# Go Wilderness Mongolia Adventure travel in the Land of the Big Blue Sky

# Accident, Incident and Near Miss Report Form.

Form completed by	Expedition	
Date	Time	
Location	GPS Reference	
Description of site	Weather conditions	
Name(s) of person(s) involved	Address(es)	
What injury was diagnosed & by whom?	What treatment was given at the site and by whom?	
What medication was given?	By whom?	
Overall assessment of casualties condition		
If unconscious, what level?		
Action taken (including description of how during evacuation and where evacuated to	the casualty was evacuated, state of casualty if applicable)	

Full details of accident / incident and action taken, were any photographs were taken and by whom? Include a diagram (if appropriate)				
Any other relevant information relating to this accident / incident				
Names, addresses and signatures of witnesses (with any relevant notes) :				
Name, address & telephone number of hosp	oital/clinic			
Names of Trip Leaders	Signatures			
I / We confirm that this the details on this fo	rm have been correctly recorded			
I / We confirm that this the details on this form have been correctly recorded Name(s) & signature(s) of the person(s) in charge of the group				
I / We confirm that this the details on this form have been correctly recorded Name(s) & signature(s) of the person(s) involved				

#### **Supplementary information**

Was the incident preventable?			
To prevent future occurrence, what changes should be made or what do you			
recommend?			
Hove only other changes been made in the light of this incident?			
Have any other changes been made in the light of this incident?			
Has GWM Office been informed?			
Name			
Signature & date			
orginature & date			
Additional Notes			
Insurance Company Communications			

Is it important that as soon as possible, the leader, or client if possible, <u>must</u> contact the insurance company if a claim is to be made. If it is not possible for the leader to do this, then let the local agent know and they can do it for you.

Name of insurance company and policy number

**Date and time of first communication** 

## Name of person who made the call

## Contact at insurance company & case reference no.

#### Log of communication with insurance company

Go Wilderness Mongolia Co, Ltd. Emergency Contact Details				
Chris Cartwright Mobile	+976	99 158 130	English	
Chris Cartwright Mobile	+976	98 051 234	English	
GWM Satellite phone			English	
Sarol mobile	+976	99 855 116	English / Mongolian	
GWM office	+976	11 379097	English / Mongolian	
GWM email	info@gowildernessmongolia.com			
GWM Fax (UK)	+44	0871 900 40 60	English	
SOS emergency line	+976	9191 3122	English / Mongolian	
SOS after hours	+976	11 464 325	English / Mongolian	
SOS mobile	+976	99 110 335	English	
SOS office	+976	99 096 175		
SOS fax	+976	11 454 537	Fax	
SOS email	admin@sosmedicamongolia.mn			
British Embassy	+976	11 458 133	English / Mongolian	
British Embassy Fax	+976	11 458 036	Fax	
British Embassy email	britemb@mongol.net			
Bodi Insurance	+976	70 110 280	English / Mongolian	
Bodi Insurance	+86	10 6462 9100	Chinese / English	