

# MACGREGOR Netball Association



## INJURY REPORT

<b>PERSONAL DETAILS:</b>				
Name of Injured Person:				
Are your contact details on file up to date in Netball Connect: Yes / No if no, details will need to be updated ASAP				
Injured Persons DOB:		Injured Persons Club:		
Date of Injury:		Time of Injury:		
Name of Person Reporting Incident/Accident:				Date:
Person Reporting:				
Player    Manager    Coach    Parent/Carer    Club Official    Other: _____				
<b>INCIDENT/ACCIDENT DETAILS:</b>				
Nature of Injury:				
Where did Injury occur:				
How the Injury occurred:				
Any known illness and/or medications:		Not known    Nil    Asthma    Epilepsy    Cardiac    Diabetic		
		Other _____		
Any Allergies: Yes: _____ No: _____				
<b>Time Observed</b>	<b>Breathing Normal-Fast-Slow</b>	<b>Conscious Level Alert-Medium-Unconscious</b>	<b>Pain Level - 1 to 10 (1low – 10 high)</b>	<b>Injury Level - 1 to 10 (1 low – 10 high)</b>
Other Observations:				
<b>A</b> abrasion <b>Bl</b> bleeding <b>Bu</b> burns <b>C</b> contusion <b>D</b> deformity <b>F</b> fracture <b>L</b> laceration <b>P</b> pain <b>S</b> swelling <b>T</b> tenderness	<b>Bodily location of injury/illness:</b>		<b>Comments:</b>	
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