INCIDENT INVESTIGATION ASSIGNMENT INSTRUCTIONS
Compliance Multi-Cooker Incident Assignments – SECTAB2020

DOCUMENT NUMBER:

DATE OF INCIDENT: **CATID:**

FOLLOW-UP REQUESTED **HAZARD ANALYSIS** ☐ **SECT 15** ☒

PRIMARY CONTACT:
BACK-UP CONTACT: Carolina Abraham, 301-504-7603, **CAbraham@cpsc.gov**

ASSIGNMENT MESSAGE:

Please investigate the attached ☐ fatal ☐ non-fatal incident involving a *[general name of product]*

This assignment is to be completed as
☐ on-site investigation
☐ telephone investigation
☐ on-site investigation if sample available, otherwise telephone investigation

Priority level: ☐ AA ☐ BB ☐ CC

Justification for AA or BB priority:

STATE in which incident occurred:

Incident and/or exemplar sample collection for Commission evaluation:
☐ Yes, obtain entire incident product, if available
☐ Yes, obtain part of incident product []
☐ Obtain [] exemplar(s).
☐ No sample collection necessary

Note: only one sample collection box above can by marked in the system – please see *Instructions to Investigator* section below for additional sample collection information, if applicable.

Instructions to Investigator: (Note: if *specialized* instructions ARE included here but appear to be incomplete, contact the requestor for additional guidance.)

Attempt to obtain as much detail as possible about the cooking process. Specifically, what was cooked, who put on the lid, how many times had they previously put on the lid, how did they put the lid on (one hand or two), how do they know the lid was on correctly and locked, did it make a noise while cooking, how long did it cook (how far into the cooking process), what setting was used, did it vent steam, was it touched before the lid came off (if so how), how was the lid removed (with one hand or two)? Also, did the person read the manual? Obtain photos, medical records, and communications with the Firm.

Obtain all official reports.

Verify incident scenario. Provide complete product identification including: **manufacturer, brand, date manufactured, place of purchase, date of purchase, model/serial numbers, cost, etc.**

Please include primary and any backup contacts in the distribution of the completed IDI.

Please refer to any/all applicable guidelines and data record sheets.

If this assignment is requested by Compliance but is listed as a category in the *Criteria and Rationales*, then the report should also meet the requirements of the *Criteria and Rationales* including use of any applicable guidelines and data record sheets. For assignments requested by EP, if it is clear that a product defect is involved, then the report must also meet Compliance requirements.

_ Area below will be completed in Data Systems _

Person(s) to Contact:

Task Number: **Date:**

Assigned to: **Processed by: lew**