

Lab Incident/Near Miss Report – Person Involved

Please fill out this form as completely as possible detailing the events of the incident. Attach additional sheets if needed. When complete, return to the following:

Department:

Phone #:

TCU ID#:

Email:

Richard Adickes, TCU Box 298860, SWR 437, Ph: (817) 257-5395, safety@tcu.edu

Name:

Position/Title (Undergrad, Grad, Post-doc, etc.):

Principle Investigator/Supervisor:	Incident Location:	Date/Time of Incident:
How the incident occurred:		
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Describe, in detail, how the incident occurred. Explain the operation in which you were involved. What were you doing before the incident occurred? What was your goal? What were you doing at the time the incident occurred? Is this a routine operation? Etc.		
occurred: What was your goals. What were you doing at the time the	incluent occurred: Is this a routine	operation: Etc.
Describe the second of suggestible fellowed the inside at 11500 did		
Describe the sequence of events that followed the incident. How did you respond?		
Describe any equipment machinery as instruments in use at the time	of the incident and their netential	contribution to the incident
Describe any equipment, machinery, or instruments in use at the time	or the incident and their potential of	contribution to the incident.
Did you sustain any injuries? What where they? How were they treat	and? Did you require modical care?	Passriba the soverity of the injury
Did you sustain any injuries? What where they? How were they treat	led : Did you require medical care: I	Describe the severity of the injury.

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was there any property loss of damage? Please elaborate.		
Safety Rules and Procedures:		
Was the use of personal protective equipment (PPE) necessary during the given operation? Was the	ne PPE worn? What did it consist of?	
the title day of personal protections equipment (1 - 2) necessary during the given operation.		
What type of training did you receive prior to engaging in this operation? Was the training adequate? What did it consist of?		
The state of the s		
Are there any specific safety rules which apply to this procedure? Were they followed? Are they adequate?		
Any other comments?		
What are your recommendations for preventing recurrence?		
That are jour recommendations for preventing recurrence.		
Signature:	Date:	

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