INCIDENT INVESTIGATION ASSIGNMENT INSTRUCTIONS

Automatic Doors

DOCUMENT NUMBER:			
DATE	OF INCIDENT:	CATID: TLNN01 2020	
FOLLOW-UP REQUESTED		HAZARD ANALYSIS $oxtimes$ COMPLIANCE $oxtimes$	
PRIMARY CONTACT: John Topping, EPHA, 301-504-7329, jtopping@cpsc.gov BACK-UP CONTACT: Caroleene Paul, ESME, 301-987-2225, CPaul@cpsc.gov			
ASSIGNMENT MESSAGE:			
Conduct an on-site investigation of the attached automatic door related incident. Confirm that the door is a sliding or swinging automatic/electric door. Determine the following:			
1)	Where the accident occurred - e.g., department store, grocery store, office building, apartment building, condo, hospital, or someplace else?		
2)	How did the incident occur?		
3)	Describe and/or photograph	any product labeling.	
4)	List safety devices associate	d with the automatic door.	
5)	Indicate if the automatic doc certifying compliance with a	or complies with any voluntary standards. Check for labels any voluntary standards.	
6)	Collect medical and official	records associated with this incident in case of fatality.	
Please include all primary and all backup contacts in the distribution of the completed IDI.			
		Area below will be completed in Data Systems	
Person(s) to Contact:			
Guidelines:			
Task Number:		Date:	
Assigned to:		Processed by: lew	