**\***Espacios obligatórios por quien reporta

|  |  |  |  |
| --- | --- | --- | --- |
| **A. DATOS DE QUIEN REPORTA (OPCIONAL)** | | | |
| **Nombre y Apellidos:** |  | | |
| **Cargo:** |  | **Email:** |  |

Marque con una X los espacios que correspondientes a su reporte

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| **B. CATEGORIZACION** | | | | | | | | | | | | | | | | | | | | | | | | | |
| **REACTIVO** | | | | **PROACTIVO** | | | | | | | **PREDICTIVO** | | | | | | | | | | | | | | |
|  | Peligros (consecuencias) | | |  | Peligros (potenciales o latentes) | | | | | |  | | Error | |  | | Amenaza | | |  | Estado no deseado | | | | |
| **C. IDENTIFICACION DE EVENTOS** | | | | | | | | | | | | | | | | | | | | | | | | | |
| **\*Ciudad** | |  | | | | **HK:** | | |  | | | | | **\*Fecha** | | | |  | | | | | **\*Hora** | | **HH:MM** |
| **\*Fase de ocurrencia** | |  | Aeronave | | | |  | Briefing | |  | | Aterrizaje | | | |  | | | Hangar | | |  | | Rodaje o Taxeo | |
|  | Almacén | | | |  | Aproximación | |  | | Crucero | | | |  | | | Mantenimiento | | |  | | Talleres | |
|  | Almacén de Residuos | | | |  | Área Administrativa | |  | | Despegue | | | |  | | | Post vuelo | | |  | | Otro: | |
|  | Ambiente organizacional | | | |  | Área de movimiento | |  | | Farmacia | | | |  | | | Pre vuelo | | |
| **D. \*DESCRIPCION DEL EVENTO (**Si desea ampliar la información del evento, puede continuar al respaldo de esta hoja**)** | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **E. \*QUE SE HIZO FRENTE AL EVENTO** (Acción inmediata o corrección) | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **F. \*QUE SUGIERE PARA EVITAR ESTE TIPO DE EVENTOS** (Acción Correctiva o de mejora) | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **G. POSIBLES CAUSAS (Espacios reservados para Sistemas de Gestión)** | | | | | | | | | | | | | | | | | | | |
|  | Aeronave | | | | | | |  | EPP | | | | | |  | Lineamientos gerenciales | | | |
|  | Aplicación o ejecución procedimientos | | | | | | |  | ESPII (Enf. De salud pública Interés Internal) | | | | | |  | Medicamentos y similares | | | |
|  | Causa externa | | | | | | |  | Factor humano | | | | | |  | Orden y Aseo | | | |
|  | Comunicación | | | | | | |  | Factores Meteorológicos | | | | | |  | Presión organizacional | | | |
|  | Condiciones aeroportuarias | | | | | | |  | Fatiga o estrés | | | | | |  | Procedimiento | | | |
|  | Despacho de la aeronave | | | | | | |  | Herramientas y equipos | | | | | |  | Riesgo biológico | | | |
|  | Documentación | | | | | | |  | Impacto Ambiental | | | | | |  | Verificación / inspección | | | |
|  | Entrenamiento | | | | | | |  | Infraestructura | | | | | |  | Otros: | | | |
| **H. IDENTIFICACION DE REPORTE (Espacios reservados para Sistemas de Gestión)** | | | | | | | | | | | | | | | | | | | |
| **N° Reporte:** | |  | | | | **Fecha de recepción:** | | | | | **DD / MM / AAAA** | | | **Fecha de Clasificación:** | | | | | **DD / MM / AAAA** |
| **Clasificación R.E.S** | |  | **G. SMS** | | | | | | | |  | | | | | | | | |
| **Firma:** | | | | | | | | **Firma:** | | | | **Firma:** | | | | **Firma:** | |
| **Responsable de la ejecución:** | | | | |  | | | | | | | | | | | | | | |
|  | **Queja** | | |  | | | **Reclamo** | | | | |  | **Sugerencia** | | | |  | **Felicitación** | |