WHEN TO USE PACKET: This packet will be utilized in any situation of a county employee injured while in the performance of their duties.

REPORTING PERIOD REQUIREMENT: All injuries must be reported to Mikki Stegen as soon as possible and no longer than 48 hours from time of the incident. She can be contacted at the County Engineer’s Office at 563-568-4574. If the injury happens after normal work hours, on a weekend or holiday; contact Corey Snitker as soon as possible at 563-568-1911. If unable to contact, call the Sheriff’s Office at 563-568-4521 to contact Corey.

MEDICAL TREATMENT POLICY: For non-life-threatening circumstances, Allamakee County employees who are injured while performing work related duties should attempt to see designated medical staff within the Mayo or Gundersen Healthcare Systems located in Waukon. Failure to do so could result in that specific visits claims being denied. If life threatening or immediate medical aid is needed – call 911.

Veterans Memorial Hospital will be used if these facilities are closed and for 911 cases.

The following are phone numbers to the local clinics referenced above for appointments: Mayo Clinic: 563-568-3449 and Gundersen Clinic: 563-568-3000. If available, have the employee see Dr. Perkins at the Mayo Clinic; otherwise wherever they can be seen the quickest.

For injuries sustained outside the county and needing immediate attention; employees will seek treatment at the nearest medical facility or as transported by an ambulance.

INJURED EMPLOYEE RESPONSIBILITIES

☐ As soon as possible call Mikki Stegen at 563-568-4574 to report the injury. Inform your Supervisor as soon as possible also.

☐ If you are seeking medical attention, you should sign the Authorization to Release Information Regarding Claimants Seeking Worker’s Compensation Benefits form and take the Attending Physician Return to Work Recommendation Record and the My Matrixx ARGENT Worker’s Compensation Prescription Information forms with you.

☐ It is your responsibility to inform the doctor of the County’s possible temporary return to work program.

☐ If your physician places you on work related restrictions, you must inform Mikki Stegen and your Supervisor immediately after the appointment and provide the Attending Physician Return to Work Recommendation Record form to them.

☐ Complete the Employee Report of Incident Form and provide to your Supervisor or Department Head to include identifying any witnesses to the incident. This should be done no later than 2 work days after the incident.

☐ Employee supervisor/department head responsibilities are on page 2.

☐ Follow-up medical treatment requirements are on page 2.

☐ Corey Snitker will also obtain footage from security or surveillance cameras in the area.
EMPLOYEE SUPERVISOR/DEPARTMENT HEAD RESPONSIBILITIES

☐ In case of a medical emergency ensure prompt medical treatment is provided by calling 911.

☐ Follow the procedures found in the **MEDICAL TREATMENT POLICY** paragraph on page 1.

☐ If not 911 and if possible, drive the injured employee to the appropriate medical facility.

☐ Remind the employee that the county has a possible temporary light duty program.

☐ Have the employee seeking medical attention sign the **Authorization to Release Information Regarding Claimants Seeking Worker’s Compensation Benefits** form. Also, ensure the employee takes the **Attending Physician Return to Work Recommendation** and the **My Matrixx ARGENT Worker’s Compensation Prescription Information** forms with them.

☐ As soon as possible contact Mikki Stegen at 563-568-4574 to report the injury. If after normal work hours see **REPORTING PERIOD REQUIREMENT** paragraph on page 1.

☐ As soon as possible have the injured employee also contact Mikki Stegen at 563-568-4574.

☐ Mikki Stegen will fill out the **First Report of Injury or Illness** form (Not in this packet).

☐ If possible and relevant, photograph scene of injury to preserve potential evidence for future use.

☐ Remove equipment/machine/product from use without repairing or altering it in anyway. Take photos of the equipment immediately.

☐ Ensure the employee fills out the **Employee Report of Incident** form.

☐ If there are any witnesses, request they each fill out a **Witness Report of Incident** form as soon as possible. If unable to fill out the form at that time, please identify them for future contact.

☐ Forward all above paperwork to Mikki Stegen within 2 working days of the incident.

☐ Corey Snitker will investigate the incident at the County level; Mikki Stegen will contact him upon notification of an injury occurring.

☐ Complete the **Supervisor Accident Investigation Report** form and an **Accident Scene Sketch** form and provide to Corey Snitker no later than 3 working days after the incident.

FOLLOW-UP MEDICAL TREATMENT REQUIREMENTS

☐ If an employee seeks or requires additional medical treatment or if there is a change in their medical status, a new **Attending Physician Return to Work Recommendation Record** form must be filled out for each visit. The employee must notify Mikki Stegen and their Supervisor and provide the updated form to both after the appointment.

☐ Upon completion of medical treatment, an **Attending Physician Return to Work Recommendation Record** form must be filled out and provided to Mikki Stegen and their Supervisor after the appointment.