

Janet T. Mills
Governor

Jeanne M. Lambrew, Ph.D.
Commissioner



Maine Department of Health and Human Services
Child and Family Services
11 State House Station
2 Anthony Avenue
Augusta, Maine 04333-0011
Tel.: (207) 624-7900; Toll Free: (877) 680-5866
TTY: Dial 711 (Maine Relay); Fax: (207) 287-9304

Serious Injury/Illness Report

The Child Care Program must notify the Department of the following within 24 hours of occurrence. A serious injury is an injury or illness which requires medical attention from a physician or other medical personnel. Notification to the Department should follow notification to emergency medical personnel and the Child's parents/guardians.

Reports must be made to your Child Care Licensing Specialist or faxed to (207) 287- 9304.

Date: Click or tap here to enter text.

Date of Injury: Click or tap here to enter text.

Time: Click or tap here to enter text.

Owner/Program Name: Click or tap here to enter text. **License #:** Click or tap here to enter text.

Name and Date of Birth of Injured Child: Click or tap here to enter text.

Describe the injury: Click or tap here to enter text.

Describe the conditions under which the incident occurred: Click or tap here to enter text.

Describe any first aid administered at the child care program: Click or tap here to enter text.

If the child was transported to the Emergency Room, who provided the transportation: Click or tap here to enter text.

Parent Notified: Yes **Date:** Click or tap here to enter text. No

Record of injury completed and signed by parent: Yes No

Outcome as reported by the parent (Example: cast, stitched, return to child care date etc.):
Click or tap here to enter text.

Name of witness(es) to injury: Click or tap here to enter text.

Comments (for example, prevention in the future?): Click or tap here to enter text.

* Please attach any supporting documentation (i.e. accident/incident report, witness statements, medical reports or summaries etc.)