**[A blue and white sign

AI-generated content may be incorrect.](https://www.smartsheet.com/try-it?trp=8777&utm_source=template-word&utm_medium=content&utm_campaign=Accident+Incident+Report--8777&lpa=Accident+Incident+Report++8777)Accident Incident Report   
Template**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Employee name** |  | **Title / role** |  | **Date of report** |
|  |  |  |  |  |
| **Employee signature** |  | **Length of time in current role** |  | **Date of incident** |
|  |  |  |  |  |
| **Location of incident** | | |  | **Time of incident** |
|  | | |  |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Result of Accident / Incident** | | | | | |  | **Incident Information** | |
| Head |  |  |  | **Left** | **Right** |  | **Incident description** |  |
| Face |  |  | Shoulder |  |  |  |
| Neck |  |  | Armpit |  |  |  |
| Upper back |  |  | Upper arm |  |  |  |
| Lower back |  |  | Lower arm |  |  |  | **Tasks leading to incident** |  |
| Chest |  |  | Elbow |  |  |  |
| Abdomen |  |  | Wrist |  |  |  |
| Pelvis / groin |  |  | Hand |  |  |  | **Additional information** |  |
| Lips |  |  | Buttocks |  |  |  |
| Teeth |  |  | Hip |  |  |  |
| Tongue |  |  | Thigh |  |  |  | **OSHA reporting** |  |
| Nose |  |  | Lower leg |  |  |  |
| Fingers |  |  | Knee |  |  |  | **Witness name and contact** |  |
| Toes |  |  | Ankle |  |  |  |
| Other: |  |  | Eyes |  |  |  |
| Other: |  |  | Ears |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Verification** | | | | |
| **Supervisor name** |  | **Reported to** |  | **Date of report** |
|  |  |  |  |  |
| **Supervisor signature** |  | **Bureau** |  | **Work unit** |
|  |  |  |  |  |
| **Additional information** | | | | |
|  | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | |  |  |  |  |
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