## **Near-Miss Report Form**

## Department of Chemistry and Biochemistry Utah State University

*Note:* Please use this form **only** for non-injury related incidents. For reporting incidents involving injury, please file the Department and University incident report forms (http://www.chem.usu.edu/htm/laboratory-safety/safety-policies)

*Note*: Please complete both Part A and Part B.

## Part A.

The information in Part A will not be made publicly available. It will only be accessed by the laboratory supervisor whose lab is involved in the near-miss, the chair of department safety committee, the department head, and, if necessary, university personnel from EH&S and/or Risk Assessment.

1. Name(s) of Person Involved	2. Title(s)/Position(s)
3. Name and Title/Position of Person	4. Contact Information (phone or email for
Completing the Form	person in Box 3)
5. Name of Laboratory Supervisor	

## Part B.

1. Date and Time of Near-Miss		2. Near-Miss Location
Date:		
Time:		
3. Near-Miss Description		
4. Potential Severity		
Example: High = may cause fata		
Medium = may cause Low = may cause min		
Low – may cause mm	or or no mjury,	no lost dona
High	Medium	Low
5. Corrective Actions (at the time of near-miss and after near miss)		
5. Conceive Actions (at the time	e of ficar-fiffs a	ma arci near miss)
6. Miscellaneous Information		