On-The-Job Injury Instructions

If you have an on-the-job injury, the following is required:

1. **Reporting Incident/Injury:**
   a. Notify supervisor that an injury has occurred **within 24 hours.**
   b. Complete the WVU Employee Injury/Incident Report and return within 24 hours. Email to: WVUInjuryIncidentReport@mail.wvu.edu.
   c. It is the supervisor’s responsibility to complete steps a & b if employee is unable.
   d. **Steps a & b need to be completed even if you do not seek medical treatment.**

2. **Seeking medical treatment, filing under Workers’ Compensation:**
   a. Notify the treating physician that you have sustained an on-the-job injury.
   b. Ensure that you complete the WC-1&2 form at treating physician’s office. Encova formerly BrickStreet Mutual Insurance is our WC Carrier. It is recommended that you file the claim as close to your injury date as possible.

3. **Release:** A release from your physician must be provided to Medical Management **before** going back to work, regardless of the amount of time missed.

4. **Extended Medical Leave, Completion of Medical Verification Form:**
   a. This form is required when you are absent from work for more than 5 consecutive days. You can fax to 293-2644, email to MedicalManagement@mail.wvu.edu or drop off to Medical Management, One Waterfront Place.
   b. Your diagnosis, prognosis, and duration of time that you will be off work must be provided by your treating physician on this form.
   c. If authorized, you will receive a letter from Medical Management providing the dates of your medical leave. Your supervisor and EBO will receive a copy of this letter by email.
   d. A release from your physician must be provided to Medical Management **before** going back to work.

5. **Return to Work with Restrictions:** If you are released to return to work with restrictions, you are required to provide written medical information that clearly defines your restrictions. Medical Management will work with your department to determine if your position may be modified to meet your restrictions on a temporary basis. If so, a Return to Work with Modifications Agreement will be forwarded to your department for signatures. A position can be modified for a maximum of 6 months. If modifications cannot be made, a medical leave of absence will be authorized.

6. **Questions:**
   a. Medical Management – 293-HURT, Amanda.Biddle@mail.wvu.edu
   b. Environmental Health and Safety – 293-3792