**Student Employee**

**Supervisor Procedures for Reporting Work-Related Injuries/Illnesses**

1. If an emergency, seek care for the injured student employee immediately.

2. If a workplace accident results in the death of a student employee, the EUP Benefits Manager must be notified immediately.

3. The following documents must be completed and returned to Human Resources Office, 2nd Floor, Reeder Hall within five (5) days of the date of injury:
   - **Student Employee** Employer’s Report of Occupational Injury or Disease (Injury Report) – See Student Employee Workplace Injury Reporting Instructions for detailed information on completing the Injury Report
   - Witness Statement – Complete a separate witness statement for each witness
   - Workers’ Compensation Employee Notification (two-page form) – Both pages must be signed by student employee

4. Provide the student employee with the following forms:
   - Memo/Panel Physicians List – Student Employees must report to the Ghering Health Center for medical evaluation and treatment. If it is determined that more extensive treatment is needed beyond the services provided by the Ghering medical staff, they must be treated by a panel provider. If they are referred to a panel physician, they must treat with the panel provider for the first 90 days of treatment.
   - Physical Capacities Checklist – The student employee should give this form to the provider to complete in the event that the treating provider recommends modified or light duty. The form should be returned to the Human Resources Office. Forms can also be faxed to (814) 732-2885. A copy will be provided to the supervisor.

5. Absence Due to Work-Related Injury/Illness
   - The Human Resources Office must be notified immediately if the student employee seeks medical attention or is absent from work due to his/her work-related injury/illness.

**Claim Number**

Claim numbers are assigned once the injury report is received and processed. The student employee must contact the Human Resources Office to receive their claim number. The claim number must be given to the provider and all medical claims and forms from the medical provider must be returned to the Human Resources Office. The Human Resources staff will then forward all related materials to Inservco, PASSHE’s third party administrator for workers’ compensation claims.

**Questions**

Questions regarding Injury Reports and Workers’ Compensation issues should be directed to the Human Resources Office, Reeder Hall, 2nd Floor, at (814) 732-2703.