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Independent Healthcare Staffing, Inc

~ Of Nurses, For Nurses, By Nurses ~

INCIDENT REPORT

Revised 7/14/08

Reporter's Name: _____ Department: _____

Hospital: _____

City: _____, State: _____

<input type="checkbox"/>	Check Above Box is this is an urgent issue needing attention within 24 hours.
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Other involved Party's Name: _____ Department: _____

Date of Incident: _____ Time of Incident: _____

Location of incident (within facility): _____

Please list all others who may be involved in the incident: _____

Was an agency / hospital incident report completed? (circle one)
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Please document a DETAILED report of the incident -use additional space/paper if necessary):

Signature of Person filing the Report

Date

If emergency action is required and it is during Independent Healthcare Staffings normal business hours, please call 1-800-536-3001. If it is after hours or weekends, please page a member of management by calling 1-877-536-3003.