University of Georgia Injury Reporting Form*

Injury Date: ________________  Time: ____________am/pm

Name of Injured Person: __________________________  Under 18: _____ Age 18 & Over: _____

Phone Number of Injured Person: (____) - ______

Incident/Accident (check all that apply):

___Lifting/moving  ___Burn  ___Needle stick  
___Ingestion/inhalation  ___Slip/trip/fall  ___Object in eye  
___Struck by/struck against  ___Strain  ___Cut/puncture/scrape  
___Animal/insect bite  ___Illness-communicable  ___Hearing loss  
___Caught by  ___Illness-non-communicable  ___Motor vehicle collision  
___Other (please specify): __________________________

Where did incident happen? (Be specific: building, room no., hallway, etc)

Building Name: ____________________________  Room No: ________________

Other location; please describe: ____________________________

Details of Incident. (Describe exactly what happened. What was the individual doing? What was the cause?)

__________________________________________________________________________

Give the name(s)/phone numbers/email of any witnesses to the incident.

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

Describe any injury (bruise, sprain, laceration, etc.)

__________________________________________________________________________

Specify what body part(s) were injured.

__________________________________________________________________________

Treatment received (known at the time of this report):

___None  ___Doctor/urgent care visit  ___Admitted to hospital  
___First aid at site  ___Emergency Room  ___Fatality  
___Refused

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Name of person completing this form (in case of question about form): ____________________________

Group Name: ____________________________  Phone Number: ____________________________

*Developed from UGA online reporting system, May 2015; must be entered in online UGA Injury Report Form