

Athletic Field Player-to-Surface Injury Report Form

Please report any player-to-surface injuries that have occurred on the field. All information collected will be used only for research purposes and will be kept confidential. The purpose of this form is to collect information related to injuries sustained on Connecticut school and municipal athletic fields, in order to determine if there is a correlation between athletic field quality and player-to-surface injuries. The management and subsequent quality of these athletic fields have been evaluated as part of ongoing research. Fields have been assessed based on turfgrass cover, weed populations, fertility, smoothness, and surface hardness. Thank you for your time and participation.

**Information in bold is most critical for our research.*

Role of Injury Reporter (e.g., coach, nurse): _____

Date of Report: _____

Town/School: _____

Field Name: _____

Parks/School Contact Person: _____

Student or player age: 5-8 _____ 9-12 _____ 13-15 _____ 16-18 _____ 19+ _____	Weather at time of injury: rain _____ wind _____ sun _____ Field conditions at time of injury: wet _____ dry _____ Temperature at time of injury: 60-74° _____ 75-89° _____ 90°+ _____
Student or player gender: male _____ female _____	
Sport/Activity: _____	
Date of Injury: _____ Day of week: _____	
Time of Injury: 7-10 am _____ 10 am-2 pm _____ 2-5 pm _____ 5-8 pm _____	
Location of injury on field (e.g., goal area, center field): _____	

Severity of Injury (circle one):	minor	moderate	severe		
Type of Injury (circle all that apply):	bruise	scrape/cut	sprain	break	loss of consciousness
Other	_____				
Description of incident (optional) _____					

**Please return this form to Victoria H. Wallace, Sustainable Turf & Landscape Educator, UConn Extension:
 (860) 885-2826 (phone), (860) 886-1164 (fax); victoria.wallace@uconn.edu**