

Injured at Work?

Report **ALL** on-the-job injuries, even minor ones

Almost!

That was a close call, lucky to be OK

- [Report a Safety Concern or Near Miss](#) to EHS

I just need a Band-Aid

Minor injury, needing supplies from First-Aid kit

- Complete [C-1 Form](#) (employee)
- Complete [Supervisor's Investigation Report](#) (supervisor)
- Employee has 90 days from the day of the injury to seek medical treatment

Secure File Transfer/Encrypt Email or Fax to UNLV RMS
workerscompforms@unlv.edu
702-895-5227



The **C-1** must be submitted **within 7 days** from the date of injury

Employee has **90 days** from the day of the injury **to seek medical treatment**



Medical Emergency

Call **University Police Services (702-895-3669 / x7911)** or go to the **nearest Emergency Room**

- Complete [C-1 Form](#) (employee)
- Complete [Supervisor's Investigation Report](#) (supervisor)
- Complete [C-4 Form](#) (treating physician)
- [Workers' Comp Witness Form](#) (witness, if applicable)

Secure File Transfer/Encrypt Email or Fax to UNLV RMS
workerscompforms@unlv.edu
702-895-5227

I need medical treatment

Visit an [approved workers' compensation provider](#) and inform them that the injury/illness happened at work

- Complete [C-1 Form](#) (employee)
- Complete [Supervisor's Investigation Report](#) (supervisor)
- Complete [C-4 Form](#) (treating medical provider)
- [Workers' Comp Witness Form](#) (witness, if applicable)

Secure File Transfer/Encrypt Email or Fax to UNLV RMS
workerscompforms@unlv.edu
702-895-5227

Exposed to other's blood/body fluids

Visit an [approved workers' compensation provider](#) and inform them that the exposure happened at work

- Complete [C-1 Form](#) (employee)
- Complete [Supervisor's Investigation Report](#) (supervisor)
- Submit [Report of Exposure to Bloodborne Pathogens](#) to EHS (supervisor)
- Complete [C-4 Form](#) (treating physician)
- [Workers' Comp Witness Form](#) (witness, if applicable)

Secure File Transfer/Encrypt Email or Fax to UNLV RMS
workerscompforms@unlv.edu
702-895-5227



Student Employee

Same as employee

- Follow employee injury/illness process



Incident Reporting

Visit **Incident Reporting** and **Environmental Health & Safety** webpages for additional information and reporting forms:
<https://www.csn.edu/csn-incident-reporting> | <https://www.csn.edu/environmental-health-safety>

If you have any questions about workers' compensation procedures, please contact **UNLV Risk Management & Safety**
702-895-5404 / 702-895-4226 | <https://www.unlv.edu/rms/insurance/workers-comp>



EH&S