

Injury Report Form

24 May 2023 / Emiliana Asselmann				Complete	
Score	0%	Flagged items	0	Actions	0
Employee name					Emiliana Asselmann
Job title				Ass	embly Line Operator
Supervisor name					Lilly Oliversen
Date and time of reportir	ng				24.05.2023 09:53 PST
Location					Los Angeles, CA, USA 58279, -118.4571974)

Employee Report of Injury Form	
I am reporting a work-related	Injury
Date and time of injury	23.05.2023 10:00 PST
Name of witnesses (if any)	
N/A	
Have you told your supervisor about this injury?	Yes
Where did the injury happen?	Assembly area in the production floor

What were you doing at the time?

I was operating a machine used for assembling components.

Describe in detail what led up to the injury.

Prior to the injury, I was working on a high-speed assembly line, specifically tasked with inserting small screws into a product. The line was operating at a rapid pace, requiring me to perform repetitive motions to keep up with the production demand. As I was working, my hand slipped, and I accidentally hit my thumb against the sharp edge of the machine's metal casing.

What could have been done to prevent this injury?

To prevent this injury, additional safety measures could have been implemented. In particular, it would be helpful to have protective gloves with enhanced grip and regular breaks to prevent fatigue-induced errors. Moreover, a safety guard or covering for the sharp edges of the machine's casing would have mitigated the risk of accidental injuries.

What parts of your body were injured?

I injured my right thumb.



Did you see a doctor about this injury?	Yes
Doctor's name	Leili Patton
Doctor's contact number	+1 202-918-2132
Date and time of consultation	23.05.2023 11:00 PST
Has this part of your body been injured before?	No

Name and signature of employee

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Emiliana Asselmann 26.05.2023 18:19 PST

Name and signature of supervisor

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Lilly Oliversen 26.05.2023 18:20 PST

Media summary



Photo 1