

# Procedure for Managing Work-related Injuries or Illnesses

Does the employee want to seek medical attention and file a claim?

**YES**

**NO**

The appropriate *Medical Authorization Form* is to be filled out and given to employee.

**Employee** must fill out and sign a *Workers' Compensation Claim Form* (NCR form), lines 1 – 8, unless in need of immediate medical attention.

**Supervisor** must complete the *Supervisors Review Form* and send to Safety, Risk Management and Information Security (SRMIS).

**Supervisor or ASM**, whichever the department requires, will fill out and sign the bottom portion of the *Workers' Compensation Claim Form*, lines 9 – 17.

**REPORT INJURY TO SRMIS IMMEDIATELY VIA PHONE (5-2366) OR FAX (5-2411).**

The *Workers' Compensation Claim form*, *Supervisors Review Form*, and a work status note from the medical facility are to be faxed to SRMIS **within 24 hours**. The originals may either be walked over or sent through inter-campus mail.

**Supervisor and employee** will fill out the *Accident Investigation Report*. This report will be signed by the supervisor and the employee.

Send the *Accident Investigation Report* to SRMIS.

**Questions?**  
Call Cheryl Velasco in Safety, Risk Management and Information Security at 5-2366 or the SRMIS Main Line at 5-2283.