

**Annexure-I**

**HOSPITAL SECURITY & VIOLENCE PREVENTION COMMITTEE,  
ZORAM MEDICAL COLLEGE, FALKAWN**

**Incident Report Form**

Victim's Name: \_\_\_\_\_

Victim's Address: \_\_\_\_\_

Victim's Contact Number: \_\_\_\_\_

Victim's Email Address (If any): \_\_\_\_\_

Date of Incident: \_\_\_\_\_

Time of Incident: \_\_\_\_\_

Precise address and location of Incident: \_\_\_\_\_

Name(s) of the perpetrators who involve in the crime or violence (if known): \_\_\_\_\_

Description of the perpetrator:

Is CCTV footage available?

(i) YES \_\_\_\_\_

(ii) NO \_\_\_\_\_

If mobile phone threat or violence,  
Is a recording available?

(i) YES \_\_\_\_\_

(ii) NO \_\_\_\_\_



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Nature of Incident (Please tick the relevant point):

- (i) Stalking
- (ii) Destruction of Property
- (iii) Physical Assault: Hitting, fighting, pushing, spitting or shoving
- (iv) Armed Assault - Use of object as weapon
- (v) Armed Assault - Use of weapon such as gun, knife, etc.
- (vi) Verbal Abuse
- (vii) Sexual Harassment
- (viii) Other (specify):

Verbal threat? YES/NO

Please give details:

Physical Violence? YES/NO

Please give details, including any weapons used:

Please describe any injuries suffered – give as much detail as you can:



**Location of Injuries -**

Please tick all relevant:

- (i) Head
- (ii) Face
- (iii) Neck
- (iv) Shoulders
- (v) Arms
- (vi) Hands
- (vii) Chest
- (viii) Buttocks
- (ix) Stomach
- (x) Back
- (xi) Groin
- (xii) Thigh
- (xiii) Shin
- (xiv) Calf
- (xv) Feet
- (xvi) Others (specify) :

Describe Incident in Detail

*Include what happened, where, who was involved, what you heard, saw, etc. Give as much detail as you can:*

Contact details of any witnesses:

Name: \_\_\_\_\_

Contact Details: \_\_\_\_\_



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Name: \_\_\_\_\_

Contact Details: \_\_\_\_\_

Name: \_\_\_\_\_

Contact Details: \_\_\_\_\_

Was first-aid required? YES/NO

Was an ambulance called for? YES/NO

Were the Police called for? YES/NO

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**Chairman : Prof.Swati M Patki, Dean, Zoram Medical College**

**Contact No : 9801703981**

**Member Secretary : T.Lalfamkima, Deputy Director  
(Administration)**

**Contact No: 9856722827**