REPORTING AN ACCIDENT AT WORK

First, click on this link → Report work-related accident

If the guideline is in Danish, click on the button “IN ENGLISH”, located top-right.

Your information is saved during the process, but it is not possible to close the browser and continue at a later point.

First fill in:

Report or record an accident

Aarhus Universitet

Report an occupational accident here.

Step 1 of 7

Who is reporting

First name of person submitting report

Last name of person submitting report

Phone no.

Email address

The information is for AU HR Development & Work Environment to use for contact related to the case.
And fill in:

Step 2 of 7

Injured

Enter CPR no.

Does the injured person have no CPR no?

First name of the injured person

Last name of the injured person

Job title

It may be necessary to contact the injured person. This is why it is important to enter the contact details.

Phone no.

Email

It is important to write the injured person’s contact information, at least CPR-no., first name, surname, and E-mail.
Then fill in:

**Employment**

**Professional status**
- Select...

**Annual income**
- Select...

**Employment start date**
- dd-mm-yyyy

**Employment end date (where applicable)**
- dd-mm-yyyy

**Place of employment (p-nummer)**
- Search

**Search on the job title of the injured person (only in Danish)**
- Du kan bruge den stillingsbetegnelse du skrev tidligere til at søge stillingen frem i vores register, fx mekaniker, chauffør, social- og sundhedsassistent, osv.

**Did the search return no results?**
- Next

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Some help to fill in 3. Employment:

**Professional status**: State if the injured person has a fixed or temporary employment, or another type of relation to Aarhus University.

**Place of employment (P-number)**: When reporting a workplace injury, you must state the correct P-number (production number) to identify the physical workplace address. You can search both P-number and address. If you need help you can search in Guide to organization units:

Your employment is associated with a specific P-number and physical address.

**The injured person’s job title (only in Danish)**: The text field is used for Work Environment statistics. It can be difficult to find the person’s job title but choose the one which fits the best.
Now fill in the detailed accident description:

Date of the accident
dd-mm-yyyy

Time
hh:mm

Detailed description of what happened

What was the person doing immediately before the accident?

What went wrong?

How was the person injured during the accident?

The categories below concerning “Information for statistics” are obligatory, as they contain important information about the accident.

Additional documentation
Please attach any documentation that may shed light on the accident or its consequences. Relevant documents are, for example: an emergency report, a medical certificate, a picture, or an investigation of the accident.

You can attach up to 3 documents of 10 MB each.

Attach document

Information for statistics
The following information must be provided for statistical purposes and to help prevent occupational accidents.

What went wrong? E.g. collapsing structure, fall

Select incident

How was the person injured? E.g. struck by a falling object

Select how the injury was sustained

What injury did the person sustain? If several injuries were sustained, state the most serious one E.g. burns, broken bones, shock

Select injury

Which part of the body was injured? E.g. shoulder, knee, back

Select part of body

Next
Now fill in:

Step 5 of 7

Accident location

Did the accident happen at the company’s address?

- Yes
- No

Next

If the accident happened at one of Aarhus University’s addresses, click “Yes” and state where the accident occurred.

If the accident did not happen at one of Aarhus University’s addresses, click “No” and state where the accident occurred.

Then fill in (expected) incapacity for work:

Step 6 of 7

Incapacity for work

Expected number of days the injured person is incapacitated for work due to the accident

You can always correct the number of days that the injured person is expected to be incapacitated for work, if it develops differently than expected. Days where the injured person is incapacitated for work due to the accident includes:

- Days the injured person is reported sick from work. See example.
- Days the injured person has time off from work, but where the injured person would not be able to work. See example.
- Days the injured person cannot perform the usual work. See example.

Select...

Next

If the injured person still in unable to work when reporting the work-related accident, choose the option in the menu which fits best with the expected return to the workplace.

On the last page you must make sure all information in the report is correct. When you are ready, click “report” at the bottom of the page.

At the top of the page, you can print out or save a copy of the form. If you save it, remember to adhere to the GDPR-regulations. The description of a work-related accident is a special personal data (read more at AU GDPR).

The ‘work accident team’ in AU HR Development & Work Environment will hereafter receive it, to either report or register it as a work-related accident.