

**CITY OF FOND DU LAC
WORK INJURY EMPLOYEE RESPONSIBILITY FORM**

Employees are responsible to complete the **Employee Incident Report Form** and return to their immediate supervisor within 24 hours of the incident.

If initial treatment for your injury is not sought and you decide to seek treatment at a later date, you must inform your supervisor and HR prior to or within 24 hours following the appointment.

If you must seek further medical attention, you are required to inform the treating physician that we are willing to accommodate modified duty and provide them with our **Injury Management Letter** if you have not already done so.

Ensure the medical provider completes a Return to Work Form after each visit, and return the completed form to your supervisor and the HR department within 24 hours of the appointment.

YOU are responsible for knowing your restrictions and limitations and expected to be aware of them at all times. Never attempt tasks that exceed your restrictions and limitations. If a question exists regarding assigned tasks or restrictions, advise your supervisor immediately. Remember, the medical restrictions are in effect 24 hours per day. Always exercise caution in your personal time to see that the restrictions are maintained. If you have hobbies or other outside interests, consult with the treating physician on possible effects.

An employee who conducts activities which are inconsistent with medical restrictions and/or treatment patterns, whether on or off the job, is subject to disciplinary actions.

In addition, the employee must keep their supervisor and HR updated on ALL appointments and/or lost time concerning their work comp injury.

I certify that I have read, understand, and agree to the above responsibilities.

Signed

Printed

Date