

# Elkin Middle School



## INJURY REPORT

TODAY'S DATE: \_\_\_\_\_

Name of Student: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: \_\_\_\_\_

Grade: \_\_\_\_\_ Teacher: \_\_\_\_\_ School: \_\_\_\_\_

Date of Injury: \_\_\_\_\_ Time: \_\_\_\_\_

First Responder: \_\_\_\_\_

Place of Injury	Nature of Injury	Body Part Injured	
____ Classroom	____ Abrasion	____ Abdomen	____ Foot
____ Hallway	____ Ashphyxia	____ Ankle	____ Hand
____ Bathroom	____ Burn	____ Arm	____ Head
____ Lunchroom	____ Fracture/Sprain	____ Back	____ Knee
____ Playroom	____ Head Injury	____ Chest	____ Leg
____ Gymnasium	____ Laceration	____ Eye	____ Teeth
____ Other	____ Other	____ Face	____ Wrist

Describe: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Were parent(s) / guardian(s) notified?  Yes  No

Describe treatment and disposition: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature of Teacher, Principal, or Nurse