

Appendix 1 – Incident Investigation Report

I Basic information on incident			
Short description of the incident			
Date and time of incident			
Place of incident			
Incident participants			
Name	Work place	Previous injuries	Medical care
Witnesses			
Name		Work place	
Description of injuries			
Description of damage to equipment			
II Sequence of events			
<div style="border: 1px dashed black; height: 20px; width: 100%;"></div>			
III Cause of incident			
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IV Corrective actions initiated			
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Initiated by:		Verified by:	
Date:		Date:	
Date of corrective action application		Corrective action application verified by:	

Comment [18A1]: Write in here the number of witness persons present.

Comment [18A2]: Write in here whether medical care was needed or not.

Comment [18A3]: E.g., type of injury, injured body part, source of injury, etc.

Comment [18A4]: Describe here the order of events that led to injury.

Comment [18A5]: Write in here the date when the incident occurred.

Comment [18A6]: Write in here what corrective actions were taken in order to remove the cause of the incident.