|  |  |  |
| --- | --- | --- |
| **1.** | **Protocol #/Title****THE EVENT** : Describe what happened**PROBLEM STATEMENT:** | RCA Team Members: Team Leader: |
| **2.** | **BACKGROUND & FACTORS SUMMARY** |
|  | What was the sequence of events that was expected to take place? Attach flowchart if available. |  |
| **3.** | **Documentation of 5 Why’s** (Add sections as necessary) |  |
| 3.1 |   |   |
| 3.2 |  |   |
| 3.3 |  |  |
| 3.4 | Was a root cause identified? | [ ]  Yes[ ]  No[ ]  NK | If YES, describe the root cause. |
| **4.** | **RISK REDUCTION ACTIONS TAKEN** – List the actions that have already been taken to reduce the risk of a future occurrence of the event under consideration. Note the date of implementation. |
| **Action Taken - Description** | **Date Implemented** |
|  |  |
| **5.** | **PREVENTION STRATEGIES** – List from highest priority to lowest priority the recommended actions designed to prevent a future occurrence of the adverse event. Begin with a rank of 1 (highest). For each strategy or action provide an estimated cost, if known, and any additional considerations or recommendations for implementing the strategy (e.g., phase-in, immediate need, triage by risk). |
| **Rank** | **Strategy** | **Estimated Cost** | **Special Considerations** |
| 1 |  |  |  |
| 2 |  |  |  |
| 3 |  |  |  |
| 4 |  |  |  |
| **5** | **INCIDENTAL FINDINGS** – List and describe any incidental findings that should be carefully reviewed for corrective action. |
|  |
| **6**. | **APPROVAL** – After review of this summary report, all team members should notify the team leader of either their approval or recommendations for revision. Following all revisions the report should be signed by the team leader prior to submission.  |
| Signature of Team Leader: | Date Signed: |