Injured? Workers’ Compensation Flow Chart

**Please contact Risk Management and Safety if assistance is needed**, 895-5404 or 895-4226,
Fax: (702) 895-5227 Email: michele.washington@unlv.edu website: rms.unlv.edu

**Accident Occurs.** Life threatening or requires immediate medical attention?

- **Yes**
  - **Call 911**
  - **C-1** form can be completed once employee is able. The C-1 form is emailed/faxed to Risk Management and Safety as soon as possible.
  - Supervisor investigates the accident and makes safety repairs/requests. Supervisor completes the **Supervisor’s Incident Report**; send to the appropriate Safety Office

- **No**
  - Employee completes the **C-1** form. The C-1 form is emailed/faxed to Risk Management and Safety
  - **Does the employee want treatment?**
    - **Yes**
      - Supervisor provides clinic information to the employee (from the Risk Management and Safety website). Also, arrange for transportation to the clinic if needed.
      - Contact Risk Management and Safety with any questions.
      - Employee goes for treatment and has the doctor fill out the claim form (Form C-4).
      - Risk Management and Safety completes the C-3 form and sends it to the Third Party Administrator.
      - Employee returns work restrictions to the supervisor.
      - **Yes**
        - Employee returns to regular job.
      - **No**
        - Supervisor places the employee in modified duty based on the restrictions. If assistance is needed with modified duty, contact Risk Management and Safety. Risk Management and Safety will complete the appropriate paperwork. Follow for Full Duty
    - **No**
      - File paperwork. No further action needed, unless employee wants treatment later.
      - Employee can go for medical treatment for up to 90 days.