

LAB EMPLOYEE & GRAD STUDENT LAB INJURY WORKERS' COMPENSATION PROTOCOL



LIFE THREATENING INJURIES:

- CALL UNIVERSITY POLICE DIAL 911
- CALL RISK MANAGEMENT DIAL 1-5582
- FILL OUT SUPERVISOR'S INJURY REPORT
- FILL OUT WORKERS' COMPENSATION ACCIDENT FORM

NON LIFE THREATENING INJURIES:

- ADVISE LAB MANAGER
- CONTACT RISK MANAGEMENT 1-5582
- RISK MANAGEMENT WILL OBTAIN A MEDICAL APPOINTMENT WITH CORPORATE HEALTH
- FILL OUT SUPERVISOR'S INJURY REPORT
- FILL OUT WORKERS' COMPENSATION ACCIDENT FORM

SUPERVISOR'S INJURY OR ILLNESS INVESTIGATION REPORT

- DOWNLOAD FORMS FROM WEBSITE

<http://www.northwestern.edu/risk/docs/supervisors-report.pdf>

<http://www.northwestern.edu/risk/docs/accident-statement-form.pdf>

- FORM MUST BE COMPLETED BY LAB MANAGER & FAXED TO RISK MANAGEMENT 7-7475 OR EMAILED TO risk@northwestern.edu