

## **WHEN AN INJURY OCCURS ON THE JOB**

1. Determine nature and extent of the injury. See that proper first aid is applied. Call 911 for serious emergencies. Notify the Cal Poly Corporation Safety Office of the injury (756-1151).
2. If medical (but not emergency) treatment is needed, accompany the injured employee to:

**Family & Industrial Medical Center- Urgent Care**  
**47 Santa Rosa Street, San Luis Obispo, CA 93401. Phone: (805) 542-9596**

**Hours: Monday-Friday: 9:00 a.m. – 9:00 p.m.**  
**Saturday & Sunday: 9:00 a.m. – 6:00 p.m.**  
**Holidays: 9:00 a.m. – 4:00 p.m., Closed Christmas Day**

Family & Industrial Medical Center is the primary treating facility for **ALL** work related injuries. In the event of an **emergency**, or injuries requiring medical attention when Family & Industrial Medical Center is closed, use:

**Sierra Vista Hospital**  
**1010 Murray Ave., San Luis Obispo, CA 93401. Phone: (805) 546-7600**

**Hours: Open 24 hours per day**

For First Aid Only claims, use:

**Cal Poly Health Center**  
**Building 27**  
**Phone: (805) 756-1211**

**Hours: Monday-Friday (excluding Wed): 8:00 a.m. – 4:30 p.m.**  
**Wednesday: 9:00 a.m. – 4:30 p.m.**  
**Closed Saturday and Sunday**

First Aid Claims are those injuries requiring one time only treatment (i.e.: simple wound cleaning or dressing) and up to one follow up visit for observation. If there is any question regarding the seriousness of an injury, take the injured employee to Family & Industrial Medical Center.

3. Be sure and let the medical facility know that this is a work related injury. The Cal Poly Corporation is self-insured through the AO-COMP Group Claims are administered through: Octagon Risk Services, PO Box 3170, Rancho Cordova, CA 95741. The phone number is (916) 851-8017.
4. Provide injured employee with Employee's Claim for Workers' Compensation Benefits, DWC Form 1. The injured employee fills out lines 1-8. The supervisor or Cal Poly Corporation representative completes lines 9-17.
5. Complete Supervisor's Injury/Illness Report and submit to the Safety Administrator within 24 hours of the injury or at the beginning of the following workday (M-F, 8:00 a.m.-5:00 p.m.) Attach completed DWC Form 1 if injured employee has received medical treatment.
6. Notify Safety Office (756-1151) when employee returns to work.
7. Request a doctor's release before permitting return to work. Be sure employee is capable of resuming work. Forward original release to work form to the Human Resources Office.