



# Ontario Society of Cardiology Technologists (OSCT)

## Reporting Form

Attention: OSCT President

Website: <https://osct.ca/>

Email: [president@osct.ca](mailto:president@osct.ca)

---

Date of Report:

*Use this form to report concerns related to the conduct, practice, or capacity of a Registered Cardiology Technologist (RCT).*

### Reporter Information

Facility/Agency/Employer Name:

Street Address:

City:

Postal Code:

Reporter Name:

Reporter Position:

Phone:

Email:

I am also the Contact Person:                      Yes              No

### First Contact Person

Name:

Position:

Phone:

Email:

Fax:

### Second Contact Person (Optional)

Name:

Position:

Phone:

Email:

Fax:

### Type of Setting

Acute Care

Cardiology Clinic

Diagnostic Imaging

Outpatient Testing

Community/Outreach

Mental Health

Home Care

Correctional Facility

Other (specify):

### Member (RCT) Information

RCT Name:

OSCT Number:

Date of Hire:

Termination or Resignation Date:

Address (if known):

Unit/Practice Area:

Typical RCT/Client Ratio:

Employment Status:              Full-Time              Part-Time              Casual



# Ontario Society of Cardiology Technologists (OSCT)

## Reporting Form

Attention: OSCT President

Website: <https://osct.ca/>

Email: [president@osct.ca](mailto:president@osct.ca)

---

### Incident Report 1

Date:

Incident/Event Description:

Consequences to Clients/Others:

RCT Response/Explanation:

Employer Action:

Additional Comments:



# Ontario Society of Cardiology Technologists (OSCT)

## Reporting Form

Attention: OSCT President

Website: <https://osct.ca/>

Email: [president@osct.ca](mailto:president@osct.ca)

---

### Incident Report 2

Date:

Incident/Event Description:

Consequences to Clients/Others:

RCT Response/Explanation:

Employer Action:

Additional Comments:



# Ontario Society of Cardiology Technologists (OSCT)

## Reporting Form

Attention: OSCT President

Website: <https://osct.ca/>

Email: [president@osct.ca](mailto:president@osct.ca)

---

### Incident Report 3

Date:

Incident/Event Description:

Consequences to Clients/Others:

RCT Response/Explanation:

Employer Action:

Additional Comments: