

### Incident Report - (Incident UID - IMF/TTK/COI/IAP/25/00061)

#### Incident Information

|                 |                          |                      |                                   |
|-----------------|--------------------------|----------------------|-----------------------------------|
| Incident UID    | IMF/TTK/COI/IAP/25/00061 | Category Name        | Injury-same as prod- don't delete |
| Status          | FIRReleased              | Site Name            | Coimbatore                        |
| Department Name | 25 regression            | Incident Date & Time | 04-Nov-2025 12:00 AM              |
| Created On      | 05-Nov-2025 04:06 PM     | Reported By          | Lalit Aditya Kola                 |

#### Incident Description

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#### Sections

|                 |                                                                                                                                                                                                                                     |
|-----------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Level of Injury | <input type="radio"/> L1-Bruise<br><input checked="" type="radio"/> L2-Abrasion<br><input type="radio"/> L3-Burn<br><input type="radio"/> L4-Laceration<br><input type="radio"/> L5-Fracture<br><input type="radio"/> L6-Amputation |
|-----------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

#### Photograph of injury & machine

Attach: 0

#### Injury treatment details

|                            |                                                         |                                                |
|----------------------------|---------------------------------------------------------|------------------------------------------------|
| Number of people injured:: | Treatment of Injury: Referred to Hospital for Treatment | Details of treatment given & doctor's advice:: |
|----------------------------|---------------------------------------------------------|------------------------------------------------|

#### Injured person details

|                             |                                                  |                                          |                                             |
|-----------------------------|--------------------------------------------------|------------------------------------------|---------------------------------------------|
| Name of the injured person: | Gender:                                          | Role – ON / OFF:                         | If Off role, mention the contractor name: : |
| Age:                        | No. of Year's total experience in TTK Prestige : | No. of years in this process / machine : | Injury Happened in Which Shift? :           |

#### Definition:

| Injury Type | Level | Definition                           |
|-------------|-------|--------------------------------------|
| Bruise      | L1    | Blood Clot                           |
| Abrasion    | L2    | Skin Rubbed with Rough Surface       |
| Burn        | L3    | Skin Burn due to fire, chemical, etc |
| Laceration  | L4    | Tear or a cut in the skin            |
| Fracture    | L5    | Bone Damage                          |
| Amputation  | L6    | Loss of body part                    |