



## MASON COUNTY FIRE DISTRICT #4

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TITLE: INJURY + ILLNESS REPORTING

CHAPTER: 2000 NUMBER: 2191 APPROVED: 03-11-2011

APPROVED: Signature on file Bob Burbridge, Chief

### SCOPE:

All personnel

### PURPOSE:

The purpose of this policy is to address the procedure for reporting fire district related injuries (no matter how minor) or illness. Such fire district related injuries or illnesses (“on the job”) include, but may not be limited to; an injury or illness occurring 1) on fire district property, 2) while officially representing the fire district, 3) during a training event, 4) during an operational incident, 5) exposure from an incident.

### POLICY:

If you are injured or suffer an illness or disease while “on the job”, you have an obligation to immediately report the injury or illness to your immediate supervisor. Any injury that REASONABLY could need medical attention, now or in the future, **shall** be reported even if you choose not to seek medical attention at the time of injury or exposure.

### PROCEDURE:

1. Report the injury/illness to your supervisor (should your supervisor not be available, you can report to any supervisory level of the organization).
2. Complete an Action Form as soon as possible and submit it to your supervisor. It is expected that the Form will be submitted the same or the next day of the injury or exposure.
3. If the injury or exposure needs medical attention, you must follow these steps.
  - a) Notify your supervisor or any District Officer within 24 hours of your decision to seek medical attention.
  - b) See the doctor of your choice to have the injury/illness evaluated and/or treated. Have the doctor complete a Doctor’s Report/Work Release Form and return the form to the Administrative Office.
  - c) Ask your doctor to complete the Physician’s Report of Injury.



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**NOTE:** Paid personnel utilize WA State Labor and Industries for injury and illness.

Volunteer personnel utilize WA Board for Volunteer Firefighters and Reserve Officers for injury and illness. Use their “self-insured form”. Advise your health care facility to bill Mason Fire #4.