Georgia Insitute of Technology ON-THE-JOB INJURY PROCEDURES

When an employee suffers a work related injury/illness, follow the steps below as needed.

o **EMERGENCY**:

- Respond immediately to determine the type of care needed (i.e. ambulance, emergency room)
- For serious injuries call ext. 4-2500 and ask the GT Police Department to call an ambulance NOTE: The employee's supervisor may take the injured worker to the emergency room

O If the injury does not require medical treatment:

- Provide first aid care
- Report as an Incident only by completing the Incident Only form*
- File in the departmental employee file

In situations where you are unsure, have them seek treatment from a doctor by calling **AmeriSys Managed Care at 678-781-2848 or 800-900-1582** and follow the procedures below

o If the injury requires medical treatment:

- Provide a copy of the Bill of Rights and call AmeriSys Managed Care at 678-781-2848 or 800-900-1582*
- The supervisor or HR Rep should call in the claim at 1-877-656-7475 to complete the First Report of Injury. **Injuries should be called in with in 24 hours of notification**
- If possible, have employee return to give you a status report on their condition

If the injury requires lost time from work:

- Have employee complete a Leave Election Form* if the injury requires more than 7 calendar days of lost time from work (not including the date of injury)
- Report lost time as sick leave, vacation or leave without pay
- Follow-up doctors visits are to be charged to sick leave

• When GT paid leave expires (sick or vacation):

- HR Rep must complete a PSF to put the employee on medical leave without pay and submit to Payroll-0435.
- Failure to complete the PSF may cause an interruption in GT employee benefits
- The supervisor or HR Rep will need to complete a Wage Statement*
- Fax both the Leave Election form and Wage Statement to DOAS at 404-657-1188

When employee returns to work:

- Notify the Department of Administrative Services (DOAS) by calling 404-657-4438
- Complete a PSF to return employee from leave and submit to Payroll-0435

NOTE:

- Employees receiving bills at home should give the healthcare facility the WC # and contact
 information for DOAS. If this fails, medical bills can be sent to the Workers' Compensation
 Counselor in the Benefits office at mail-code 0435
- Employees may be compensated for mileage and parking expenses to and from the doctor by completing the Mileage & Parking Reimbursement* form and faxing or mailing it to DOAS.

^{*}Indicates that this form can be obtained from the OHR –Benefits webpage @ www.ohr.gatech.edu

Georgia Insitute of Technology ON-THE-JOB INJURY CHECKLIST

Employee Information	Name:	PeopleSo		ft ID#				
	Department	Date of Ir	te of Injury		WC#			
First Aid	☐ Given first aid care ☐ Completed Incident Only Form ☐ Filed form in departmental file						Additional Comments:	
Medical Treatment	☐ Given a copy of the Bill of Rights and called AmeriSys Managed Care at 678-781-2848 or 800-900-1582 to obtain treatment ☐ Called in claim at 1-877-656-7475 ☐ Received status report on employees condition			Additional Comments: Additional Comments:				
Lost time from work	☐ Received completed Leave Election Form ☐ Reported lost time as sick leave, vacation or leave without pay ☐ The supervisor should call employee to show empathy							
GT Paid Leave Expires	□Completed and submitted PSF to medical leave of absence □Completed Wage Statement □ Faxed Leave Election Form and DOAS at 404-657-1188	nce ement Form and Wage Statement to			onal Comments:			
Returned to work	☐ Called DOAS at 404-657-4438 ☐ Completed and submitted PSF t medical leave of absence			Additional Comments:				
Completed By:				Г	Date:			

-File in departmental employee file-