
ON-THE-JOB AND STUDENT INJURIES

Responding to Injuries

General guidance for immediate response actions for injuries and illnesses follows. As with all emergency scenarios, general campus guidance must be supplemented with worksite specific information and/or procedures as appropriate to capture unique needs and circumstances. This is often done at the department or unit level. The template/checklist at the end of this document may be used to assist in planning at the local level. This general guidance is not intended as a first aid guide. First aid training is available from a number of local sources, including UNL Campus Recreation, American Red Cross, and Nebraska Safety Council.

- **Near-Miss/Close Call**

A near miss is an incident where no property was damaged and no personal injury or illness sustained, but where, given a slight shift in time or position, damage and/or injury/illness easily could have occurred. It can be thought of as a "close call." EHS encourages reporting of near-miss/close call incidents so that contributing factors can be identified and abated before they result in personal injury/illness or property damage. A reporting tool is available on the EHS web site featured on the right under "Report an Accident or Near-Miss" section.

- **Minor Injuries/Illnesses**

Minor injuries are those that do not present a serious health risk and are typically recognized as sufficiently treated using standard first aid supplies and techniques (e.g., minor cuts, scrapes, burns, bruises, sprains, etc.), and generally accomplished with self-help. First aid kits are encouraged in all work locations to facilitate self-treatment. See EHS SOP, **First Aid Kits**. Even minor medical injuries should be reported as described later in this document.

- **Moderate Injuries/Illnesses**

Moderate injuries often involve initial first aid treatment, but should also include evaluation by a medical professional. These types of injuries generally do not necessitate immediate dispatch of emergency responders. However, they often do require that someone assist the injured to provide immediate first aid and transport to a medical facility for additional follow-up. Examples include: foreign objects in the eye that are not completely removed with flushing or that continue to impact vision or pain continues after flushing; third degree burns (e.g., black, white, brown or yellow skin, swelling, lack of pain because of damaged nerve endings, etc.); deep cuts that are likely to need stitches or butterfly bandages to facilitate healing; bone fractures/breaks; overexposures to chemicals; potential

exposures to bloodborne pathogens (discussed later), etc. Pre-planning will involve identifying person(s) who are trained in first aid/CPR and who are willing to provide assistance and the means for summoning their assistance; modes and means of transport of injured persons to medical facilities; communication/reporting of the incident, etc.

- **Major Injuries/Illnesses**

Major injuries should prompt immediate action to dispatch emergency responders, typically by calling “911” from the nearest telephone. When calling “911,” remain calm and stay on the line until you are told to hang up by the dispatcher. Among other things, the emergency dispatcher will ask you to describe the nature (e.g., unconscious person with bleeding observed from the nose) and location (e.g., ABC Hall, in the foyer of the main entrance) of the emergency. If others are available to provide assistance, have them wait outside/near the entrance to escort emergency responders to the victim’s location. Persons trained in First Aid/CPR may render assistance until relieved by emergency responders. Never leave a victim alone, wait until emergency responders have arrived. Examples of major medical injuries/illnesses include symptoms of heart attack or stroke, profuse bleeding, amputations, unconsciousness, extreme breathing problems, deeply impaled objects, anaphylactic reaction, hypoglycemia in diabetics, shock, and seizures. Pre-planning considerations include: identifying person(s) who are trained in First Aid/CPR and who are willing to provide assistance and the means for summoning their assistance; means of voluntary identification of personal medical conditions that could have serious complications; names and contact information for persons to notify in the event of a serious injury (department/unit personnel, EHS, other administrative bodies, and emergency contacts for the victim); location of Automatic External Defibrillators (AEDs) or other equipment/supplies; etc.

General guidance on response actions for tornados, floods, power outages, and other emergencies is available on the UNL Emergency Preparedness web site (emergency.unl.edu). General response procedures for certain emergencies that may also result in injury/illness are also addressed in the following EHS SOPs (available on the EHS web page):

- ***Spill and Exposure Response - Biohazardous Materials (including Recombinant and Synthetic Nucleic Acids)***
- ***Radioactive Material Spills***
- ***Pre-planning for and Responding to Hazardous Chemical Spills***

Medical Care Facilities

UNL employees who are injured on the job may seek medical attention from a personal physician or at a medical facility of their choice. Following is a list of some medical facilities in Lincoln, Nebraska. Use of emergency rooms should be reserved for after-hours care and severe injuries or illnesses. Injured employees should bring their employee ID card.

Facility	Address	Phone Number	Hours of Operation	Comments
Company Care	5000 N. 26 th Street, Suite 200	(402) 475-6656 (After 5 pm Mon-Fri or weekends call (402) 326-0168)	Walk in Mon-Fri 7am-5pm	Supervisor approval is not necessary for treatment. Bring employee ID Card to verify employment.
Your own physician (fill in information)				Ask your physician to submit bill to the UNL Human Resources or the State WC Claims Third Party Administrator
<i>Nearest medical emergency room (after hours or for severe injuries and illnesses)</i>				
Bryan Health East	1600 S. 48 th Street	(402) 481-1111 (800) 742-7844	Walk in 24 hours	Submits bill to State WC Claims
Bryan Health West	2300 S. 16 th Street	(402) 481-1111 (800) 742-7844	Walk in 24 hours	Submits bill to State WC Claims
CHI Health St. Elizabeth	555 S. 70 th Street	(402) 219-8000	Walk in 24 hours	Submits bill to State WC Claims

Students who are conducting work for compensation by UNL at the time of their injury/illness should seek medical assistance as described above for employees. Such injuries/illnesses should be reported as described later in this document to initiate workers compensation benefits.

Students who are not conducting work for compensation by UNL at the time of their injury/illness should seek medical treatment at the University Health Center or their own private physician. Treatment at a hospital emergency room may be warranted if the medical condition is life threatening or serious and occurs after normal clinic business hours. Hospital emergency rooms are listed in the table above.

Establishing Workers Compensation Benefit Eligibility

For all occupational injuries and illnesses, the injured employee or their supervisor must complete a **First Report of Alleged Occupational Injury or Illness** form, **Workers' Compensation Incident Report** form and a **Choice of Doctor** form. The Choice of Doctor form must be completed by the injured employee. These forms are available electronically through links on the UNL Human Resources website or the EHS website (Forms Index). Fax the completed forms as soon as possible to UNL Human Resources at 402-472-8381.

Determination of eligibility for workers compensation benefits will not occur until these forms have been completed and submitted. UNL Human Resources transmits completed forms to the State of Nebraska Worker's Compensation Third Party Administrator. Medical providers may send claims to UNL Human Resources, Attn. Workers Comp, 501 Stadium Drive, Lincoln, NE 68588-0204.

Reporting Serious Injuries/Illnesses/Deaths

Incidents involving employee or student death, hospitalization, or likely over-exposure to toxic chemicals, radioactive materials, or etiologic agents must be immediately reported to EHS. If the situation involves a student (regardless of employment status with UNL), departments/units are encouraged to also report the situation to the Vice Chancellor for Academic Affairs. Reports to EHS may be made by the supervisor, department head or chair, or a designated representative.

Reporting Student Injuries

EHS encourages reporting of student injuries and illnesses. A reporting tool is available through the EHS web site featured on the right under “Report an Accident or Near-Miss” section. Reports may also be called into the EHS office (402-472-4925), or an email sent to ehs@unl.edu.

Special Procedures for Occupational Exposure to Bloodborne Pathogens

Bloodborne pathogens mean pathogenic microorganisms that may be present in human blood and certain other body fluids (e.g., semen, vaginal secretions, cerebrospinal fluid, etc.). Examples include Human Immunodeficiency Virus (HIV), Hepatitis B (HBV), and Hepatitis C (HVC). A bloodborne pathogen exposure means that a person has been exposed to a potentially infectious body fluid of another person, usually through contact with mucus membranes or penetration of the skin with a sharp object (e.g., needle). Potential exposure routes and risk of transmission are discussed in greater detail in the web-based EHS Bloodborne Pathogen Training program (available on the EHS web site, under the “Training” tab).

- **Treatment**

If an employee (including student employees) is exposed to a bloodborne pathogen on the job, the employee must be offered medical treatment within three (3) hours of exposure. During normal working hours, the employee should seek post-exposure care at St. Elizabeth’s Company Care. After normal working hours, employees should be directed to St. Elizabeth Hospital Emergency Room. ***Do not go to any urgent care clinic or Bryan LGH East and West Emergency Rooms, because they do not provide screening services for bloodborne pathogen exposures.*** Company Care will manage all employee follow-up care, even if St. Elizabeth’s Hospital Emergency Room provided initial treatment.

- **Medications**

In some cases, the attending physician may prescribe prophylactic medication. In accordance with the Occupational Safety and Health Administration (OSHA) Bloodborne Pathogen Standard, employers are responsible for all medical consultation costs, including post-exposure evaluation and prophylactic treatment. If you are at risk of occupational exposure to a bloodborne pathogen, you are encouraged to pre-enroll in the Prescription Program for Work-Related Injuries. Contact UNL Human Resources for the appropriate form. You are also encouraged to discuss your department’s procedure for payment of prophylactic

medications with your supervisor in the event that the associated costs are not reimbursed by Worker's Compensation.

- **Student Exposures to Bloodborne Pathogens**

While not subject to OSHA's Bloodborne Pathogen Standard and Nebraska Worker's Compensation Laws, students who experience a potential bloodborne pathogen exposure are encouraged to seek immediate medical consultation, particularly if not vaccinated against Hepatitis B. Unless the potential exposure occurs while conducting work for compensation as a student employee, costs associated with medical follow-up are not eligible for Worker's Compensation benefits.

Checklist for Local Planning for Responses to Injuries

Locally developed procedures should contain all of the following:

- Name of the person(s) responsible for maintaining the content of local procedure(s).
- Location of telephones or other devices available for summoning emergency responders.
- Names and contact information for persons who are trained in first aid/CPR and generally readily available to the worksite.
- Posting locations for emergency response numbers, including outside emergency response personnel ("911"), UNL EHS (402-472-4925 or University Operator "0"), other numbers as appropriate (department contacts, first aid/CPR contacts, etc.).
- Location of first aid kit(s) and name/contact information for person(s) responsible for inspecting and maintaining the kit(s).
- Location(s) of Automatic External Defibrillator(s), if available, and name/contact information for person(s) responsible for inspecting and maintaining AED(s).
- Procedures for submitting, maintaining, and accessing emergency contact information for personnel and students.
- Description of the means and person(s) responsible for transport of an injured person to a medical facility when the nature of the injury/illness does not warrant dispatch of an ambulance but should have timely evaluation by a medical professional.

- Description of the procedure for voluntary disclosure of personal medical conditions that could result in serious complications and the manner of protecting the privacy of such information and accessing the information in the event of an emergency.
- Name of the person(s) responsible to ensure timely reporting of student injuries to EHS, and others as appropriate (e.g., Department Head/Chair, VCAA, etc.).
- Additional local information/instructions as appropriate (e.g., special considerations for remote work locations, etc.).