



TICK INSECT BITE PRO FORMA

Supplementary Questions – Post Receipt of a Report of Workplace Injury of Illness Form		August 2016	
Injured Member:		SAP number:	
District/Business Section:		Date of injury:	
Incident location:			

Health, Safety & Welfare request for information

Before Health, Safety & Welfare can determine if further investigation is required for this incident, could you please answer the following questions.

- > *Was insect repellent containing Picaridin (e.g. Johnson 'OFF!' repellent) available to the injured member on the day of injury? If yes, did the injured member apply the repellent before commencing work and reapply as necessary during work?*

- > *On the day of injury did the Supervisor remind the injured member that repellent MUST be applied prior to work, then reapplied at regular intervals (particularly when sweating)?*

- > *When the tick was found was the removal undertaken by a competent first aider and can you confirm that the whole tick was removed (i.e. No head left behind)? If more than one tick, specify number of ticks.*

> What part(s) of the body were bitten by the tick(s)?

> Has the injured member had any medical complications from the tick bite(s)?

Manager Name: _____ Date: _____

Manager Signature: _____

The Health, Safety & Welfare Section will contact the District Office or Business Section if further information is required.

Thank you for your assistance.

Email address: safety@rfs.nsw.gov.au

Tick information that can be provided to NSW RFS members

Note: Products containing Deet (e.g. Bushman's) cannot be used as it degrades Proban treated clothing and gel version is a fire risk.

The Department of Health – Tick Bite Fact

<http://www.sti.health.gov.au/internet/main/publishing.nsf/Content/ohp-tick-bite-prevention.htm>

NSW Health – Tick Alert Brochure

http://www.health.nsw.gov.au/environment/Publications/tick_alert_brochure.pdf