

Investigation Report - (Investigation UID - IR/TTK/FSI/26/00007)

Investigation Information

Investigation UID	IR/TTK/FSI/26/00007	Investigation Category	First-Aid Safety Incident Investigation Report
Investigation Status	Final Report Released	Created On	11-Mar-2026 03:50:11 AM
Approver Names	Curley Benedict, Mozell Heaton, Rodrigo Benedict, Edna Traynor, Brianda Latour		

Incident Information

Incident UID	IMF/TTK/COI/INJ/26/00004	Incident Category	Injury
Site Name	Washoe Valley	Department Name	Production
Process	Handle & Other Assesory Assembly	Asset	Assets Not Involved
Incident Status	FinalReportReleased	Created On	04-Mar-2026 05:08:34 PM
Reported By	Ashby Armour		

Incident Description

While checking the strapping machine by injured person, another person operated the machine & strap injured the person who is checking the machine. It resulted to laceration injury over the right hand

Sections

Category of Incident	NA
Findings	1. Single button operation, 2. Unauthorized person operated the switch
Immediate Action Taken	Awareness Given
Root Cause	During setting time, Emergency stop not pressed & operated by unauthorised person
Photographs	NA
Level of Injury	<input type="radio"/> L1-Bruise <input checked="" type="radio"/> L2-Abrasion <input type="radio"/> L3-Burn <input type="radio"/> L4-Laceration <input type="radio"/> L5-Fracture <input type="radio"/> L6-Amputation

Report Prepared by

Name: Padmanaban N, Praveenkumar Selvaraj	Date: 11-Mar-2026
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Preventive Actions

UID	Site Name	Category Name	Assignee Name	Due Date	Created By	Description	Status
AT/TTK/COI/INR/26/00018	Washoe Valley	Investigation Report	Edna Traynor	12-Mar-2026 06:03:51 PM	Mozell Heaton	Two hand operation switch shall be provided with simultaneous operation	Assigned
AT/TTK/COI/INR/26/00019	Washoe Valley	Investigation Report	Brianda Latour	12-Mar-2026 06:03:51 PM	Mozell Heaton	Training shall be given to operator on safe setting operation	Assigned

Horizontal Deployment of Preventive Actions With in the Site

UID	Site Name	Category Name	Assignee Name	Due Date	Created By	Description	Status
NA							

Horizontal Deployment of Preventive Actions Across the Sites

UID	Site Name	Category Name	Assignee Name	Due Date	Created By	Description	Status
NA							

Injured person details

Name of the injured person: Selvaraj R	Gender: Male	Role – ON / OFF: Off Roll		If Off role, mention the contractor name:: 2			
Age: Age - 47	No. of Year's total experience in TTK Prestige: NA	No. of years in this process / machine: NA		Injury Happened in Which Shift?: Shift - B			