




INCIDENT AT WORK?

Apply first aid then follow these steps.

	SUPERVISOR	INJURED WORKER
REPORTING 1	<ul style="list-style-type: none">Find your Employee Incident Procedure Packet and complete the supervisor's portion of the Incident Report Form.Send the completed Incident Report Form to ERNwest. claimsreporting@ernwest.com (Fax) 877-717-0590	<ul style="list-style-type: none">Notify your supervisor of the injury immediately.Complete your portion of the Incident Report Form provided by your supervisor. 
TREATMENT 2	<ul style="list-style-type: none">If medical treatment is needed, provide the worker with the Return to Work Form and help them identify the nearest appropriate medical provider.If medical treatment isn't needed, maintain a record of the injury for possible OSHA 300 reporting.	<ul style="list-style-type: none">Take the Return to Work Form with you to your first medical visit. Have your physician complete the form and then return it to your supervisor within 24 hours.Update your supervisor with your progress after each medical appointment. 
RETURN TO WORK 3	<ul style="list-style-type: none">After medical care, review the completed Return to Work Form with the worker.If released to regular work, return the worker to his/her normal work and schedule.If released to modified duty, complete the Job Offer Letter. Review the completed letter with the worker and place them back on the schedule.Send the completed Incident Report, Return to Work Form and Job Offer Letter to your ERNwest Claim Manager.	<ul style="list-style-type: none">Take the completed Return to Work Form back to your employer.If released to regular work, resume your normal job duties.If released to modified duty, review the job requirements with your supervisor.Review the Job Offer Letter for your new modified-duty position and sign indicating whether you are accepting or declining the modified-duty work. 

If there are any questions or concerns at any time,
CALL ERNWEST FOR IMMEDIATE ASSISTANCE

1-800-433-7601, OPTION 0.



Washington Health Care Association

Your ERNwest Claim Manager contact: