

January 1, 2009

I-FLOW COMPLIANCE INCIDENT REPORT FORM

Today's Date: _____ Date(s) of Incident(s): _____

Location: _____

To: _____, **Compliance Officer**

Person(s) alleged to have been involved in the incident: _____

Any other person(s) who may be aware of, or have information regarding the incident:

Concise Description of Concern: _____

Narrative of Concern: _____

OPTIONAL INFORMATION:

Name: _____

Telephone number: _____

Please note: Although this information is not required for an investigation to be conducted, the Compliance Officer will be unable to report findings back to you or to obtain additional information if needed without this information. I-Flow does not permit retaliatory action against employees who, in good faith, report incidents or concerns.