

Sau de orts

Use this worksheet to assist in gathering details of the new occurrence prior to entering the data on www.safestudentreports.org.

1.	Who received injury? (select one) ☐ Patient	6.	Date (enter date of occurrence using the following format): mm/dd/yyyy
	☐ Visitor	7.	Time (enter time of occurrence):
	□ Student	_	
	☐ Faculty☐ Staff☐ Other	8.	Category of occurrence (select one): □ Error [Def ned as: Incident or occurrence that had the potential to place a patient at risk for harm or resulted in actual harm]
2.	Gender (select one): ☐ Male ☐ Female ☐ Unknown		□ Near miss [Def ned as: An event or situation that could have resulted in an accident, injury, or illness, but did not, whether by chance or through timely intervention. (Ebright et al., 2004)]
3.	English is predominant language (select one): ☐ Yes	9.	Type of occurrence (select one): ☐ Medication Error
	□ No		☐ Needle stick
	□ Unknown		Inadequate preparation for providing patient care
4.	Status of patient/individual (select one):		☐ Blood/pathogen exposure
	☐ Harm		☐ Fall event
	□ No harm		☐ Outside scope of practice
	□ Death		☐ Injury to body
	□ Other		☐ Change in patient condition
_	A (lk)		☐ Deviation in protocols
5.	Age (select one): □ <15		☐ Equipment or medical device malfunction
	□ 15-20		Environmental safety – for self, patient or others
	□ 21-25		$\hfill\square$ Inappropriate or inadequate communication by:
	☐ 26-30		Faculty, preceptor, other student, health care
	□ 31-35		team, patient or visitor
	□ 36-40		☐ Breach of conf dentiality
	□ 41-45		□ Other
	□ 46-50	10	Occurrence description (optional: enter additional
	□ 51-55 □	10	details about the unsafe occurrence):
	□ 56+		
	□ Unknown		

11. Lc		17. Follow up actions (optional: enter additional details about any follow up action)
	3	
	Simulation Lab	
	Learning Lab	
	Other	
	/ho is completing the report <i>(select one):</i> Faculty Student/Faculty Dyad	18. Current semester or quarter number (enter number between 1-16):
		19. Total number of semesters or quarters in program (enter number between 1-16):
		20. Student age (select one):
13. W	/ho is alerted (select one):	□ 15-20
	Faculty	□ 21-25
	School of Nursing (SON) Administration	□ 26-30
	Patient/Family	□ 31-35
	Other	□ 36-40
	Unknown	□ 41-45
		□ 46-50
14. In	form clinical agency (select one): Yes	□ 51-55
	••	□ 56+
	Unknown	☐ Unknown
		04 T
Ц	N/A	21. Type of program (select one): ☐ LPN
	gency occurrence report completed (select one):	☐ Associate
	Yes	□ Diploma
	No	□ BSN
	Unknown	☐ 2nd Degree BSN
Ш	N/A	☐ Masters – Non-APRN
16 CF	nanges occurring as a result of occurrence	☐ Masters – APRN
	elect one): System Changes	
	Policy Changes	22. Do you wish to share anything else relevant to this
	Practice Changes	report? (optional: enter any additional comments)
	Curriculum Changes	, , ,
	Nothing at Present	