

**Appendix A**

**Villanova University**

**Environmental Health & Safety Department**

**EXPOSURE INCIDENT INVESTIGATION FORM**

**Date of Incident:** \_\_\_\_\_ **Time of Incident:** \_\_\_\_\_

**Location:** \_\_\_\_\_

**Person(s) Involved:** \_\_\_\_\_

**Potentially Infectious Materials Involved:**

**Type:** \_\_\_\_\_ **Source:** \_\_\_\_\_

**Circumstances (what was occurring at the time of the incident):** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**How was the incident caused: (accident, equipment malfunction, etc.) List any tool, machine, or equipment involved:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Personal protective equipment being used at the time of the incident:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Actions taken (decontamination, clean-up, reporting, etc.):** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Recommendations for avoiding repetition of incident:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Supervisor's Name/Signature:** \_\_\_\_\_

**Department:** \_\_\_\_\_

**Date Signed:** \_\_\_\_\_