

7-20-2000

DDASaccident356

Humanitarian Demining Accident and Incident Database
AID

Follow this and additional works at: <https://commons.lib.jmu.edu/cisr-globalcwd>

 Part of the [Defense and Security Studies Commons](#), [Peace and Conflict Studies Commons](#), [Public Policy Commons](#), and the [Social Policy Commons](#)

Recommended Citation

Database, Humanitarian Demining Accident and Incident, "DDASaccident356" (2000). *Global CWD Repository*. 556.
<https://commons.lib.jmu.edu/cisr-globalcwd/556>

This Other is brought to you for free and open access by the Center for International Stabilization and Recovery at JMU Scholarly Commons. It has been accepted for inclusion in Global CWD Repository by an authorized administrator of JMU Scholarly Commons. For more information, please contact dc_admin@jmu.edu.

DDAS Accident Report

Accident details

Report date: 19/05/2006	Accident number: 356
Accident time: 08:02	Accident Date: 20/07/2000
Where it occurred: Chamy Trshakan, Penjwen District, Sulaimanya Governate	Country: Iraq
Primary cause: Victim inattention (?)	Secondary cause: Field control inadequacy (?)
Class: Other	Date of main report: 06/08/2000
ID original source: MA	Name of source: MAG
Organisation: Name removed	
Mine/device: Valmara 69 AP Bfrag	Ground condition: bushes/scrub grass/grazing area soft
Date record created: 21/02/2004	Date last modified: 21/02/2004
No of victims: 1	No of documents: 3

Map details

Longitude:	Latitude:
Alt. coord. system:	Coordinates fixed by:
Map east:	Map north:
Map scale: not recorded	Map series:
Map edition:	Map sheet:
Map name:	

Accident Notes

no independent investigation available (?)
inadequate medical provision (?)
inadequate metal-detector (?)
visor not worn or worn raised (?)

Accident report

The demining group made an internal investigation of the accident and made that report available. The investigation follows (edited for anonymity). Some of the statements of those involved are under "Statements".

INVESTIGATOR'S REPORT

General:

On Thursday 20th July 00, while Mine Action Team number 3 was carrying out de-mining at Chamy Trshakan minefield in Penjwen district in Sulaimanya Governorate, an accident occurred outside the minefield in another known mined area at 08:02 hrs resulting in the severe injury to one deminer.

A night before the accident took place, an IED blew up inside a tourist hotel called "Abu Sana Hotel", as a result of that the mother of one of our staff was seriously injured and she has been admitted to the hospital in Sulaimanya. In the morning of 20th July 00, a number of HQ staff I decided to visit her in the hospital.

On 20th July 00 and on 08:17 hrs I have heard from (an NGO) contacting Charlie [Demining group] base saying that: your people have had an accident go on channel 4LSB for your ops base in Penjwen. After hearing that message I went up to the radio room in the HQ and the message was as follows:

One deminer injured severely by V-69 AP bounding fragmentation mine at 08:02 hrs at Chamy Trshakan minefield in Penjwen district.

The message I have received said that the ETA of the casualty to Emergency hospital is 01.15 minutes. I have decided to suspend the operations in both branches for that day and I told the team who had the accident that they should stay on their site until I arrive, then I set off to the accident site.

While I was getting closer to the minefield I have been informed by Sulaimanya Field Operations Manager that the accident occurred outside of the minefield in a known mined area close to the minefield.

The minefield:

On 27th July 1999, [the Demining group] started mine clearance on this minefield, this minefield contains V50 AP blast mine and V69 AP bounding fragmentation mine. This minefield is surrounded by many other mined areas.

Accident site:

On arrival at the minefield I have met with the Supervisor in charge in Penjwen area, team leader in charge of the minefield and the rest of the team members. I have noticed that the accident occurred in a known mined area 90 metres from the minefield that was under clearance.

The accident occurred inside a known mined area, with two small gullies crossing the mined area and the area is covered with oak trees and bushes. The lower part of the mined area that the injured deminer walked into, is covered with thin grasses. By the effect of previous years raining and snowing, the soil of the mined area has been washed down from the upper part of the mined area, which is a hilly area. For more information see photograph No. (1 and 2). [Not made available.]

I asked the team leader in charge to brief me on what happened that morning and the story was as follows:

The team started working at 07:00 hrs and the injured deminer's sub-team started working at 07:00 hrs in the morning of the day of the accident. He worked for an hour and was on his

way back to the rest area, he decided to cross a known mined area for the purpose of going to the toilet there. And he took with him his Schiebel AN/19 mine detector his ballistic jacket and a jug of water to clean himself after going to the toilet.

As I said the accident occurred outside of Charny Trshakan minefield in a known mined area. The mined area was well known by all the team members and it has not been demarcated but was marked with rocks painted red to indicate the boundary of that part which was close to the team.

I positioned a medic in a safe place outside the danger area and decided to clear a safe lane to the accident site.

On our way to the accident site (10) metre inside a known mined area we saw 2 V69 empty pots, we continued in our clearance until we have passed the accident site. I have noticed the following: As I said on my way to the accident site I saw two V69 empty pots 10 metres inside the mined area. If you continue walking to the accident site you will see the water jug lying without having received any fragments.

As we continued in clearing a safe lane through the mined area and we reached the site of the accident. I saw a V69 empty pot, the area around it was covered with blood and V69 metal picket there. If you go a bit further you will see a water jug.

If you look from the northern east of accident site, you can see 2 disrupted V69 AP mine rows coming down from the hill, crossing the small gully and going up to the hill again

The injured deminer took his way into the minefield about 30 meters into the known mined area and on the way to the accident site you can see a number of V69 empty pots, prongs and metal pickets.

The injured deminer worked 1 hour in the minefield and he was on his way out to the rest area to have 30 minutes rest. The team leader of the task decided to task the injured deminer's sub-team to re-paint the wooden pickets rather than continuing in demining, so he told him to take the sub-team's Schiebel detector back to the store area and pack it up. On his way back from the safe lane to the rest area [the Victim] decided to walk into a mined area close to their minefield to go to the toilet but he took his detector with him.

CONCLUSIONS

The deminer who was injured intended to go to the toilet or something else inside another known mined area close to their minefield rest area. As a result of his action he initiated one V69 A/P bounding fragmentation mine and resulted in amputating his both legs above the knee.

Still difficult to give proper explanation to this accident, I have interviewed the injured deminer (the key person), who is in a difficult situation psychologically until now because of his injuries.

My aim was to find out the reasons that pushed him to walk into a known mined area and who else may have been aware of his action. I thought that the injured deminer would be prepared to tell me why he entered a known mined area, but it was like I expected. Having interviewed him twice I believe he failed to tell me the truth so at the end of the day I have to depend on the evidence left after the accident and my personal observations and experiences to enable me to write my recommendations.

Still a lot of questions require to be answered and I conclude the followings:

1. Why the injured de-miner entered a known mined area?

The injured de-miner is one of the zealous Muslims, he deeply believes in a verse of the Holy Quran saying: *"Say; we shall not be afflicted with aught unless authorized by God."*

I think misunderstanding and misinterpretation of this verse prompted the injured deminer to have low self-discipline in his job as a deminer. If people make a major mistake in any stage of their life, then they will use the verse above to cover their arse and to return every thing to their fate.

2. If he was intending to go to the toilet, why did he take his detector with him? The injured deminer was fully aware of that mined area, but he said he was not aware of the location of the mine rows. And he assumed that the lower part of the mined area is not containing any mines.
3. The injured deminer mentioned that he was holding his detector in one hand and the water jug in the other. His hand that was holding the water jug has received a number of fragments, but the water jug has not received any fragments.
The area around the accident site has not been used as latrine area and I haven't noticed any evidence of that the area has been used by others.
4. First Aid training for all operational staff was shown to have proved it's success. In [the Victim]'s case the deminers gave a good hand and help to our medics.
5. The last accident shows clearly that in the case of explosion of fragmentation/bounding fragmentation mines we required to have more than one medical bag.
6. A memo should be sent out by the Country Programme Manager and Technical Operations Manager to all [Demining group] staff, particularly all field staff to remind them again if anybody shows negligence in their self discipline they will be fired straight away or they will be not considered for insurance.
7. The team who had the accident have two designated latrine areas, that does not leave any excuses for [the Victim] entering any neighbouring known mined areas.
8. Three medics participated in giving First Aid and stabilizing his injures, indicate that one medic with one medical bag will not be enough in the case of explosion of fragmentation/bounding fragmentation mine of multiple injures.

RECOMMENDATIONS AND ACTIONS TAKEN

1. All [Demining group] NI staff members, particularly operational staff have to be informed by their line managers that the injured deminer's accident should not have occurred at all. The accident occurred because [the Victim] has shown a lack of self-discipline towards his job and his organisation.
2. All mined areas, minefields and suspected mined areas must be accounted and treated as minefields and none of [the Demining group]'s staff and the visitors to the operational sites should be allowed to enter them at all times. [Demining group] operational staff should have known better than anybody else how they should behave safely in minefields and mined areas.
3. All Team Leaders should enforce the discipline and make sure that their de-miners are only using those designated areas designed as Latrine areas.
4. A memo should be sent out to all [Demining group] Northern Iraq staff, particularly the operational staff to warn/remind them, if anybody is killed or injured outside known mined areas they will not be considered for the insurance claim and they will be fired straight away.
5. One medic with one medical bag is not sufficient in the case of having an accident with fragmentation or bounding fragmentation mine. I have discussed this matter with the Senior Medical Officer directly after the accident and I explained my concerns to him.
The Senior Medical Officer said that; having one medic with extra medical equipment or one medic with two medical bags is sufficient in the case of any accidents in the future. All operational staff have attended First Aid course at work, which can be a good support to the medics in the case of accident.
6. A memo has been sent out to all related agencies to explain briefly what was happened.
7. In the future more time should be allowed than stated in the SOPs for the compliance of the accident reports to allow the investigator to interview all people involved properly.

8. Appreciation letter has been sent to all demining agencies particularly (Local demining NGO) for their sympathy with us in [this] accident by suspending their operations for one day and their members were available in the hospital until the midnight of the day of the accident.

9. I have asked the CPM to send an appreciation letter to [the hospital] for their help in the two recent mine accidents.

Victim Report

Victim number: 453	Name: Name removed
Age:	Gender: Male
Status: deminer	Fit for work: no
Compensation: not made available	Time to hospital: 1 hour 15 minutes
Protection issued: Frag jacket	Protection used: Frag jacket
Helmet	
Short visor	

Summary of injuries:

INJURIES

minor Arm

minor Face

minor Genitals

minor Hand

severe Hand

AMPUTATION/LOSS

Leg Above knee

Leg Above knee

COMMENT

See medical report.

Medical report

A medic's report from a hospital reads:

"We would like to inform you that the patient admitted to our hospital as a case of mine injury at 20th July 2000 with traumatic bilateral AKA in a very bad condition. After resuscitation, DBR of both thighs done as multiple stage operation until the closure of stumps partially and he is now waiting for skin graft of other wound. Beside physiotherapy. About further procedures which may be needed till complete recovery we will inform you after the discharge of the patient by another report because it depends on the stumps and general condition of the patient."

The medic's statement reads:

On Thursday 20th at 8:00 a.m. an explosion occurred at Chami Trshakan minefield in Ahmac Kiwan village. Then it was known that the Dm.1 was blown up by a V-69 mine. Straightaway two deminers took the casualty out from the accident site by a stretcher.

After a quick examination it was found out that (he had an above knee amputation of right side lower limb and crushed wounds of left side lower limb till lower thigh & severely injured right hand and some simple wounds of left hand, groin (scrotum), chin, right arm above elbow, and simple facial injuries and a deep lacerated wound of right side of buttock).

Straightaway we carried out First Aid for the casualty as follows:

- 1- Providing two canulla with IV fluid
- 2- Stoppage his right & left limb bleeding
- 3- These two actions have been done by [medic]. One. Splinting his left and right hands.
Two- Stopping his right limb bleeding.
- 4- A-providing AB
B- 2 Cortisone
C- giving pain killer injection
- 5- Checking: blood pressure, respiration, pulse rate and consciousness.
- 6- Splinting his left limb.
- 7- Evacuating the injured de-miner to the ambulance and transporting him.
- 8- Sending an additional vehicle with two persons having the same blood group.

On the way and after providing these First Aids the condition of the injured de-miner became better, but after getting closed to Saed Sadiq district we have done the following for the casualty:

- 1- over dressing
- 2- providing Vial Cortisone
- 3- checking: blood pressure, respiration and pulse rate. In Saed Sadiq district we have met [the Doctor].

The Senior Medical Officer reported:

From the initial examination I found the followings:

The injured person was irritable and pale.

- Vital signs; pulse rate 110/mm., Blood pressure 70/30 mmHg, respiratory rate 26/mm.
- He had amputated Rt. Leg, which was properly dressed with no bleeding visible over the dressings.
- The whole Lt. Lower limb was dressed and splinted below the Knee, there was oozing of blood over the dressings despite proper over dressing made by the two medics accompanying the victim.
- There was a large lacerated wound in the Rt. Buttock, dressed properly but still there was slight bleeding.

Two simple wounds of chin, with no bleeding.

Rt. Hand was dressed till above the wrist. No bleeding.

A simple wound of Lt. Hand and scrotum, no bleedings.

Bruises of Rt. Upper arm.

- The abdomen was soft, but he had slight pain in Rt. Hypochondria region.
- There were 2 IV lines from both upper limbs, patent and fluid bottles squeezed for rapid administration.

The two medics and a deminer were in the ambulance, busy with holding and squeezing intravenous fluids bottles, and stabilizing the crushed Lt. Leg.

I gave extra 2 litres of Ringer lactate Infusion rapidly to elevate blood pressure and avoiding impending circulatory shock state.

The medics had already gave Antibiotics and painkillers to the patient, so no other treatments were necessary.

We arrived at Emergency hospital at 10:15 am and the victim admitted to the OPD ward and immediately the following procedures were done:

1. Another IV line established in the Jugular Vein for receiving blood, and 1 pint was given immediately.
2. After removal of the dressings of Lt. Leg it was obvious that the limb was crushed completely and there was a huge bleeder from the thigh.
3. The patient was admitted to the operation theatre at once and the surgeon decided to amputate the leg after letting me to see the wounds inside the operation.
4. The patient received 7 pints of fresh blood in the operation room, later another 6 pints were given till the next morning.
5. There were multiple fractures of Rt. Hand, which were reduced.
6. A urine catheter was put revealing oliguria (reduced amount of urine output), and the condition improved afterwards.
7. The patient was fully conscious 2 hours after the operation, still there was some oozing of blood from the wound of Rt. Buttock.

Signed.

Analysis

The primary cause of this accident is listed as "*Victim inattention*" because it seems that the deminer went thoughtlessly into the area that he knew to be mined. However, if his claim to have used the area before on ten occasions was true, that is evidence of a "*Field control inadequacy*". Whether it was his partner or a supervisor who should have corrected, someone should have.

It is not clear whether the Victim was squatting to defecate when the accident occurred. If so, the mine may have bounded into the back of his knees, so explaining why the injuries were so severe and why the spread of fragments was relatively limited.

The medical treatment in this accident undoubtedly saved the Victim's life.

A detector inadequacy is noted because the victim has been clearing by excavation without using a detector immediately before the accident. This was said to be due to the number of fragments (see Statements).

Related papers

The file made available by the demining group included their "First look" report. This is an immediate accident report designed to provide first impressions of the accident and allow the investigators a little more time to make a full report. The report, edited for anonymity, is reproduced below. It is followed by a letter telling deminers that if they are injured outside the minefield, they will not be insured.

Northern Iraq Programme FIRST LOOK REPORT

On Thursday 20th July 2000 while Mine Action Team number 3 was carrying out de-mining at Chamy Trshakan in Penjwen district in Sulaimanya Governorate an accident occurred outside the minefield in another mined area at 08:02 hrs resulting in the severe injury to one deminer. This report gives an initial outline of the events surrounding the accident; a more detailed report will be compiled soon.

GROUND

The area is soft and some part of it covered with short bushes and grasses. The site of the accident was 90 meters far from Chamy Trshakan minefield, which our team is working on.

The injured deminer took his way into the minefield about 30 meters in to the accident site and on the way to the accident site you can see V69 empty pots, prongs and metal pickets.

SITUATION

The deminer who was injured was intending to go to the toilet inside another mined area close to their minefield. He initiated one V69 A/P bounding fragmentation mine and resulted in amputating his both legs above his knees.

CONCLUSION

It is very difficult to give any explanation to this accident at the moment, I have still to interview the injured deminer which is in a very difficult situation because of his injuries to find out the reason that pushed him to walk into a known mined area.

The injured deminer worked 1 hour in the minefield and he was on his way out to the rest area to have 30 minutes rest. The team leader of the task decided to task the injured deminer's sub-team to re-paint the wooden pickets rather than continuing in demining, so he told him to take the sub-team's Schiebel detector back to the store area and pack it up. On the way back from the safe lane to the rest area [the Victim] decided to walk into a mined area close to their minefield for latrine but he took his detector with him.

He walked about 30 meters into a known mined area carrying a jug of water and his Schiebel mine detector and on his way back to the rest area he stepped on one V69 AP bounding fragmentation mine and initiated it.

[Demining group] Internal Memo

Date: 30th July 2000

Subject: Wearing of Personal Protective Equipment (PPE)

Be informed that from the effect of 30th July 00, the following instructions to be practiced and passed to all de-mining operational staff working with [Demining group] NI:

Personnel carrying out clearance procedures, or personnel, who are within 50 meters of where clearance activity is taking place, are to wear full Personal Protective Equipment (PPE). This procedure is also to be adopted by those personnel carrying out demining or/demolition clearances as part of COR tasking. The minimum standard of PPE for all operational personnel and those persons visiting operational sites, is to be:

- a) A ballistic jacket fitted correctly and fastened.
- b) A ballistic helmet fitted correctly and undamaged visor pulled down to cover the face.

If anybody discovered any breaches of the above-mentioned instructions is to report the matter immediately to the Technical Operations Manager (TOM), where after investigation if came out that the person(s) is/are guilty that will lead to their dismissal from [the Demining group].

All supervisors are to be briefed by the FOMs and the Team Leaders should be brief by the Supervisors and all deminers to be briefed by their team leaders.

I require personal signatures from all demining staff and a copy should be sent to my office.
Signed.

Statements

The Victim's statement after the accident is reproduced below (edited for anonymity).

The Victim

Q. Describe how the accident occurred, since the work started up to the moment of the accident?

A. At that day I was No.2 (observer). The first change over was done and I became (No.1),. The previous No.1] went to the rest area and [Deminer No.3] replaced him.

The first hour of that day we didn't use the Schiebel mine detector, we were hand prodding as the area contains too many fragments. We were hand prodding in the lower part near the stream. After one hour working it was my turn to changeover, then I came to the water pipe, I laid my helmet beside the water pipe. I opened my jacket and I washed my face.

The water jug was around there, I wanted to go to toilet, so I carried the water jug; I took the Schiebel mine detector with me and I went there. I was looking for a latrine area.

Question 2: Do you want to continue?

Answer: Yes

Q. What happened then?

A. I was just searching for a place. It took me 30 seconds, because from the stream to that area is ploughed and the other side beyond is a minefield. I think there was a bush behind me, a big bush behind me. I carried the Schiebel and the water jug like that. I carried the Schiebel backwards. Just then I thought it was a doomsday. I heard a big bang I saw my leg laid in front of me. I don't know who was the first one came to me but after 10 minutes I was aware all those who were surrounding me. Even I heard them talking and I recognized them all even I told them the call signs of other people.

This has been the accident that occurred to me.

Q. Did you know that the area that you went to is a minefield?

A. We were suspected it to be a minefield but not the lower part of it, because I was behind the grass, I was behind the bush. You didn't believe that V69 can be found in that area, in which I had blown up by V69, as it is sand, so I don't know how I was blown up by the mine.

Q. So you didn't know that it is a minefield?

A. I knew that it is a minefield. I didn't expect the lower part to be mined but beyond this is mined because we were escorted by a guide man from the coconut tree of the other side in the sub teams number 1, 2, 3 up when you came down from the valley to the stream near the water pipe and to the other side we considered it as a minefield (known mined areas) and we take it into account that it contains Type 72 A/P mines because they said that it contains Type 72. If anything happened it is totally my fault therefore no one was aware that I went there to go to toilet carrying the Schiebel mine detector with me.

Just imagine I wasn't had my helmet and I have got no fragments so my helmet is safe. I opened my jacket and I think my jacket have not received too many fragments as well. So the accident occurred to me.

Q. Did other people use that place as a latrine area before?

A. Myself used the area close to that place more than 10 times, but not that place (accident site). The area behind our shade (rest area) and there are bushes beside it, most of us used that place as a latrine area.

Q. If we look at the latrine area that you have used is situated inside of the rocks that you painted red (the painted red stones indicating the boundary of the known mined area). Are you aware that you entered 30-40 m into that area which you painted the outside rocks?

A. I am aware that we painted the rocks to indicate the boundary of the mined area, I am aware because the next minefield hasn't been demarcated.

From the beginning we came there that guy (local villager) came and picked up the mines on the other side of the known mined area. You came and you saw all the mines and you said destroy them. Then the guy ploughed the area by tractor.

We used those painted rocks as a boundary of the mined area, I was aware when I came down from sub team to sub-team and then to our sub team and to the sub team of and then to the water pipe. But I am not sure whether I passed the boundary of the known mined area or not I wasn't aware.

Q. Did you have any personnel, psychological or physical problems on the day of the accident?

A. I didn't have any physical problems but intended to travel and leave the country.

Q. To travel where?

A. To travel abroad, one night before I came to your house to see you and to talk to you about this matter. Some guys are witnessed this one of them is (Deminer). May be I was concerned and worried because of the failure of my plan to travel that I couldn't travel and otherwise I should have travelled on 05108/2000. This was my psychological state.

Q. How was your psychological state when you decided to go to the known mined area or to go to that area in order to go to the toilet?

A. How would be the psychological state of someone who is desperately needed to go to toilet; he runs quickly, he takes his clothes off and empties himself but I wasn't in a confused psychological state or I wasn't ill or worried.

Q. From where did you go towards the accident site and from the water pipe of the upper side?

A. Let me think I don't want to say something that I am not sure about it. I went from the water pipe because I carried the water jug.

Q. When you went to the accident site have you carried the water jug with you?

A. Yes, I had the water jug.

Q. Were you carrying the Schiebel mine detector during at the moment of explosion?

A. Yes I carried a detector Schiebel, but I myself don't know how I carried it, otherwise, why I took the Schiebel at the time I took off the helmet.

Q. You didn't take the Schiebel to clear your path or for any other reasons?

A. No. In fact I had a plan to travel abroad. Even if I were very sick I would have spent 2000 ID so that I could have recovered in order to travel on time.

Q. Did you face any problems, caused by the stretcher, on your way in the hospital, because they said you had a backache?

A. Yes I had my backache, there is a big wound still in my buttock this was dressed with gauze. The stretcher caused aches to my buttock wound. In order to keep my heart pressure stable they splint my leg, my leg was not amputated yet, and my leg was on the Dr's thigh. A deminer was close to my head, the medic was beside me. Honestly all of them even the driver had a good role in rescuing me because if I would have been late for 10 minutes I couldn't have talked to you now.

Q. How did you enter an area that you previously knew that it is a mined area.

A. Believe me even though it had a boundary you will not believe that it is a minefield because it is so sandy. God knows that I haven't seen anything in it. I haven't seen a mine. I haven't seen a metal picket neither a trip wire. It seemed that they throw it under my feet.

Q. Did you see the landowner?

A. Yes I saw him.

Q. Did you know him personally?

A. I don't know him personally but I know his name.

Q. Is he the same landowner who cleared the two rows of V69 mines in the other part of the known mined area and you showed me the mines stock pile when I visited you last time?

A. Yes I think that is also belongs to him.

Q. I wonder why you took the Schiebel with you if you went to the toilet?

A. You may not believe it, maybe because I felt too hot as I had been hand prodding or maybe because I was desperately needed to go to the toilet.

Q. Did they delegate any other task to your sub team, when they told you to take the Schiebel back to the rest area?

A. Because we were hand prodding that day I don't believe that we would have used the Schiebel, so why it should be left it under the sun.

Q. Did you know who was the first person who came to you?

A. I don't know exactly who came first because when the explosion throws me down I said, "Oh, God what I have done to myself," I saw my leg in the boot by my head I looked at it and said "Oh, my God what I have done to myself" then I was unconscious for period when I have been put in the ambulance but they provided me with cannula and IV set and I still remember that the Normal saline was with [deminer].

Q. Did your team have a designated latrine area as per Standard Operating Procedures?

A. In fact we don't have a designated latrine area, as the area surrounded with too many mined areas. We were forbidden to enter the trees, the area beyond us and the stream of the lower part and use it as a latrine area So the only area which is safe and close is near (deminer 1), i.e. the area in which I had my accident.

Q. Has anyone else entered the accident site before, as far you are aware?

A. In fact I didn't see anyone but near our shade I used this area.

Q. So you didn't see anyone use that mined area as a toilet area?

A. No, I didn't see any one inside the known mined area.

Q. Did the accident take place before or after you went to the toilet?

A. I haven't gone to the toilet yet, I wanted to go. I mean I wanted to sit in the area in which I had blown up because it was shady. I just wanted to sit and I was blown up.

Q. You didn't notice anything or look at the area in front of you before you were going to sit down?

A. In fact because the area is a hill and covered with sand, the top of the rusty V69 cannot be seen in the sand so I don't believe that you can see anything.

Q. Did you go beyond the area in which the accident occurred?

A. No, I didn't.

Q. So you blown up just when you reached there?

A. Yes.

Q. [name excised] from Cambodia and the other friends from UK sending their regards and wish you a quick recovery.

A. I thank you and thank them as well.

Q. Do you have anything else to add on the accident?

A. No, thank you I don't have anything