HARDING UNIVERSITY WORKERS' COMPENSATION POLICY

Injured Employee's Responsibilities for Reporting On-The-Job Injuries

Failure to follow the procedures below may affect benefits under Workers' Compensation

1. Report any injury, no matter how trivial, IMMEDIATELY to your supervisor.

2. With your supervisor, complete the following forms required by Arkansas Workers' Compensation Commission law:
   
   A. Form 1 - Workers' Compensation - First Report of Injury or Illness
   B. Form N - Employee's Notice of Injury

3. Obtain a copy of form 1 (front and back), Form N, the "Injured Employee's Responsibilities" list, and the "Return to Work" instructions. READ THOROUGHLY THE INSTRUCTIONS ON ALL FORMS.

4. If the injury requires minor first aid treatment, go to the Student Health Services Nurse on duty. (Monday-Friday, 8:00 - 5:00)

5. If the injury requires a physician visit, notify the Office of Human Resources and an appointment will be made for you with one of the following physicians:

   Family Practice Associates  
   3130 East Race, Suite 100  
   Dr. Dan Davidson or Dr. David Staggs

   PrimeCare Medical Clinic  
   J.P. Wornock, M.D.

   205 East Race

   *You must continue to use this physician or, if he is unavailable, another one of Harding's Workers' Comp. Physicians for any future treatment of your injury. Otherwise, unless you are referred to another physician by one of Harding's Workers' Comp. Physicians or unless you petition the Workers' Compensation Commission and are granted a change of physician, you must see one of the above mentioned physicians. It is important to note that if you petition the Commission and are granted a change of physician that this is a one time change and it cannot be reversed. (AWCC Code 11-9-508 (d) (5) and AWCC Code 11-9-514)

   *If you do not want to be treated by one of the above initial treating physicians or the physician your initial treating physician has referred, you may consult a physician of your choice AT YOUR OWN EXPENSE. (AWCC Code 11-9-514 (b))

6. If emergency treatment is required, go to the Emergency Room at White County Medical Center.

7. If prescriptions are needed as the result of your injury, you must obtain a prescription drug card prior to or after your physician’s visit from the Office of Human Resources in order to have the prescription filled.

8. If you will be off work per the physician's orders, YOU MUST NOTIFY your supervisor AND the Office of Human Resources within 24 hours.

9. If you have any questions at any time, please call the Office of Human Resources at 279-4380.
Workers' Compensation Procedures Form

I, ________________________________, do hereby acknowledge that I have received

and read a copy of the Harding University's Workers' Compensation Procedures.

____________________________
Employee's Signature

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Date