



# International Training

## ACCIDENT / INCIDENT REPORT

**Directions:** Please print or type clearly. It is extremely important that you fill in this form COMPLETELY!

The information contained within all of the pages that make up this document is **CONFIDENTIAL** and **PRIVILEGED**. Said information is intended solely for the use of the individual to whom it is directed. If the recipient is a person / business other than those listed, you are hereby notified that any dissemination, copying, or other use of this communication is strictly prohibited. If you have received this document in error, please notify SDI (Scuba Diving International) immediately at (888) 778-9073 and destroy this document immediately thereafter. Thank you for your cooperation and courtesy in relation to this matter.

Date of Accident: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Name of Victim: \_\_\_\_\_  
Day / Month / Year Last / Family / Surname First / Given Initial

Location of Accident: \_\_\_\_\_

Address of Victim: \_\_\_\_\_

Sex:  M  F Age: \_\_\_\_\_ Was this an Instructional or Supervised Dive?  Yes  No

Check all items applicable:  Fatality  Bodily Injury  Bends  Embolism  Non-Injury  Other (describe):

Describe the diving experience of the victim; was he or she a student? Novice diver? Experienced diver?

Describe the injuries suffered by the victim: \_\_\_\_\_

Please provide all details regarding weather conditions (water, visibility, wind, waves etc.):

Please provide details of any equipment failure: \_\_\_\_\_

Please describe any rescue or emergency procedures used and first aid given:

Please list any other emergency personnel / Agencies that attended:

Narrative Report: Describe the accident and the events leading up to it with your best overview, including the roles of the participants. Use additional pages if needed to give a complete account:

Your Name: \_\_\_\_\_ Your SDI Number: \_\_\_\_\_  
Last / Family / Surname First / Given Initial

Your Address: \_\_\_\_\_

Your Telephone Number: Day: \_\_\_\_\_ Evening: \_\_\_\_\_

Please describe your current diving status (i.e. Active Instructor, Divemaster etc.): \_\_\_\_\_

Describe your personal participation in the incident (i.e. were you instructing the victim, a witness, called on to assist, etc.): \_\_\_\_\_

Please list the names, addresses and phone numbers of all other participants, witnesses. Use additional sheets if needed: \_\_\_\_\_