## STUDENT/VISITOR INJURY REPORT – OSU CHS/TULSA

10020011112	•	rint legibly)	must be completed*	
Name (As on Social Security Card):	CWID:	Sex:	Phone Number:	Date of Birth:
Last: First: MI:			Home: ( )	
Pont /Unit Name:		Job Title:	Work: ( )	
Dept./Unit Name:		Job Hue:		
Injury Date: / / M D Y		Time:	□ AM □ PM	
Location of Injury: Room #:	Buildin	g:		
Body Part Injured:		Witness Name	(s):	
Finger Hand (Right/Left)				
Arm (Right/Left) Leg (Right/	Left)			
Torso Head				
Othory				
Other:				
Was injury reported on date it occurred?	□ YES □ NO If	NO, please explai	n:	
To colore generated.				
To whom reported:				
Date/Time reported:				
Did you seek medical attention before re	porting? ☐ YES ☐ N	O If <b>YES</b> , plea	se explain and provide	physician:
Physician name:	Address:		Pho	one:
			Pho	one:
Physician name:  Describe how and what happened to cau			Pho	one:
			Pho	one:
			Pho	one:
	use this injury:		Pho	one:
Describe how and what happened to cau	use this injury:	ent details:	Pho	one:
Describe how and what happened to cau  Has body part been injured before?	use this injury:	nent details:	Pho	one:
Describe how and what happened to cau  Has body part been injured before?	use this injury:	ent details:	Pho	one:
Describe how and what happened to calculate the second of	use this injury:			one:
Describe how and what happened to cause Has body part been injured before?  If YES, please provide date of injury, physics Student/Visitor Signature:	use this injury: /ES □ NO ician name, and treatm	Da	nte Completed: / M D	/ ) Y
Describe how and what happened to cause Has body part been injured before?  If YES, please provide date of injury, physics  Student/Visitor Signature:  Type of Event	use this injury:  /ES	Da n <b>g Condition</b>	ate Completed: / M D Contrib	/ ) Y uting Behavior
Describe how and what happened to cause Has body part been injured before?  If YES, please provide date of injury, physics  Student/Visitor Signature:  Type of Event  Struck by	use this injury:  /ES	Da ng Condition or failure	ate Completed: /  M D  Contrib	/ ) Y uting Behavior task
Has body part been injured before?	Contributir  Equipment defect PPE (personal pro	Da ng Condition or failure tective	ate Completed: / M □ Contrib □ Inattention to □ Rushing or hu	/ ) Y uting Behavior task rried
Describe how and what happened to cause Has body part been injured before?  If YES, please provide date of injury, physics  Student/Visitor Signature:  Type of Event  Struck by Caught in/under/between Overexertion	Contributing PPE (personal proequipment) unaverse	Da ng Condition or failure tective ailable	ate Completed: /  M D  Contrib  Inattention to  Rushing or hu  Failure to get	/ D Y uting Behavior task rried assistance
Describe how and what happened to cause Has body part been injured before?   Yes, please provide date of injury, phys.  Student/Visitor Signature:  Type of Event   Struck by   Caught in/under/between   Overexertion   Patient handling	Contributing PPE (personal proequipment) unavaged Work area set-up,	Dang Condition or failure tective ailable /arrangement	ate Completed: /  M	/ D Y uting Behavior task rried assistance
Describe how and what happened to cause Has body part been injured before? If YES, please provide date of injury, physics.  Student/Visitor Signature:  Type of Event  Struck by	Contributir  Equipment defect PPE (personal pro equipment) unav: Work area set-up, Floor/work surfac	Dang Condition or failure tective ailable /arrangement	ate Completed: /  M	/ uting Behavior task rried assistance stive device (lift
Describe how and what happened to cau  Has body part been injured before?   Yes, please provide date of injury, phys  Student/Visitor Signature:  Type of Event   Struck by     Caught in/under/between   Overexertion   Patient handling   Material handling   Fall/slip/trip	Contributir    Contributir   Equipment defect   PPE (personal pro   equipment) unava	Dang Condition or failure tective ailable /arrangement	ete Completed: /  M C  Contrib  Inattention to Rushing or hu Failure to get Not using assise equipment) Procedure not	/ viting Behavior task rried assistance stive device (lift
Describe how and what happened to cause Has body part been injured before?   No of the content o	Contributing  Contributing  Contributing  Equipment defect  PPE (personal production of the production	Da ng Condition or failure tective ailable /arrangement es	ate Completed: /  M	/ uting Behavior task rried assistance stive device (lift
Describe how and what happened to cause Has body part been injured before?   Note of the provide date of injury, physical structure   Struck by     Caught in/under/between   Overexertion   Patient handling   Material handling   Fall/slip/trip   Chemical or other exposure   Body fluid splash	Contributing  Contributing  Equipment defect  PPE (personal proequipment) unaveralled area set-up, Floor/work surfact Ventilation Lighting Disassembling equipment	ng Condition or failure tective ailable /arrangement es	ate Completed: /  M	task rried assistance stive device (lift coor position or motion ety device
Describe how and what happened to cau  Has body part been injured before?   Yes   If YES, please provide date of injury, phys  Student/Visitor Signature:  Type of Event  Struck by     Caught in/under/between  Overexertion   Patient handling  Material handling  Fall/slip/trip  Chemical or other exposure  Body fluid splash  Needle stick or sharps injury	Contributing  Equipment defect PPE (personal proequipment) unave Work area set-up, Floor/work surfact Ventilation Lighting Disassembling equ	ng Condition or failure tective ailable /arrangement es	ate Completed: /  M D  Contrib  Inattention to Rushing or hu Failure to get Not using assisequipment) Procedure not Unbalanced/p Bypassing safe	/ uting Behavior task rried assistance stive device (lift c followed coor position or motion ety device or PPE
Describe how and what happened to cause Has body part been injured before?   Note of the provide date of injury, physical structure   Struck by     Caught in/under/between   Overexertion   Patient handling   Material handling   Fall/slip/trip   Chemical or other exposure   Body fluid splash	Contributing  Contributing  Equipment defect  PPE (personal proequipment) unaveralled area set-up, Floor/work surfact Ventilation Lighting Disassembling equipment	ng Condition or failure tective ailable /arrangement es	ate Completed: /  M D  Contrib  Inattention to Rushing or hu Failure to get Not using assisequipment) Procedure not Unbalanced/p Bypassing safe	y uting Behavior task rried assistance stive device (lift followed oor position or motion ety device ar PPE ence by other person(s)

☐ Ordered or posted hazard/warning signs					
☐ Reported equipment/condition to					
□ Counseled Student					
□ Corrective Action					
□ Other					
Phone #:	Date Completed:		/	/	
		M	D	Υ	′
-	<ul><li>□ Reported equipment</li><li>□ Counseled Student</li><li>□ Corrective Action</li><li>□ Other</li></ul>	<ul> <li>□ Reported equipment/condition to</li> <li>□ Counseled Student</li> <li>□ Corrective Action</li> <li>□ Other</li> </ul>	□ Reported equipment/condition to □ Counseled Student □ Corrective Action □ Other  Phone #: Date Completed:	□ Reported equipment/condition to □ Counseled Student □ Corrective Action □ Other  Phone #: Date Completed: /	□ Reported equipment/condition to □ Counseled Student □ Corrective Action □ Other  Phone #: Date Completed: / /