

# WORK RELATED INJURY / ILLNESS PROCEDURE

**For Life Threatening Injuries - CALL 911 IMMEDIATELY**

**WITHIN 24 HOURS**

## EMPLOYEE

## SUPERVISOR

**Immediately** report work related injury/illness to Supervisor.  
Obtain from Supervisor (or the Human Resource Services home page at [inside.sou.edu/hrs](http://inside.sou.edu/hrs), then select forms) the Workers' Compensation Claim Form (801) and complete:

- ❖ Lines 1-26 if Incident Only (Do Not Sign form).
- ❖ Lines 27 if seeking medical treatment (Sign Form).
- ❖ Return form 801 to your Supervisor or Human Resource Services.
- ❖ Seek medical attention and have your physician or practitioner complete form 827.

A representative from SAIF Corporation, SOU's third party adjustor, will contact employee to obtain additional information.

To obtain required forms, please go to the Human Resource Services page at [inside.sou.edu/hrs](http://inside.sou.edu/hrs). If you are unable to provide the Claim Form (801) to employee, please call (541) 552-8119 immediately for mailing within 24 hours. Upon notification of injury from employee, proceed as follows:

- ❖ Complete the Work Related Injury/Illness Form and obtain employee's signature.
- ❖ Review 801. If **no** medical treatment is needed, have employee complete **Lines 1-26 only**. If medical treatment is needed, employee **signs** Line 27.
- ❖ Copy forms for employee.
- ❖ FAX, deliver or email forms to Michele Barlow, HR Leave Coordinator, Human Resource Services, Churchill Hall Room 159  
FAX (541) 552-8508, email - [barlowm@sou.edu](mailto:barlowm@sou.edu).

**IF EMPLOYEE IS HOSPITALIZED  
OSHA NEEDS TO BE NOTIFIED  
WITHIN 24 HOURS**

## Does Employee Want To Seek Medical Treatment?

**YES**

**NO**

**For emergencies, call 911**

**A completed Claim Form 801 must be submitted to HR**

### INITIAL TREATMENT

A medical provider of the employee's choosing, emergency room or urgent care facility.

### FOLLOW UP TREATMENT

A medical provider of the employee's choice, or a medical provider assigned by SAIF with the approval of the employee.

**If treatment is requested  
by employee at a later date:**

**Employee must contact  
Human Resource Services**

### After Each Doctor Appointment

**Employee must use own leave for follow-up doctor appointments**

- ❖ Employee and Human Resource Service review Work Status Update form or doctor's note.
- ❖ If work restrictions are identified, Employee, HR and Supervisor discuss to determine reasonable accommodation when operationally feasible.
- ❖ FAX, deliver or email doctor's note to Human Resource Services Attn: Michele Barlow - HR Leave Coordinator, (541)552-8508 FAX [barlowm@sou.edu](mailto:barlowm@sou.edu). Human Resource Services - Churchill Hall Rm.159

### HAVE QUESTIONS OR NEED FORMS?

Please Contact:

Michele Barlow  
HR Leaves Coordinator  
Human Resource Services  
Churchill Hall, Room 159  
1250 Siskiyou Blvd.  
Ashland, OR 97520

[inside.sou.edu/hrs](http://inside.sou.edu/hrs)

(541) 552-8119 Phone

(541) 552-8508 Confidential Fax

[barlowm@sou.edu](mailto:barlowm@sou.edu)