The following items serve merely as an example of what might be used or modified by employers to help identify potential workplace violence problems.

A reportable violent incident should be defined as any threatening remark or overt act of physical violence against a person(s) or property whether reported or observed.

<table>
<thead>
<tr>
<th>1. Date: __________________________</th>
<th>2. Specific Location: __________________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Day of week: _____________________</td>
<td>Specific Location: __________________________</td>
</tr>
<tr>
<td>Time: __________________________</td>
<td>Time: __________________________</td>
</tr>
<tr>
<td>Assailant: Female ____ Male ____</td>
<td>Assailant: Female ____ Male ____</td>
</tr>
</tbody>
</table>

| 3. Violence directed towards:    | 4. Predisposing factors:                     |
| Patient ____ Staff ____ Visitor ____ Other | Intoxication ____ Dissatisfied with care/waiting time |
| Assailant: Patient ____ Staff ____ Visitor ____ Other | Grief reaction ____ Gang related |
| Assailant's Name: ______________________ | Prior history of violence |
| Assailant: Unarmed ____ Armed (weapon) | Other (Describe) _________________________ |

| 5. Description of incident:       | 6. Injuries: ____ Yes ____ No ____ Unable to determine |
| Physical abuse ____ Verbal abuse ____ Other | Injuries: ____ Yes ____ No ____ Unable to determine |

8. Detailed description of the incident: 

9. Did any person leave the area because of incident? 
   ____ Yes ____ No ____ Unable to determine
10. Present at time of incident:
   - Police
   - Hospital security officer

11. Needed to call:
   - Police
   - Police
   - Name of department
   - Department
   - Hospital security officer
   - Hospital security

12. Termination of incident:
   - Incident diffused
   - Yes
   - No
   - Police notified
   - Yes
   - No
   - Assailant arrested
   - Yes
   - No

13. Disposition of assailant:
   - Stayed on premises
   - Escorted off premises
   - Left on own
   - Other

14. Restraints used:
   - Yes
   - No

15. Report completed by:
   - Title:
   - Witnesses:
   - Supervisor notified:
   - Time:

*This form was taken from: Guidelines for Preventing Workplace Violence for Health Care and Social Service Workers. OSHA Publication 3148, (1996).*