

## Lab Incident Report

**Report by:**

**Title:**

**Dept:**

**Email:**

**Phone #:**

**Incident:**

**Accident:** \* mark only if physical injury occurred

**Date:**

**Time:**

**Location:**

**Description of Incident or Accident:**

**What injuries resulted from the Accident:**

**In what method was EHS notified:**

**Date notified:**

**EHS personnel notified:**

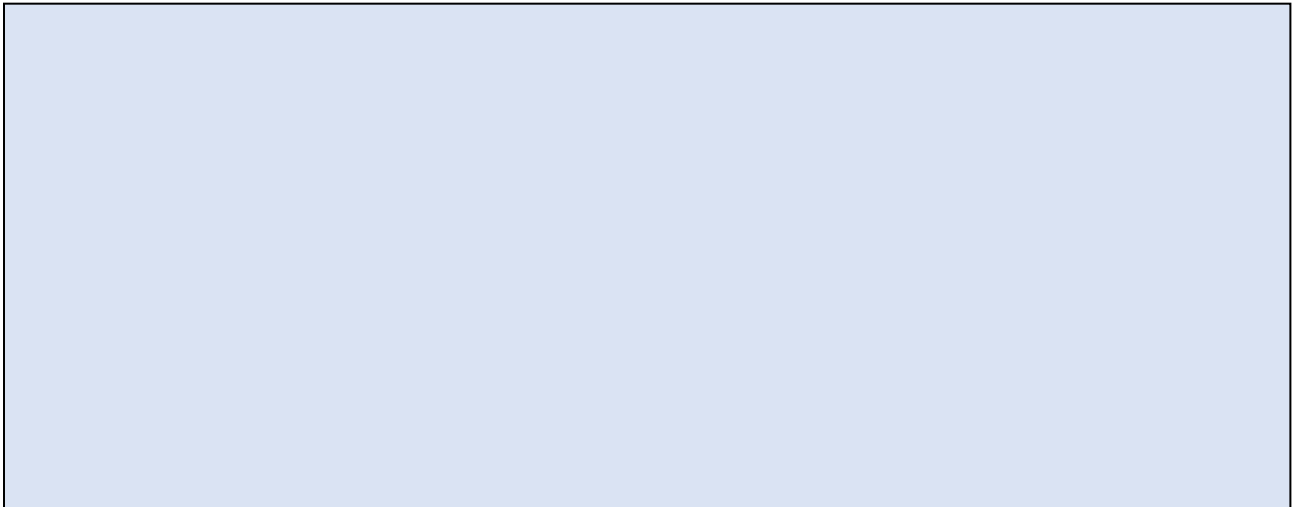
**Investigation:**

Filled by EHS



**Corrective Action Recommended:**

Filled by EHS



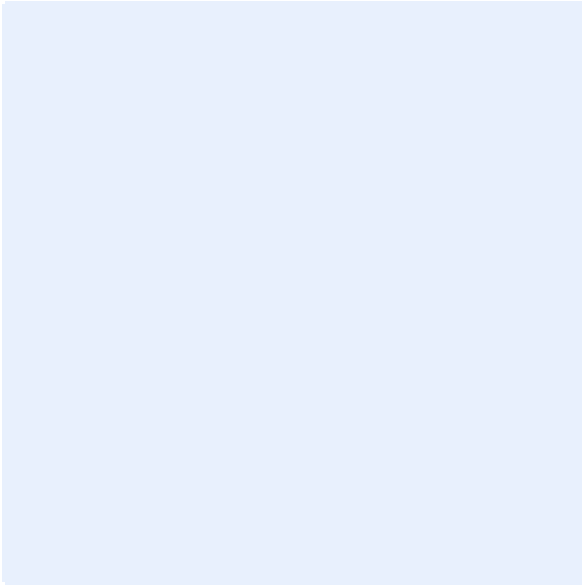
**Name of EHS Investigator:**

**Date:**

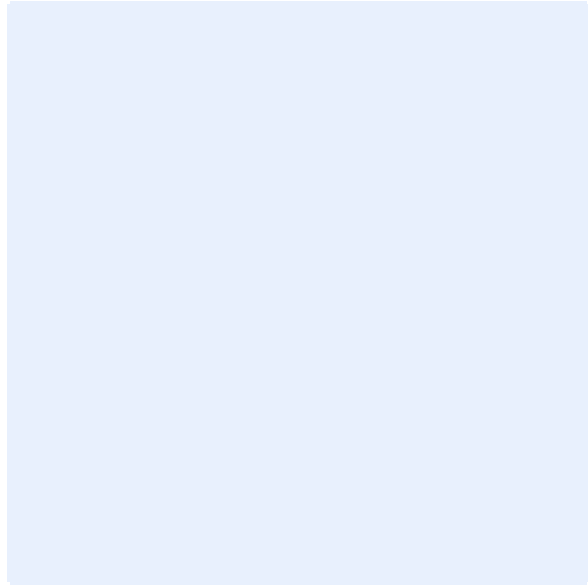
Attached any photos on the last page.

Click on the box to add image

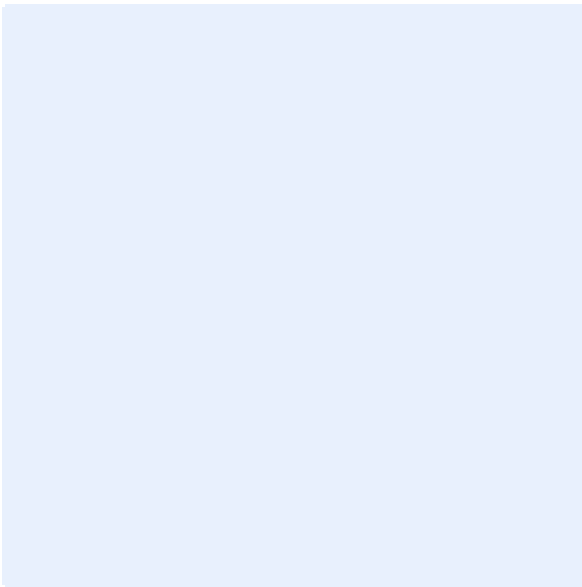
**Picture 1**



**Picture 2**



**Picture 3**



**Picture 4**

