 2006; Wogalter, Laughery, & Mayhorn, 2012; as cited in Smith, 2019), consistently recommend that on-product warnings include content that addresses the following three elements:

- a description of the hazard;
- information about the consequences of exposure to the hazard; and
- instructions regarding appropriate hazard-avoidance behaviors.<sup>23</sup>

In May 2022, ASTM published F3084-22, *Standard Consumer Safety Specification for Infant and Infant/Toddler Rockers*.<sup>24</sup> This standard, intended to address disassembly/collapse, stability, and fall hazards, includes specific labeling and warning requirements for infant rockers and infant/toddler rockers, as well as their packaging. Section 8 of ASTM F3084-22 specifies labeling and warning requirements for infant rockers and infant/toddler rockers.

### A. Content

<sup>23</sup> All three elements may not be necessary in some cases, *i.e.*, if certain information is open and obvious or can be readily inferred by consumers. However, determining what is "open and obvious" can be challenging, as consumers may vary meaningfully in their knowledge and expectations, and overestimating obviousness can lead to fatal outcomes.

<sup>24</sup> ASTM F3084 – 22, *Standard Consumer Safety Specification for Infant and Infant/Toddler Rockers*, ASTM International, West Conshohocken, PA, 2017, [www.astm.org](http://www.astm.org).

Section 8.1 specifies that all rockers shall be marked or labeled clearly and legibly to indicate the following:

8.1.1 The name, place of business (city, state, and mailing address, including zip code), and telephone of the manufacturer, distributor, or seller.

8.1.2 A code mark or other means that identifies the date (month and year as a minimum) of manufacture.

Section 8.4 applies to battery-operated products and requires the following:

8.4.1 Each product's battery compartment, battery compartment door/cover or area immediately adjacent to the battery compartment shall be marked or labeled permanently and legibly to show the correct battery polarity, size, and voltage. These markings are not required for products utilizing one or more non-replaceable batteries.

8.4.2 Products utilizing one or more nonreplaceable batteries accessible with the use of a coin, screwdriver or other common household tool shall be marked or labeled permanently and legibly with a statement that the batteries are not replaceable. If marking or labeling the product is not practicable, then this statement shall be in the instructions.

Section 8.5 applies to products that use replaceable button or coin cell batteries that are 1.5 V or greater and that are larger than 15 mm in diameter but fit within the small parts cylinder (see 16 CFR 1501) and requires that the packaging for these products address the following:

**▲ WARNING**

Contains button or coin cell battery. Hazardous if swallowed—see instructions.

Section 8.7 contains four sets of warning statements with minor differences between each set based on the type of rocker (*i.e.*, infant rocker or infant/toddler rocker) and the type of restraint system used.

Section 8.7.1 applies to products meeting the definition of “infant rocker” (per section 3.1.6) and states that the warning statements must address the following:

**FALL HAZARD:** Children have suffered head injuries falling from rockers.

- **ALWAYS** use restraints. Adjust to fit snugly.
- **NEVER** lift or carry baby in rocker. [Rockers with a handle(s) intended for use to lift and carry a child are exempt from including this warning statement.]
- **STOP** using product when baby starts trying to sit up or has reached [*insert manufacturer's recommended maximum weight, not to exceed 20 lb*], whichever comes first.
- **ALWAYS** place rocker on floor. Never use on any elevated surface.

**SUFFOCATION HAZARD:** Babies have suffocated when seats tipped over on soft surfaces.

- **NEVER** use on a bed, sofa, cushion, or other soft surface.

- Stay near and watch baby during use. This product is not safe for sleep or unsupervised use. If baby falls asleep, remove baby as soon as possible and place baby on a firm, flat sleep surface such as a crib or bassinet.

Section 8.7.2 applies to products meeting the definition of “infant/toddler rocker” (per section 3.1.7) that do not utilize shoulder straps as part of the restraint system and states that the warnings must address the following.

**FALL HAZARD:** Children have suffered head injuries falling from rockers.

- **ALWAYS** use restraints until child is able to climb in and out of the product unassisted. Adjust to fit snugly.
- **NEVER** lift or carry baby in rocker. [Rockers with a handle(s) intended for use to lift and carry a child are exempt from including this warning statement.]
- **STOP** using rocker when baby has reached *[insert manufacturer’s recommended maximum weight, not to exceed 40 lb]*.
- The upright position is only for children who have developed enough upper body control to sit up without tipping forward.
- **ALWAYS** place rocker on floor. Never use on any elevated surface.

**SUFFOCATION HAZARD:** Babies have suffocated when seats tipped over on soft surfaces.

- **NEVER** use on a bed, sofa, cushion, or other soft surface.
- Stay near and watch baby during use. This product is not safe for sleep or unsupervised use. If baby falls asleep, remove baby as soon as possible and place baby on a firm, flat sleep surface such as a crib or bassinet.

Section 8.7.3 applies to products meeting the definition of “infant/toddler rocker” (per section 3.1.7) that utilize shoulder straps as part of the restraint system. For these products, the warnings must address the statements specified in either section 8.7.3.1 or 8.7.3.2 (shown below).

8.7.3.1 **FALL HAZARD:** Children have suffered head injuries falling from rockers.

- **ALWAYS** use restraints. Adjust to fit snugly.
- **NEVER** lift or carry baby in rocker. [Rockers with a handle(s) intended for use to lift and carry a child are exempt from including this warning statement.]
- **STOP** using rocker when baby has reached *[insert manufacturer’s recommended maximum weight, not to exceed 40 lb]*.
- The upright position is only for children who have developed enough upper body control to sit up without tipping forward.
- **ALWAYS** place rocker on floor. Never use on any elevated surface.
- **ALWAYS** place rocker on floor. Never use on any elevated surface.

**SUFFOCATION HAZARD:** Babies have suffocated when seats tipped over on soft surfaces.

- **NEVER** use on a bed, sofa, cushion, or other soft surface.

- Stay near and watch baby during use. This product is not safe for sleep or unsupervised use. If baby falls asleep, remove baby as soon as possible and place baby on a firm, flat sleep surface such as a crib or bassinet.

8.7.3.2 **FALL HAZARD:** Children have suffered head injuries falling from rockers.

- **ALWAYS** use restraints until child is able to climb in and out of the product unassisted. Adjust to fit snugly.
- **NEVER** lift or carry baby in rocker. [Rockers with a handle(s) intended for use to lift and carry a child are exempt from including this warning statement.]
- **STOP** using product when baby has reached *[insert manufacturer's recommended maximum weight, not to exceed 40 lb]*.
- The upright position is only for children who have developed enough upper body control to sit up without tipping forward.
- **ALWAYS** place rocker on floor. Never use on any elevated surface.

**SUFFOCATION HAZARD:** Babies have suffocated when seats tipped over on soft surfaces.

- **NEVER** use on a bed, sofa, cushion, or other soft surface.
- Stay near and watch baby during use. This product is not safe for sleep or unsupervised use. If baby falls asleep, remove baby as soon as possible and place baby on a firm, flat sleep surface such as a crib or bassinet.

## B. Format

Formatting requirements for warning labels are detailed in section 8.6. These formatting requirements align with the ASTM Ad Hoc Wording Task Group (Ad Hoc TG) recommendations.<sup>25</sup> The Ad Hoc TG recommends permanent, conspicuous, and consistently formatted on-product warning labels across juvenile products. On-product warning labels that align with the task group recommendations address numerous warning format issues and improve the label's attention-getting features and readability. Figure 1 is an example of a warning label following these formatting requirements.

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<sup>25</sup> Ad Hoc TG harmonized the wording and language used across juvenile product standards. This task group also developed recommendations for harmonizing warning format across standards. CPSC staff has worked closely with this group to develop ad hoc recommendations that are based largely on the requirements of the ANSI Z535.4, American National Standard for Product Safety Signs and Labels and other considerations. Ad Hoc TG contains members of the various juvenile product subcommittees as well as the Human Factors Division hazard communication subject matter expert and CPSC representative on the ANSI Z535 committee, Timothy P. Smith.



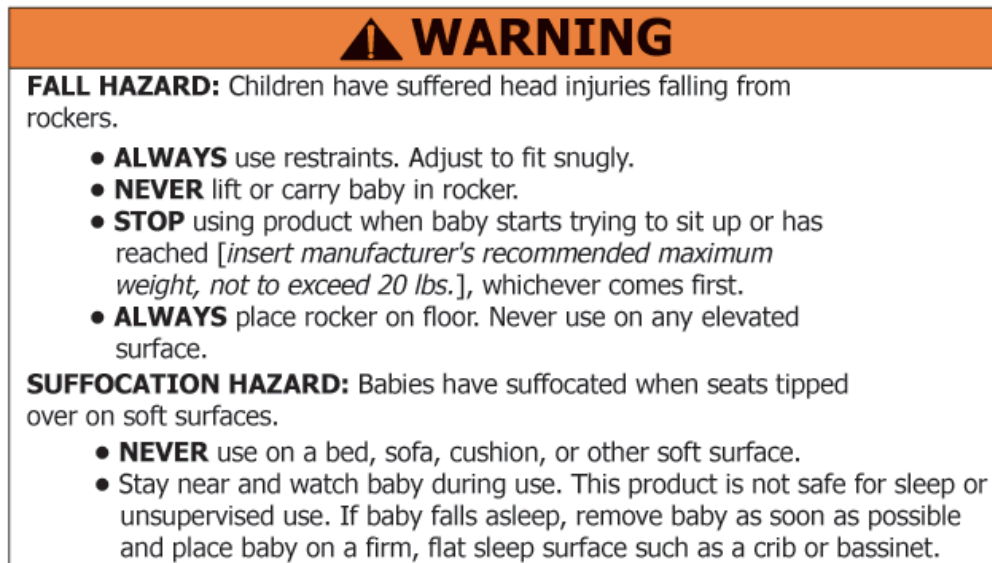


Figure 1: Warning label example provided in ASTM F3084-22

### C. Adequacy of Labeling and Warning Requirements to Address the Hazard

ESHF staff's assessment is that the labeling and warning requirements generally address the hazards associated with infant rockers and infant/toddler rockers with important exceptions discussed below, particularly to better warn against using for sleep. Namely, the warnings specifically address fall hazards and suffocation hazards and contain specific instructions for the consumer (ex: use restraints, use the product on the floor only, etc.). ESHF staff also assesses that the formatting requirements are likely to make warning labels consistent across various infant rockers and infant/toddler rockers, and that the requirements address warning format issues related to capturing consumer attention, improving readability, and increasing hazard perception and avoidance behavior.

Based on the fatality data, ESHF staff recommends that the warnings against using rockers for sleep be made stronger and that those warnings be the first presented on the warning label, as the vast majority of fatal incidents are associated with infant sleep. Additionally, while ESHF staff recognizes that keeping the warnings concise is important to maximize their effectiveness, given the number of fatal incidents involving the use of soft bedding (*i.e.*, blankets and/or pillows) in the rocker, ESHF staff recommends that language be added to the warnings to address the use of soft bedding. ASTM F2088-22 *Standard Consumer Safety Specification for Infant and Cradle Swings* contains such language. While ESHF staff notes that this language is only required for cradle swings, which by design allow an infant to lie flat, neither cradle swings nor rockers are intended to be used for infant sleep. Therefore, ESHF staff recommends that the language in ASTM F2088-22 warning against the use of soft bedding or padding be added to the warnings in ASTM F3084-22. Additionally, Health Sciences staff notes that infants born prematurely face greater vulnerability to suffocation due to a shorter gestation period and recommends that parents of premature infants consult a physician before using a rocker (see

Tab B). ESHF staff agrees with this assessment and therefore recommends that such a statement be added to the warning text. An example warning containing staff's recommended changes is shown in Figure 2. Staff requests comments on these recommendations.

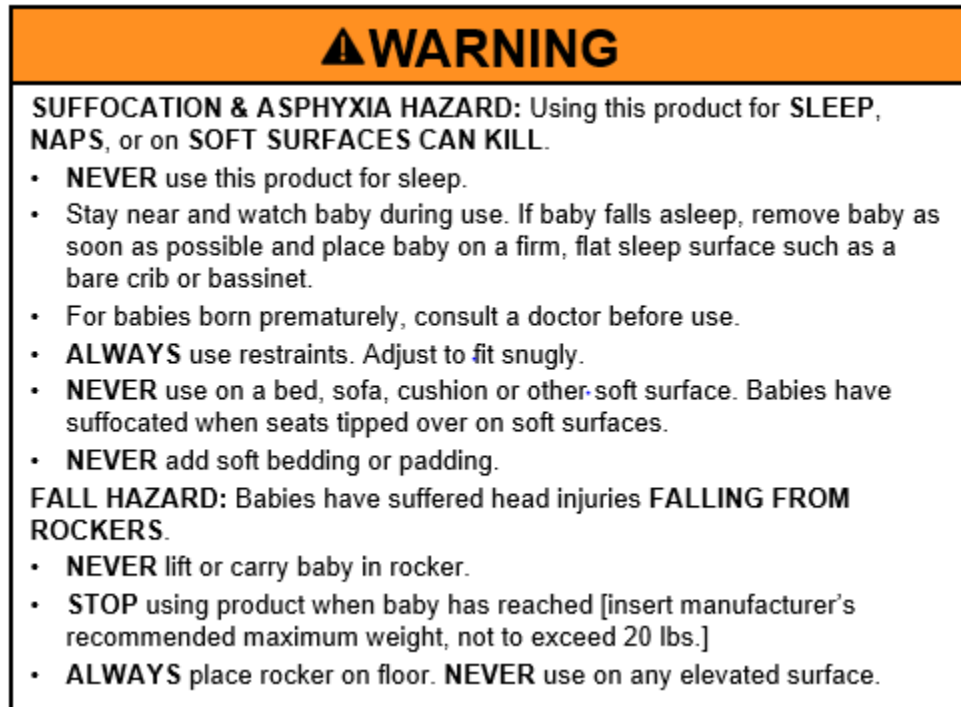


Figure 2: Example warning label with staff's recommended changes

ESHF staff also notes that, other than a requirement for a warning label to be “conspicuous,” the voluntary standard contains no specific requirements for the location or visibility of the warning labels. ESHF staff recommends that these location/visibility requirements be added to ASTM 3084. Additionally, given the prevalence of fatal incidents involving infants sleeping/napping in rockers, ESHF staff recommends that these requirements be modified to apply to all warning language, not just fall hazard warnings. The bouncer standard, ASTM F2167-22, contains such requirements for fall hazard warnings in sections 7.11 and 8.4.7:

*7.11 Fall Hazard Label Visibility Test:*

7.11.1 Place infant bouncer seat on the floor.

7.11.2 Place and secure the Newborn CAMI dummy (Fig. 2) in the infant bouncer seat.

7.11.3 *Visibility Tests With and Without Accessories and Toy Bars:*

7.11.3.1 *Visibility With CAMI Dummy Restrained in Seat—*

Place the CAMI Newborn Dummy in the product with the restraint system engaged according to the manufacturer's instructions. While standing in front of the product with the Newborn CAMI dummy installed, verify that the required warnings are visible and placed above an imaginary horizontal line that crosses through the junctions of under arm and side of the torso armpits on both left and right sides and not obscured by any part of the dummy (refer to Fig. 10).



NOTE 10—The placement of the warnings is only applicable to the English language portions of the warning label.

**7.11.3.2 Visibility with Accessories (Excluding Toy Bars)—**

Infant bouncer seats that include any accessory(ies) that could potentially obscure the fall hazard warning shall comply with visibility requirements of 7.11 both with such accessory(ies) in place (in all configurations and combinations) and with the accessory(ies) removed.

**7.11.3.3 Visibility With Toy Bar—**If any part of the required warnings is obscured by a toy bar or its attached toys, but is visible with a shift of the observer's head position, then this is considered acceptable.

**8.4.7 Fall Hazard Warning Location—**The fall hazard warnings in 8.5.1.1 shall be on the front surface of the infant bouncer seat back so as to comply with the visibility requirements in 7.11.

Lastly, ESHF staff recommends that several typographical errors in the ASTM F3084-22 warning requirements be corrected.

The redline memorandum in Tab G contains all of ESHF staff's recommended revisions.

## VI. Instructional Literature Requirements

Section 9 of ASTM F3084-22 specifies requirements for the instructional literature for infant rockers and infant/toddler rockers. Per section 9.1, instructions shall be provided with the rocker, shall be easy to read and understand, and shall be in the English language at a minimum. These instructions shall include information on assembly, maintenance, cleaning, and use, where applicable.

### A. Content

Section 9.2 states that the instructions shall include the warnings in section 8.7. Given that there are four different warnings in section 8.7, ESHF staff's interpretation is that the instructions shall include the warning from section 8.7 relevant to the given product.

Section 9.3 applies to products that operate using replaceable batteries and requires that the instructions address the following:

**▲ CAUTION**

To prevent battery leaks, which can burn skin and eyes:

- Remove batteries when storing product for a long time.
- Dispose of used batteries immediately.

9.3.2 Instructions for products that use more than one battery in any one circuit shall also address the following under the same CAUTION header:

- Always replace the entire set of batteries at one time.
- Never mix old and new batteries, or batteries of different brands or types.

Section 9.4 applies to products that operate using replaceable button or coin cell batteries and requires that the instructions address the following:

**▲ WARNING**

This product contains a button or coin cell battery.

A swallowed button or coin cell battery can cause internal chemical burns in as little as two hours and lead to death.

- Dispose of used batteries immediately.
- Keep new and used batteries away from children.
- If you think batteries might have been swallowed or placed inside any part of the body, seek immediate medical attention.

Section 9.6 states that the instructions shall contain information indicating the manufacturer's recommended maximum weight, height, age, developmental level, or combination thereof of the occupant for which the product is intended.

### *B. Format*

Formatting requirements for instructional literature are detailed in section 9.5. Section 9.5 states that the cautions and warnings in the instructions shall meet the requirements specified in 8.6.4-8.6.6 (formatting requirements for warning labels), except that sections 6.4 and 7.2-7.6.3 of ANSI Z535.4 need not be applied. However, the signal word and safety alert symbol must contrast with the background of the signal word panel, and the warnings shall contrast with the background of the instructional literature. These formatting requirements align with the Ad-Hoc recommendations for instructional literature.

### *C. Adequacy of Instructional Literature Requirements*

Since, per section 9.2, instructional literature for a given product is required to contain the applicable warning statement from section 8.7, any changes to the warning(s) in section 8.7 would be reflected in the instructional literature. Therefore, ESHF staff assesses that the instructional literature requirements in ASTM F3084-22 adequately address hazards associated with infant rockers and infant/toddler rockers and do not require revision, provided that ESHF staff's recommended revisions to the warning requirements in section 8 are incorporated. ESHF staff also concludes that the formatting requirements are likely to make the warning/caution statements contained in the instructional literature consistent across various infant rockers and infant/toddler rockers, and that the requirements address warning format issues related to capturing consumer attention, improving readability, and increasing hazard perception and avoidance behavior.

## **VII. Conclusion**

ESHF staff has reviewed the warnings and instructional requirements specified in sections 8 and 9 of ASTM F3084-22. Staff advises that additions to the warning language, specifically language addressing infant sleep and the use of soft bedding, are needed to address the

hazards found in staff's review of the incident data. Staff also recommends that warning visibility requirements be added to the standard to ensure that warnings are prominently placed and conspicuous to the consumer. ESHF staff has revised the warning language and proposed a label visibility requirement, which can be viewed in the redline memorandum (Tab G). ESHF staff recommends that the Commission issue a proposed rule for infant rockers and infant/toddler rockers that incorporates by reference ASTM F3084-22, with the proposed modifications.

## VIII. References

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## **Tab E: Memorandum by The Office of Compliance and Field Operations, Division of Regulatory Enforcement**



## Memorandum

**TO:** Zachary S. Foster, Project Manager,  
Division of Human Factors  
Directorate of Engineering Sciences

**DATE:** September 13, 2023

**THROUGH:** Robert Kaye, Director  
Office of Compliance and Field Operations

Shaun Keller, Division Director  
Division of Regulatory Enforcement

Stephanee Synnott, Assistant Division Director  
Division of Regulatory Enforcement

**FROM:** Maureen Danskin, Compliance Officer  
Division of Regulatory Enforcement

**SUBJECT:** Infant Rockers: Summary of Recalls and Warnings – January 2011 through August 2023

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### I. Introduction

This memorandum provides a summary of infant rocker and infant/toddler rocker recalls and warnings in support of the draft notice of proposed rulemaking for infant rockers.

### II. Summary of Recalls

From January 1, 2011 through August 29, 2023 CPSC issued one recall and one warning regarding infant and infant/toddler rockers. The recall involved two multi-mode products with infant rocker modes.<sup>26</sup> The press release described four infant deaths in one of the recalled products, in which the infants were reportedly placed on their backs unrestrained and later found on their stomachs.

The warning involved 13 reported deaths in infant/toddler rockers.<sup>27</sup> The warning press release explained to consumers that rockers should never be used for sleep and infants should never be unsupervised or unrestrained in the rockers.

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<sup>26</sup> <https://www.cpsc.gov/Recalls/2021/Fisher-Price-Recalls-4-in-1-Rock-n-Glide-Soothers-After-Four-Infant-Deaths-2-in-1-Soothe-n-Play-Gliders-Also-Recalled>

<sup>27</sup> <https://www.cpsc.gov/Newsroom/News-Releases/2022/CPSC-and-Fisher-Price-Warn-Consumers-About-13-Deaths-in-Fisher-Price-Infant-to-Toddler-and-Newborn-to-Toddler-Rockers-Advise-Rockers-Should-Never-Be-Used-for-Sleep>

## **Tab F: Initial Regulatory Flexibility Analysis**



## Memorandum

**TO:** Zachary S. Foster, Project Manager,  
Division of Human Factors  
Directorate of Engineering Sciences

**DATE:** September 13, 2023

**THROUGH:** Alex Moscoso, Associate Executive Director, and  
José Tejada, Division Director,  
Directorate for Economic Analysis

**FROM:** Susan Proper, Economist  
Directorate for Economic Analysis

**SUBJECT:** Initial Regulatory Flexibility Analysis for Draft Notice of Proposed Rulemaking to Establish a  
Safety Standard for Infant and Infant/Toddler Rockers

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### I. Introduction

The U.S. Consumer Product Safety Commission (CPSC) staff developed a draft Notice of Proposed Rulemaking (NPR) to establish a mandatory safety standard for infant rockers and infant/toddler rockers. This safety standard would incorporate ASTM F3084-22 by reference with modifications to make the mandatory standard more stringent to further reduce the risk of injury associated with infant rockers.

Section 603 of the Regulatory Flexibility Act (RFA, 5 U.S.C. § 603) requires the Commission to prepare an Initial Regulatory Flexibility Analysis (IRFA) for a proposed rule, describing the impact of the proposed rule on small entities, and identifying efforts by the Commission to reduce those impacts. This memorandum provides the IRFA for the infant rockers NPR. Overall, the impact of the draft proposed rule could be significant for nine small U.S. importers and small manufacturers because all products affected would likely require some structural modifications to meet the requirements in this NPR, as well as new warning labels.

As specified in the RFA, the IRFA must contain:

- “(1) a description of the reasons why action by the agency is being considered;
- (2) a succinct statement of the objectives of, and legal basis for, the proposed rule;
- (3) a description of and, where feasible, an estimate of the number of small entities to which the proposed rule will apply;
- (4) a description of the projected reporting, recordkeeping, and other compliance requirements of the proposed rule, including an estimate of the classes of small entities which will be subject to the requirement and the type of professional skills necessary for preparation of the report or record;
- (5) an identification, to the extent practicable, of all relevant Federal rules which may duplicate, overlap or conflict with the proposed rule.”



## II. Reason for Agency Action

Currently, no mandatory safety standard exists for infant rockers or infant/toddler rockers. The hazard data (Tab A) shows 11 reported fatalities and 88 reported nonfatal injuries involving infant rockers from January 1, 2011 to November 7, 2022. The majority of the fatalities were attributed to positional asphyxia or probable asphyxia, while the majority of nonfatal injuries were head injuries from falls. All 11 fatalities, and 70 of the 88 nonfatal injuries, involved victims less than one year old.

Pursuant to section 104 of the Consumer Product Safety Improvement Act of 2008 (CPSIA), the CPSC is required to create mandatory safety standards for all durable infant or toddler products. Accordingly, staff is recommending that CPSC publish an NPR with specific performance requirements to address the hazards associated with infant rockers, particularly hardware and stability hazards, and to require a specific warning label addressing the hazards of using rockers for infant sleep.

The requirements in the draft NPR are more stringent than the voluntary ASTM standard for infant rockers. Relatively few rockers for sale in the U.S. are marketed as ASTM-compliant.<sup>28</sup> Only two out of approximately 50 current suppliers to the U.S. market are members of the Juvenile Products Manufacturers Association's (JPMA) certification testing program for infant/toddler rockers, which provides third party testing for compliance with CPSC and ASTM standards. JPMA currently has four member companies that are certified specifically for infant/toddler rockers, two of which do not currently have a rocker for sale in the U.S.

## III. Objectives and Legal Basis of the Proposed Rule

### A. Objectives of Proposed Rule

The objective of the proposed rule is to establish a mandatory safety standard based on the voluntary standard to address the known hazards of the products, which include positional asphyxia, disassembly/collapse, hardware failures such as screws coming out and parts breaking off, and falls from elevated surfaces. The draft rule has more stringent performance and labeling requirements than the voluntary standard, based on analysis by engineering staff (Tab C) and human factors staff (Tab D). The warning label and instructions recommended by staff (Tab D) have stronger and more specific warnings than the ASTM standard, improving the warning about not using the rockers for sleep.

### B. Legal Basis of Proposed Rule

Section 104(b)(1) of the CPSIA requires the Commission to assess the effectiveness of voluntary standards for durable infant or toddler products and to adopt mandatory standards for these products. 15 U.S.C. § 2056a(b)(1). A mandatory standard must be "substantially the same

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<sup>28</sup> Staff research found that on prominent online marketplaces, some rockers are advertised as "CPSIA certified" and/or "ASTM certified", however neither the CPSIA nor ASTM "certify" products.

as” the corresponding voluntary standard, or it may be “more stringent than” the voluntary standard, if the Commission determines that more stringent requirements would further reduce the risk of injury associated with the product. *Id.* This draft NPR would incorporate by reference, ASTM F3084-22 *Standard Consumer Safety Specification for Infant and Infant/Toddler Rockers*, with modifications that make the standard more stringent to further reduce the risk of injury.

The CPSIA also authorizes the Commission to require manufacturers of durable nursery products to provide consumers with a postage-paid consumer registration form with each such product, and to permanently place the manufacturer name and contact information, model name and number, and the date of manufacture on each durable infant or toddler product. 15 U.S.C. § 2056a(d). This draft NPR would add infant and toddler rockers to the list of products for which registration cards are required.

The CPSIA also sets forth the requirements for third party testing of children’s products, and for the accreditation of such testing laboratories. 15 U.S.C. § 2063. This draft NPR would add infant and toddler rockers to the list of durable infant products specified in 16 C.F.R. part 1112, Requirements Pertaining to Third Party Conformity Assessment Bodies.

### *C. Compliance with Proposed Rule*

The draft NPR establishes new performance and labeling requirements. Suppliers, meaning importers and domestic manufacturers, would need to conduct third party testing to demonstrate compliance with the specific requirements of this rule. The requirement to conduct third party testing should not be a new requirement or burden for any supplier; suppliers were already required to demonstrate compliance with other relevant CPSC mandatory standards for children’s products, including those for lead paint and small parts, with third party testing. More than half of the rocker products on the market are combination products that also already subject to third party testing to demonstrate compliance to the mandatory standards for bouncer chairs or swings.

The requirements in the draft NPR are more stringent than the requirements in the ASTM standard for rockers. Some of the more stringent requirements are consistent with the requirements in the mandatory standard for bouncer chairs, so products that are a combination of a rocker and bouncer chair may already meet those requirements.

Most of the paperwork requirements, including third party testing and providing certificates of conformance, are already required for all children’s products under OMB Control Number 3041–0159. The only additional paperwork requirements of this draft NPR are the warning labels and instruction manuals, which most products already have, but would require modification to meet the specific requirements of this rule. The ongoing cost of the new labels, registration forms, and instruction manuals is estimated to be about \$1 per item for materials. The initial cost for labor to develop the labels and instruction manuals is included in the cost of redesigning models to comply with this rule, which is discussed in more detail in section VII of this memorandum. The labeling and instruction requirements constitute a burden under the Paperwork Reduction Act. CPSC staff will submit an Information Collection Request to OMB for their approval and obtain

an OMB control number for this new information collection.

#### **IV. Entities to Which the Proposed Rule Would Apply**

##### *A. Products in Scope*

The draft NPR would apply to infant rockers and infant/toddler rockers, including multi-mode products that have a rocker mode. The ASTM standard F3084-22 defines an infant rocker as “a freestanding product intended to support an occupant who has not developed the ability to sit up unassisted (approximately 0 to 6 months of age) in a seated, reclined position greater than 10° and to facilitate rocking by the occupant with the aid of the caregiver or by other means.” The standard defines infant/toddler rocker as “a freestanding product intended to support an occupant in a seated, reclined position greater than 10° and to facilitate rocking by the occupant with the aid of the caregiver or by other means until the occupant is approximately 2 ½ years.” The draft NPR does not change those definitions.

Products in scope of this rule would include:

- Infant rockers, marketed for infants up to 6 months old,
- Infant/toddler rockers, marketed for children up to 2 ½ years old,
- Combination rocker/bouncers (bouncers with curved rocker legs),
- Combination swing/rockers (rockers that attach to a stationary swing base), and
- Other combination products, such as rocker/bouncer/stationary chair products

Most rockers have a metal or plastic frame with a padded fabric seat. A few products, primarily from foreign direct shippers and hand crafters, have a wooden frame. Some products have a motorized rocking function, a vibration function, or sounds, which is powered by either batteries or an electrical cord with a plug (A/C).

##### *B. Products out of Scope*

Some items marketed as “rockers” are in the scope of the mandatory standard for swings in 16 C.F.R. part 1223, rather than this draft NPR. CPSC staff considers rockers to be products that rotate forward/backward on a moving base, most commonly by curved legs on the bottom, whereas swings have a stationary base. Additionally, many swings have motorized movements, while some rockers have motorized sounds and vibrations, but typically do not have motorized swinging or rocking movements. Multi-mode items, such as a rocker with curved legs that attaches to a motorized swing base, must meet both standards. Some conventional bouncer seats are advertised as “rockers” because they rock up and down, but these products do not meet the definition of a “rocker” in either the ASTM standard or this draft NPR if the base remains stationary. Bouncer seats must meet the bouncer seat mandatory standard in 16 C.F.R. part 1229, while multi-mode items that are both rockers and bouncers must meet both standards.

Rocking horse toys and similar items are out of scope. They do not meet the definition of a

“rocker” in the ASTM standard or this draft NPR because they do not support the occupant in a seated, reclined position. Similarly, traditional children’s rocking chairs with a straight, non-reclining back are not in scope.

### *C. The Market – Suppliers, Units Sold, Prices*

Staff estimates infant rocker sales to be 567,500 units per year based on recent market analysis data<sup>29</sup> and CPSC staff analysis.

Infant rockers are intended to be used to contain and entertain an awake infant. They compete with other items marketed for the same purposes, including swings and bouncer chairs<sup>30</sup>. Consumer reviewers often group rockers and bouncers together as one category.<sup>31</sup> On a major internet retailer site in January 2023, five of the 20 best-selling products, or 25 percent, in the “infant bouncers and rockers” category were rockers or combination rocker/bouncer products within scope of this rule. For the purposes of estimating the impact of the draft NPR, staff assumes that, at most, 25 percent of the units sold in the “Baby motion swing rocker sleeper bouncer” category from a 2018 Statista survey (567,500) include rockers within the scope of this draft rule, with the other 75 percent of units are swings and bouncer seats.<sup>32</sup>

As a caveat, actual sales may be lower than the Statista estimate because it is possible that sales have declined since 2018, due in part to increased public awareness of suffocation deaths in infant rockers.<sup>33</sup> Additionally, at least one large company has seemingly stopped selling infant rockers in the U.S. in the past year. However, staff assumes that the sales numbers for infant rockers include infant/toddler rockers; if this is not the case, then actual sales may be greater than the Statista estimate.

New rockers are available from online general retail sites, brick and mortar baby specialty stores, and brick and mortar general retail stores including “big box” stores. Used items are widely available on second-hand sites, as well as in some thrift stores. Prices range from under \$35 for a small infant rocker with no powered functions to more than \$250 for a combination swing/rocker with a motorized base. The average price is about \$110. Using the estimate of approximately 567,500 units sold each year with the average price, staff estimates a \$62 million market in terms of annual sales.

An estimated 13 U.S. firms supply the infant and infant/toddler rockers domestic market, as well as 7 foreign manufacturers and about 30 foreign direct shippers<sup>34</sup>, for a total of about 50

29 A market analysis by Statista in 2018 reported U.S. sales of “Baby motion swing rocker sleeper bouncer” of 2.27 million units. Staff cannot separate out specifically “rockers” from these sales, or from similar surveys of product ownership, because of the plethora of combination products. A rocking function is common on swings and bouncer chairs. Swings and bouncer chairs are sometimes marketed as “rockers,” even if they have a stationary base. See <https://www.statista.com/statistics/891908/baby-feeding-care-and-travel-accessory-unit-sales-by-product-type-us/>

30 Ibid.

31 For example, see <https://www.nytimes.com/wirecutter/reviews/best-baby-bouncers-and-rockers/>

32 Staff assumes that the sales of inclined sleepers is now zero due to Congress’s ban on these products in the 2022 Safe Sleep for Babies Act.

33 See, for example <https://www.cpsc.gov/Newsroom/News-Releases/2022/CPSC-and-Fisher-Price-Warn-Consumers-About-13-Deaths-in-Fisher-Price-Infant-to-Toddler-and-Newborn-to-Toddler-Rockers-Advise-Rockers-Should-Never-Be-Used-for-Sleep>

34 Foreign direct shippers are suppliers who ship product directly to individual U.S. consumers from an address in a foreign country.

suppliers<sup>35</sup>. The total number of suppliers is approximate because third party sellers on prominent internet sites (primarily small importers and small foreign direct shippers) sell a wide variety of products and can enter and exit the market very quickly. Most companies that supply infant rockers also supply a variety of other infant and children's products; infant rockers are typically not their only or main product line. About 80 models of infant rockers were available for sale on the U.S. market as of March 2023.

#### *D. Small Entities to Which the Proposed Rule Would Apply*

Of the 13 U.S. manufacturers and importers that currently supply the U.S. market, four are small U.S. manufacturers and five are small U.S. importers based on Small Business Administration (SBA) size standards, for a total of nine small U.S. entities to which the draft NPR would apply. The rest of the suppliers, about 37, are foreign-based manufacturers, including foreign-based manufacturers and foreign direct shippers. Staff estimates of company sizes and location of company operations are based on publicly available information on company websites and information from financial analytics subscription services, as well as seller address listings on online retailer sites.

The SBA sets size standards for what constitutes a U.S. small business for the purpose of various federal government programs<sup>36</sup>. The size standards are based on the number of employees or the annual revenue of the firm, and there is a specific size standard for each North American Industry Classification Series (NAICS) category<sup>37</sup>.

Manufacturers and importers of rockers may fit into several different NAICS categories. Neither infant rockers nor durable nursery products have a specific NAICS category. Companies that manufacture infant rockers may be categorized as furniture, textile products, toy and game, or apparel manufacturers. Importers are generally considered a type of merchant wholesaler. Other NAICS categories may apply to companies that manufacture or import infant rockers, but for whom rockers are not their main product line. As seen in the table below of applicable general NAICS categories, the size standard for manufacturers is generally 500 to 1000 employees to be considered a small business, while it is generally 100 to 150 employees for importers and wholesalers.

NAICS code	SBA size category	SBA size standard for small business
315240	Women's, Girls', and Infants' Cut and Sew Apparel Manufacturing	750 employees
337122	Nonupholstered Wood Household Furniture Manufacturing	750 employees

35 Based on staff analysis of products offered online by general retailers, specialty baby product retailers, department stores, and individual baby product companies.

36 The size standards are in listed in the Code of Federal Regulations. See 13 CFR part 121.

37 The North American Industry Classification System (NAICS) is the standard used by Federal statistical agencies in classifying business establishments for the purpose of collecting, analyzing, and publishing statistical data related to the U.S. business economy. For more information, see <https://www.census.gov/naics/>

337124	Metal Household Furniture Manufacturing	750 employees
314999	All Other Miscellaneous Textile Product Mills	500 employees
337125	Household Furniture (except Wood and Metal) Manufacturing	750 employees
337910	Mattress Manufacturing	1000 employees
339930	Doll, Toy, and Game Manufacturing	500 employees
339999	All Other Miscellaneous Manufacturing	500 employees
423210	Furniture Merchant Wholesalers	100 employees
423920	Toy and Hobby Goods and Supplies Merchant Wholesalers	150 employees
424330	Women's, Children's, and Infants' Clothing and Accessories Merchant Wholesalers	100 employees

The draft NPR would not have any requirements or direct economic impacts on retailers of any size, because products manufactured or imported before the effective date of the final rule could still be sold. There could be indirect impacts on retailers in the longer term if rockers are removed from the market rather than redesigned to meet the requirements of this standard, or if an increased price of compliant rockers reduces demand.

## **V. Compliance, Reporting, Paperwork & Record Keeping Requirements for the Draft Proposed Rule**

Suppliers would be required to meet the performance, warning label, and user instruction requirements of the draft NPR, and conduct third party testing to demonstrate compliance. This section discusses the reporting and paperwork requirements. The compliance costs are analyzed in detail in section VII of this memorandum. Suppliers must demonstrate that they have met the performance requirements of the draft NPR by third party testing their products and issuing certificates of compliance (certificate). Also, as specified in 16 CFR part 1109, suppliers who are not the original manufacturer or importer may rely on testing or a certificate provided by another party to issue their own certificate, provided they meet the requirements in part 1109. Retailers are not required to third party test the children's products that they sell. Section 14(g)(3) of the CPSA requires certifiers to furnish certificates to each retailer and distributor. Manufacturers of durable infant or toddler products listed in 16 CFR part 1130 must



also provide product registration cards. CPSC's website describes current certificate and product registration card requirements.<sup>38</sup>

While some products currently have labels, all products would have to meet the specific labeling requirements and instructions specified in the draft NPR. The text and graphics for the required labels and instructions are provided in the rule, so specialized graphics design expertise would not be required to develop the warnings and instructions. CPSC's Office of the Small Business Ombudsman provides additional online resources for small businesses to assist with the recordkeeping requirements of compliance.<sup>39</sup>

Some reporting and recordkeeping requirements of this rule would be new. New packaging and instructions would be required for items not compliant with the current ASTM standard. Many items from foreign direct shippers do not come with the required labels or instructional literature. Staff estimates the ongoing cost of the new labels and instruction manuals is about \$1 per item for materials. The initial cost for labor of developing the labels and instruction manuals is included in the cost of redesigning models to comply with this rule, which is discussed in more detail in section VII of this memorandum. As noted earlier, the labeling and instruction requirements constitute a burden under the Paperwork Reduction Act. CPSC staff will submit an Information Collection Request to OMB for their approval and obtain an OMB control number for this information collection.

## **VI. Federal and State Rules That May Overlap with the Proposed Rule**

CPSC staff has not identified any other Federal rules that duplicate, overlap, or conflict with the proposed rule. As noted earlier, some products marketed as "rockers" do not meet the ASTM definition of a rocker, nor the definition in this NPR, but may be in scope of CPSC's mandatory standards for swings or bouncer seats.

The Safe Sleep for Babies Act banned inclined sleepers for infants, which includes a product with an inclined sleep surface greater than 10 degrees that is intended, marketed, or designed to provide sleeping accommodations for an infant up to 1 year old. This means that any rocker intended, marketed, or designed for sleep would be not compliant with the Safe Sleep for Babies Act. Furthermore, sleep products with an inclined sleep surface greater than 10 degrees would not meet the mandatory standard for Infant Sleep Products in 16 CFR part 1236.

## **VII. Potential Impact on Small Entities**

The rule could have a significant impact on nine small U.S. importers and manufacturers whose products may not be consistent with the requirements in this draft NPR. Staff considers one percent of annual revenue from sales to be a "significant" economic impact, consistent with economic analysis used by other federal government agencies.

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38 See: <https://www.cpsc.gov/Testing-Certification/Childrens-Product-Certificate-CPC> and <https://www.cpsc.gov/Business--Manufacturing/Business-Education/Durable-Infant-or-Toddler-Products/FAQs-Durable-Infant-or-Toddler-Product-Consumer-Registration>

39 See <https://www.cpsc.gov/Business--Manufacturing/Small-Business-Resources>

### *A. Cost of Modifying Product*

Most products on the market would require redesign to meet the standard and need new packaging and labels. The extent of the required modifications would depend on whether the products already meet the ASTM standard for rockers, or (for multi-mode products) the mandatory standard for bouncer chairs or swings.

Multi-mode products are already required to be third-party tested for compliance with the bouncer or swing mandatory standard. Given that the structural stability requirements in the bouncer standard are similar to the requirements in this draft NPR, it is possible that multi-mode products would meet the performance requirements without modification. However, given the number of incidents reported in the EPI memo (Tab A), it is possible that products that appear to comply with the draft NPR may require some modifications. Rockers that do not meet the general requirements for hazardous edges, structural stability, and pinching hazards would require substantial redesign. Rockers that recline to a less than 10-degree angle (almost fully flat) and infant rockers that do not have a restraint system would require redesign.

Customer reviews of infant rockers and infant/toddler rockers from retail websites are consistent with the hazards reported in the EPI memo (Tab A). Many products have multiple negative customer reviews about structural stability for an occupant within the marketed weight/size limit. Some products have negative reviews about screws or other fasteners that are loose or do not fit, as well as wood splinters. Some complaints state that the product tipped over with the occupant inside. Many products, particularly those from foreign direct shippers, do not have the required labeling or instructions. There have been instances of counterfeit infant rockers<sup>40</sup> being manufactured, and infant rockers are sold on online sites that are on the Office of the U.S. Trade Representative's list of notorious markets for counterfeiting and piracy.<sup>41</sup>

Manufacturers whose products do not meet the performance requirements in the draft NPR will need to redesign their products, at a cost of approximately \$80,000 per model, or remove the products from the market. (Testing costs are covered in the next section.) A one-time redesign requires an estimated 400 hours of professional staff time per model, including in-house testing of the prototypes and development of labels and instruction materials. Given that most rockers have metal or molded plastic parts, new molds or metal templates may be required. Using current (March 2023) Bureau of Labor Statistics Employer Costs of Employee Compensation,<sup>42</sup> staff estimates the cost per supplier for labor is \$25,380 at a current cost for professional labor of \$63.45 per hour, rounded to \$25,000 for the purpose of this cost estimate. Staff estimates the materials costs for prototyping to be about \$10,000 at the low end, up to \$100,000 if new molds are required for the final design. Thus, the total cost of redesign is approximately \$35,000 to \$125,000 per model, with an average estimate of \$80,000. One of the small U.S. companies

<sup>40</sup> <https://www.shine.cn/news/metro/1910173892/>

<sup>41</sup> <https://ustr.gov/about-us/policy-offices/press-office/press-releases/2023/january/ustr-releases-2022-review-notorious-markets-counterfeiting-and-piracy>

<sup>42</sup> . [https://www.bls.gov/news.release/archives/eccec\\_06162023.pdf](https://www.bls.gov/news.release/archives/eccec_06162023.pdf) These costs reflect the employers' cost for salaries, wages, and benefits for civilian workers.



that manufacturers rockers has at least 5 models of rockers, including combination products; the cost of redesign could be as high as \$400,000 for that small company.

Most U.S. manufacturers have outsourced production to Asia, but design their products in North America, so this estimate reflects U.S. labor and materials costs for prototype designs. Larger manufacturers with a range of similar products may be able to reduce the design cost per model. However, smaller manufacturers would be less likely to be able to benefit from such economies of scale. While importers would not directly pay for the cost of redesign, the cost of redesign by others would almost certainly be reflected in the wholesale price. One of the small U.S. importers has 3 different rocker models, while another has 2 models. Currently, dozens of companies on Alibaba<sup>43</sup> offer customized rocker/bouncer infant chairs, with wholesale prices under \$20 per item for volume discounts. If those suppliers raised prices by 10 percent to cover the cost of redesign and testing, that would increase the wholesale cost by approximately \$2 or less.

Staff anticipates that most models would require at least some redesign to meet the requirements of the standard. However, some redesigns could be relatively inexpensive, such as changing the seat angle or modifying the restraints. Products that meet all the physical performance requirements might only need the new warning sticker or a stamped-on label. A few combination products that are compliant with the mandatory bouncer chair standard and have no hanging restraint straps may not require redesign. The cost could be significant for all nine of the small manufacturers and importers, who currently supply 17 models to the U.S. market.

Staff estimates the total cost of redesign for the 17 models supplied by U.S. small businesses to be \$1.36 million (17 models × \$80,000). While yearly routine cosmetic redesigns, such as new fabric seat colors or toy attachments, are typical of suppliers, the structural redesigns required by this rule are an additional cost that would not have occurred without the rule. The cost could be less if some models do not require redesign, or only modest redesign. The cost of redesign could also be spread across multiple models by the same supplier since models from the same manufacturer can be similar in structural design and dimensions, with different fabrics or toy bars. Similarly, one model from a foreign manufacturer may be sold by multiple direct shippers and small importers, under different brand names.

Redesigned products could cost more or less to produce than the current product. For example, adding a restraint system would increase the cost, while changing the seat angle might not require any new hardware. The ongoing cost of compliance after the first year that the rule is in effect is expected to be minimal for materials and labor because the redesigned products would likely use the same types of materials and production methods as current products.

Clear substitutes for rockers are available, so if the costs of compliance raise the price of rockers above the price of what parents perceive as reasonable substitutes, particularly swings or bouncer seats, there could be a decline in sales of rockers as a result of this rule. Toddler rockers specifically compete with other products that can be used by a child old enough to sit up

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<sup>43</sup> A prominent Chinese online site for wholesale consumer products

without assistance, such as activity centers, jumper swings, and regular child seats. Other options exist that parents may prefer to contain and entertain an awake toddler, including toys inside a play yard. However, the cost impact on suppliers of reduced rocker sales could be offset by an increase in sales of these competing products by the same companies. Most suppliers of rockers manufacture or import multiple types of baby and infant products, including swings and bouncer seats.

The impact of the redesign cost could also be reduced if suppliers are able to increase the retail price to cover some or all the cost, which is likely, without significantly impacting overall demand for rockers. Because all suppliers would have to meet the requirements, it is likely that large companies would raise the retail price to cover costs, so small companies would not necessarily be at a competitive disadvantage if they raise prices to cover compliance costs. Most companies that supply rockers also supply a variety of other infant and children's products, so companies may also be able to absorb some of the cost of rocker redesign with revenue from other children's products.

### *B. Third Party Testing Costs*

This rule would require manufacturers of rockers to comply with the rule and demonstrate that compliance through third party testing.

The NPR does not require any new testing equipment for testing laboratories or for firms that test similar products or that test rockers to the ASTM F3084 requirements, and the additional performance requirements are substantively similar to requirements in the mandatory bouncer chair standard. The draft rule would have an effective date 180 days after publication, giving suppliers ample time to test to the new standard. Staff anticipate that additional testing costs – beyond what suppliers are already spending to comply with other CPSC standards, such as those for lead and small parts – would be less than \$1,000 per year per model, similar to the costs of third party testing for other children's products, and that the costs would be bundled with the cost of the other required tests. The cost of testing would vary, depending on where the testing takes place, and whether volume discounts apply. This is the estimated cost only for testing to the requirements in this NPR; most products already require testing for phthalates, small parts, lead, etc. It is also common for products sold to a global market to be tested to both U.S. and foreign standards at the same time, for a bundled test price. Multi-mode products that are already required to demonstrate compliance with the bouncer or swing mandatory standard through third party testing may have a smaller incremental cost for testing only the rocker mode. Companies with similar models may be able to rely on the component testing rule for models that are physically very similar, or that differ only in accessories such as toy bars and sounds. Foreign direct shippers may be able to rely on the testing provided by their manufacturer. Thus, staff estimates the testing costs for the industry as a whole, including foreign and large businesses, to be \$80,000 per year (80 models × \$1,000 per model for testing).

### *C. Labeling, Instruction Manuals, and Certificates of Compliance - Paperwork Requirements*

Suppliers would need to add the required labels. As specified in the ASTM standard and this draft NPR, the warnings must be conspicuous and permanent. The cost of designing the labels should be minimal because the warning text and graphics is specified in the draft NPR, so graphic design expertise is not needed. The cost of adding the label should also be minimal, less than \$1 per unit, because the label can be a sticker, printed on the fabric, or stamped into the plastic part of the item. Most items on the market already have warning labels, although not ones compliant with this draft NPR. The warning label and instructions recommended by staff (Tab D) have stronger and more specific warnings than the current ASTM standard about never using rockers for sleep. Assuming that 100 percent of the market (567,500 units) require new labels at \$1 per label, the cost to the industry would be a one-time cost of \$567,500; the impact specifically on U.S small businesses would be a fraction of that cost.

As noted earlier, labeling and instruction requirements constitute a burden under the Paperwork Reduction Act. CPSC staff will submit an Information Collection Request to OMB for their approval and obtain an OMB control number for this information collection. Certificates of Compliance are covered by an existing OMB control number.

### *D. Summary of Impacts*

Redesign costs could be significant for all nine small U.S. firms supplying rockers because all products on the market from U.S. manufacturers and importers would likely require at least some redesign. The costs of redesign could be as high as \$1.36 million for U.S. firms in the first year that the rule is effective. Testing costs specifically for small U.S. businesses are estimated at \$17,000 annually, or \$1,000 per model. New labels and instruction manuals have an estimated one-time cost of \$567,500.

Importers may not be able to find compliant products from their suppliers, depending on the decisions of foreign manufacturers to comply with the standard and demonstrate compliance through third party testing. However, given the size of the U.S. market, it is likely that at least some foreign manufacturers would decide to comply with this rule and continue to supply product to importers. As noted earlier, the wholesale price might rise by a few dollars to cover compliance costs.

The impact of the redesign and testing costs could be reduced if suppliers are able to increase the retail price to cover some or all the cost, which is likely, without reducing demand for rockers. Most companies that supply rockers also supply a variety of other infant and children's products, so companies may also be able to absorb some of the cost of rocker redesign with revenue from other children's products.

Some loss in sales of specific products may occur as a result of this rule, if the redesigned products are less appealing to consumers than alternatives, particularly swings and bouncer chairs. Suppliers may pass the costs of compliance onto consumers by raising wholesale or retail prices. However, it is unlikely that shifts within the infant product market would have a

significant impact on small firms, because the firms that sell rockers typically also sell other infant products that compete with rockers, so any shift in sales to other products could be for products sold by the same companies. For example, consumers might buy a bouncer chair or a swing from the same supplier, or a more expensive combination swing/rocker instead of two separate products.

## **VIII. Efforts to Minimize Impact – Alternatives Considered**

The RFA specifies that the IRFA must contain a:

“description of any significant alternatives to the proposed rule which accomplish the stated objectives of applicable statutes and which minimize any significant economic impact of the proposed rule on small entities. Consistent with the stated objectives of applicable statutes, the analysis shall discuss significant alternatives such as-

- (1) the establishment of differing compliance or reporting requirements or timetables that take into account the resources available to small entities;
- (2) the clarification, consolidation, or simplification of compliance and reporting requirements under the rule for such small entities;
- (3) the use of performance rather than design standards; and
- (4) an exemption from coverage of the rule, or any part thereof, for such small entities.”

Exempting small entities from this rule or parts of this rule would not be consistent with the applicable statutes, because this is a rule for durable infant or toddler products. 15 U.S.C. § 2063(d)(4)(C). The CPSA allows CPSC to provide “small batch” exemptions to testing requirements or alternative requirements for some mandatory safety standards, but not those for durable infant or toddler products. The standard is a performance standard rather than a design standard. CPSC staff considered several alternatives to this rule that could have a different impact on small businesses, including:

- Not establishing a mandatory standard
- Only including infant rockers in the scope
- Incorporating the ASTM 2022 standard by reference with no modifications
- A shorter or longer effective date

### ***A. Not Establishing a Mandatory Standard***

Not establishing a safety standard for rockers would minimize the regulatory impact on small businesses, but it would also not reduce injuries and deaths from the known hazards. The hazard data shows 11 reported fatalities and 88 reported nonfatal injuries involving infant rockers from January 1, 2011 to November 7, 2022. The majority of the fatalities were attributed to positional asphyxia or probable asphyxia, while the majority of non-fatal injuries were head injuries from falls. All 11 fatalities and 70 of the 88 nonfatal injuries involved victims less than one year old. Moreover, section 104 of the CPSIA requires the Commission to create mandatory safety standards for durable infant or toddler products.

There may be small firms that currently seek to differentiate their products by marketing their products as safer, particularly the few firms that currently claim compliance with the ASTM standard. Not implementing the rule might benefit this subset of small firms by enabling the existence of this niche market for products marketed as safer, but at a potentially high societal cost in terms of deaths and injuries. Therefore, staff does not recommend this alternative.

### *B. Only Including Infant Rockers in the Scope*

The incident data (Tab A) shows that all the fatalities and most of the injuries were to children less than one year old. Therefore, staff considered excluding rockers marketed for use by children over one year old from the scope. This would not significantly reduce the impact on small businesses, as there are very few specifically “toddler” rockers on the market; most toddler rockers are marketed for infants also. It would also be confusing for manufacturers because the ASTM standard defines toddler rockers as for children over 6 months, rather than 1 year. In addition, this alternative would not effectively address the hazards, as it is foreseeable that rockers marketed for older children would be used for infants. Also, the incident data contains multiple non-fatal injuries to children over 1 year old. Therefore, staff does not recommend this alternative.

### *C. Incorporating the ASTM 2022 Standard with No Modifications*

Staff considered incorporating the ASTM standard by reference with no modifications. This would reduce the impact on two of the small U.S. businesses that claim to be compliant with the ASTM standard. However, given the hazard data on suffocation and fall hazards, some caregivers are using rockers for sleep. Many product reviews confirm that parents are using the product for sleep or leaving awake children unattended in rockers. Therefore, staff recommends a stronger warning than the current ASTM standard about the hazards of using the product for sleep, including the dangers of adding soft bedding to rockers. The estimated cost of the new warning label is under \$1 per unit, which does not by itself represent a significant impact on small businesses.

Engineering analysis indicates that the stronger stability standards similar to the bouncer chair standard are needed to address the hazards of rockers. Given that many products on the market are combination rocker/bouncers, the impact of these requirements could be minimal for those combination products. While the cost of redesign could be significant for small businesses, this is a one-time cost; the new structural and stability requirements should not significantly increase the ongoing costs of production for small businesses. In addition, small businesses may be able to cover some of the one-time costs of redesign by raising the retail or wholesale price of rockers. Therefore, staff does not recommend this alternative.

#### *D. A Different Effective Date*

Staff proposes an effective date of 180 days after publication of the final rule. This is consistent with other 104 rules, and with JPMA's certification program, which typically allows 180 days for products in their certification program to shift to a new standard once that new standard is published. A shorter effective date could provide the benefits of the rule more quickly, but it would increase the burden on small businesses to quickly redesign and test their products. A shorter effective date could result in temporary shortages of rockers because the testing labs would need to apply for accreditation, and potentially at least 50 companies, including foreign companies that supply to U.S. importers, need to have their products tested for compliance. A longer effective date could reduce the impact on small businesses but would also delay addressing the known hazards. Therefore, staff does not recommend this alternative.

### **IX. Impact on Testing Labs**

In accordance with section 14 of the CPSA, all children's products that are subject to a children's product safety rule must be tested by a third-party conformity assessment body that has been accredited by CPSC. These third-party conformity assessment bodies test products for compliance with applicable children's product safety rules. Testing laboratories that want to conduct this testing must meet the Notice of Requirements (NOR) for third party conformity testing. CPSC has codified NORs in 16 CFR part 1112. This section assesses the impact of a proposed change to the existing standard requirements would have on small laboratories.

There should be no adverse impact on testing laboratories as a result of this rule. The testing instruments or devices are required to test rockers for compliance to this draft NPR are estimated to cost about \$500 to \$1000, including the customized frame to hold the product and the testing devices. The cost will be on the lower end of this range if the laboratory already has devices such as force gauges, which are common. No laboratory is required to provide testing services. The only laboratories that are expected to provide such services are those in which accepting the requirements is a sound business decision. The 22 labs that are currently accredited to test to the mandatory bouncer standard are likely to easily meet the requirements for accreditation to the infant rocker standard, given the similarity of the requirements and test methods.

For the same reasons, revising the NOR to add infant rockers to the list of products subject to part 1112 would not have a significant adverse impact on small laboratories. Also, most laboratories are not small U.S. businesses. Companies in the lab testing industry include companies with hundreds of locations, including labs in Asia and Europe, and thousands of employees. Therefore, the Commission could certify that the NOR for the infant rocker mandatory standard would not have a significant impact on a substantial number of small laboratories.

## **X. Conclusion**

If adopted as a final rule, the draft NPR could have a significant impact on nine small U.S. entities, of which four are manufacturers and five are importers. The cost of redesign in the first year that the rule is effective would likely be significant for most of the nine small U.S. businesses currently in the market. Companies of all sizes may be able to offset the costs of redesign by raising the wholesale or retail price of rockers. The requirement for a new warning label should not be a significant burden on small businesses. Some importers may exit the market, but it is likely that importers would be able to find compliant suppliers, given the size of the U.S. market. The ongoing costs of testing to demonstrate compliance should not be significant for any small businesses.

## **Tab G: Proposed Changes to ASTM F3084-22**





## Memorandum

**TO:** The Infant and Infant/Toddler Rockers Rulemaking File  
**THROUGH:** CPSC Infant and Infant/Toddler Rockers Project Team  
**FROM:** Zachary S. Foster, Industrial Engineer  
Division of Human Factors  
Directorate for Engineering Sciences  
**SUBJECT:** Proposed Changes to ASTM F3084-22, Standard Consumer Safety Specification for Infant and Infant/Toddler Rockers for NPR

**DATE:** September 13, 2023

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### I. Introduction

Staff proposes several modifications to ASTM F3084-22 to improve safety and correct errors in the standard, including:

- Addition of performance requirements and test methods for the accessibility of tethered straps to address strangulation hazards associated with straps.
- Addition of performance requirements and test methods for battery compartments to address hazards associated with battery leakage.
- Addition of a drop test to ensure product durability.
- Addition of performance requirements and test methods for firmness to address the suffocation hazard associated with soft surfaces that can envelope an infant's face.
- Addition of performance requirements and test methods for the concavity (curvature of the seat back) to minimize suffocation due to contact of an infant's mouth/nose against the side of the products during normal supine lying with a head rotation.
- Revision to forward stability test to make test more stringent, addressing tip-over hazards.
- Revisions to warning requirements to emphasize that rockers are not intended for sleep and that soft bedding is not to be used in rockers.
- Addition of warning location/visibility requirements to ensure that on-product labels are prominently placed and conspicuous to the consumer.
- Corrections of typographical errors.

Additional information on these modifications is listed below.

## II. Requirements for Infant and Infant/Toddler Rockers

The proposed changes to the standard are listed below, section by section. Modifications are shown in red text. Underlined sections are to be added, and sections that are struck through are to be removed. Staff's rationale is provided for all changes to the standard.

Instead of complying with section 3.1 of ASTM F3084-22, comply with the following:

3.1.6 infant rocker, n—a freestanding product intended to support an occupant who has not developed the ability to sit up unassisted, up to 20 lb., (approximately 0 to 6 months of age) in a seated, reclined position greater than 10° and to facilitate rocking by the occupant with the aid of the caregiver or by other means.

3.1.7 infant/toddler rocker, n—a freestanding product intended to support an occupant in a seated, reclined position greater than 10° and to facilitate rocking by the occupant with the aid of the caregiver or by other means until the occupant is approximately 2 1/2 years, up to 40 lb.

*Rationale:* These revisions are needed to clarify which forward stability test is required for each product type (see revisions to forward stability test below). These revisions are also consistent with the manufacturers' maximum recommended weight required by the product warnings.

Add the following paragraphs to section 3.1 of ASTM F3084-22:

3.1.18 *tethered strap*, n – an exposed strap underneath or behind the occupant support surface with both ends secured to the product (see 6.8).

3.1.18.1 *Discussion* – This specifically excludes straps that are loose or hanging from a product that are not intended to be attached to another component according to the manufacturer's instructions.

3.1.18.2 *Discussion* – The strap may consist of monofilaments, rope, woven and twisted cord, plastic and textile tapes, or ribbon.

*Rationale:* These definitions are necessary for the tethered strap performance requirements and test methods proposed below.

Add the following paragraph to section 3.1 of ASTM F3084-22:

3.1.19 *rocking*, v – forward and backward motion via a nonstationary base.

*Rationale:* This definition is needed to clearly differentiate rockers from other seated infant products, such as swings or bouncers.

Instead of complying with the Forward Stability requirements in sections 6.3.1, 6.3.1.1, and 7.4.1.6 of ASTM F3084-22, comply with the following:

6.3.1 Forward Stability—The rocker shall not tip over when tested in accordance with 7.4.1. This shall be for all infant rockers and infant/toddler rockers in the infant rocker use, mode, or position.

6.3.1.1 Forward Stability Infant/Toddler Rockers—If the product is intended for use after the occupant can sit upright unassisted with a manufacturer's recommended weight above 20 lbs, the rocker shall not tip over when tested in accordance with 7.4.2.

7.4.1.6 Apply a static load of 21 lbf. (93 N) vertically downward on the stability test fixture in the location designated in Fig. 8 (~~5-in~~ 6-in. (~~130~~152.4-mm) in front of the crotch post) within a period of 5 s and maintain for an additional 60 s (Fig. 9). If the stability test fixture touches the test surface and prevents the product from tipping over, retest the product near the edge of an elevated test surface to allow the product to tip.

*Rationale:* Staff is aware of multiple incidents of rockers tipping over with infants seated in the product(s). This revision is intended to mitigate tip-over hazards by increasing the stringency of the stability test and harmonize the requirements with the current stability test for infant bouncers in 16 CFR part 1229. These revisions also clarify what forward stability tests that infant rockers and infant/toddler rockers are subject to.

Add the following paragraphs to section 6 of ASTM F3084-22:

6.8 Tethered Strap Accessibility for Non-Occupants – Any products that have a tethered strap (see 3.1.18) shall meet either 6.8.1 or 6.8.2 when tested in accordance with 7.11.

6.8.1 - A bounded opening formed by tethered strap(s), alone or in conjunction with the product, shall not allow the passage of the small head probe (Fig. 14) when tested in accordance with 7.11.

6.8.2 - A bounded opening formed by tethered strap(s), alone or in conjunction with the product, shall allow the passage of the large head probe (Fig. 15), and the tethered strap portion of the bounded opening shall not be greater than 7.4 in. (188 mm) long when tested in accordance with 7.11.

Add the following paragraphs to section 7 of ASTM F3084-22:

7.11 Tethered Strap Accessibility Testing:

7.11.1 Assemble the product in one of the manufacturer's recommended use positions.

7.11.2 Adjust any strap underneath or behind the occupant support surface to its full-length configuration. This includes adjusting any sliding buckle and/or other hardware.

7.11.3 For straps that are part of the restraint system, unbuckle the restraint system to allow for the maximum strap length underneath or behind the occupant support surface.

7.11.4 Where applicable, orient any fasteners, buckles, clips, or other hardware in the position most likely to prevent them from being pulled through any opening.

7.11.5 Using a 3/4 in. (19 mm) diameter clamping surface (Fig. 16), gradually pull on the tethered strap from underneath or behind the occupant support surface in the most onerous direction most likely to release the strap through the opening with a force of 5 lbf. (22 N). Apply the force over a period of 5 s and maintain for an additional 10 s or until the strap releases, whichever comes first.

7.11.5.1 If during the test procedure in 7.11.5, the strap remains does not release at a force of 5 lbf. (22 N) or less, proceed to 7.11.6.

7.11.5.2 If during the test procedure in 7.11.5, the tethered strap releases, replace the strap through the opening into its original test position described in 7.11.3 and 7.11.4. Repeat the force application in 7.11.5 four more times for a total of five times. If the strap releases during every one of the five individual tests, this strap is exempt from 7.11.6, 7.11.7, and 7.11.8. If the strap remains attached during any of the five force applications, proceed to 7.11.6.

7.11.6 Rotate the small head probe (Fig. 14) to the orientation most likely to fail and gradually apply a force of 25 lb. (111 N) in the bounded opening. Apply the force perpendicular to the base of the probe in the direction most likely to fail within a period of 5 s and maintain it for an additional 10 s.

7.11.6.1 If the small head probe (Fig. 14) cannot pass entirely through the opening in any orientation, this bounded opening passes 6.8.1.

7.11.6.2 If the small head probe (Fig. 14) can pass entirely through the opening in any orientation, proceed to 7.11.7.

7.11.7 Determine if the large head probe (Fig. 15) can be freely inserted through the bounded opening.

7.11.7.1 If the large head probe (Fig. 15) cannot pass entirely through the opening in any orientation, this bounded opening fails 6.8.2.

7.11.7.2 If the large head probe (Fig. 15) can pass entirely through the opening in any orientation, proceed to 7.11.8.

7.11.8 Measure the available length of the tethered strap from its two attachment points on the product under a load of 5 lb. (2.27 kg).

7.11.8.1 If the tethered strap is greater than 7.4 in. (188 mm), this tethered strap fails 6.8.2.

7.11.8.2 If the tethered strap is less than or equal to 7.4 in. (188 mm), this tethered strap passes 6.8.2.

7.11.9 Repeat for each bounded opening formed with tethered strap(s), in all manufacturer's recommended use positions.

*Rationale:* This performance requirement and test method is intended to address hazards associated with tethered straps that are exposed below products. Staff is aware of an incident in which a child's neck became entangled in a strap after crawling under a rocker. The small head probe represents a 5<sup>th</sup> percentile 6-month-old because it represents the youngest child with the developmental abilities to become entrapped (*i.e.*, able to crawl under the product). The large head represents a 97<sup>th</sup> percentile 3-year-old child. A 7.4-inch strap length was selected because it is shorter than the average neck circumference of a 5<sup>th</sup> percentile 3-to-6-month-old infant (8.3 inches) and is used in other established mandatory standards, such as 16 CFR part 1221 – Safety Standard for Play Yards. A 25-lb insertion force is used to evaluate openings for several juvenile products, such as play yards, infant walkers, and changing products.

Add the following paragraph to section 6 of ASTM F3084-22:

6.9 Drop Test—The rocker shall not create a hazardous condition as defined in Section 5 when tested in accordance with 7.12.

Add the following paragraphs to section 7 of ASTM F3084-22:

7.12 Drop Test:

7.12.1 The rocker shall be dropped from a height of 36 in. (910 mm).

7.12.1.1 If the rocker does not fold, drop the rocker once on each of six different planes (top, bottom, front, rear, left side, and right side).

7.12.1.2 If the rocker does fold, drop the rocker once on each of six different planes, both in the folded and erect configurations.

*Rationale:* This performance requirement and test method is intended to address product durability.

Add the following paragraphs to section 6 of ASTM F3084-22:

6.10 Battery Compartments (remote control devices are exempt from these requirements):

6.10.1 Each battery compartment shall provide a means to contain the electrolytic material in the event of a battery leakage. This containment means shall not be accessible to the occupant.

6.10.2 Positive protection from the possibility of charging any primary (non-rechargeable) battery shall be achieved either through physical design of the battery compartment or through the use of appropriate electrical circuit design. This applies to situations in which a battery may be installed incorrectly (reversed), and in which a battery charger may be applied to a product containing primary batteries. This section does not apply to a circuit having one or two batteries as the only source of power.

6.10.3 The surfaces of any accessible electrical component, including batteries, shall not achieve temperatures exceeding 160°F (71°C) when tested in accordance with 7.13. At the conclusion of the test, there shall be no battery leakage or, explosion or a fire to any electrical component. This test shall be performed prior to conducting any other testing within the performance requirements section.

Add the following paragraphs to section 7 of ASTM F3084-22:

7.13 Battery Compartment Test

7.13.1 The battery compartment shall be tested using fresh alkaline batteries or an a/c power source. If the function powered by the compartment can be operated using both, then both batteries and a/c power must be tested separately. If another battery chemistry is specifically recommended for use in the rocker by the manufacturer, repeat the test using the batteries specified by the manufacturer. If the rocker will not operate using alkaline batteries, then test with the type of battery recommended by the manufacturer at the specified voltage. The test is to be carried out in a draft-free location, at an ambient temperature of  $68 \pm 9^{\circ}\text{F}$  ( $20 \pm 5^{\circ}\text{C}$ ).

7.13.1.1 Operate the function powered by the battery compartment at the maximum speed or highest intensity. Do not disable any mechanical or electrical protective device, such as clutches or fuses. Operate the function powered by the battery compartment continuously, and record peak temperature. The test shall be discontinued 60 min after the peak temperature is recorded. If the function shuts off automatically or must be kept "on" by hand or foot, monitor temperatures for 30 s, resetting the function as many times as necessary to complete the 30 s of operation. If the function shuts off automatically after an operating time of greater than 30 s, continue the test until the function shuts off.

***Rationale:*** This performance requirement and test method is included as a preventative measure to address potential hazards associated with consumer incorrectly orienting batteries within the battery compartment, which may result in battery swelling/leakage and consumers/occupants being exposed to battery acid. Staff is aware of multiple incidents of battery leakage. The proposed requirement addresses battery leakage and harmonizes the requirements with other established mandatory standards, such as 16 CFR part 1229 – Safety Standard for Infant Bouncer Seats.

Add the following paragraph to section 6 of ASTM F3084-22:

6.11 Firmness -- The surface of the rocker that supports the infants head shall displace less than 11mm (0.43 in.) for a 10N (2.25 lb.) force when tested in accordance with 7.14.

Add the following paragraphs to section 7 of ASTM F3084-22:

#### 7.14 Firmness Test

##### 7.14.1 Hand-Held Firmness Test Device:

7.14.1.1 The test device, as shown in Fig. 17, shall consist of a 7.5 cm (2.95 in.) diameter hemisphere (made of a rigid material such as wood, metal, or plastic) attached to a compression force gauge with a range of 0 to 50 N;  $\pm 0.2\%$  accuracy and a depth gauge with sufficient travel to measure displacement of the hemisphere relative to the footprint ring.

##### 7.14.2 Test Point Location

7.14.2.1 Place the Hinged Weight Gauge - Infant in the rocker with the hinged edge into the seat bight.

7.14.2.2 Mark a line on the seat back 4 in. (10.2 cm) from the top of the gauge (Fig. 18).

7.14.2.3 Remove the hinged weight gauge and mark the test points at the center line and 8 in. (20.3 cm) to the either side of the center line (Fig. 19).

7.14.3 Position the Hand Held Test Device (Fig. 17) on a test location, with the footprint ring of the fixture centered on the location.

7.14.4 Apply a 10N (2.25 lb.) force for at least 30 seconds and record the peak deflection. The product meets the requirements if the deflection is less than 11 mm (0.43 in.).

##### 7.14.5 Repeat the test on the remaining location.

*Rationale:* The Firmness requirement ensures the head support portion of the rocker to be sufficiently firm to prevent a child's nose and mouth from being obstructed by soft products such as pillows or hammock type designs that can envelope an infant's face in the prone or head turned to the side position. The minimum firmness would ensure rockers to have a firmness in the head area equivalent to a crib mattress.

Add the following paragraph to section 6 of ASTM F3084-22:

6.12 Concavity -- The radius of surface of the rocker that supports the infant's head shall be greater than 22 cm (8.66 in.) when tested in accordance with 7.15.

Add the following paragraphs to section 7 of ASTM F3084-22:

#### 7.15 Concavity Measurement

7.15.1 Configure the rocker with the Hinged Weight Gauge – Infant installed and locate the head support line as shown in Fig. 20.

7.15.2 Measure the width L, along the head support line and the interior of the side supports as shown in Fig. 20.

7.15.3 Place a rigid bar between the side support and over the head support line. Measure the maximum vertical distance d, from the bottom of the bar to the Hinged Weight Gauge – Infant (Fig. 21). Calculate the depth D by adding the thickness of the Hinged Weight Gauge – Infant to the vertical distance from the bottom of the bar to the top of the Hinged Weight Gauge – Infant.

7.15.4 Using Equation 1, calculate the concavity r by inputting the width L and depth D into the equation below. r values greater than 22 cm (8.66 in.) meet the concavity requirement.

$$r = \frac{D}{2} + \frac{L^2}{8D}$$

Equation 1. Concavity Equation

(The larger the radius, the flatter the product, and vice versa)

***Rationale:*** The anthropometric analysis in the *Seated Products Characterization and Testing* report showed seated product with a concavity radius greater than 22 cm (8.66 in.) with an infant in the product, would prevent mouth/nose contact with sides of the seated products during supine lying with a normal head rotation.

Add the following paragraphs to section 7 of ASTM F3084-22:

7.16 Warning Label Visibility Test:

7.16.1 Place rocker on the floor.

7.16.2 Place and secure the Newborn CAMI dummy (Fig. 2) in the rocker.

7.16.3 Visibility Tests with and Without Accessories and Toy Bars:

7.16.3.1 Visibility with CAMI Dummy Restrained in Seat—

Place the CAMI Newborn Dummy in the product with the restraint system engaged according to the manufacturer's instructions. While standing in front of the product with the Newborn CAMI dummy installed, verify that the required warnings are visible and placed above an imaginary horizontal line that crosses through the junctions of under arm and side of the torso armpits on both left and right sides and not obscured by any part of the dummy (refer to Fig. 22).



NOTE—The placement of the warnings is only applicable to the English language portions of the warning label.

7.16.3.2 Visibility with Accessories (Excluding Toy Bars)—

Rockers that include any accessory(ies) that could potentially obscure the warnings shall comply with visibility requirements of 7.16 both with such accessory(ies) in place (in all configurations and combinations) and with the accessory(ies) removed.

7.16.3.3 Visibility with Toy Bar—If any part of the required warnings is obscured by a toy bar or its attached toys but is visible with a shift of the observer's head position, then this is considered acceptable.

Add the following paragraph to section 8 of ASTM F3084-22:

8.6.8 Warning Location—The applicable warnings as specified in 8.7 shall be on the front surface of the rocker seat back so as to comply with the visibility requirements in 7.16.

**Rationale:** Other than a requirement for warning labels to be “conspicuous,” ASTM F3084-22 does not contain specific requirements for the location or visibility of warning labels. These requirements are intended to ensure that on-product warnings are prominently placed and conspicuous to consumers and to harmonize the requirements with other established mandatory standards, such as 16 CFR part 1229.

Remove the following from section 8.6 of ASTM F3084-22:

~~8.6.7 Example warnings in the format described in this section is shown in Figs. 14 and 15.~~

**Rationale:** The example warnings in Figs. 14 and 15 are no longer necessary, as the warnings added by staff to section 8.7 are formatted per section 8.6 (see below).

Instead of complying with section 8.7. of ASTM F3084-22, comply with the following:

8.7 Warning Statements—Each product shall have warning statements to address the following at a minimum.

NOTE 5—“Address” means that verbiage other than what is shown can be used as long as the meaning is the same or information that is product-specific is presented.

8.7.1 Infant Rockers:

~~**FALL HAZARD:** Children have suffered head injuries falling from rockers.  
• **ALWAYS** use restraints. Adjust to fit snugly.~~

- ~~**NEVER** lift or carry baby in rocker. [Rockers with a handle(s) intended for use to lift and carry a child are exempt from including this warning statement.]~~
- ~~**STOP** using product when baby starts trying to sit up or has reached [insert manufacturer's recommended maximum weight, not to exceed 20 lb], whichever comes first.~~
- ~~**ALWAYS** place rocker on floor. Never use on any elevated surface.~~
- SUFFOCATION HAZARD:** Babies have suffocated when seats tipped over on soft surfaces.
- ~~**NEVER** use on a bed, sofa, cushion, or other soft surface.~~
- ~~Stay near and watch baby during use. This product is not safe for sleep or unsupervised use. If baby falls asleep, remove baby as soon as possible and place baby on a firm, flat sleep surface such as a crib or bassinet.~~

## ⚠ WARNING

**SUFFOCATION & ASPHYXIA HAZARD:** Using this product for **SLEEP**, **NAPS**, or on **SOFT SURFACES CAN KILL**.

- **NEVER** use this product for sleep.
- Stay near and watch baby during use. If baby falls asleep, remove baby as soon as possible and place baby on a firm, flat sleep surface such as a bare crib or bassinet.
- For babies born prematurely, consult a doctor before use.
- **ALWAYS** use restraints. Adjust to fit snugly.
- **NEVER** use on a bed, sofa, cushion or other soft surface. Babies have suffocated when seats tipped over on soft surfaces.
- **NEVER** add soft bedding or padding.

**FALL HAZARD:** Babies have suffered head injuries **FALLING FROM ROCKERS**.

- **NEVER** lift or carry baby in rocker. [Rockers with a handle(s) intended for use to lift and carry a child are exempt from including this warning statement.]
- **STOP** using product when baby starts trying to sit up or has reached [insert manufacturer's recommended maximum weight, not to exceed 20 lb], whichever comes first.
- **ALWAYS** place rocker on floor. **NEVER** use on any elevated surface.

8.7.2 *Infant/toddler Rockers without Shoulder Straps as Part of the Restraint System:*

~~**FALL HAZARD:** Children have suffered head injuries falling from rockers.~~

- ~~**ALWAYS** use restraints until child is able to climb in and out of the product unassisted. Adjust to fit snugly.~~
  - ~~**NEVER** lift or carry baby in rocker. [Rockers with a handle(s) intended for use to lift and carry a child are exempt from including this warning statement.]~~
  - ~~**STOP** using rocker when baby has reached [insert manufacturer's recommended maximum weight, not to exceed 40 lb].~~
  - ~~The upright position is only for children who have developed enough upper body control to sit up without tipping forward.~~
  - ~~**ALWAYS** place rocker on floor. Never use on any elevate surface.~~
- ~~**SUFFOCATION HAZARD:** Babies have suffocated when seats tipped over on soft surfaces.~~
- ~~**NEVER** use on a bed, sofa, cushion, or other soft surface.~~
  - ~~Stay near and watch baby during use. This product is not safe for sleep or unsupervised use. If baby falls asleep, remove baby as soon as possible and place baby on a firm, flat sleep surface such as a crib or bassinet.~~

## ⚠ WARNING

**SUFFOCATION & ASPHYXIA HAZARD:** Using this product for **SLEEP**, **NAPS**, or on **SOFT SURFACES CAN KILL**.

- **NEVER** use this product for sleep.
- Stay near and watch baby during use. If baby falls asleep, remove baby as soon as possible and place baby on a firm, flat sleep surface such as a bare crib or bassinet.
- For babies born prematurely, consult a doctor before use.
- **ALWAYS** use restraints until child is able to climb in and out of product unassisted. Adjust to fit snugly.
- **NEVER** use on a bed, sofa, cushion or other soft surface. Babies have suffocated when seats tipped over on soft surfaces.
- **NEVER** add soft bedding or padding.

**FALL HAZARD:** Babies have suffered head injuries **FALLING FROM ROCKERS**.

- **NEVER** lift or carry baby in rocker. [Rockers with a handle(s) intended for use to lift and carry a child are exempt from including this warning statement.]
- **STOP** using product when baby has reached [insert manufacturer's recommended maximum weight, not to exceed 40 lb].
- The upright position is only for children who have developed enough upper body control to sit up without tipping forward.
- **ALWAYS** place rocker on floor. **NEVER** use on any elevated surface.

8.7.3 *Infant/toddler Rockers with Shoulder Straps as Part of the Restraint System may use either 8.7.3.1 or 8.7.3.2:*

8.7.3.1 ~~**FALL HAZARD:** Children have suffered head injuries falling from rockers.~~

- ~~**ALWAYS** use restraints. Adjust to fit snugly.~~
- ~~**NEVER** lift or carry baby in rocker. [Rockers with a handle(s) intended for use to lift and carry a child are exempt from including this warning statement.]~~
- ~~**STOP** using rocker when baby has reached [insert manufacturer's recommended maximum weight, not to exceed 40 lb].~~
- ~~The upright position is only for children who have developed enough upper body control to sit up without tipping forward.~~

Staff Briefing Package: Draft NPR for Infant and Infant/Toddler Rockers | September 13, 2023 |

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- ~~**ALWAYS** place rocker on floor. Never use on any elevated surface.~~
- ~~**ALWAYS** place rocker on floor. Never use on any elevated surface.~~
- ~~**SUFFOCATION HAZARD:** Babies have suffocated when seats tipped over on soft surfaces.~~
- ~~**NEVER** use on a bed, sofa, cushion, or other soft surface.~~
- ~~Stay near and watch baby during use. This product is not safe for sleep or unsupervised use. If baby falls asleep, remove baby as soon as possible and place baby on a firm, flat sleep surface such as a crib or bassinet.~~

## **WARNING**

**SUFFOCATION & ASPHYXIA HAZARD:** Using this product for **SLEEP**, **NAPS**, or on **SOFT SURFACES CAN KILL**.

- **NEVER** use this product for sleep.
- Stay near and watch baby during use. If baby falls asleep, remove baby as soon as possible and place baby on a firm, flat sleep surface such as a bare crib or bassinet.
- For babies born prematurely, consult a doctor before use.
- **ALWAYS** use restraints. Adjust to fit snugly.
- **NEVER** use on a bed, sofa, cushion or other soft surface. Babies have suffocated when seats tipped over on soft surfaces.
- **NEVER** add soft bedding or padding.

**FALL HAZARD:** Babies have suffered head injuries **FALLING FROM ROCKERS**.

- **NEVER** lift or carry baby in rocker. [Rockers with a handle(s) intended for use to lift and carry a child are exempt from including this warning statement.]
- **STOP** using product when baby has reached [insert manufacturer's recommended maximum weight, not to exceed 40 lb].
- The upright position is only for children who have developed enough upper body control to sit up without tipping forward.
- **ALWAYS** place rocker on floor. **NEVER** use on any elevated surface.

- 8.7.3.2 ~~**FALL HAZARD:** Children have suffered head injuries falling from rockers.~~
- ~~**ALWAYS** use restraints until child is able to climb in and out of the product unassisted. Adjust to fit snugly.~~
  - ~~**NEVER** lift or carry baby in rocker. [Rockers with a handle(s) intended for use to lift and carry a child are exempt from including this warning statement.]~~

- ~~**STOP** using product when baby has reached [insert manufacturer's recommended maximum weight, not to exceed 40 lb].~~
- ~~The upright position is only for children who have developed enough upper body control to sit up without tipping forward.~~
- ALWAYS** place rocker on floor. Never use on any elevated surface.
- SUFFOCATION HAZARD:** Babies have suffocated when seats tipped over on soft surfaces.
- ~~**NEVER** use on a bed, sofa, cushion, or other soft surface.~~
- ~~Stay near and watch baby during use. This product is not safe for sleep or unsupervised use. If baby falls asleep, remove baby as soon as possible and place baby on a firm, flat sleep surface such as a crib or bassinet.~~

## ⚠ **WARNING**

**SUFFOCATION & ASPHYXIA HAZARD:** Using this product for **SLEEP, NAPS,** or on **SOFT SURFACES CAN KILL.**

- **NEVER** use this product for sleep.
- Stay near and watch baby during use. If baby falls asleep, remove baby as soon as possible and place baby on a firm, flat sleep surface such as a bare crib or bassinet.
- For babies born prematurely, consult a doctor before use.
- **ALWAYS** use restraints until child is able to climb in and out of the product unassisted. Adjust to fit snugly.
- **NEVER** use on a bed, sofa, cushion or other soft surface. Babies have suffocated when seats tipped over on soft surfaces.
- **NEVER** add soft bedding or padding.

**FALL HAZARD:** Babies have suffered head injuries **FALLING FROM ROCKERS.**

- **NEVER** lift or carry baby in rocker. [Rockers with a handle(s) intended for use to lift and carry a child are exempt from including this warning statement.]
- **STOP** using product when baby has reached [insert manufacturer's recommended maximum weight, not to exceed 40 lb].
- The upright position is only for children who have developed enough upper body control to sit up without tipping forward.
- **ALWAYS** place rocker on floor. **NEVER** use on any elevated surface.

**Rationale:** Staff identified several fatalities involving infants sleeping in rockers, some of which involved the use of soft bedding. These revisions are intended to emphasize that rockers are not intended for sleep or napping and warn against the use of soft bedding in rockers. This revision also corrects a typographical error in section 8.7.2 in which “elevated” is misspelled as “elevate”, as well as a typographical error in section 8.7.3.1 in which the statement “**ALWAYS** place rocker on floor. Never use on any elevated surface.” is repeated.

Add the following paragraph to section 8 of ASTM F3084-22:

8.8 Manufacturers may present the **SUFFOCATION & ASPHYXIA HAZARD** and **FALL HAZARD** warning information on separate labels. If presented separately, both labels shall still meet the requirements set forth in sections 7.16 and 8.6.

**Rationale:** This is intended to provide flexibility to manufacturers to meet the proposed label visibility requirements.

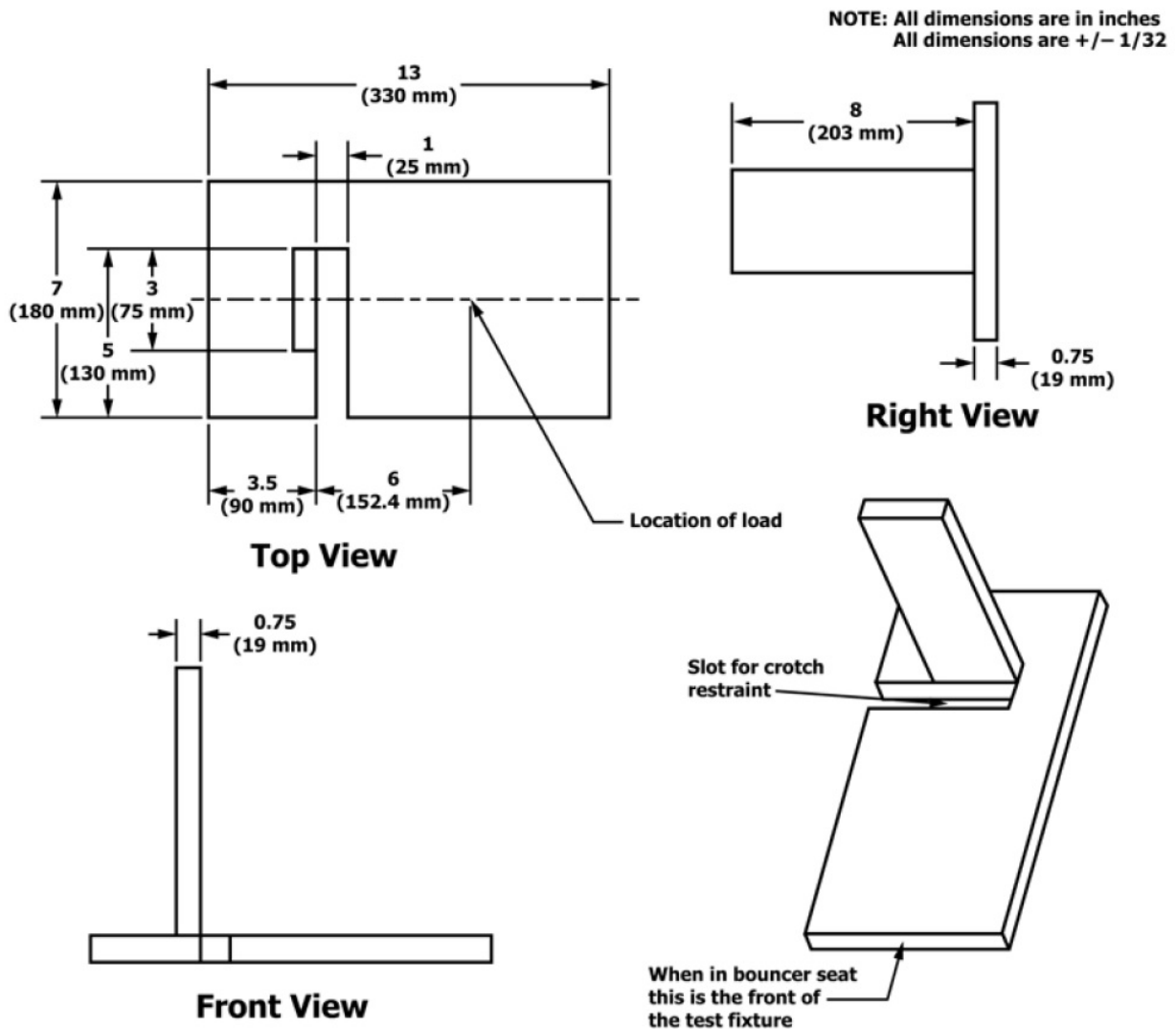
Instead of complying with section X1.2 of ASTM F3084-22, comply with the following:

X1.2 Subsection 6.3.1.1—The forward ~~salability~~ **stability** test is required if the rocker is to be used after a child can sit up unassisted due to incident data showing injuries because of occupants leaning forward between the ages of 6 and 9 months.

**Rationale:** Corrects a typographical error.

Replace FIG. 8 in section 7 of ASTM F3084-22 with the following figure:





**FIG. 8 Forward Stability Test Fixture**

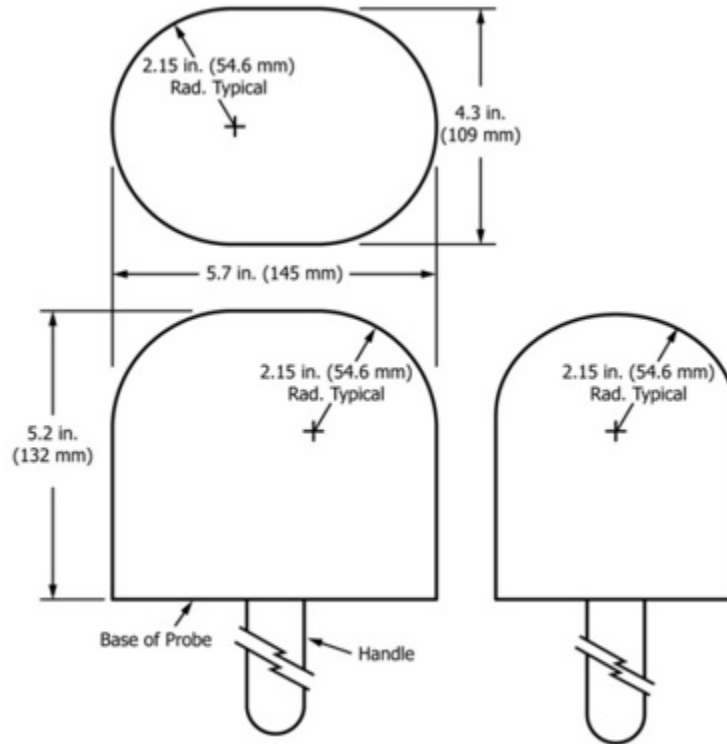
**Rationale:** This figure reflects the recommended revisions to the forward stability test (see above).

Remove FIG. 14 and FIG. 15 (example warnings) from section 8 of ASTM F3084-22.

**Rationale:** The example warnings in FIG. 14 and FIG. 15 are no longer necessary, as the warnings added by staff to section 8.7 are formatted per section 8.6 (see above).

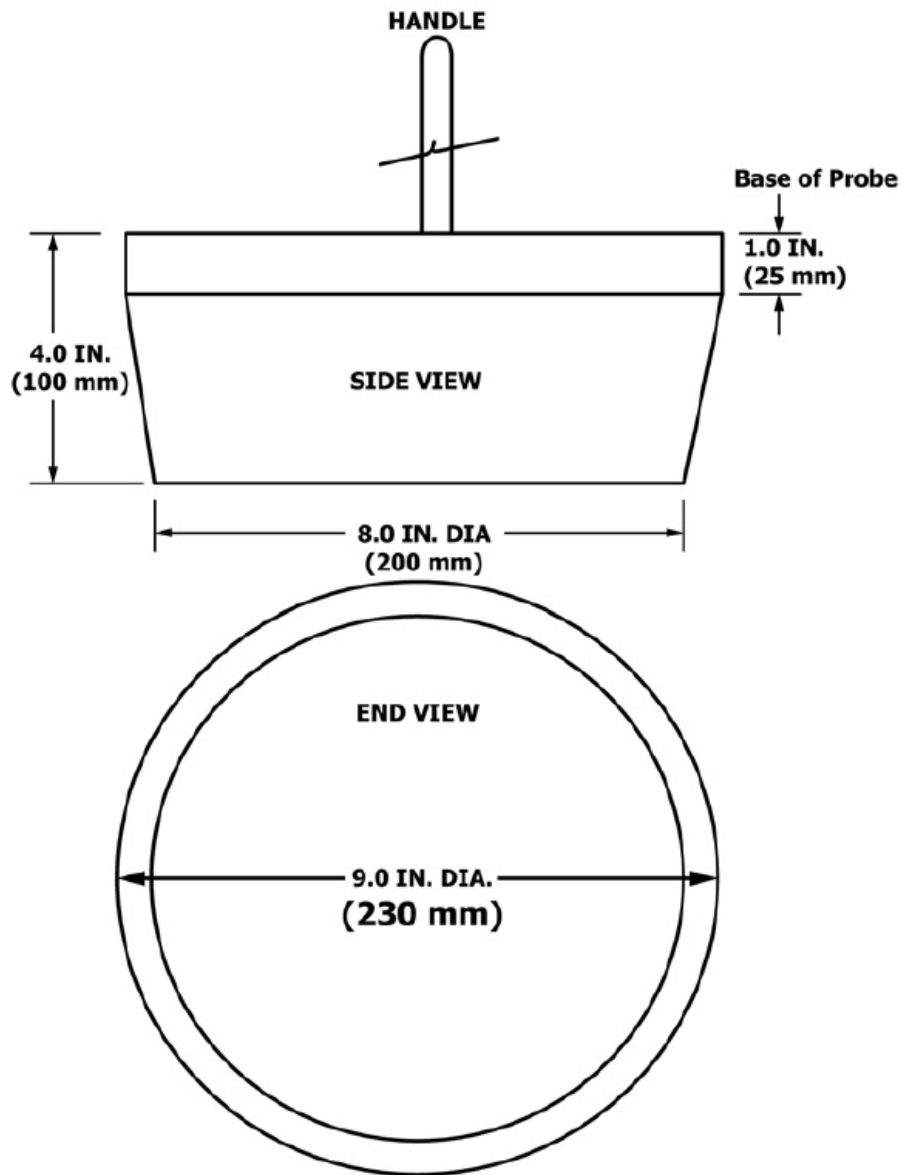


Add the following figures to section 7 of ASTM F3084-22:



Dimensions are based on a 5th percentile 6-month-old child.

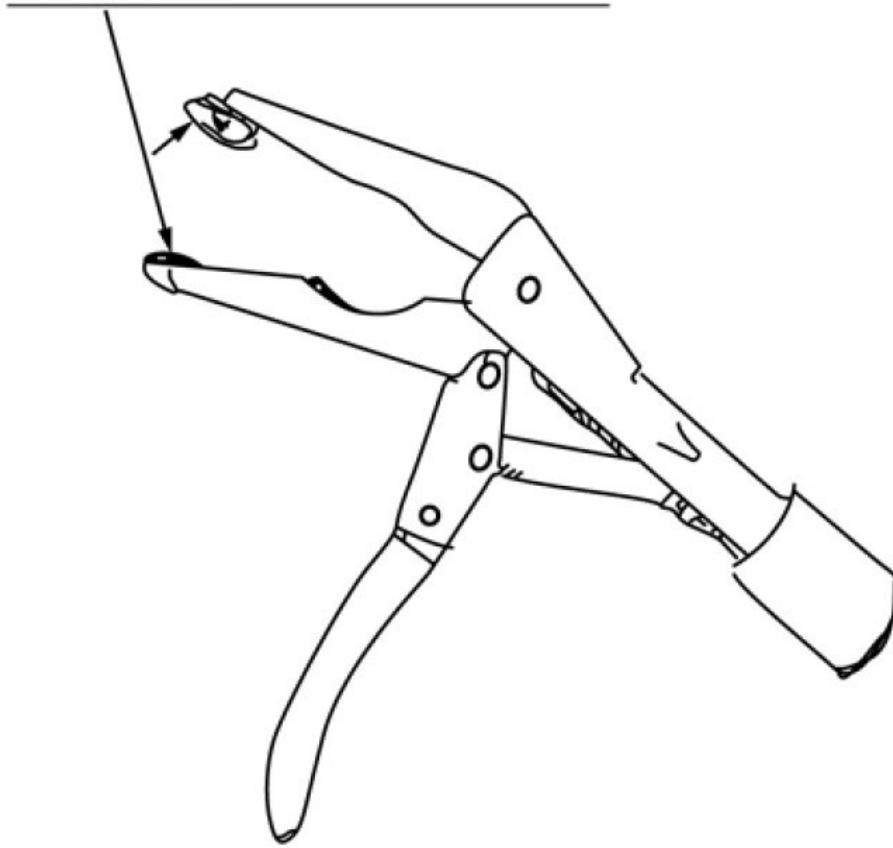
**FIG. 14 Small Head Test Probe**



The 9.0 in. diameter is based on the back-of-head to tip-of-chin dimension for a 97th percentile 3-year-old.

**FIG. 15 Large Head Test Probe**

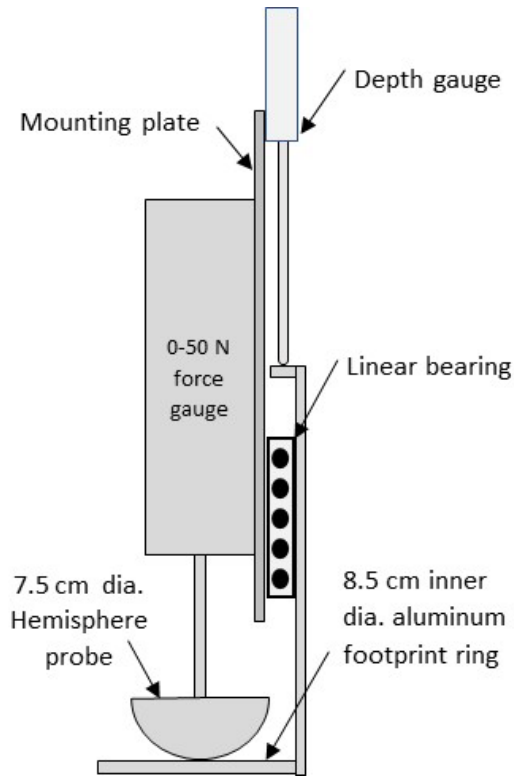
BRAZE 3/4 in. Dia. PLAIN STL WASHER  
TO JAW TIPS



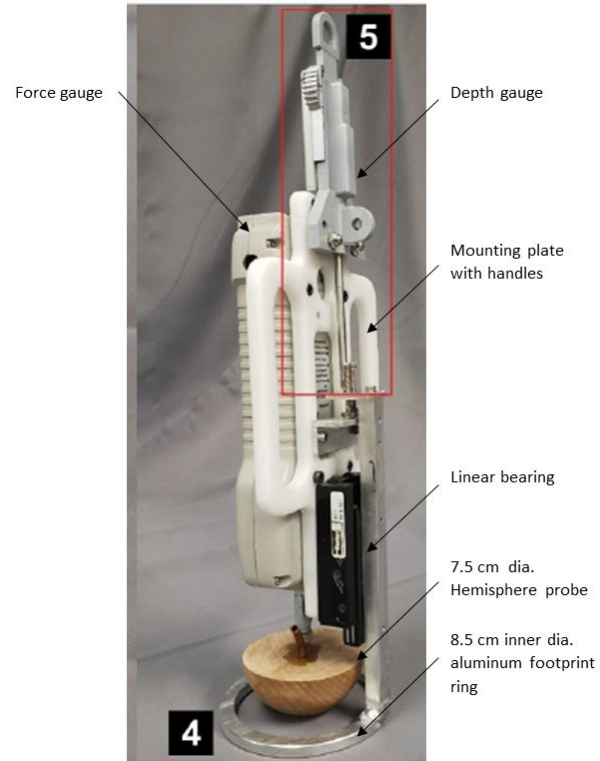
**FIG. 16 A 3/4-in. (19-mm) Diameter Clamp**

*Rationale:* These figures are necessary for staff's proposed tethered strap accessibility test (see above).

Add the following figures to section 7 of ASTM F3084-22:



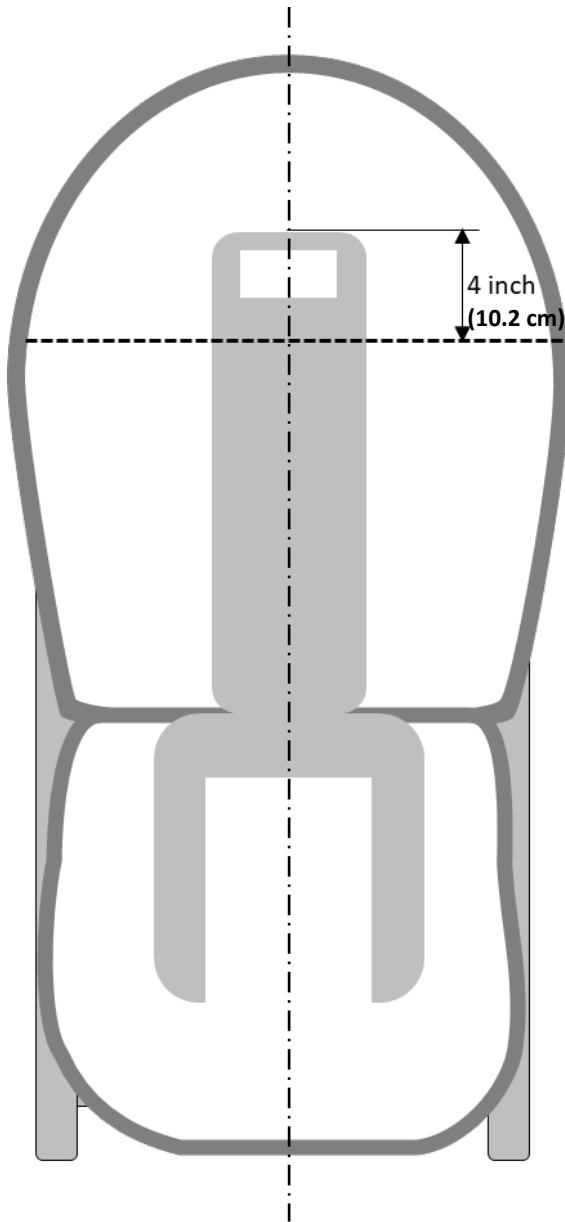
Schematic of the firmness test device



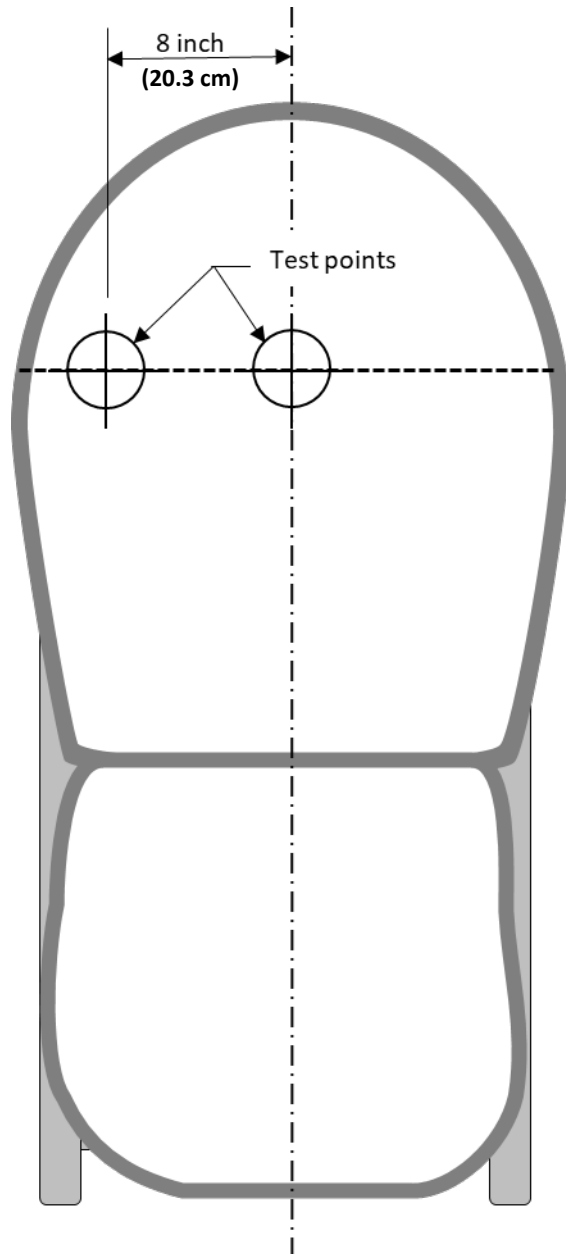
Example of test device using a commercially available force gauge, depth gauge and linear bearing. The hemisphere probe, mounting plate and aluminum footprint ring are fabricated to accommodate gauges.

(Fabrication drawings in Appendix B, Handheld Firmness Tester Details in *Seated Product Characterization and Testing* report).

**FIG. 17 Hand-Held Firmness Test Device**



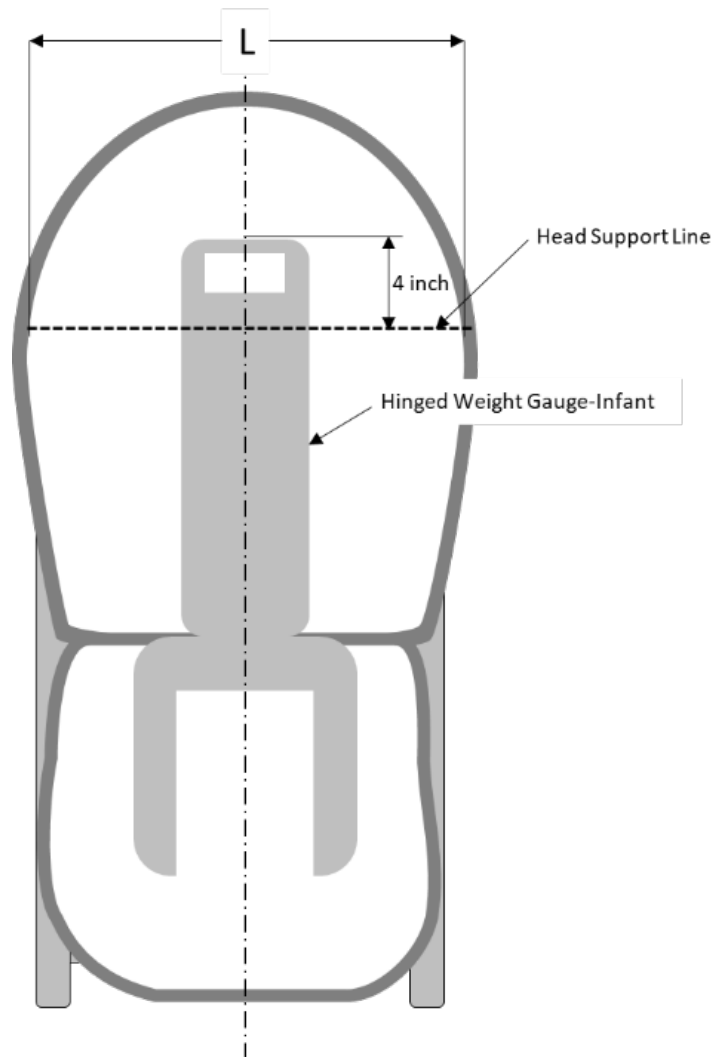
**FIG. 18 Location of Head Support Line**



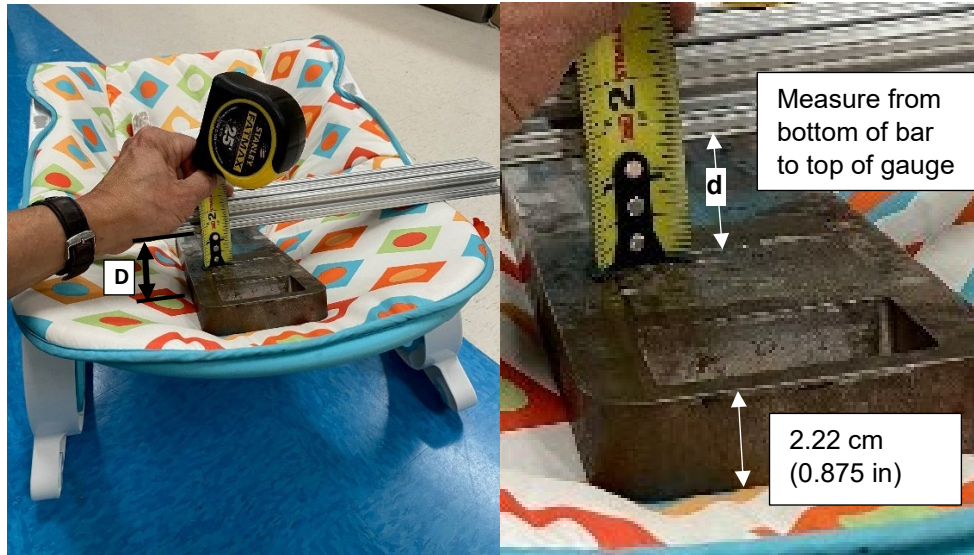
**FIG. 19 Test Point Locations**

*Rationale:* These figures are necessary for staff's proposed firmness test (see above).

Add the following figures to section 7 of ASTM F3084-22:



**FIG. 20 Width L Measurement**



**FIG. 21 Depth  $D = d + \text{Thickness of the Gauge}$**

*Rationale:* These figures are necessary for staff's proposed concavity test (see above).

Add the following figure to section 7 of ASTM F3084-22:



**FIG. 22 Allowable Area for Warning Label Placement Starts from the Dotted Line that Crosses the Junctions of Underarm and Both Sides of the Torso**

*Rationale:* This figure is necessary for staff's proposed warning label visibility test (see above).