



NICA Safety Study Incident Report Form (Printable)

This is the new NICA Incident Report Form for use in Spring Leagues plus Utah and Georgia.

This form should be filled out when an accident or injury meets the following injury definition. Injury is defined as any physical event that occurs during a NICA team practice, race, coaches training or camp that results in physical harm to participant significant enough to: **1) Warrant referral to a medical provider OR; 2) Lose time from training or competition OR; 3) Miss school or work**

Please Select all applicable injury triggers that have led to this report (Must be between 1 & 3)

Referral to Medical Provider Lost time from training / competition Miss School/Work

League: _____ **Team/ School:** _____

Information on Injured Person:

Student-athlete Coach Volunteer Other

First Name: _____ Last Name: _____ DOB: __/__/____

Sex: _____ (M/F/Other, prefer not to identify)

Date and approximate injury time (MM/DD/YYYY, HH:MM): __/__/____, __:__ (AM/PM)

During which kind of ride or event did this occur?

Team Practice (Skills training) Team Practice (on mountain bike trails) Team Practice (riding on public roads) Race Camp Leaders Summit NICA On-the-Bike Skills Coaches Retreat Other

Please provide a brief description of how the incident occurred:

Injury Information

Injured Body Part (mark all that apply)

Head/brain (concussion, brain injury, bleeding under the skull, skull fracture, etc)

Head / superficial (scalp wound, bruise, hematoma/goose egg, etc)

Neck Face Upper Back (thoracic spine) Lower Back (lumbar spine)

Abdomen & Chest Pelvis & Hip Other

For the following injured body parts, please indicate "L" for Left, "R" for right, "B" for both or "N/A" for does not apply:

Shoulder (including Collar Bone) Arm (between shoulder and elbow)



Forearm (between elbow and wrist) Elbow Wrist & Hand
 Thigh (between hip and knee) Knee Leg (Between knee and ankle) Foot & ankle

What was the diagnosis for the injury? Using the list below, please indicate which injured body part received which diagnosis. *Example:* Head/brain, concussion; Right Elbow, abrasion, fracture etc...

Abrasion (scrape of skin); Sprain (ligament injury at a joint); Fracture (broken bone); Concussion
Contusion (bruise); Laceration (cut of the skin); Strain (Muscle or tendon injury); Dislocation (joint out of place); Other; Unknown

Was the injured person able to complete the training session or race?

No Yes N/A

Was the injured person evacuated from the trail or race course by emergency personnel?

Please note: NICA volunteers and coaches are NOT considered emergency personnel

No Yes Unknown

Did the injured person go to the emergency room (ER) at any time for the injury? *This can be updated at a later point if necessary. Please include what has been done so far.*

No Went to ER, then sent home Went to ER, then admitted to hospital Unknown

Which health care provider(s) did the injured person see for their injury? Check all that apply.

This can be updated at a later point if necessary. Please include what has been done so far.

None Medical Tent Physical Therapist Family Physician Chiropractor
 Sports Medicine Physician (non-surgical) Athletic Trainer Pediatrician
 Orthopedic Surgeon Urgent Care Clinic Physician Emergency Medicine Physician
 Hospitalized Other Unknown

At which point in the ride did the injury occur?

Warm-up First third of the ride/race (e.g. 2nd lap of an 8 lap course)
 Middle third of the ride/race (e.g. 4th lap of an 8 lap course)
 End of the ride/race (e.g. 7th lap of an 8 lap course) Finish Line
 Cool Down Other

Was the venue or route familiar to the injured rider?

No, the rider had not ridden on this trail before
 Yes, the rider had ridden on this trail before
 N/A

Were any of the following associated with the injury? Check all that apply.

Weather Obstacle (man-made, tree, rock, etc.) or trail condition
 Highly technical nature of the portion of the trail (e.g. difficult turn, loose terrain, etc.)



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Passing another rider or getting passed Nothing
 Mechanical problem (e.g. failing brakes, loose cables, inability to shift, etc, please explain)
 Inexperience of the student-athlete (e.g. a more experienced rider would not have made the same mistake) Other

IF weather condition(s) were associated with the injury, please check all that apply:

Rain Snow Ice Cold Heat Wind Hail Humidity

Other, please

comment: _____

Which type(s) of trail conditions were present where the injury occurred? Click all that apply.

Roots Rocks Mud Snow Ice Sand Dirt Gravel Sharp turn
 Rut Log Water crossing Other man-made Other natural Not applicable

Other, please

comment: _____

What was the trail incline where the injury occurred?

Uphill / ascending Downhill / descending Flat Other N/A

**What was the approximate number of NICA Licensed Coaches present at the race/practice?
(Includes Level 1, Level 2 or Level 3 coaches) _____**

Which NICA Licensed Coaches were present? Check all that apply

Level 1 Level 2 Level 3 Other

What was the licensing level of the coach leading the activity?

Level 1 Level 2 Level 3 Unsure or N/A

First and Last Name of Person Submitting Report: _____

Email Address of Person Submitting Report: _____

Please give this completed form to your Team Director for them to submit to the NICA Safety Study or if this activity is not associated with a team, this report may be submitted using the Universal Online Incident Report Form.