Student Injury/Illness Reporting Flow Chart

Environmental Health and Safety

Injured/Ill Student Seeking Medical Attention

Did the injury/illness occur while performing work and being compensated by UofC?

Yes

No

Student's supervisor shall assess the occurrence of the student's injury/illness to determine the cause and initiate any necessary corrective actions to rectify the problem.

Student shall notify supervisor

Student shall seek medical attention at University of Chicago Occupational Medicine Group

After normal business hours, student shall seek medical attention at:

- Mitchell Emergency Room
  - 702-6250
  - 901 E. 58th Street
  - Hours: Open 24hrs

Is the injury/illness a chemical exposure, needle stick and/or a bloodborne pathogen exposure?

Yes

Make next assessment

No

Report injury/illness to Safety by completing the Student Injury/Illness Assessment Form and fax to 702-6546

A safety representative will evaluate if further investigation is necessary

Is the injury/illness a strain/sprain, fracture, laceration/cut, burn/scald, scratch/abrasion?

Yes

Did a safety issue contribute to the illness/injury or has the potential to impact others?

Yes

Continue normal Student Care Center treatment protocol

No

Continue normal Student Care Center treatment protocol

No

Student shall seek medical attention at Student Care Center

Document in Safety's Database

If assistance is needed in conducting an assessment of the injury/illness of the student, contact Safety at 702-9999

Yes

No

If the injury/illness is a chemical exposure, needle stick and/or a bloodborne pathogen exposure?

Yes

Make next assessment

No

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A safety representative will evaluate if further investigation is necessary

Is the injury/illness a strain/sprain, fracture, laceration/cut, burn/scald, scratch/abrasion?

Yes

Did a safety issue contribute to the illness/injury or has the potential to impact others?

Yes

Continue normal Student Care Center treatment protocol

No

Continue normal Student Care Center treatment protocol

Student supervisor shall send completed Form 100 to Human Resources Benefits Office located on the 3rd floor of the Bookstore

Student's supervisor shall complete a Form 100

Supervisor shall report the findings of the injury/illness assessment to Environmental Health and Safety at 702-9999

Chicago Lyric in Hospital
5815 S. Maryland Ave., Room L156
702-6765
Hours: 7:15 am - 4:30 pm M-F

Student Health Services
5841 S. Maryland Ave., Room R150
702-4156
Hours: 8:00 am - 5:00 pm M-F

Student shall seek medical attention at University of Chicago Occupational Medicine Group

Student shall seek medical attention at Student Care Center

Document in Safety's Database

Chicago Lying In Hospital
5815 S. Maryland Ave., Room L156
702-6765
Hours: 7:15 am - 4:30 pm M-F

Is the injury/illness a strain/sprain, fracture, laceration/cut, burn/scald, scratch/abrasion?

Yes

Continue normal Student Care Center treatment protocol

No

Report injury/illness to Safety by completing the Student Injury/Illness Assessment Form and fax to 702-6546

A safety representative will evaluate if further investigation is necessary

Document in Safety's Database

Did a safety issue contribute to the illness/injury or has the potential to impact others?

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Document in Safety's Database

Did the injury/illness occur while performing work and being compensated by UofC?