



## RIDESHARE INJURY REPORT

DATE \_\_\_\_\_ TIME \_\_\_\_\_  
 DRIVER'S NAME \_\_\_\_\_ VAN # \_\_\_\_\_  
 STREET / INTERSECTION \_\_\_\_\_ DIRECTION OF TRAVEL \_\_\_\_\_

### INDIVIDUAL INFORMATION

Name \_\_\_\_\_ Phone \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_  
 State \_\_\_\_\_ Zip \_\_\_\_\_  
 Nature of injury \_\_\_\_\_

Please answer all questions by checking the appropriate box.

#### The Injured

- Was person
  - sitting
  - standing
  - walking
  - running
  - exiting
  - boarding
  - other \_\_\_\_\_
- Did person
  - slip
  - trip
  - fall
  - other \_\_\_\_\_
- Was the walk path clear?
  - Yes
  - No
- Did the person use
  - handrails
  - seat rails
  - other
  - unknown
- Was person carrying anything
  - If yes, which hand
    - right
    - left
    - both
  - what was being carried? \_\_\_\_\_
- Was the person's clothing
  - loose
  - torn
  - caught in foot
  - other \_\_\_\_\_
- Was a mobility device used  
If so:
  - No
  - Yes
  - cane
  - walker
  - braces
  - crutches
  - other \_\_\_\_\_

#### The Van Driver

- Were you
  - stopping
  - accelerating
  - turning
  - braking suddenly
  - taking an evasive action
  - other \_\_\_\_\_
- Did you see the incident/injury
  - Yes
  - No
- Did you call RideShare
  - Yes
  - No
- Was a supervisor at the scene
  - No
  - Yes Whom? \_\_\_\_\_
- Were courtesy cards given out
  - If yes, how many? \_\_\_\_\_
  - How many returned? \_\_\_\_\_
- Did you detect any odors?
  - No
  - Yes What? \_\_\_\_\_

#### The Incident

- Was the surface of van floor /  
running board
  - wet
  - dry
  - debris
  - icy
  - snow-packed
- Were the police called
  - Yes
  - No
 Report number \_\_\_\_\_
- Was medical treatment offered?
  - Yes
  - No
- Was medical treatment rendered?
  - Yes
  - No
 If Yes, By whom \_\_\_\_\_
- Was the fire department at scene?
  - Yes
  - No
- Were paramedics at the scene?
  - Yes
  - No

Please be as specific as possible in your answers to the following questions.

1. Describe what happened.

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2. What was the exact location of the person at the time of the incident/injury? Be as specific as possible. (Example: second set of seats facing forward on the right hand side of the van)

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3. Describe the body motion or movement that resulted in the incident/injury.

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4. What body parts were injured? (Example: right shoulder pain, left knee bruised)

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5. What type of shoes was worn? Good repair? Types of heels, soles, etc. (Example: flip-flops on a wet day, six inch heels, leather soles, rubber soles.)

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6. What were the weather conditions? Include when the rain/sleet/snow began in relationship to the incident/injury.

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7. How close was van to curb? Front Door \_\_\_\_\_ feet      Back door \_\_\_\_\_ feet

8. Describe the person (Sex, hair color, approximate weight, height, and age.) \_\_\_\_\_

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9. Note posture and mannerisms. (Example: unsteady gait, walks with cane in left hand, glassy-eyed, staggering, etc.) \_\_\_\_\_

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Any other information. (Use separate sheet of paper, if necessary.)

\_\_\_\_\_  
Driver's signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Time