ISO

ISO/TC22/SC12/WG5 N1041

Anthropomorphic Test Devices

This document specifies the new validation specifications for the WorldSID 50th agreed and recommended by WorldSID Task Group in October 2013 and endorsed by ISO Working Group 5 in November 2013. The specification corridors below supersede those in ISO 15830 (2nd edition, May 2013) Road vehicles – Design and performance specifications for the WorldSID 50th percentile male side-impact dummy, Part 2: Mechanical subsystems.

Note:

All specification changes take effect immediately in all new production and recertifications and remain in effect until the publication of ISO TS 15830, Part 5. All other specifications in ISO 15830-2 (2^{nd} edition, May 2013) that are not revised below are still valid.

4.1 Head

4.1.3 Validation

Table 1 — WorldSID head validation specifications

Table 1 — WorldSID nead validation specifications		
Frontal drop		
	ISO 15830-2:	Recommended
	May 2013	by WorldSID
		Task Group
Variable		Oct. 2013
Peak resultant acceleration (G)	225 to 275	205 to 255
Peak lateral acceleration (a _y) (G)	< 15	< 15
Maximum percentage, subsequent-to-main peak (%)	< 10	< 10
Lateral drop		
	ISO 15830-2:	Recommended
	May 2013	by WorldSID
		Task Group
Variable		Oct. 2013
Peak resultant acceleration at CG (G)	99 to 121	104 to 123
Peak lateral acceleration (a _x) (G)	< 15	< 15
Maximum percentage, subsequent-to-main peak (%)	< 10	< 10

4.2 Neck

4.2.3 Validation

Table 2 — WorldSID neck validation specifications No new recommendations. The specifications in ISO 15830-2 (2^{nd} edition, May 2013) are still valid.

- 4.3 Thorax/abdomen/shoulder
- 4.3.3 Validation
- 4.3.3.1 Shoulder

Table 3 — WorldSID shoulder validation specifications

	ISO 15830-2:	Recommended
	May 2013	by WorldSID
	-	Task Group
Variable		Oct. 2013
Pendulum velocity (m/s)	4.3 ± 0.1	4.3 ± 0.1
Peak pendulum force (kN)	2.6 to 3.3	2.6 to 3.3
Peak shoulder rib deflection (mm)	35 to 44	35 to 45

4.3.3.2 Thorax with half arm

Table 4 — WorldSID thorax with half-arm validation specifications No new recommendation. The specifications in ISO 15830-2 (2nd edition, May 2013) section 4.3.3.2 are still valid.

Note:

Replacing the thorax with half arm validation test by a "single-rib certification" and a single half arm validation is under discussion. Until a final decision is made, the specifications in ISO 15830-2 (2nd edition, May 2013) section 4.3.3.2 are still valid.

4.3.3.3 Thorax without half arm

Table 5 — WorldSID thorax without arm validation specifications

	ISO 15830-2:
	May 2013
Variable	is still valid
Pendulum velocity (m/s)	4.3 ± 0.1
Peak pendulum force (kN)	3.2 to 3.8
Peak T4 acceleration along y axis (G)	14 to 20
Peak T12 acceleration along y axis (G)	14 to 22
Peak thorax rib 1 deflection (mm)	33 to 43
Peak thorax rib 2 deflection (mm)	35 to 43
Peak thorax rib 3 deflection (mm)	32 to 40

4.3.3.4 Abdomen

Table 6 — WorldSID abdomen validation specifications

	ISO 15830-2:	Recommended
	May 2013	by WorldSID
		Task Group
Variable		Oct. 2013
Pendulum velocity (m/s)	4.3 ± 0.1	4.3 ± 0.1
Peak pendulum force (kN)	2.7 to 3.1	2.7 to 3.1
Peak T12 acceleration along y axis (G)	15 to 20	15 to 20
Peak abdomen rib 1 deflection (mm)	33 to 40	33 to 40
Peak abdomen rib 2 deflection (mm)	30 to 36	30 to 36

4.6 Lumbar spine and pelvis

4.6.3 Validation

Table 7 — WorldSID pelvis validation specifications

	ISO 15830-2:	Recommended by
	May 2013	WorldSID Task
		Group
Variable		Oct. 2013
Pendulum velocity (m/s)	6.7 ± 0.1	6.7 ± 0.1
Peak pendulum force (kN)	6.3 to 7.8	6.8 to 8.2
Peak T12 acceleration along y axis (G)	10 to 14	10 to 14
Peak pelvis acceleration along y axis (G)	41 to 51	37 to 47

Section 5.2 Neck Section 5.2.5 Preparation 5.2.6 Procedure

Table 10 — (Neck) Pendulum arm deceleration pulse

	ISO 15830-2:	Recommended by
	May 2013	WorldSID Task
		Group
Variable		Oct. 2013
Pendulum velocity (m/s)	3.4 ± 0.1	3.4 ± 0.1
Velocity change at 4 ms* (m/s)	0.8 to 1.0	0.77 to 1.04
Velocity change at 8 ms* (m/s)	1.6 to 1.9	1.60 to 1.90
Velocity change at 12 ms* (m/s)	2.4 to 3.3	2.43 to 3.29
* T=0 s at initial pendulum contact with honeycomb or alternative p		
be shown to lead	to the same results	