Accident Incident Report Template

Accident / Incident Report Form Template

Employee Name: 108 Title/Role: Junior Doctor Date of Report: 1-Apr-2018

Employee Signature: Length of Time In Current Role: 1year Date of Incident: 1-Apr-2018

Location Of Incident: Rayadurgam Time of Incident: 12:00pm

RESULT OF ACCIDENT/INCIDENT					
HEAD	☒			Left	Right
FACE	☐		SHOULDER	☐	☐
NECK	☐		ARM PIT	☐	☐
UPPER BACK	☐		UPPER ARM	☐	☐
LOWER BACK	☐		LOWER ARM	☐	☐
CHEST	☐		ELBOW	☐	☐
ABDOMEN	☐		WRIST	☐	☐
PELVIS/GROIN	☐		HAND	☒	☐
LIPS	☐		BUTTOCKS	☐	☐
TEETH	☐		HIP	☐	☐
TONGUE	☐		THIGH	☐	☐
NOSE	☐		LOWER LEG	☐	☐
FINGERS	☐		KNEE	☐	☐
TOES	☐		ANKLE	☐	☐
OTHER:	☐		EYES	☐	☐
OTHER:	☐		EARS	☒	☐

INCIDENT INFORMATION	
INCIDENT DESCREPTION	6 people injured and 4 motor cycles and 2 cars damaged
TASKS LEADING TO INCIDENT	Lorry break failure
ADDITIONAL INFO	None
OSHA RPORTING	No
WITNESS NAME AND CONTACT	Maro Aparichithudu, FootPath, Near Rayadurgam PS. Phone:1234567890

VRIFICATION

Supervisor Name: Venkatachalam Reported To: UNKNOWN Date of Report: 02-Apr-2018

Supervisor Signature: Bureau: Health Ministry Work Unit: 108

Additional Info: None