# Child Injury Report Form for Indoor and Outdoor Injuries

1. **Child’s name** ____________________________ 3. **Grade** ______________ 5. ( ) Male ( ) Female

2. **School name** ____________________________ 4. **Date of injury** ______________ 6. **Time of injury** ______

7. **Days absent:**  ___Less than ½  ___1/2  ___1  ___1½ - 2  ___2½ - 3  ___Other:  ____________________________________

8. **First Aid given:**  
   - Ice  
   - Washed wound  
   - Kept immobile  
   - Observed  
   - Stopped bleeding  
   - Applied splint  
   - Applied dressing  
   - Other  
   
   **Explain:** __________________________________________________________________________________________

9. **Body part injured:**  
   - Head  
   - Trunk  
   - Extremities  
   - Other

   - Ear  
   - Abdomen  
   - Ankle  
   - Lower arm  
   - Eye  
   - Back  
   - Elbow  
   - Lower leg  
   - Face  
   - Chest  
   - Finger  
   - Thumb  
   - Head  
   - Groin  
   - Foot  
   - Toes  
   - Neck  
   - Shoulder  
   - Hand  
   - Upper arm  
   - Scalp  
   - Trunk  
   - Hip  
   - Upper leg  
   - _________________  
   - Knee  
   - Wrist  

10. **Type of injury suspected:**  
    - Laceration/Abrasion  
    - Bruise/Contusion  
    - Sprain/Strain  
    - Dislocation  
    - Fracture  
    - Concussion  
    - Surface cut/Scratch  
    - Burn  
    - Other:

11. **Action taken:**  
    - Parent took home  
    - Transfer to hospital  
    - Parent took to doctor  
    - Returned to class  
    - Called 911  
    - Parent took to ER  
    - Other:  

12. **Explanation of accident:**  
    - Collision with person  
    - Collision with obstacle  
    - Hit with object  
    - Injury to self  
    - Fall  
    - Height of fall  
    - Other:

13. **Accident location:**  
    - Classroom  
    - Playground  
    - Gym  
    - Assembly  
    - Stairs  
    - Hallway  
    - Bus  
    - P.E. class  
    - Before School  
    - After school  
    - Other:  

14. **Surface:**  
    - Blacktop  
    - Dirt  
    - Grass  
    - Synthetic surface  
    - Carpet  
    - Pea gravel  
    - Mats  
    - Rubber tile  
    - Concrete  
    - Ice/Snow  
    - Sand  
    - Wood products  
    - Other:  

15. **Depth of loose fill material**  

16. **Activity:**  
   - 1. Baseball/Softball  
   - 2. Basketball  
   - 3. Bicycling  
   - 4. Climbing  
   - 5. Dodgeball  
   - 6. Fighting  
   - 7. Flag/Touch football  
   - 8. Jumping  
   - 9. Kickball  
   - 10. Playground equipment  
   - 11. Playing on bars  
   - 12. Running  
   - 13. Rough housing  
   - 14. Sliding  
   - 15. Sliding on ice  
   - 16. Soccer  
   - 17. Swinging  
   - 18. Throwing rocks  
   - 19. Track/Field  

17. **Equipment:**  
   - Was playground equipment involved in injury?  
   - Yes  
   - No  
   - (a) Did equipment appear to be used appropriately?  
   - Yes  
   - No  
   - (b) Was there any apparent malfunction of equipment?  
   - Yes  
   - No  

18. **Describe:**  
    Describe specifically how the injury happened.  

19. **Signatures:**  
   - (Person filing report)  
   - (Director)

---

CHILD INJURY REPORT FORM INSTRUCTIONS

This form is to be completed immediately following the occurrence of any injury that is severe enough to:

a. Cause the loss of one-half day or more of school
b. Warrant medical attention and treatment (i.e., school nurse, M.D., E.R., etc.), and/or
c. Require reporting according to School District policy.

<table>
<thead>
<tr>
<th>Number</th>
<th>Description of Each Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>1-6</td>
<td>Self explanatory.</td>
</tr>
<tr>
<td>7</td>
<td>Do not file a form until you have filled in days missed. If student is going to be absent for an extended period of time, use parent’s estimate. If no school is missed, check less than ½.</td>
</tr>
<tr>
<td>8-11</td>
<td>Self explanatory. Record the amount of time child was in the nurse’s office. Please include H or M. H= hours: M=minutes (i.e., 1h:40m).</td>
</tr>
<tr>
<td>12</td>
<td>Collision with person includes injuries which result from interactions between players from incidental or intended contact. Hit with object includes that the student got hit by an object (ball, backpacks, etc.) Fall injuries are those when the student falls from equipment or falls while running. Collision with obstacle includes contact when the child collides into an object (playground equipment, fence, etc.) Injury to self occurs when a child got injured because of an action s/he carried out.</td>
</tr>
<tr>
<td>13</td>
<td>Self explanatory. Height of fall – Report the height from where the child fell.</td>
</tr>
<tr>
<td>14</td>
<td>Describe surface over which injury occurred.</td>
</tr>
<tr>
<td>15</td>
<td>In the small box indicate the number of the activity that the child was doing when s/he got injured.</td>
</tr>
<tr>
<td>16</td>
<td>Self explanatory. See attached document with pictures of each piece of equipment.</td>
</tr>
<tr>
<td>17</td>
<td>Briefly describe specifically how the incident happened. Make sure to include all names of witnesses present. If additional space is needed, continue on another sheet of paper and attach.</td>
</tr>
</tbody>
</table>

National Program for Playground Safety
School of HPELS
University of Northern Iowa
Cedar Falls, IA 50614-0618
www.playgroundsafety.org
(800) 554 –PLAY : (319) 273-7308 (fax)

2005 National Program for Playground Safety