**On the Job Injury**

**Checklist for Supervisors**

When an injury occurs:

* If the injury is an **emergency**, call 911 or get injured worker to an emergency room.
* If injury is **not an emergency**, go over the Panel of Physicians with the injured employee and allow him/her to choose a physician. (Insure the employee **does not** go to their Primary Physician.)

**Note:** if injury occurs after hours during the week or the weekend, employees are permitted to utilize the ER

* Call the Safety Coordinator immediately or Insurance Department, at 615-898-7715 or 615-405-5656 within (1) working day from the date of occurrence.
* Insure the following forms are completed on all injuries, accidents and/or illnesses whether medical treatment is necessary or not, within two (2) working days from the date of the event. The Safety Coordinator or designee (OJI Representative) will complete and sign off on all reports of injuries, accidents and/or illnesses.

1. **Claim Report**,
2. **Employee Injury Statement**,
3. **OJI Supervisor’s Report**,
4. **OJI Witness Report**,

Forms are available at: <http://www.rutherfordcountytn.gov/insurance/oji_forms.htm>

* Review the **Post Injury Follow-Up sheet** with the injured employee to prevent out of pocket expenses and assure him/her that you are eager to see him/her return to work. Complete the **Return to Work Agreement Form** by listing light duty jobs that fall within the employee’s restrictions. If there is no light duty available, the employee will be paid through the OJI Program. These forms are also available at the above website.
* Insure all of the above listed forms are completed and forwarded to the Safety Coordinator and or the Insurance office, Fax: 615-867-4602

If you have any questions about reporting the injury, please contact the Safety Coordinator at 615-898-7715 / 615-405-5656 or email [dgoode@rutherfordcountytn.gov](mailto:dgoode@rutherfordcountytn.gov)

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