

IN CASE OF AN ON THE JOB INJURY

TO SEEK MEDICAL TREATMENT

WORKERS' COMPENSATION CLAIM MUST BE FILED

Process:

1. Contact Company Nurse to report an injury 1-833-686-5119 and use code STUSD.
 - Company Nurse will refer you to a District designated medical facility for treatment.
2. Report to your Supervisor in order to obtain the necessary forms to complete.
3. Forms need to be provided to the injured worker at the site level before treatment is sought. Forms are located on the Risk Management webpage: <https://www.stocktonusd.net/Page/786>
A copy of the forms goes to the injured worker and the original forms to Risk Management
 - DWC1 Claim Form: injured worker to complete the top portions numbers 1-9:
<https://www.stocktonusd.net/cms/lib/CA01902791/Centricity/Domain/321/DWC 1 Claim Form - Updated.pdf>
 - Workers' Compensation Supplement:
<https://www.stocktonusd.net/cms/lib/CA01902791/Centricity/Domain/321/Workers Comp Supplement 9-20-23.pdf>
 - Record only- does not wish to seek medical treatment:
<https://www.stocktonusd.net/cms/lib/CA01902791/Centricity/Domain/321/Workers Comp Supplement 9-20-23.pdf>
4. The injured worker must **provide Risk Management with a doctor's note PRIOR to returning to work.**
 - If there are restrictions on the medical note Risk Management, in conjunction with a supervisor, will determine whether modified work duty is available. PLEASE NOTE: It is District policy that modified work is provided whenever possible.
5. Workers' Compensation Leave (OJI) is a full day of missed work with a corresponding doctor's note taking you off of work for an approved claim. The Work Comp Administrator must also approve the claim as well as the time off of work for any missed time from work to be coded to OJI leave.

Please reach out to the Risk Management Department if you have any questions or concerns.

Stockton Unified School District
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