

Refer to Section {B}
{Personnel}Unit
Procedure for {B 40 – Workers' Compensation}



1. The State of Kentucky Workers' Compensation Law requires immediate and formal reporting of accidents and injuries on the job.
2. The employee's primary responsibility is to inform his/her supervisor as soon as is practicable in the event of a work-related injury. Failure to properly provide notice may prevent an employee from being eligible for benefits even if they become totally disabled due to a work-related injury.
3. Employees who receive medical treatment or evaluation in the event of a work-related injury must provide a completed Physician's Release to Return to Work form to their supervisor. The form may be the attached Midway College form or the standard form provided by the medical provider.
4. It is the responsibility of the supervisor to complete an accident report form (see next page) and forward it to the director of human resources. The director of human resources will file the S.F. 1 Employer's First Report, with the college's Workers Compensation carrier. The accident report form can be secured from the human resource office. This claim form should be submitted along with bills for all medical expenses to the director of human resources.
5. It is the responsibility of the director of human resources to submit the accident report and medical bills to the workers' compensation insurance company.

(ACCIDENT REPORT FORM follows)

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ACCIDENT REPORT FORM
Midway College

Name of person injured _____

Describe how the accident occurred _____

Name of person who witnessed accident _____
(Attach witness statement of occurrence)

Cause of Accident _____

Date of accident and physical circumstances that might have contributed _____

Did person seek treatment or return to work? _____

How many days was the person off? _____

Was an ambulance called? _____

Name of treating physician _____

Did employee make statements as to whether they were all right or not? _____

Date accident was reported to supervisor? _____

Signature of supervisor _____