

GEORGIA INSTITUTE OF TECHNOLOGY
ENVIRONMENTAL HEALTH AND SAFETY
INJURY AND ILLNESS REPORTING GUIDELINES

PURPOSE

To provide instructions for supervisor(s) to follow when reporting and handling an injury or illness case.

INJURY REPORTING

If medical treatment is necessary, the departmental supervisor must report the injury/illness to the State Department of Administrative Services (DOAS) by calling 877-656-7475 within 24 hours of the injury. Reporting should be delayed only long enough for the employee to be taken to the doctor. The injury/illness must also be documented using the Georgia Tech Injury/Illness Reporting Form.

Note: **Claims may only be reported by a supervisor. Employees cannot call in their own claims.**

Supervisors should encourage the injured employee to call AmeriSys Managed Care at 678-781-2848 or 800-900-1582. They will assist in selecting a case manager for follow-up care and future appointment scheduling (if needed).

IMPORTANT NOTE: If no medical treatment is necessary, DO NOT phone the DOAS Injury Report line. However, the injury/illness must still be documented on the Georgia Tech Injury and Illness Report form. Copies of this form must be sent to the Environmental Health and Safety (EHS) Office and a copy must remain in the supervisor's file.

DEFINITIONS

Classifying Injuries

An **injury** is any wound or damage to the body resulting from an event in the work environment.

Examples: Cut that requires medical attention, puncture, laceration, abrasion, fracture, major bruise, contusion, chipped tooth, amputation, insect bite, electrocution, or a thermal, chemical, electrical, or radiation burn. Sprain and strain injuries to muscles, joints, and connective tissues are classified as injuries when they result from a slip, trip, fall or other similar accidents.

Classifying Illnesses

Skin diseases or allergic reactions are illnesses involving the worker's skin that are caused by work exposure to chemicals, plants, or other substances.

Examples: Contact dermatitis, eczema, or rash caused by primary irritants and sensitizers or poisonous plants; oil acne; friction blisters, chrome ulcers; inflammation of the skin.

Respiratory Conditions are illnesses associated with breathing hazardous biological agents, chemicals, dust, gases, vapors or fumes at work. (i.e. metal fume fever, chronic obstruction bronchitis, occupational asthma, acute congestion and more.)

GEORGIA INSTITUTE OF TECHNOLOGY
ENVIRONMENTAL HEALTH AND SAFETY
INJURY AND ILLNESS REPORTING GUIDELINES

Poisoning includes disorders evidenced by abnormal concentration of toxic substance in blood, other tissues, other bodily fluids, or the breath caused by the ingestion or absorption of toxic substance into the body. (i.e. poisoning by lead, mercury, arsenic carbon monoxide, hydrogen sulfide, insecticide sprays, and more.)

Other Illnesses: Heatstroke, sunstroke, heat exhaustion, heat stress, freezing, frostbite, effects of welding flash, ultra-violet rays, anthrax, bloodborne pathogenic diseases, hepatitis B or C, brucellosis, tumors and more.

STEP BY STEP PROCEDURE

When a supervisor is notified of an injury or illness, the incident must be documented on the form located in the Injury and Illness Reporting Packet.

A. INJURY INCIDENT REPORT (NO MEDICAL ATTENTION REQUIRED)

- The supervisor must fill out the “Injury and Illness Report” form with the employee.
- The employee and supervisor must both sign the form.
- Since medical attention is not needed, the “Medical Use Only” portion of the form must remain blank.
- A copy of the completed form must be mailed or faxed to: EHS, mail-code: 0465 - ATTN: EHS General Safety Office, or FAX: (404) 894-5042
- However, if medical attention is needed or requested by the employee at a later date due to the same injury, the supervisor will do the following:
 - i. Send a copy of the original incident report to the medical provider.
 - ii. Follow steps under section B below.
- Copies of the “Injury and Illness Report” form must be sent to EHS, mail-code: 0465 - ATTN: EHS General Safety Office

B. INJURY INCIDENT REPORT (MEDICAL ATTENTION REQUIRED)

Depending on the nature of the incident, the supervisor must do the following:

- **Severe/Life Threatening** - Immediately call Georgia Tech Emergency Line: 911
- **Non-Life Threatening** – Employee must be transported to a local medical facility
 - i. The supervisor must fill out the Injury/Illness Report Form with the employee as soon as possible after appropriate medical attention is provided and/or as soon as the employee is able.
 - ii. The employee and supervisor must both sign the form.
 - iii. The employee must give the form to the Medical Facility and the bottom portion of the form must be filled out by the physician. The form should then be returned to the supervisor.

GEORGIA INSTITUTE OF TECHNOLOGY
ENVIRONMENTAL HEALTH AND SAFETY
INJURY AND ILLNESS REPORTING GUIDELINES

- iv. Call the DOAS 24 Hour Injury Report line – 877-656-7475 within 24 hours of the injury.
- Copies of the “Injury and Illness Report” form must be sent to EHS, mail-code: 0465 - ATTN: EHS General Safety Office

C. ILLNESS INCIDENT REPORT (MEDICAL ATTENTION REQUIRED)

If an employee experienced an illness related to work, the supervisor must do the following:

- Immediately call Georgia Tech Emergency Line: 911 or Georgia Tech Police at 404-894-2500 (if warranted).
 - i. The supervisor must fill out the Injury/Illness Report Form with the employee (as soon as employee is able, as appropriate).
 - ii. Employee and supervisor must sign the form.
 - iii. Call the DOAS 24 Hour Injury Report line – by calling 877-656-7475 within 24 hours of the injury.
- Copies of the “Injury and Illness Report” form must be sent to EHS, mail-code: 0465 - ATTN: EHS General Safety Office

TRAINING

Training on injury and illness reporting guidelines will be given by EHS to supervisors at scheduled times initially, then as a refresher, by request.

RECORDS

Injury and illness report records are maintained on file with EHS.

A copy of the completed form must be mailed or faxed to

- ATTN: EHS General Safety Office: Mail Code: 0465 or Fax: (404) 894-5042

REFERENCES

Title
Injury and Illness Report Form
DOAS -24 Hour Report Line: 877-656-7475
AmeriSys: 678-781-2848 or 800-900-1582