

# Equipment Malfunction Injury Incident Report

Report Date

Incident Date & Time

## 1. Injured Person Details

Name

Employee ID

Department

Position

## 2. Incident Location

Specific Location

Area/Section

## 3. Equipment Information

Equipment Name

Equipment ID/Serial Number

Manufacturer

## 4. Injury Details

Description of Injury

Body Part(s) Injured

Severity

Select Severity ▼

## 5. Incident Description

Describe What Happened

Describe Equipment Malfunction

## 6. Immediate Actions Taken

Actions Taken Immediately After Incident

## 7. Witness Information

Names & Contact Details of Witnesses

## 8. Reported By

Name

Contact

Signature