

Serious Injury Reporting Form

Family Child Care

All providers shall inform their county licensor immediately after the occurrence of any serious injury or death of a child within the child care residence. A serious injury is one that is treated by a physician. Your licensor may request that you complete a serious injury reporting form.

Program Information

License Holder name		Address	
City	State	Zip Code	Phone Number

Injury / Death Information

What are you reporting?	Date of serious injury or death	Time of injury	Treatment by a Physician or Dentist	Date License Holder was notified of treatment
Type of injury	If other:		Location injury occurred	If other:
Injury / death details (describe what happened)				

Child name	Child Date of Birth
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Action taken while responding to injury

Indicate here if this injury is similar to past events with this child or other children

Name of person completing the report (License Holder, Second Caregiver, Helper)	Date of Report to County
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Serious injury - is an injury the requires treatment by a physician or dentist. This means that if a child sees a physician or a dentist for evaluation of an injury, but no treatment is given, the injury does not meet the definition of serious and does not need to be reported. Examples of injuries that do not need to be reported include things like cuts or scrapes for which a child sees a physician but no treatment is needed, a bump to a tooth if the dentist determines no treatment is needed, etc.)

Email a copy of this completed form to your county licensor.