

Injury Reporting Protocol

Employee Injury Reporting Requirements

1. Immediately notify supervisor of accident and describe in detail the events leading up to the accident or illness.
2. On the day of the accident, submit the following completed forms to supervisor:
 - Signed copy of “[Employee Notice of Injury](#)” form.

Supervisor Injury Reporting Requirements

1. Immediately call the Employer Flexible Risk Management Department at 888-983-5881 if the employee is seeking medical attention. If employee does not want to seek medical attention, please mark at the top of the “**For Report Only**” and not send the completed forms. Regardless, please send all forms to Employer Flexible as soon as possible.
2. Complete and sign “[Supervisor Accident Analysis Report](#)” form.
3. Send the following documents (3) to the Employer Flexible Risk Management Department either via Email at risk@employerflexible.com or Fax at [281-377-7029](tel:281-377-7029).
 - [Employee Notice of Injury](#)
 - [Supervisor Accident Analysis Report](#)
4. Maintain copy of completed “[Supervisor Accident Analysis Report](#)” form to keep on file with OSHA Injury Log information.

Questions?

Please contact your Employer Flexible Risk Management Team at:

Toll Free: 888-983-5881

Houston Local: 281-377-7630

Fax: 281-377-7029

Email: risk@employerflexible.com

