

INJURY MANAGEMENT PROGRAM CLAIM REPORTING CHECKLIST

EMPLOYEE NAME: _____

DATE OF INJURY: _____

TYPE OF CLAIM: FIRST AID

OR

INJURY BEYOND FIRST AID

FOR FIRST AID CLAIM:

- Provide first aid to employee (always take care of the employee first)
- Document incident on Incident/Hazard Report
- Complete with affected employee - Declination of Medical Treatment Form
- Notice to Doctor Regarding First Aid Treatment letter – If Employee goes to a doctor
- Submit the above completed forms to the Risk Management Department within 24 hours of incident

INJURY BEYOND FIRST AID:

- Get medical treatment. Arrange an appointment, if necessary
- Document incident on Incident/Hazard Report
- Notice to Doctor Regarding First Aid Treatment letter
- Provide employee with DWC-1. Employer completes questions 9 through 12, and 14 through 18. DO NOT complete question 13 until the employee returns the form to you with their portion completed.
- Provide employee with “Work Ability” form to take to the doctor. Instruct them to return it to you immediately after their appointment.
- Provide employee with “Facts about Workers Compensation Injury Management Program”.
- Provide employee with the Cypress Care “First Fill” form & the Plumas County Network Pharmacies listing.
- Initiate “Interactive Process – Return to Work” to provide employee with transitional duty job if they are medically able.
- Submit the above completed forms to the Risk Management Department within 24 hours of incident

Name, address, and phone number of physician or facility employee is going to:

Quincy Family Medicine
1045 Bucks Lake Road
Quincy, CA 95971
530.283.0650

Sutter North Medical Group
Brownsville Clinic
16911 Willow Glen Rd.
Brownsville, CA 95919
530.675.2457

Plumas District Hospital
Emergency Room
1060 Bucks Lake Road
Quincy, CA 95971
530.283.2121

<http://www.suttermedicalfoundation.org/snmg/>

Seneca Healthcare District
130 Brentwood Drive
Chester, CA 96020
530.258.2151

Oroville Hospital
2767 Olive Highway
Oroville, CA 95966-6185
530.533.8500 - Hospital
530.532.8550 - Administration
530.538.3117 - Fax
<http://www.orovillehospital.com>

Eastern Plumas Health Care
500 First Avenue
Portola, CA 96122
530.832.6600
<http://www.ephc.org>

Greenville Medical Clinic
176 Hot Springs Road
Greenville, CA 95947
530.284.6116
(A clinic of Eastern Plumas Health Care)