**Incident Report: School of Art and Art History (8/9/11)**

**Please fill out this form and turn into SA+AH Director of Operations office FAC 103**

*Procedures are listed on the back of this page*

Name of Injured Party: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ UFID:\_\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_\_

Person Filling Out Report:

name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Location:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Course: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supervisor:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Witnesses (name, contact): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Briefly describe injury: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please Explain Accident in Full Detail (Use Additional Pages if Necessary)

Action taken: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Supervisor/GTA/Faculty Witness (if applicable)

**Incident Report Procedures: School of Art and Art History**

***Injuries or Medical Emergencies:*** *If you discover a medical emergency:*

1. If necessary, call 911. Make a note of your location (listed below).

2. If the injured person is stable and does not require a 911 call, immediately **notify** your Supervisor, GTA and/or Faculty.

3. If the injured is an employee of the University and incident while performing work duties, contact workers compensation at (352) 392-4940 immediately.

4. The Supervisor, GTA, or Faculty will bring the **first aid kit** to the site or instruct someone else to

 do so.

5. If necessary, and you are properly certified, administer First Aid/CPR using all personal safety equipment available as outlined in First Aid training.

6. Keep the person as comfortable as possible. **Disperse any crowd** that may have gathered.

7. Take a moment to look around, making a mental note of the scene and those around you.

8. **Locate any witnesses**. Make sure they know to stay in a specified location so that you can

talk to them after the injured person has been attended to.

9. The Supervisor should be introduced to the injured person and then to any witnesses.

10. The Supervisor should fill out the **SAAH Incident Report** including any information witnesses may have. Any witnesses will be asked to sign this form.

11. **Turn in this form** to the SA+AH Director of Operations office FAC 103

12. **For non-emergencies**, strongly encourage the student to **seek medical attention** at the UF Infirmary or student’s doctor immediately after the incident.

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| **UF BUILDING** | **UF BUILDING NUMBER** |
| Fine Arts Building A (Library, Office of the Dean) | 597 |
| Fine Arts Building B (Gallery) | 598 |
| Fine Arts Building C (Main Office, AH, Studios) | 599 |
| Fine Arts Building D (Studios, Offices) | 269 |
| Old Norman (Art Ed) | 101 |
| Old Norman Gym (Studios) | 102 |
| Yon (Studios, Stadium) | 158 |
| WARPhaus (Off campus- 534 SW 4th Ave) | 3451 |

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| **CONTACT** | **PHONE NUMBER** |
| Medical Emergency | 911 |
|  UF Police | 352- 392-1111 |
| UF Infirmary (afterhours medical concern)  | 352- 392-1161 |
| UF Infirmary (afterhours mental health concern)  | 352-392-1575 |
| SAAH Main Office | 352-392-0201 |