HUMAN BODY DENSITY AND FAT OF AN ADULT MALE POPULATION AS MEASURED BY WATER DISPLACEMENT

Harry J. Krzywicki, et al.

Fitzsimons General Hospital
Denver, Colorado

21 July 1966

Processed for...

DEFENSE DOCUMENTATION CENTER
DEFENSE SUPPLY AGENCY

20090506 009

CLEARINGHOUSE
FOR FEDERAL SCIENTIFIC AND TECHNICAL INFORMATION

U. S. DEPARTMENT OF COMMERCE / NATIONAL BUREAU OF STANDARDS / INSTITUTE FOR APPLIED TECHNOLOGY

UNCLASSIFIED
NOTICE TO DEFENSE DOCUMENTATION CENTER USERS

This document is being distributed by the Clearinghouse for Federal Scientific and Technical Information, Department of Commerce, as a result of a recent agreement between the Department of Defense (DOD) and the Department of Commerce (DOC).

The Clearinghouse is distributing unclassified, unlimited documents which are or have been announced in the Technical Abstract Bulletin (TAB) of the Defense Documentation Center.

The price does not apply for registered users of the DDC services.
LABORATORY REPORT No. 297

HUMAN BODY DENSITY AND FAT OF AN ADULT MALE POPULATION AS MEASURED BY WATER DISPLACEMENT

21 JULY, 1966

US ARMY MEDICAL RESEARCH AND NUTRITION LABORATORY
FITZSIMONS GENERAL HOSPITAL
DENVER, COLORADO 80240
HUMAN BODY DENSITY AND FAT OF AN ADULT MALE POPULATION AS MEASURED BY WATER DISPLACEMENT

By

Harry J. Krzywicki
Chief, Body Composition Branch
Bioenergetics Division

and

Kenneth S. K. Chinn
Physiology Division

US Army Medical Research and Nutrition Laboratory

DISTRIBUTION OF THIS DOCUMENT IS UNLIMITED
Body volume was measured on 14 male adults at 7 intervals during a 24 hour period using a water displacement technique. The variation in body densities fell within the accepted limits of error propagated by the technique. Body densities were also performed on 173 male adults ranging between the ages of 17 - 69. Values were effectively ranked in terms of age and body fat, demonstrating a continued increase in body fat with an increase in age. These values were independent of body weight.

The human body volumeter is a simple, rapid and effective device which compares favorably with the underwater weighing technique for estimating body density in large populations. The precision for estimating body fat is ± 0.488 kg when the residual lung volume is measured but is reduced to ± 1.52 kg when the residual lung volume is estimated.
BODY OF REPORT

WORK UNIT NO. 061: Work Performance and Body Composition As Related to Environment and Nutritional Status

Human Body Density and Fat of an Adult Male Population as Measured by Water Displacement

PROBLEM

No single method for estimating the 4 main components (fat, water, protein and mineral) of the human body exists although several techniques are available for approximating any one compartment. Routine body volumes for computing body density, measured by somewhat complex underwater weighing methods, have had wide acceptance but require semitrained subjects for reproducible results. A simple, more expedient method described by Huff and Feller (1) and again by Allen, et al (2) measures the body volume by direct water displacement, in a calibrated tank. Information on the accuracy and reproducibility of this technique by repeated observations on the same subject is lacking. This study was designed to evaluate the limitations of the technique before additional body composition data of a mixed population was to be reported.

BACKGROUND

Systematic attempts to characterize and estimate the main anatomical, compartmental or chemical components of the human body mass have been reviewed by Keys and Brozek (3), Brozek and Henschel (4), and Brozek (5). Although the visual quantity of body fat is a crude index of nutritional status, the role of adipose tissue, the most variable component of the human body, requires further study in both normal and disease states. The discrimination of body fat from the other components of the whole body is important in the study of body composition of the individual or of various populations. The various procedures used for estimating body fat depend, ultimately, upon the derivations of equations that permit approximation of the fat compartment. Of the many existing fat estimating equations, Damon and Goldman (6) were able to densitometrically validate two of 10 equations tested.
A simple rapid and accurate measurement of body volume for computing body density is desirable for laboratory or field use. Robertson (7) was the first to have reported on the measurement of body volume employing water displacement. Two centuries later, Huff and Feller (1), and Allen, et al (2) described the construction and use of a body volumeter based on water displacement. Details of the construction and operation of the device have been reviewed by Consolazio, et al (8). Garn (9) reported on the construction of a transparent body volume tank and its readout accuracy but made no mention of human body volume data. Nagamine (10) described the body density and percent body fat of Japanese students as estimated from direct water displacement volumetry. The present study attempts to evaluate the accuracy and reproducibility of repeated body volumes measured by water displacement on a group of subjects and then presents data on the estimated body fat of a random male adult population.

APPROACH TO THE PROBLEM

The human body volumeter in use at this Laboratory had undergone very minor changes since it was originally described by Allen, et al (2) but the method of calibration is somewhat different. Aliquots of water were drawn off into a two liter volumetric flask from the portion of the volumeter served by a water level manometer. Centimeter scale changes in the manometer were recorded for each two liter change in water level. The factor obtained from the calibration was used for all human body volumes subsequently measured.

Body volumes obtained by direct water displacement include the errors contributed by the residual volume of air in the lungs following a forced maximal expiration as well as the volume of the gastrointestinal gas. Residual lung volume can be measured and reproduced to within 100 ml by the nitrogen washout method of Rahn (11) or it can be estimated using Chinn and Allen's (12) predicting formula. No accurate technique exists for the direct determination of gastrointestinal gas volume but the volume of 125 ml, suggested by Bedell (13) is generally accepted. However, Blair, et al (14) have reported maximal values of gastrointestinal gas as high as 2600 ml.

Two groups of adult males were studied. The first group was composed of 14 males from 21 - 47 years in age, and from 46.8 - 79.2 kg in body weight. This group was observed at 4 hour intervals over a period of 24 hours to test the reproducibility of body volumes as well as observe the trends in volume changes that might
be attributed to gastrointestinal gas formation when on ad libitum food intake. The second group of 173 males ranged from 17 - 69 years in age and from 55.9 - 117.7 kg in body weight. The body volumes of this group were measured once and were used to assemble data on body composition changes with respect to aging. This group consisted of civilian and military volunteers from our Laboratory and Fitzsimons General Hospital.

Body heights of both groups were recorded to the nearest 0.1 cm on a centimeter rule and body weights were recorded to the nearest 0.05 kg using a Toledo scale (Model 2071) or Plima scale. Arm and scapula skinfolds were measured with the USAMRLN calipers (15). Residual lung volumes were computed from Chinn and Allen's (12) formula which incorporates body weight, age, and the average of the bilateral arm and scapula skinfolds. Gastrointestinal gas was not considered in the gas free body volume. Body fat was calculated from Allen's (2) formula wherein percent body fat = \[
\frac{4.834\text{/density} - 4.366}{100}.
\]

RESULTS

The calibration of the body volumeter by repeatedly drawing off two liter aliquots of water and noting the manometer scale changes resulted in a factor of 2.100 ± 0.014 liters/cm. The water level manometer is backed by a machine engraved centimeter rule (0.05 cm graduations) and could be interpolated to 0.01 cm with the aid of an enlarging lens. Each 0.01 cm represented 0.021 liters of volume. Error propagation based on two manometer scale readings and the subject's ability to effect a forced maximal expiration reproducible to 100 ml permitted fat to be estimated with ± 0.488 kg if the observed body volume is corrected for the measured residual lung volume. However, this precision is decreased to ± 1.52 kg when a mean residual volume of 7.250 liters is accepted to correct for body volume.

The data in Table 1 shows the means and standard deviation for body weight, body volume, and the calculated body density for each of the 14 subjects of the first group measured at 7 intervals over a 24 hour period. The greatest observed standard deviation was found in subject No. 4 who exhibited changes in body mass of ± 0.062 kg, volume ± 0.59 liters, and ± 0.004 density units. The lowest standard deviation occurred in mass and volume of Subject No. 2 (0.020 kg and 0.163 liters, respectively) while the body density had a standard deviation of ± 0.002 units. An analysis of variance for the body density unit change of all 14 subjects over the 24 hour period was performed and showed the standard deviation of a single observation to be 0.002 density units (Table 2).
Table 3 depicts the mean body weight, density and percent body fat subgrouped into 5 year age increments for all of the 173 subjects studied. Residual lung volumes were estimated for this group and the gastrointestinal gas was ignored in the calculation of body density. The data shows a progressive decline in the mean body density with age (1.060 gm/ml at ages 17 - 19 to 1.017 gm/ml at ages 65 - 69) as well as a gradual increase in body fat (19.6% at ages 17 - 19 to 38.7% for the oldest age group).

Comparisons are made in Table 4 of the body density and the fat free mass of 93 males between the ages of 20 - 40 years from the group of 173 subjects studied, with that as reported by several investigators and collated by Behnke (16). The mean body density of the 93 males resembles the values of 31 males reported by Siri (Behnke) in this table but the fat free body weight was less for our subjects. Table 5 presents the body weight, density, and percent body fat of 60 males aged 17 - 25 years from the group of 173 subjects for comparison with earlier literature values as reported by Pascale (17) and Brozek (18). The 60 subjects exhibit the highest mean body weight (73.1 kg) and the lowest mean body density (1.059 gm/ml) which reflects a higher percent body fat (19.9%).

**DISCUSSION**

Calibration of the volumeter resulted in lowering Allen's (2) calibration factor slightly from 2.114 ± 0.064 to 2.100 ± 0.014 liters/cm, but improved its precision approximately 4 times. This is in agreement with a second volumeter reported by Allen (19). Garn (9) reported a greater readout volume accuracy in his volumeter by tilting the water manometer (33 cc/mm). However, such accuracy is questionable since it requires a body weight scale of comparable accuracy. Other measurements requiring improvement are the means of estimating residual lung volume and accurate determinations on quantities of intestinal gas present.

Food and water intake was ad libitum during the 24 hour diurnal study of body weight and body volume changes as shown in Table 1. These measurements were done to observe any extreme variation in body volume that could have been attributed to gastrointestinal gas. Conflicting reports by Bedell (13) and Blair, et al (14) cite gastrointestinal gas to be approximately 125 or up to 2600 ml, respectively. Chinn (20) suggested that the gastrointestinal gas production and volume followed a diurnal pattern and was predictable, reaching its lowest ebb between the hours of 10 a.m. and 12 noon. However, no such trends were observed in this study.
The greatest variation in body volume as seen in Subject No. 4 (Table 1), when coupled with body weight variation, produced a standard deviation of only ± 0.004 density unit change. A 70 kg man with a body density of 1.064 could alter his body density by 0.001 units had he consumed one liter of water, and as Durnin and Taylor (21) cite, this is equivalent to an 0.4% change in estimated percent body fat. Thus, estimates of body fat in Subject No. 4 could be over or underestimated by 1.6%, which by calculation from given data showed fat to vary from 7.29 - 10.58% of body weight (5.30 - 7.69 kg actual body fat) for one standard deviation.

Durnin and Taylor (21) measured body density by underwater weighing 5 times over a two week period in 10 subjects whose body weight varied by 0.5 kg during this period. These authors reported that the standard deviation of a single observation of body density measurement was ± 0.002 units, which is in agreement with our observations. The reproducibility of the estimated body density from body volumes measured by water displacement volumetry also falls within the prescribed limits of ± 0.005 density units set forth by Siri (22) wherein he had determined the inherent errors of such densitometric techniques.

A progressive increase in the mean body weight to age 34 is noted in Table 3, with a decline in body density which reflects increased body fat. The body density continues to decline although the body weight has decreased by approximately 10 kg at age 49. In the older age groups body density is further decreased demonstrating an increase in body fat. Fryer (23) reported information on 60 males aged 60 years or older and cited a mean body density of 1.0296 gm/ml which indicated 31.7% body fat and is comparable to the 60 - 64 year old males in Table 3.

Behnke (16) showed 20 - 40 year old males to have a rather constant fat free mass and cited the observations of several investigators (Table 4). Siri's data (as reported by Behnke) may be more reliable since he considered hydration of the body in his fat estimating equation. It is unusual that our data may be in agreement with Siri's because of the fact that the residual lung volumes were estimated for our subjects while the residual lung volumes are automatically corrected by Siri's technique. Allen (2) considered the water content of body tissues in deriving the USAMRNL fat predicting equation; however, his formula also estimates body fat as much as 2.5% higher than Siri's predicting equation.
The early data of Pascale (17) and Brozek (18) has been compared with data of the young adults from the 173 subjects in Table 5. These comparisons are of interest insofar as Pascale (17) reported a mean body density of 1.068 which represented 16.0% body fat as calculated by Allen's (2) equation. Our group of 60 soldiers were approximately 5 kg heavier and of a lowered body density which reflected a mean body fat burden of 19.9%. Brozek reported a specific gravity of 1.0695 which was corrected to a density value of 1.063 at 30 - 32°C for this group and cited 14.4% body fat; however, when Allen's equation is applied to this mean value, body fat is estimated at 18.2%.

It is noteworthy that this technique of water displacement volumetry effectively ranks population groups in different degrees of body fat independent of body weight but obviously age related. The technique is relatively simple, requires no source of electrical power and is quite useful in backward or remote population areas. It might be far more effective to rank populations studied in nutrition surveys in terms of relative fatness by this method rather than to relate skinfold thickness to standard height and weight tables since body density serves as a better index of percent body fat. Plough (24) cites that skinfold thickness measurements made in ICNND surveys (25) did not give more information than did height and weight tables alone, based on the preliminary results of such surveys. The actual estimate of percent body fat from direct water displacement volumetry may be in error in the individual but is of little consequence when the population is considered in terms of age groups.

ACKNOWLEDGEMENTS

Acknowledgement is made of the cooperation of the many enlisted, officer, and civilian personnel of this Laboratory and Fitzsimons General Hospital, the reserve officers attending annual active duty training at this Laboratory, and reservists of the 156th General Hospital who consented to be measured. We are especially grateful for the direction and assistance rendered by Dr. Thomas H. Allen, Lt. Colonel James E. Hansen, MC and Lt. Colonel John E. Canham, MC.


Table 1.
Body Weight, Volume and Density of 14 Subjects
Measured 7 Times at 4 Hour Intervals

<table>
<thead>
<tr>
<th>Subject</th>
<th>Body Weight, kg</th>
<th>Volume, liter</th>
<th>Density, gm/ml</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>79.19 ± 0.43</td>
<td>75.921 ± 0.479</td>
<td>1.043 ± 0.002</td>
</tr>
<tr>
<td>2</td>
<td>76.73 ± 0.02</td>
<td>72.429 ± 0.163</td>
<td>1.060 ± 0.002</td>
</tr>
<tr>
<td>3</td>
<td>75.29 ± 0.53</td>
<td>70.974 ± 0.519</td>
<td>1.061 ± 0.002</td>
</tr>
<tr>
<td>4</td>
<td>72.72 ± 0.62</td>
<td>67.036 ± 0.591</td>
<td>1.085 ± 0.004</td>
</tr>
<tr>
<td>5</td>
<td>72.50 ± 0.49</td>
<td>68.615 ± 0.440</td>
<td>1.056 ± 0.001</td>
</tr>
<tr>
<td>6</td>
<td>69.98 ± 0.24</td>
<td>66.497 ± 0.193</td>
<td>1.052 ± 0.001</td>
</tr>
<tr>
<td>7</td>
<td>69.83 ± 0.37</td>
<td>66.807 ± 0.287</td>
<td>1.045 ± 0.002</td>
</tr>
<tr>
<td>8</td>
<td>66.80 ± 0.56</td>
<td>63.055 ± 0.485</td>
<td>1.059 ± 0.002</td>
</tr>
<tr>
<td>9</td>
<td>64.69 ± 0.37</td>
<td>61.658 ± 0.360</td>
<td>1.049 ± 0.001</td>
</tr>
<tr>
<td>10</td>
<td>63.68 ± 0.54</td>
<td>59.750 ± 0.508</td>
<td>1.066 ± 0.001</td>
</tr>
<tr>
<td>11</td>
<td>58.23 ± 0.56</td>
<td>54.240 ± 0.325</td>
<td>1.074 ± 0.004</td>
</tr>
<tr>
<td>12</td>
<td>57.36 ± 0.31</td>
<td>53.420 ± 0.295</td>
<td>1.074 ± 0.002</td>
</tr>
<tr>
<td>13</td>
<td>57.32 ± 0.38</td>
<td>54.335 ± 0.226</td>
<td>1.055 ± 0.003</td>
</tr>
<tr>
<td>14</td>
<td>46.76 ± 0.22</td>
<td>42.964 ± 0.221</td>
<td>1.088 ± 0.002</td>
</tr>
</tbody>
</table>
Table 2.

Analysis of Variance of Diurnal Variation in Body Density of 14 Subjects at 4 Hour Intervals

<table>
<thead>
<tr>
<th>Source of Variation</th>
<th>DF</th>
<th>Sum of Squares</th>
<th>Mean Square</th>
</tr>
</thead>
<tbody>
<tr>
<td>Men</td>
<td>13</td>
<td>0.01741214</td>
<td>0.00133395</td>
</tr>
<tr>
<td>Hours</td>
<td>6</td>
<td>0.00005982</td>
<td>0.00000997</td>
</tr>
<tr>
<td>Residual</td>
<td>7</td>
<td>0.00034712</td>
<td>0.00000445</td>
</tr>
<tr>
<td>Total</td>
<td>97</td>
<td>0.01781908</td>
<td></td>
</tr>
</tbody>
</table>

Standard Deviation of Single Observation = 0.0021 Density Units

Standard Error of Estimate = 0.0002 Density Units
Table 3.

Body Density and Per Cent Fat
In Adult Males

<table>
<thead>
<tr>
<th>Age Group</th>
<th>n</th>
<th>Body Weight, kg</th>
<th>Density, gm/ml</th>
<th>% Fat</th>
</tr>
</thead>
<tbody>
<tr>
<td>17 - 19</td>
<td>9</td>
<td>71.9 ± 14.4</td>
<td>1.060 ± 0.016</td>
<td>19.6 ± 7.0</td>
</tr>
<tr>
<td>20 - 24</td>
<td>35</td>
<td>73.6 ± 7.5</td>
<td>1.060 ± 0.013</td>
<td>19.5 ± 5.5</td>
</tr>
<tr>
<td>25 - 29</td>
<td>29</td>
<td>76.8 ± 14.0</td>
<td>1.053 ± 0.017</td>
<td>22.6 ± 7.3</td>
</tr>
<tr>
<td>30 - 34</td>
<td>15</td>
<td>85.8 ± 17.6</td>
<td>1.044 ± 0.013</td>
<td>26.3 ± 6.1</td>
</tr>
<tr>
<td>35 - 39</td>
<td>13</td>
<td>76.2 ± 10.6</td>
<td>1.043 ± 0.012</td>
<td>26.9 ± 3.6</td>
</tr>
<tr>
<td>40 - 44</td>
<td>25</td>
<td>75.4 ± 11.1</td>
<td>1.042 ± 0.012</td>
<td>27.1 ± 5.5</td>
</tr>
<tr>
<td>45 - 49</td>
<td>24</td>
<td>76.2 ± 10.0</td>
<td>1.038 ± 0.010</td>
<td>29.3 ± 4.5</td>
</tr>
<tr>
<td>50 - 54</td>
<td>12</td>
<td>75.5 ± 10.1</td>
<td>1.032 ± 0.026</td>
<td>32.8 ± 9.1</td>
</tr>
<tr>
<td>55 - 59</td>
<td>4</td>
<td>79.0 ± 10.3</td>
<td>1.031 ± 0.021</td>
<td>32.5 ± 4.8</td>
</tr>
<tr>
<td>60 - 64</td>
<td>5</td>
<td>69.7 ± 7.5</td>
<td>1.026 ± 0.010</td>
<td>34.7 ± 4.5</td>
</tr>
<tr>
<td>65 - 69</td>
<td>2</td>
<td>68.6 ± 2.1</td>
<td>1.017 ± 0.001</td>
<td>38.7 ± 0.6</td>
</tr>
<tr>
<td>Total</td>
<td>173</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Table 4.

Estimated Fat Free Weights on Groups of Adults
20 - 40 Years of Age from Body Density Determinations

<table>
<thead>
<tr>
<th>Investigator</th>
<th>Year</th>
<th>n</th>
<th>Density gm/ml</th>
<th>Range</th>
<th>Fat Free Body Weight kg</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Underwater Weighing</td>
<td></td>
</tr>
<tr>
<td>Behnke</td>
<td>1942</td>
<td>99</td>
<td>1.064</td>
<td>1.016 - 1.092</td>
<td>61.3</td>
</tr>
<tr>
<td>Osserman</td>
<td>1949</td>
<td>81</td>
<td>1.063</td>
<td>1.016 - 1.095</td>
<td>63.5</td>
</tr>
<tr>
<td>Brozek</td>
<td>1952</td>
<td>25</td>
<td>1.063</td>
<td>-</td>
<td>60.2</td>
</tr>
<tr>
<td>von Dobeln</td>
<td>1956</td>
<td>35</td>
<td>1.072</td>
<td>1.020 - 1.099</td>
<td>61.2</td>
</tr>
<tr>
<td>Pascale</td>
<td>1956</td>
<td>88</td>
<td>1.068</td>
<td>1.020 - 1.089</td>
<td>59.1</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Gas Displacement</td>
<td></td>
</tr>
<tr>
<td>Siri (Behnke)</td>
<td>1957</td>
<td>31</td>
<td>1.051</td>
<td>1.014 - 1.081</td>
<td>61.9</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Direct Water Displacement</td>
<td></td>
</tr>
<tr>
<td>USAMRNL</td>
<td>1960</td>
<td>93</td>
<td>1.052</td>
<td>1.010 - 1.094</td>
<td>59.1</td>
</tr>
</tbody>
</table>
Table 5.

Body Density and Per Cent Fat in Adult Males

<table>
<thead>
<tr>
<th>Investigator</th>
<th>Age Group</th>
<th>n</th>
<th>Body Weight</th>
<th>Density gm/ml</th>
<th>% Fat</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pascale</td>
<td>17 - 25</td>
<td>88</td>
<td>68.3 ± 11.1</td>
<td>1.068 ± 0.012</td>
<td>16.0</td>
</tr>
<tr>
<td>Brozek</td>
<td>23 - 29</td>
<td>25</td>
<td>70.6 ± 8.3</td>
<td>1.063 ± 0.013</td>
<td>14.4</td>
</tr>
<tr>
<td>USAMRNL</td>
<td>17 - 25</td>
<td>60</td>
<td>73.1 ± 10.3</td>
<td>1.059 ± 0.013</td>
<td>19.9</td>
</tr>
</tbody>
</table>
HUMAN BODY DENSITY AND FAT OF AN ADULT MALE POPULATION AS MEASURED BY WATER DISPLACEMENT

Body volume was measured on 14 male adults at 7 intervals during a 24 hour period using a water displacement technique. The variation in body densities fell within the accepted limits of error propagated by the technique. Body densities were also performed on 173 male adults ranging between the ages of 17-69. Values were effectively ranked in terms of age and body fat, demonstrating a continued increase in body fat with an increase in age. These values were independent of body weight.

The human body volumeter is a simple, rapid and effective device which compares favorably with the underwater weighing technique for estimating body density in large populations. The precision for estimating body fat is ±0.488 kg when the residual lung volume is measured but is reduced to 1.52 kg when the volume is estimated.
**INSTRUCTIONS**

1. **ORIGINATING ACTIVITY**: Enter the name and address of the contractor, subcontractor, grantee, Department of Defense activity or other organization (corporate author) issuing the report.

2a. **REPORT SECURITY CLASSIFICATION**: Enter the overall security classification of the report. Indicate whether "Restricted Data" is included. Marking is to be in accordance with appropriate security regulations.

2b. **GROUP**: Automatic downgrading is specified in DoD Directive 5200.10 and Armed Forces Industrial Manual. Enter the group number. Also, when applicable, show that optional markings have been used for Group 3 and Group 4 as authorized.

3. **REPORT TITLE**: Enter the complete report title in all capital letters. Titles in all cases should be unclassified. If a meaningful title cannot be selected without classification, show title classification in all capitals immediately following the title.

4. **DESCRIPTIVE NOTES**: If appropriate, enter the type of report, e.g., interim, progress, summary, annual, or final. Give the inclusive dates when a specific reporting period is covered.

5. **AUTHOR(S)**: Enter the name(s) of author(s) as shown on or in the report. Enter last name, first name, middle initial. If military, show rank and branch of service. The name of the principal author is an absolute minimum requirement.

6. **REPORT DATE**: Enter the date of the report as day, month, year, or month, year. If more than one date appears on the report, use date of publication.

7a. **TOTAL NUMBER OF PAGES**: The total page count should follow normal pagination procedures, i.e., enter the number of pages containing information.

7b. **NUMBER OF REFERENCES**: Enter the total number of references cited in the report.

8a. **CONTRACT OR GRANT NUMBER**: If appropriate, enter the applicable number of the contract or grant under which the report was written.

8b, 8c, & 8d. **PROJECT NUMBER**: Enter the appropriate military department identification, such as project number, subproject number, system numbers, task number, etc.

9a. **ORIGINATOR'S REPORT NUMBER(S)**: Enter the official report number by which the document will be identified and controlled by the originating activity. This number must be unique to this report.

9b. **OTHER REPORT NUMBER(S)**: If the report has been assigned any other report numbers (either by the originator or by the sponsor), also enter this number(s).

10. **AVAILABILITY/LIMITATION NOTICES**: Enter any limitations on further dissemination of the report, other than those imposed by security classification, using standard statements such as:

   (1) "Qualified requesters may obtain copies of this report from DDC."

   (2) "Foreign announcement and dissemination of this report by DDC is not authorized."

   (3) "U. S. Government agencies may obtain copies of this report directly from DDC. Other qualified DDC users shall request through...

   (4) "U. S. military agencies may obtain copies of this report directly from DDC. Other qualified users shall request through...

   (5) "All distribution of this report is controlled. Qualified DDC users shall request through...

If the report has been furnished to the Office of Technical Services, Department of Commerce, for sale to the public, indicate this fact and enter the price, if known.

11. **SUPPLEMENTARY NOTES**: Use for additional explanatory notes.

12. **SPONSORING MILITARY ACTIVITY**: Enter the name of the departmental project office or laboratory sponsoring (paying for) the research and development. Include address.

13. **ABSTRACT**: Enter an abstract giving a brief and factual summary of the document indicative of the report, even though it may also appear elsewhere in the body of the technical report. If additional space is required, a continuation sheet shall be attached.

   It is highly desirable that the abstract of classified reports be unclassified. Each paragraph of the abstract shall end with an indication of the military security classification of the information in the paragraph, represented as (TS) (S), (C), or (U).

   There is no limitation on the length of the abstract. However, the suggested length is from 150 to 225 words.

14. **KEY WORDS**: Key words are technically meaningful terms or short phrases that characterize a report and may be used as index entries for cataloging the report. Key words must be selected so that no security classification is required. Identifiers, such as equipment model designation, trade name, military project code name, geographic location, may be used as key words but will be followed by an indication of technical context. The assignment of links, rules, and weights is optional.