

Injury Report merupakan report yang berisi tentang injury yang terjadi pada seseorang. Injury report hanya bisa diisi oleh pengguna yang memiliki role sebagai medic. Berikut adalah tampilan antarmuka awal dari Injury Report.

WW-FRACAS Application
Wayang Windu

Dashboard FRACAS SHE Daily Log Equipment Daily Report Asset Register RCA PIR Welcome Vacant! [Log Off]

Injury Report

[Add Injury Report](#)

Drag a column header and drop it here to group by that column

Action	Date / Time	Name
	7/1/2013 2:15:00 PM	asd

Displaying items 1 - 1 of 1

Gambar 1 Tampilan Antarmuka Awal Injury Report

Adapun form yang perlu diisi untuk injury report adalah sebagai berikut.



WW-FRACAS Application

Wayang Windu

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STAR ENERGY GEOTHERMAL (WAYANG WINDU) LIMITED

Injury Report - Medical Assessment

Date / Time	9/16/2013 3:22 PM		Sex / Nation	<input type="radio"/> L <input type="radio"/> P /				
Name / ID Number			Age / BOD	/ 9/16/2013				
Comp / Dept / Sect			Job Title					
Direct Supervisor			Date of employment	9/16/2013				
Current job exp.			Time start work before incident	3:22 PM				
Brief cause								
General Condition	Conscious		Temperature					
	Blood pressure		Pulse rate					
	Respiratory rate		Oxygen saturation					
MEDICAL CONDITIONS								
PRIMARY SURVEY		Time : 3:22 PM	FIRST OBSERVATION					
Airway	<input type="radio"/> Clear	<input type="radio"/> Obstructed	Respiratory Rate --					
C. Spine	<input type="radio"/> Normal	<input type="radio"/> Possible Injury	Oxygen Saturation : Sa O2 %					
Breathing	<input type="radio"/> Spontaneous	<input type="radio"/> Problem	Blood Pressure:					
Circulation	<input type="radio"/> External	<input type="radio"/> Possible Internal	Pulse Rate:					
Hmorhage	<input type="radio"/> None / slight	<input type="radio"/> Moderate <input type="radio"/> Severe						
Disability	Alert Responds to	<input type="radio"/> Visual stimuli <input type="radio"/> Pain <input type="radio"/> Unresponsive	SECONDARY SURVEY					
Exposure / Injuries								
						Eye Opening	Spontaneous	<input type="radio"/> 4
							To Voice	<input type="radio"/> 3
							To Pain	<input type="radio"/> 2
							None	<input type="radio"/> 1
						Best Verbal Response	Oriented	<input type="radio"/> 5
							Confused	<input type="radio"/> 4
							Inappropriate	<input type="radio"/> 3
							Incomprehensible	<input type="radio"/> 2
						Motor Response	None	<input type="radio"/> 1
Obeys command	<input type="radio"/> 6							
Localizes pain	<input type="radio"/> 5							
Withdrawal (pain)	<input type="radio"/> 4							
Flexion (pain)	<input type="radio"/> 3							
Pupils	React	<input type="checkbox"/> R <input type="checkbox"/> L						
	1 Constricted	Size R						
2 Normal								
3 Dilated	Size L							
PRIMARY MANAGEMENT			Trauma Score: Time 3:22 PM					
Airway	<input type="radio"/> Oropharyngeal <input type="radio"/> C/Thyrotomy	<input type="radio"/> Nasal <input type="radio"/> Oxygen <input type="radio"/> E Tube <input type="radio"/> Suction	COMMENTS					
C. Spine	<input type="radio"/> C. Collar	<input type="radio"/> Spine board						
Breathing	<input type="radio"/> Ventilate	<input type="radio"/> Chest drain						
Circulation	Cannula size :	Rt Lt						
	IV Fluids	Volume Time						
	<input type="checkbox"/> H'Mans / N. Saline							
	<input type="checkbox"/> H'macel / G'fusine							
SECONDARY MANAGEMENT								
Analgesia Drugs (specify)		Time :						
Splinting	<input type="radio"/> Frac Strap <input type="radio"/> Box	<input type="radio"/> KED <input type="radio"/> Other (specify)						
	<input type="radio"/> Traction							
Signed								
Crew								

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Gambar 2 Tampilan Form Pengisian Injury Report