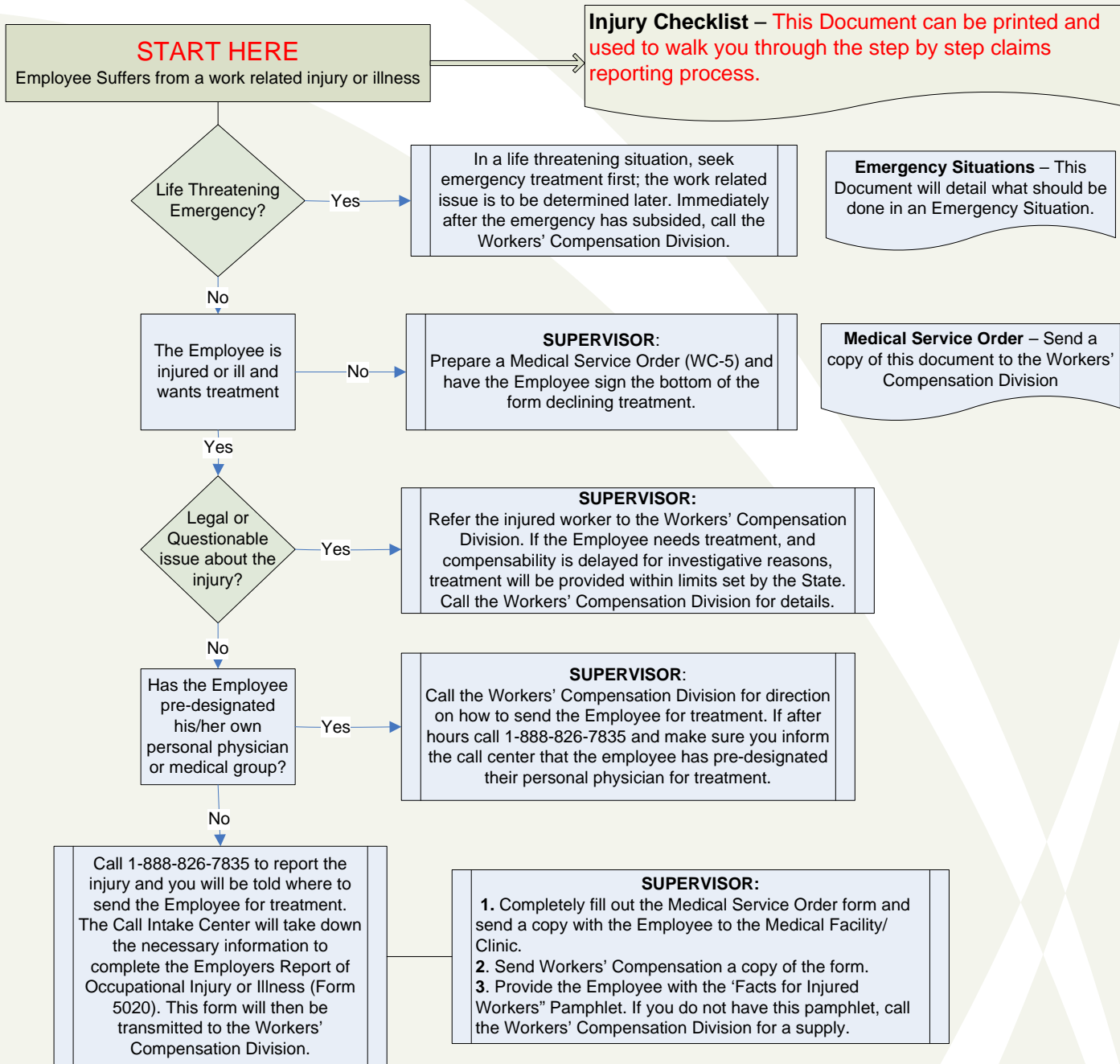


Workers' Compensation Division

951-955-3530 Staff or 951-955-5864 Receptionist

951-955-3544 Fax

Reporting an Injury Flowchart



Additional Forms that need to be filled out by the Supervisor or Manager:

-Most Importantly Call 1-888-826-7835 and report the injury to the Intake Call Center. This call will generate the reporting of the injury and the completion of the Employers Report of Occupational Injury or Illness [Form 5020]. Injury and Employee information will be taken over the phone and a report will be generated and transmitted to the Workers' Compensation Division.

-If you have questions about the content of this form, before calling print out and read the document entitled: The Supervisor's Guide for filling out the Form 5020. Please note this Form is ALWAYS to be completed by the Intake Call Center.

-Complete the Supervisor's Report of Employee Injury [Safety Form 674]. Forward the original and yellow copy to the Workers' Compensation Division.

-Complete the Workers' Compensation Lost Time Report [WC-6] and submit the form along with any original off work orders to the Workers' Compensation Division.

Additional Forms that need to be filled out by the Supervisor or Manager. AND Employee:

-Provide the Employee with an Employee Claim Form [DWC-1] *This Form is a multipart form. When the Employee returns the completed Form, date stamp the green copy and give the green copy to the Employee. Complete the Employers portion and send the pink copy to the Employee CERTIFIED mail. Forward the White copy to the Workers' Compensation Division.

-Have the Employee complete the Workers' Compensation Acknowledge Form [WC-35]. Have the Employee sign this form to acknowledge their receipt of and filling out of the DWC-1 and their receipt of the Facts for Injured Workers Pamphlet.