



THOR

Simplified Option Packages

Onboard, Digital - Analogue

Instrumentation options for the integrated THOR. Packaged for convenience, usability and simplification.

A tier of standardized option menus have been created for the THOR as part of the ATD complexity reduction initiative in an effort to simplify the purchasing process for integrated ATDs.

These package options offer sets of predetermined channel counts of load cells, accelerometers, and angular rate sensors conveniently bundled together for optimal usability. Moreover, the standard delivery time will be greatly reduced as a result of streamlining the ATD production and assembly processes.

On-Board DAS Option Table

THOR Application	Spine		On Board DAS Type			Channel Count Options			
	Advanced	Standard	Analogue DTS	Digital DTI		99	118	139	151
			SLICE 6	mg- sensor	Kistler				
Euro NCAP & HIII Legs	•		•	•	•	•			
NHTSA & LX Legs		•	•				•	•	
	•		•	•			•	•	•
					•		•	•	

An Umbilical Option is available for each simplified options package listed.

Engineered-to-Order THORs with varying channel count options can be quoted upon request.



THOR 50M - Simplified Instrumentation Package Options

CHANNEL	QTY	INSTRUMENTATION/LOCATION	99 CH	118 CH	139 CH	151 CH
LOAD CELL/IR-TRACC						
12	4	IR-TRACC Assy, 3D Thorax	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
6	2	IR-TRACC Assy, 3D Abdomen	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
2	2	Skull Spring Load Cell	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
5	5	Face Load Cell			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
6	1	Upper Neck Load Cell	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
6	1	Lower Neck Load Cell		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
4	2	A.S.I.S Load Cell	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
4	1	Clavicle Load Cell (Left)	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
4	1	Clavicle Load Cell (Right)	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
5	1	Thoracic Spine Load Cell	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
3	1	Acetabulum Load Cell (Left)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
3	1	Acetabulum Load Cell (Right)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
6	1	Upper Arm Load Cell (Left)				<input checked="" type="checkbox"/>
6	1	Upper Arm Load Cell (Right)				<input checked="" type="checkbox"/>
12	2	Leg femur Load Cell	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
2	2	Achilles Load Cell		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
10	2	Upper Tibia Load Cell	<input checked="" type="checkbox"/> *	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
10	2	Lower Tibia Load Cell	<input checked="" type="checkbox"/> *	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
ACCELEROMETER						
3	3	Head	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
3	3	T1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
3	3	T4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
3	3	T12	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
1	1	Mid-Sternum	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
1	1	Upper Abdomen	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
3	3	Pelvis	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
2	2	Tibia (Left)		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
2	2	Tibia (Right)		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
3	3	Foot (Left)		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
3	3	Foot (Right)		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
ANGULAR RATE SENSOR (ARS)						
3	3	Head	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
3	3	Chest			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
3	3	Pelvis			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
POTENTIOMETER						
1	1	Neck Rotational		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
2	2	Knee (BBKS)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
3	3	Ankle Joint (Left)		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
3	3	Ankle Joint (Right)		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

* 4 Channel Load Cell