

## **Record of Pre existing injury**

## \* sustained before coming into nursery

Completed by   About the injury (please tell us how this happened and when)   Details of pre existing injury (please give as much detail as you can and state where any injuries are on the child's body, record using map on reverse)   Was any treatment given?   Was it necessary to seek medical advice – please give details   Parent/ Carer Name Parent/Carer Signature   Staff Name Staff Signature	Name of child (including surname)	Date & time completed
About the injury (please tell us how this happened and when)   Details of pre existing injury (please give as much detail as you can and state where any injuries are on the child's body, record using map on reverse)   Was any treatment given?   Was it necessary to seek medical advice – please give details   Parent/ Carer Name Parent/Carer Signature		
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Parent/ Carer Name Parent/Carer Signature		
	Was it necessary to seek medical advice – please give details	
	Parent/ Carer Name	Parent/Carer Signature
Staff Name Staff Signature		
Stall Name Stall Signature	Stoff Nama	Stoff Signature
	Stall Name	
Senior Name Senior Signature	Senior Name	Senior Signature
		-





Child's Name : .....

Date: .....

Child's surface anatomy skin map

