

# INCIDENT REPORTING GUIDELINES (Exhibit F-1)

(Updated December 17, 2014)

**ROUTE IN THE FOLLOWING ORDER:**

SUPERVISOR  
DEPARTMENT HEAD  
ADMINISTRATIVE ASSISTANT  
HUMAN RESOURCES OFFICE

**REFERENCE:**

COC SAFETY POLICY MANUAL & PERSONNEL OPERATIONS GUIDE

## **I. EXPOSURE:**

- ☐ INCIDENT REPORT (exhibit F)
- ☐ SUPERVISORS REPORT (exhibit H)
- ☐ EXPOSURE FORM (exhibit J-1)
- ☐ WORKERS COMP 101 LONG FORM (exhibit J)

## **II. INJURY WITH NO PHYSICIAN TREATMENT (NOT INCLUDING EXPOSURE):**

- ☐ INCIDENT REPORT (exhibit F)
- ☐ SUPERVISORS REPORT (exhibit H)
- ☐ WORKERS COMP 101 LONG FORM (exhibit J)

## **III. INJURY WITH PHYSICIAN TREATMENT AND/OR TIME LOST (NOT INCLUDING VEHICLE ACCIDENT):**

- ☐ INCIDENT REPORT (exhibit F)
- ☐ COC EMPLOYEE ACCIDENT REPORT (exhibit G)
- ☐ SUPERVISORS REPORT (exhibit H)
- ☐ WORKERS COMP 101 LONG FORM (exhibit J)
- ☐ HEALTH E-SYSTEMS PRESCRIPTION FORM (exhibit J-3)
- ☐ CITY WORKERS COMP FACILITY IS NEXTCARE  
(634-8173 AT 450 S. Willard St. Suite #120)

## **IV. EQUIPMENT LOSS (NOT VEHICLE ACCIDENT RELATED):**

- ☐ INCIDENT REPORT (exhibit F)

## **V. VEHICLE ACCIDENT WITH NO INJURY:**

- ☐ INCIDENT REPORT (exhibit F)
- ☐ EMPLOYEE VEHICLE ACCIDENT REPORT (exhibit G)
- ☐ NOTICE OF CLAIM (exhibit G-1) (Revised 2/6/08) *Provide to other driver.*
- ☐ POLICE REPORT (obtain from PD)

## **VI. VEHICLE ACCIDENT WITH INJURY:**

- ☐ INCIDENT REPORT (exhibit F)
- ☐ EMPLOYEE VEHICLE ACCIDENT REPORT (exhibit G)
- ☐ NOTICE OF CLAIM (exhibit G-1) (Revised 2/6/08) *Provide to other driver.*
- ☐ SUPERVISORS REPORT (exhibit H)
- ☐ NOTICE OF WC INSURANCE (exhibit I)
- ☐ WORKERS COMP 101 LONG FORM (exhibit J)
- ☐ POLICE REPORT (obtain from PD) CITY WORKERS COMP FACILITY IS NEXTCARE (634-8173 AT 450 S. Willard St. Suite #120)