**On-the-job injury Instructions**

**for Managers and Supervisors**

If your employee has a serious or life-threatening injury, call 911 and see that the employee receives medical attention immediately, then call the Questco Claims Department at 936-521-5754.

*If the employee is hospitalized call the Safety Department 936-521-5793 as soon as possible. OSHA must be called within 24 hours of a hospitalization and within 8 hours of a fatality.*

If it is not a serious injury, provide first aid and transport employee for medical treatment, if needed. Contact the Claims Department at 936-521-5754 ANYTIME your employee is seeking medical attention. This will allow us to give the medical provider approval for treatment and the workers compensation insurance info they will request. Failure to report the injury may result in delays or possible denial of your employee’s claim.

As soon as practical complete the **Employer’s First Report of Injury** and fax to 888-756-1920 or email to [claims@questco.net](mailto:claims@questco.net)

Phone Numbers:

24 Hour Claims Reporting Line 936-756-1980

Claims Department 936-521-5754

Safety Department 936-521-5793

Questco Main Number 936-756-1980

Questco Toll Free 800-256-7823

Questco Fax 888-756-1920

*NOTE: Employees with an on-the-job injury needing medical attention may be required to submit to a post-accident drug screen.*

**Text, icon

Description automatically generated***If the employee is hospitalized call the Safety Department 936-521-5793 as soon as possible. OSHA must be called within 24 hours of hospitalization. If there is a fatality, the employer must report that to OSHA within 8 hours of notification.*

**Manager’s instructions to be posted in office**

**ATTENTION!**

**ALL EMPLOYEES MUST**

**REPORT ANY WORK RELATED**

**INJURIES IMMEDIATELY!**

Failure to report an injury by the end of your shift may result

in delays or possible denial of your claim.

Prior to leaving the premises to seek medical treatment

you are required to notify your supervisor

Provide your supervisor with all medical documentation as

soon after your appointment as possible

Notify your supervisor immediately following any work status

changes. Without this notification your wage payments may be delayed

Employees who have an on-the-job injury may be required

to submit to a post-accident drug screen

If you have questions regarding your claim please contact the

Questco Claims Department at (936) 521-5754

***IN CASE OF AN EMERGENCY PLEASE CALL 911***

**Text, icon

Description automatically generated**

Available Medical Providers

Hospital/Emergency Room

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Hospital/Emergency Room

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Med Clinic

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Med Clinic

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_