

**SOMERSET COUNTY JOINT INSURANCE FUND  
NOTIFICATION PROCEDURES FOR REPORTING WORKERS COMPENSATION**

INJURED EMPLOYEE	SUPERVISOR	EMERGENCY PROCEDURES	FATALITIES, HOSPITALIZATIONS, AMPUTATIONS, & LOSS OF AN EYE																
<p><b>1. Notify Supervisor.</b></p>	<p>1. Make sure employee calls QUAL-LYNX and follows their directions. If the employee cannot call, the supervisor must assume this responsibility.</p>	<p>1. Injured employee seeks medical care at nearest emergency room.</p>	<p><b>1. Work related in-patient hospitalizations, amputations or loss of an eye, call the NJ DEPARTMENT OF LABOR @ 1-800-624-1644 within 24 hours and notify HUMAN RESOURCES.</b></p>																
<p>2. Call <b>QUAL-LYNX</b> 1-800-425-3222. Speak with Intake Nurse and report incident. Follow instructions given by intake nurse.</p> <p><u>Exception:</u> If a true emergency, employees should go directly to Somerset Medical Center, Hunterdon Medical Center or closest Emergency Room.</p> <p><b>QUAL-LYNX Hours:</b> 1-800-425-3222 You may call this number 24/7. If the office is closed (after 6pm and weekends) follow prompts to speak with "On Call Nurse", leave a message, and you'll receive a call within 10-15 minutes.</p> <table border="0"> <tr> <td><b>US HealthWorks</b></td> <td><b>Concentra</b></td> </tr> <tr> <td>Bridgewater</td> <td>S. Plainfield</td> </tr> <tr> <td>M-F 8-8 S/S 9-3</td> <td>M-F 8-5</td> </tr> <tr> <td>908.231.0777</td> <td>908.757.1424</td> </tr> <tr> <td> </td> <td></td> </tr> <tr> <td>Somerset</td> <td>Parsippany</td> </tr> <tr> <td>M-F 8-4:30</td> <td>M-F 8-8 Sa 8-5/Su 9-2</td> </tr> <tr> <td>732.748.1900</td> <td>973.882.3217</td> </tr> </table>	<b>US HealthWorks</b>	<b>Concentra</b>	Bridgewater	S. Plainfield	M-F 8-8 S/S 9-3	M-F 8-5	908.231.0777	908.757.1424	 		Somerset	Parsippany	M-F 8-4:30	M-F 8-8 Sa 8-5/Su 9-2	732.748.1900	973.882.3217	<p>2. Fill out Supervisor's report and forward to Human Resources Department along with appropriate job description for the injured employee.</p>	<p>2. A Rescue Squad must be called if an employee suffers acute conditions. By way of example but not limited to:</p> <ul style="list-style-type: none"> <li>• Chest pain</li> <li>• Difficulty breathing</li> <li>• Closed head injury and/or any head injury that includes dizziness, nausea or vomiting, loss of consciousness and/or blurred vision</li> <li>• Allergic reactions which involve any unusual swelling or rash, tingling in extremities, dizziness or shortness of breath</li> <li>• Profuse, uncontrolled bleeding</li> </ul> <p><b>DO NOT ATTEMPT TO TRANSPORT EMPLOYEES WITH THESE SYMPTOMS.</b></p>	<p><b>2. If an employee dies as a result of a work related injury call the NJ DEPARTMENT OF LABOR @ 1-800-624-1644 within 8 hours and notify HUMAN RESOURCES.</b></p>
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<p>3. Fill out employee report and forward to Human Resources.</p>	<p>3. Call Human Resources to report accident.</p>	<p>3. Supervisor notifies QUAL-LYNX of the Emergency.</p>	<p><b>3. FAILURE TO NOTIFY THE NJ DEPARTMENT OF LABOR WITHIN THE REQUIRED TIME WILL RESULT IN A FINE AND PENALTY FOR THE ENTITY.</b></p>																
<p>4. Employee must call <b>QUAL-LYNX</b> on the next business day to advise they have been seen at US HealthWorks, Concentra, etc., or Somerset Medical Center, or Hunterdon Medical Center.</p>		<p>4. Employee reports back to supervisor and follows procedures as indicated in previous columns.</p>																	

**ALL NECESSARY PAPERWORK REGARDING WORK RELATED INJURIES MUST BE COMPLETED AND SUBMITTED TO HUMAN RESOURCES WITHIN 48 HOURS OF AN ACCIDENT, WITH EXCEPTION OF A WORK RELATED FATALITY WHICH MUST BE REPORTED WITHIN 8 HOURS. ANY WORK RELATED IN-HOSPITAL ADMISSIONS, AMPUTATIONS, OR LOSSES OF THE EYE, MUST BE REPORTED WITHIN 24 HOURS.**