Leonard Stanley Early Years

Existing Injury Form

This form to be completed by parents or carers when they bring a child to EY's with a pre-existing injury.

This form will be held confidentially, only accessible to the child's key person, the Manager and Social Services or OFSTED, should they wish to see it.

Name of Child_____

Date of Injury_____Date injury reported _____

Reported by_____

Nature of injury_____

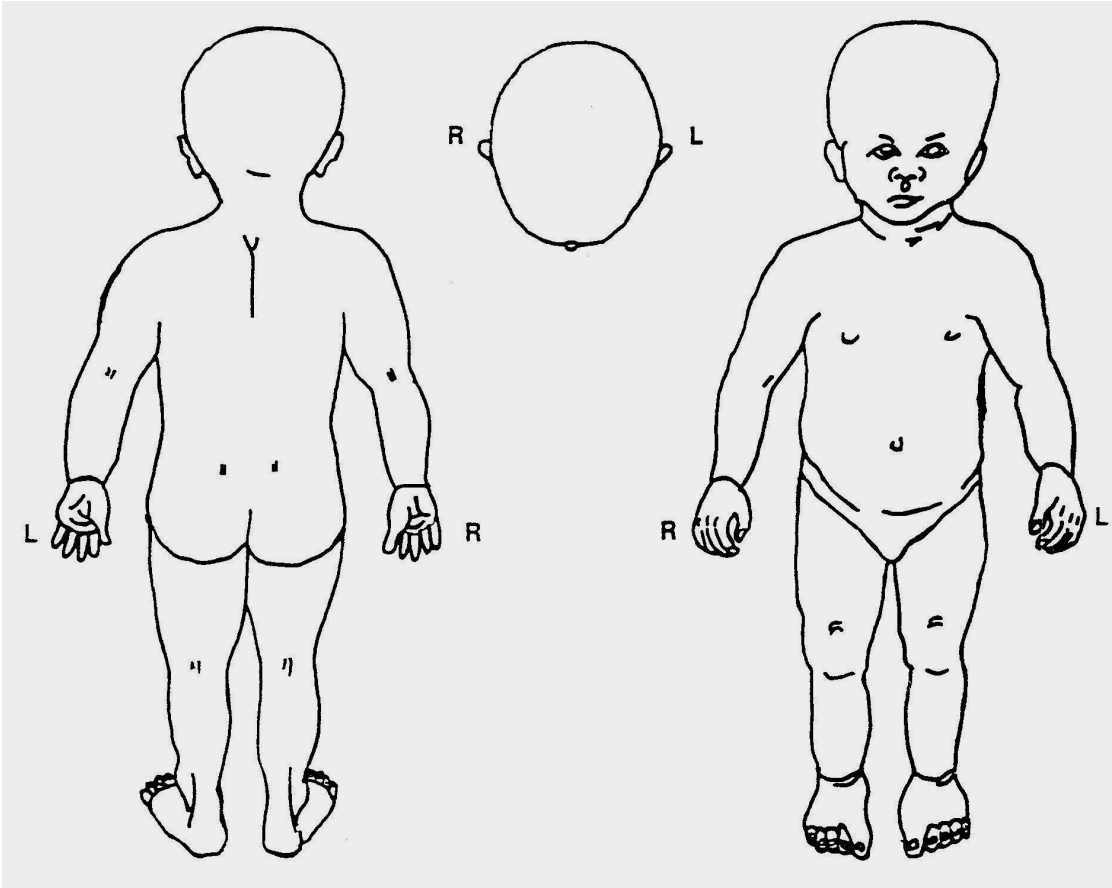
How was the injury obtained_____?

Any treatment or medical advice sort_____

_____

Any ongoing care requested_____

_____



Parent/carer signature_____

Staff signature_____ (Manager/Deputy)