

## Appendix A – Incident Report Template for HIC

Integrated Assessment Record (IAR) System Incident Report		
		Fax No: (###) ###-####
<b>1. Contact Information</b> <i>To be completed by the individual submitting this report</i>		
First Name	Last Name	Date (dd/mm/yyyy)
Email	Organization	
Phone No.	Title / Position	
Address (street, city, province, postal code)		
<b>2. Incident Description</b> <i>Describe the incident below.</i>		
Date of Incident (dd/mm/yyyy)	Involves PHI?	Reported By
Description / Details		
		Date of Incident (dd/mm/yyyy)
<b>3. Incident Management</b>		
Incident #	Internal Reference #	
Assigned to	Incident Receipt Date (dd/mm/yyyy)	
Containment Action		
Follow-up Action	Most Responsible (Primary) Organization	
Follow-up Date (dd/mm/yyyy)	Other Organizations (if any)	
Resolution Status		
Resolution Date (dd/mm/yyyy)		
Notes		