WORKER’S COMPENSATION FOR RESIDENTS
GME 3.2 Review Date: February 2016
Chapter: Insurance and Benefits

I. PURPOSE:
To delineate the process and responsibilities when an on the job injury occurs.

II. POLICY:
All residents (interns, residents and clinical fellows) are trainees of the University of Utah School of Medicine, and paid by the University of Utah. The University pays a worker’s compensation premium for them and, as such, is responsible for making sure any claims get paid. Residents are covered by this insurance regardless of which hospital or medical facility they are in when the accident occurs, if the accident happens while they are performing their duties as a trainee.

III. PROCEDURE:
A. The residents working at University Hospital should contact the Work Wellness Center or the Hospital Emergency Room (during "off" hours) for care following a needle stick or any other work-related injury. The resident must fill out the EMPLOYER’S FIRST REPORT OF INJURY FORM. This form, necessary for worker’s compensation coverage, may be obtained from the Hospital Emergency Room, the Work Wellness Center, or, online at: http://www.hr.utah.edu/forms/lib/E1.pdf. The form should be returned to the Work Wellness Center. NO CLAIMS WILL BE PAID UNLESS THIS FORM IS COMPLETED.

B. For disabling, significant or serious injuries OSHA must be notified at (801) 530-6901 within 8 hours of the occurrence.

C. Evidence that might pertain to the cause of the accident shall not be removed or destroyed until authorized by the Labor Commission or one of its Compliance Officers.

D. Residents injured outside of University Hospital while at work should seek care at the hospital or medical facility where the injury occurred. The EMPLOYER’S FIRST REPORT OF INJURY must be completed for worker’s compensation insurance. Refer to “A” on how to obtain and process form.

All hospitals should make sure that their Emergency Room Personnel are familiar with this procedure. If any problems arise, please contact The Office of Graduate Medical Education, Room 1C412, UUMC, 581-2401.
Approval body: Affiliated Hospitals Committee Graduate Medical Education Committee
Approval date: 1993

Policy Owner: Graduate Medical Education

Historical Information:
Review dates: 6/05, 7/06, 8/08, 8/08, 11/09, 9/10, 01/11
Approval dates: 8/08