

**\*\*\*If emergency medical treatment is required, please immediately contact emergency medical care for employee (1911-campus phone; 872-2589 Security Dispatch) then follow through with required reporting to Human Resources Benefits Office at 872-3728\*\*\***

## INSTRUCTIONS

With notification of an illness or incident, it is the responsibility of the employee/supervisor to complete and immediately submit the **Employee Incident Report** form to the HR Benefits Office:

The employee and/or supervisor are responsible for completing the Employee Incident Report form.

- If the employee is unavailable to complete the Incident Report, the supervisor should complete the form.
- The Incident Report must be completed within 24 hours of the College's first notice of incident.
- **FAX THE COMPLETED FORM IMMEDIATELY TO THE OFFICE OF HUMAN RESOURCES AT 872-3810.** Give a copy to the employee, and retain a copy for your department file.

**Supervisor's Investigative Report** – supervisor should complete and fax to HR within 3 days of incident

**Witness Statement** – should be completed by any witness(es) to incident and faxed to HR within 3 days of incident

**\*\*\* IMPORTANT \*\*\***

***Employee's Responsibilities:***

***It is the employee's responsibility to contact HR to ensure WC claim (DWC-1) is completed and obtain medical authorization. Employee MUST report changes in medical status that affect ability to return to work to HR Benefits Office. Employee must keep HR updated after every physician visit on return-to-work status. Copy of Work Status Report (DWC-73) must be provided to HR.***

## FURTHER INFORMATION

***Reporting an injury or submission of a claim form does not imply automatic approval of the claim.*** Claims are reviewed and approved by Attention – Claims Manager for Texas Political Subdivisions.

TEXAS POLITICAL SUBDIVISIONS  
P.O. Box 803356  
Dallas, Texas 75380

Ph: 1-800-588-0013

Fax: 1-972-387-4248

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**Statement of Equal Opportunity:** No person shall be excluded from participation in, denied the benefits of, or be subject to discrimination under any program or activity sponsored or conducted by South Texas College on the basis of race, color, national origin, religion, sex, age, veteran status or disability.