

PORTAGE LA PRAIRIE SCHOOL DIVISION
Section E: Operations (Property And Transportation)



EC-E

File EC-E

MANITOBA SCHOOLS INSURANCE PROGRAM
ACCIDENT INCIDENT REPORT

INSTRUCTIONS FOR USE:

A copy of this form should be completed and sent (weekly) to Hayhurst Elias Dudek Inc. In respect of all accidents/injuries considered moderate or severe. If your practice is to complete forms in respect of "minor" injuries as well, then such forms should also be sent.

SEND TO: Mrs. Linda Baker

Hayhurst Elias Dudek Inc.
777 Portage Avenue
Winnipeg, MB
R3G 0N3

website: www.hedinc.com
username: PORTAGE LA PRAIRIE
password: 3r7ca

"Serious" cases should also be reported immediately by telephone to the appointed MSIP Liability adjuster: Mr. Ken James, James Dube Spraggs Adjusters Ltd. at 985-1200 (If Mr. James is not available, may also be reported to Mrs. Linda Baker, Hayhurst Elias Dudek Inc. at 943-0331).

SCHOOL BOARD: _____

SCHOOL: TELEPHONE#: _____

NAME OF INJURED PERSON: _____ DATE OF BIRTH: _____

ADDRESS: _____ DATE (D/M/Y) & TIME OF ACCIDENT _____

WHERE DID ACCIDENT OCCUR: _____

WAS A TEACHER PRESENT OR PROVIDING SUPERVISION: YES _____ NO _____

EXACT NATURE AND LOCATION OF INJURY: _____

GUIDELINES ON CLASSIFICATION OF ACCIDENTS/INJURIES (CHECK ONE)

- "MINOR"** - Scratch, bruise, scrape, minor cut, minor sprain, etc.
- "MODERATE"** - Serious cut, more severe sprain, broken finger, etc.
- "SEVERE"** - Injury to eye, head, face, back, broken arm/leg, etc.

WAS PUPIL: SENT HOME ___ TAKEN TO HOSPITAL/DOCTOR ___ # OF SCHOOL DAYS MISSED (if known) ___

WAS INJURY TREATED: YES ___ NO ___ BY WHOM?: _____

TYPE OF TREATMENT: _____

DESCRIBE IN DETAIL HOW ACCIDENT OCCURRED: _____

NAME OF TEACHER(S) PRESENT: _____

NAME OF WITNESS(ES): _____

WAS PARENT NOTIFIED: _____ BY WHOM: _____

HAS THERE BEEN ANY SUBSEQUENT CONTACT WITH THE PARENT(S): _____

IS STUDENT COVERED BY STUDENT ACCIDENT PROTECTION PLAN: YES ___ NO ___ NOT KNOWN _____

ANY ADDITIONAL COMMENTS: _____

DATE: _____

SUBMITTED BY: _____

(September 1999)

SIGNATURE OF PRINCIPAL: _____

NAME OF PRINCIPAL (IN FULL): _____