

Description of Incident

Today's date:

(This description will remain in your chart at your physician's office and will be available to you if you ever need it. It is confidential and will not be released to anyone but you.)

My partner abused Me and/or _____

on (date) _____ by doing or threatening to do this: choke force to have sex grab hit

kick slap punch push shove use a weapon against me other:

Briefly describe this incident: _____

This was: physical harm; threat of imminent physical harm, bodily injury, assault;

extreme psychological abuse; malicious property damage;

These children were in the home, were close by, or were present when the above incident occurred:

I did or did not seek medical care as a result of this incident at (name of provider/medical facility)

Photographic documentation is attached below or digitally.

(This incident report was modelled on Hawaii State TRO petition forms available at: <https://www.courts.state.hi.us/docs/IFP/IFP752.pdf>) Research has shown that Restraining orders or protective orders are beneficial to women in abusive relationships as a source of empowerment, validation as well as legal support. Please talk to your physician if you would like a copy of a TRO petition form.