

Incident Investigation Initial-Response Checklist

Use when safe to document. Mark D (Done), P (Pending), or N/A. Assign an owner and next step for pending items.

Event ID: _____ Location: _____

Event date/time + zone: _____ Completed by: _____

Record date/time + zone: _____

1 Care and stabilize

☐ D ☐ P ☐ N/A

Activate the emergency plan and arrange medical care. Authorized personnel control continuing hazards and restrict access as needed.

2 Check notifications

☐ D ☐ P ☐ N/A

Assign someone to check internal and external requirements. Record deadlines, recipients, notification times, and confirmation; do not wait for the final report.

3 Preserve the scene

☐ D ☐ P ☐ N/A

Preserve conditions where compatible with care and hazard control. Record what changed, who changed it, when, and why.

4 Capture changing conditions

☐ D ☐ P ☐ N/A

Safely record equipment state, settings, lighting, weather, materials, and positions. Label photos with time, place, photographer, and description; retain originals.

5 Protect sources

☐ D ☐ P ☐ N/A

Ask authorized owners to preserve relevant video and logs before overwrite. Register source IDs and secure locations; follow privacy and retention procedures.

6 Prepare the handoff

☐ D ☐ P ☐ N/A

Identify people with relevant knowledge. Record remaining hazards, uncertainties, pending actions, owners, and the next review time.

Pending item / owner / next step:

Follow the emergency plan and authorized personnel for rescue, isolation, recovery, and return to service. This checklist does not determine legal reporting duties.

Optional: use page 2 for the response record or your approved case system.

Initial Response Record

Optional companion form | Continue in your approved case file when more space is needed.

Event ID: _____ Location: _____ Recorded by: _____

Event date/time + zone: _____ Record date/time + zone: _____

A Immediate protections

Action / remaining exposure	Owner	Time + zone

B Notifications - record the requirement source in the case file

Recipient / requirement	Owner	Deadline + zone	Sent / confirmed

C Scene changes and evidence priorities

Change / reason OR source ID / evidence to preserve	Time / person / preservation owner	Secure record reference

D Handoff

Known + source / reported but unverified / open questions:

Pending action / owner / due: _____

Next review time + zone: _____ Received by: _____

Keep medical details and personal contact information in approved restricted records.