**Bury Safeguarding Adults Body Map**

Please use this form document any injuries sustained on the following body maps, indicating location of injury and type of injury e.g. graze, cut, bruise.



|  |  |
| --- | --- |
| Name of Adult at Risk |  |
| Date and Time |  |
| Name of person completing form |  |
| Name of Organisation Alerter works for |  |