

# How to respond to a workplace injury:

- For life-threatening medical emergencies, call **911**.
- For non-life-threatening injuries, call the **24/7 Nurse Line at (844) 581-0828** to report the incident and get your employee the right care.



STATE OF TENNESSEE  
BUREAU OF WORKERS' COMPENSATION  
220 FRENCH LANDING DRIVE  
NASHVILLE, TENNESSEE 37243-1002  
(615) 741-2395  
1-800-332-2667

## Notice of Employer Rights and Responsibilities in a Workers' Compensation Claim

Your workers' compensation insurance policy covers medical and partial wage-replacement benefits for any covered employee who sustains a compensable work-related injury or illness. This document, produced by the Tennessee Bureau of Workers' Compensation and provided by your insurance carrier or TPA, is designed to give you a better understanding of your role and responsibilities under the workers' compensation system.

Your workers' compensation adjusting entity is \_\_\_\_\_  
(Printed name of carrier, self-insured or TPA)

and your primary contact there is \_\_\_\_\_  
(Printed name, title and contact information of primary contact)

### • Notice of a work-related injury or illness

Your employees have the right to report workplace injuries or illnesses. Their violation of your company's policy regarding how quickly it must be reported is not sufficient grounds to prevent an injured worker from receiving worker's compensation benefits. Employers must refrain from denying a claim or refusing to acknowledge an employee's report of an injury because of how quickly it was reported. The insurance carrier must be notified of all alleged workplace injuries to allow the carrier to assign an adjuster to investigate the claim. If an injury is not reported within the timeframes defined in the workers' compensation act, the adjuster will take the steps it believes is appropriate to protect the employer's rights.

- Employees injured at work are entitled to receive medical treatment at no expense to them. Employers are entitled to guide treatment by providing the injured employee with a panel of at least three physicians who are willing and able to treat the injury and located within his/her community. The panel must be provided on an **Employee Choice of Physician Form C-42**, available on the "Forms" link on the Bureau's website [www.tn.gov/workerscomp](http://www.tn.gov/workerscomp). Employers must provide the panel within three (3) business days of the employee notifying his/her employer of their injury. The employee should indicate the physician selected, sign the form and return it to the employer. Failure to timely provide a valid panel of physicians may subject the employer to a penalty assessed by the Bureau.
- Employers should provide the injured employee with a copy of the **Beginner's Guide to Tennessee Workers' Compensation**, available on the Bureau's website. This document provides important basic information to the employee and answers several commonly asked questions.
- Employers should immediately notify their insurance carrier after an injury is reported. Employers should report the injury to their insurance adjuster even if the injury is unwitnessed or suspicious. The adjuster will determine the claim's compensability. Failure to immediately report the injury to the adjuster may subject an employer to a penalty assessed by the Bureau.
- Employers are allowed to request a written statement from the employee reporting the injury. Having this statement will assist the insurance adjuster if an investigation is necessary.
- Employers should immediately work to eliminate the likelihood of someone else being injured in the same manner.
- If the injured employee is disabled and unable to work his/her normal job or usual number of hours, the employee may be entitled to receive temporary disability (partial wage replacement) benefits. The insurance adjuster will need the employer to provide a wage history for the injured employee on a **Wage Statement Form C-41**, available on the Bureau's website.

- **Notice to your employees**

The Tennessee workers' compensation law requires all covered employers to display the **Posting Notice** available on the "Forms" link on the Bureau's website. This notice provides your staff with the name and title of the person designated by the employer as the primary contact to receive reports of workplace injuries and illnesses. Your workers' compensation insurance carrier should also provide you with a copy of this form when you purchase or renew your policy.

- **Best Practices to Consider Implementing**

Employers can create a positive workers' compensation culture and help build a relationship of trust and mutual aid with employees. Here are some practices that you should consider.

- If one of your employees is injured at work, reinforce his/her value to you by becoming an advocate rather than an adversary. Be a resource when injured employees have questions or concerns.
- Encourage your employees to report their injuries as soon as possible. Delays in reporting injuries negatively affect recovery.
- Let your staff know how much you rely on them and want them to return. Stay in contact with injured employees during their recovery period if they are unable to work. Call them, email them, text them—even consider sending a "Get Well" card to them. It will be one of the best investments you can make in improving your workers' compensation culture and outcomes.
- Focus your workers' compensation goals on "workers' recovery". Provide work to your injured employees that comply with a treating physician's restrictions, if possible. If an employer considers an employee as disabled, the employee will view themselves as disabled, too. And, studies prove that the longer an injured worker stays off work, the less likely they are to return to work. Work to help your injured employees return to their health and to their jobs as quickly as possible. It is good for everyone!
- Provide the employee with a copy of the signed Form C-42 and assist the employee with making the appointment with the chosen physician.
- Remember, it is the responsibility of the insurance adjuster to "accept" or "deny" a workers' compensation claim, but he/she will need your assistance. Assist the insurance adjuster in investigating any claim in which you have doubts. Obtain witness statements. Take photos of the site of the injury. Do not automatically deny your employees their rights to report a claim just because you have doubts. Failure to timely provide appropriate benefits may subject an employer to a penalty assessed by the Bureau.
- Injured employees will often have questions about their benefits, their rights and what to expect. The Bureau has an Ombudsman Program designed to assist employees with these, and other questions if they are not represented by an attorney. Ombudsmen can be reached by calling 800-332-2667 or by emailing [wc.info@tn.gov](mailto:wc.info@tn.gov). The Bureau's website has information helpful to employers and injured employees. Share these resources with your supervisors before someone is injured and with injured employees after a claim is made.
- Perform an analysis concerning how injured employees have been treated in the past. If your employees routinely hire attorneys to obtain their workers' compensation benefits, work to discover why they believe that they need legal representation. Is it a reflection of their fears that can be overcome by improving the workplace culture or is it a misconception that can be overcome by training and education?
- Create a culture of safety. Stress job safety in staff meetings and new hire orientations. Recruit a Safety Committee. Work to eliminate potential injuries before they occur.
- Consider participating in the Tennessee Drug Free Workplace Program. The program is designed to increase productivity for Tennessee employers and promote safe worksites for employees by promoting drug- and alcohol-free workplaces. There are financial benefits available to employers for participating and additional information is available on the Bureau's website.
- Lead by example. Don't complain about the process. Encourage your employees to keep you informed about any changes to their ability to work. Let them know that you want them, and will help them, to recover and return to work as quickly as possible.

Visit the Bureau's website at: [www.tn.gov/workerscomp](http://www.tn.gov/workerscomp)



**STATE OF TENNESSEE  
BUREAU OF WORKERS' COMPENSATION**

220 FRENCH LANDING DRIVE  
NASHVILLE, TENNESSEE 37243-1002  
(615) 741-2395  
(800) 332-2667

## **NOTICE OF REPORTED INJURY**

The Tennessee Bureau of Workers' Compensation has been notified you were injured on the job. **This notice does not mean that your claim has been accepted or that you are eligible to receive benefits. This only confirms that your claim has been reported by your employer to its insurance company and to the Bureau.**

Your employer should help you obtain all needed medical care related to your injury, at no cost to you, from a doctor you select from their approved list. The doctor selected becomes your authorized treating physician.

Your employer will also help you contact their workers' compensation insurance adjuster who will administer your claim and help you with your recovery. The adjuster's name and contact information are on a separate letter enclosed with this notice.

The adjuster has fifteen (15) calendar days (from the date you provided notice of your injury to your employer) to conduct an investigation and to either accept or deny your claim.

**If your claim is accepted**, you may be eligible to receive medical treatment including prescriptions, mileage reimbursement for attending appointments with your authorized treating physician and partial wage replacement benefits (also known as temporary disability benefits) as described in the enclosed "Beginner's Guide to Tennessee Workers' Compensation".

- If you are eligible for temporary total disability benefits, the first payment must be sent to you within fifteen (15) calendar days of when your disability begins (the date you are taken off work by your authorized treating physician) and then every subsequent payment must be made within the following fifteen (15) calendar days until you are allowed to return to work.
- If you are eligible for temporary partial disability benefits because your authorized treating physician allows you to continue to work but restrictions reduce the amount of money you earn, the payments must be sent as near as possible to the same schedule as your normal paychecks are paid.

**If your claim is denied**, the adjuster assigned to your claim will send you a Notice of Denial that provides the reason for the denial.

Most employers and adjusters provide all required benefits for an accepted claim, also known as "compensable" claim, without assistance from the Bureau. If you have questions about your claim, you should contact your employer and your adjuster first. If, after contacting your employer and your adjuster, you have questions or are not getting the benefits you are due, you can request assistance from the Bureau by calling (800) 332-2667. The Bureau will work with you, your employer, and your adjuster to help resolve any issues. The Bureau's role is to ensure workers' compensation claims are handled in a fair and professional manner and is available to assist you, if needed.





**ESTADO DE TENNESSEE**  
**OFICINA DE COMPENSACIÓN A TRABAJADORES**

220 FRENCH LANDING DRIVE  
NASHVILLE, TENNESSEE 37243-1002  
(615) 741-2395  
(800) 332-2667

## **AVISO DE LESIÓN INFORMADA**

Se ha informado a la Oficinal de Compensación a Trabajadores Tennessee de que usted sufrió una lesión en el trabajo. **Este aviso no significa que su reclamación ha sido aceptada o que usted es elegible para recibir beneficios. Esto es solo una confirmación de que su reclamación ha sido notificada por su empleador a su empresa de seguros y a la Oficina.**

Su empleador debe ayudarle a obtener toda la atención médica que necesite relacionada con su lesión, sin costo alguno para usted, proporcionada por un médico que usted seleccione de la lista de médicos autorizados. El médico que usted seleccione se convierte en su médico tratante autorizado.

Su empleador también le ayudará a comunicarse con el tasador del seguro de indemnización laboral quien administrará su reclamación y le ayudará en su recuperación. El nombre del tasador y su información de contacto se encuentran en una carta adjunta a este aviso.

El tasador dispone de quince (15) días calendario (a partir de la fecha en que notifique de su lesión a su empleador) para llevar a cabo una investigación y para aceptar o denegar su reclamación.

**Si su reclamación es aceptada**, podría ser elegible para recibir tratamiento médico, así como medicamentos recetados, reembolso de millaje para asistir a las citas con su médico tratante autorizado y beneficios de reemplazo parcial de su salario (también conocido como beneficios de discapacidad temporal), tal y como se describe en el folleto adjunto “Guía Informativa de Compensación a Trabajadores de Tennessee.”

- Si usted es elegible para beneficios de discapacidad absoluta temporal, el primer pago tiene que enviársele en un plazo de quince (15) días calendario a partir del comienzo de su discapacidad (la fecha en que su médico tratante le indica una licencia) y luego cada uno de los pagos subsiguientes debe realizarse cada quince (15) días calendario hasta que se le permita volver a trabajar.
- Si es elegible para beneficios de discapacidad parcial temporal porque su médico tratante autorizado le permite continuar trabajando, pero le indicó restricciones que limitan sus ingresos, los pagos tienen que ser enviados lo más cercano posible al mismo esquema en que se paga su sueldo normal.

**Si su solicitud es denegada**, el tasador asignado a su reclamación le enviará una Notificación de denegación que indica el motivo de la denegación.

La mayoría de los empleadores y tasadores proporcionan todos los beneficios requeridos para una reclamación aceptada, también conocida como reclamación “indemnizable”, sin asistencia de la Agencia. Si tiene alguna pregunta respecto a su reclamación, comuníquese con su empleador y su tasador primero. Si tras comunicarse con su empleador y su tasador, tiene alguna pregunta o no está recibiendo los beneficios que debiera recibir, puede solicitar asistencia a la Oficina llamando al (800) 332-2667. La Oficina colaborará con usted, su empleador y su tasador para ayudar a resolver cualquier problema. La función de la Oficina es asegurarse de que las reclamaciones de indemnización laboral sean atendidas de manera justa y profesional y está a su disposición para ayudarle, si fuera necesario.



# NOTICE

We are committed to a drug-free workplace

**ALL JOB APPLICANTS AND EMPLOYEES  
ARE SUBJECT TO DRUG TESTING**

**\*Illegal Use or Possession  
of**

**Drugs or Alcohol**

**May Lead to**

**Denial of Employment,**

**Termination,**

**and/or**

**Loss of Workers' Compensation Benefits!**

\*T.C.A. Section 50-9-100 et. seq.



## How the Doctor is Selected

You will select your **Authorized Treating Physician** from a panel of three doctors that your employer gives you. That physician will provide the medical care needed to help you return to your health and to your job.



Medical treatment for your work-related injury is provided at the employer's expense. Sign the panel mentioned above, known as the **Agreement between Employer/Employee Choice of Physician** (Form C-42), which should be provided to you by your employer, to indicate which doctor you select to become the authorized treating physician. If emergency treatment is required, the employer should provide the panel after the injury is stabilized.

### Keep up with your records



Request and keep a copy of your signed Form C-42 for your records. If you do not sign the form, but accept medical treatment from a doctor on the form, it may be considered that you have chosen that doctor.

## Have Questions?

Call the Ombudsman Program of the Tennessee Bureau of Workers' Compensation at **800-332-COMP (2667)** if you have any questions.

An ombudsman will assist with any questions from employees, employers and insurance companies that do not have attorney representation.



Learn more online and download forms at:  
[www.tn.gov/workerscomp](http://www.tn.gov/workerscomp)

## Keep in Touch

Stay in contact with your employer if you are taken off work by the doctor.

## Benefits that Injured Employees May Be Entitled to Receive

Employees who have suffered a compensable injury, meaning that the authorized treating physician has determined the injury to be work-related, may be entitled to receive the following:

### Medical treatment, at no cost to the employee

This treatment must be provided for as long as required by the authorized treating physician. Medical treatment recommended by the authorized treating physician that is denied by the insurance company's utilization review agent can be submitted to the Bureau's Utilization Review Program for additional review and consideration.

### Travel Expenses

Reimbursement for mileage to and from medical treatment may be requested if travel exceeds 15 miles one way.



### Temporary Disability Benefits (Wage Replacement)

Disability begins when the authorized treating physician takes you off work. Temporary disability benefits replace lost wages and are due beginning on the eighth day of the disability. If the disability lasts fourteen (14) days or longer, benefits will be paid back to the first day of disability. Temporary disability benefits are usually two-thirds of your average weekly wages earned during the 52 weeks prior to the injury. The Bureau of Workers' Compensation does not pay these benefits. Benefits are paid by your employer's insurance carrier.

If you are able to work, but your average weekly earnings are reduced because of work restrictions, you may be entitled to partial disability benefits.

If the authorized treating physician restricts your ability to work, such as limiting the number of hours worked or the type of work performed, it is very important that the physician's instructions and restrictions are followed at all times. **Failure to report for light duty offered by your employer may terminate your temporary disability benefits.**

## If Your Claim is Denied

When a claim is denied, it means your employer's workers' compensation insurance adjuster believes your injury is not compensable, meaning that your injury was not caused by the work that you perform and it is not covered by workers' compensation. If the adjuster denies your claim, you have a right to challenge the decision. If a dispute regarding compensability occurs, you may seek help resolving the dispute from the Bureau. Call an ombudsman at **(800) 332-2667**.

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## Protect Your Rights

The right to receive workers' compensation benefits does not stay open forever. To protect your rights, file a **Petition for Benefit Determination (PBD) form**. The form is available on the Bureau's website. In most cases, the deadline to file the form is one year from:

- A. The date the injury occurred; or,
  - B. The date the last temporary disability benefits were paid or medical benefits were provided for the injury, whichever is latest.
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## Can I Be Fired for Reporting a Work Injury?

It is illegal for an employer to fire an employee for reporting a work injury. If you are fired and believe it was for reporting a work injury, you may wish to consult an attorney. The Bureau of Workers' Compensation does not have authority to resolve wrongful termination claims.

Learn more and download forms from our website:  
[www.tn.gov/workerscomp](http://www.tn.gov/workerscomp)

## Frequently Asked Questions:

### **Do I have to pay for medical treatment for a compensable injury?**

No, you are not responsible for the costs of medical treatment provided by the authorized physician for a compensable claim.

### **What options do I have if I disagree with the authorized treating physician's findings or recommended medical treatment?**

The employer or insurance company is usually not required by law to offer a second opinion, but you can always ask for it anyway. You may, however, obtain a second opinion or additional medical treatment with any doctor at your own expense.

### **What if I'm not receiving the benefits I deserve?**

Call a Workers' Compensation Ombudsman at (800) 332-2667 to help you. Submitting a completed **Petition for Benefit Determination**, available on the Bureau's website, will speed up the process.

### **Will I need to use sick or vacation time while off work due to a compensable injury?**

It depends. An employee taken off work by the authorized treating physician for less than 14 days is not entitled to temporary disability benefits for the first seven (7) days missed. Review your company's policies about this unpaid time. If the authorized treating physician requires you to miss more than 14 days; however, benefits are due from the first day of disability.

### **Am I paid for the time spent attending doctor appointments during work hours?**

Not unless your company has a policy to pay for this time.

### **Which employers must provide workers' compensation coverage for their employees?**

In most industries, any employer with five or more full- or part-time employees must carry workers' compensation insurance. In the construction or mining industry however, employers must provide coverage even if there is only one employee. Construction employers may exempt themselves from the workers' compensation coverage requirements by applying for an exemption; but, all employees in construction must be covered.

Information about the Workers' Compensation Exemption Registry is available at: <http://tnbear.tn.gov/WC/Default.aspx> or by calling the Tennessee Secretary of State's office at **(615) 741-2286**.

## Cómo seleccionar el médico

Deberá seleccionar su **Médico tratante autorizado** del panel de tres doctores provisto por su empleador. Ese médico proporcionará la atención médica necesaria para ayudarlo a recuperar su salud y regresar a su trabajo.



Los tratamientos médicos para su lesión laboral son proporcionados por cuenta y costo del empleador. Firme el **Acuerdo entre el empleador /empleado Elección de Médico** (formulario C-42), el cual debe ser proporcionado por su supervisor, para indicar el doctor que ha seleccionado como su médico tratante autorizado. Si necesita tratamiento de emergencia, el supervisor debe proporcionar el panel una vez que la lesión haya sido estabilizada.

### Mantenga sus registros al día



Solicite y guarde una copia para sus registros de su formulario C-42 firmado. Si no firma el formulario, pero acepta recibir tratamiento de un médico listado en el formulario, se puede considerar que usted ha elegido a ese médico.

## ¿Tiene alguna pregunta?

Si tiene alguna pregunta, llame al Programa de Defensa de la Oficina de Compensación a Trabajadores de Tennessee al **800-332-COMP (2667)**.



Un defensor ayudará a responder las preguntas que puedan tener el empleado, el empleador o la empresa aseguradora si no cuentan con representación legal.

Obtenga más información en línea y descargue los formularios en: [www.tn.gov/workerscomp](http://www.tn.gov/workerscomp)

## Manténgase en comunicación

Manténgase en comunicación con su empleador si su médico le indica ausentarse del trabajo.

## Beneficios que los trabajadores lesionados pueden tener derecho a recibir

Los trabajadores que han sufrido una lesión indemnizable, es decir que el médico tratante autorizado ha determinado que la lesión es una lesión laboral, pueden tener derecho a recibir lo siguiente:

### Tratamiento médico, sin costo alguno para el empleado

Este tratamiento debe ser proporcionado durante el tiempo que sea necesario por el médico tratante autorizado. El tratamiento médico recomendado por el médico tratante autorizado que sea denegado por el agente de revisión del uso de recursos de la empresa aseguradora, puede ser presentado al Programa de Revisión del Uso de Recursos de la Oficina para revisión y consideración adicional.



### Gastos de viaje

Se puede solicitar reembolso por las millas que viaje para asistir a los tratamientos médicos si tiene que viajar más de 15 millas en cada dirección.

### Temporary Disability Benefits (Wage Replacement)

La discapacidad comienza cuando el médico tratante autorizado le indica ausentarse del trabajo. Los beneficios de discapacidad temporal reemplazan el salario y se comienzan a pagar a partir del octavo día de que comience la discapacidad. Si la discapacidad dura catorce (14) días o más, los beneficios serán pagados con carácter retroactivo al primer día de la discapacidad. Los beneficios de discapacidad temporal son generalmente dos tercios del salario semanal promedio recibido durante las 52 semanas previas a la lesión. La Oficina de Compensación a Trabajadores no paga estos beneficios. Los beneficios son pagados por la empresa aseguradora de su empleador.

Si usted puede trabajar, pero su promedio de ingresos semanales se ve reducido a causa de las restricciones laborales, es posible que tenga derecho a beneficios de discapacidad parcial.

Si el médico tratante autorizado restringe su capacidad para trabajar, por ejemplo, limita la cantidad de horas trabajadas o el tipo de trabajo realizado, es muy importante que cumpla en todo momento con las instrucciones y restricciones del médico. **No presentarse para realizar trabajos ligeros ofrecidos por su empleador puede causar que se cancelen sus beneficios de discapacidad temporal.**

## Si se deniega su reclamación

Cuando se deniega una reclamación, esto significa que el tasador de la empresa aseguradora de compensación a trabajadores de su empleador cree que su lesión no es indemnizable, es decir que su lesión no fue causada por el tipo de trabajo que usted realiza y no es cubierta por compensación a trabajadores. Si el tasador deniega su reclamación usted tiene derecho a apelar dicha decisión. Si hubiera alguna controversia respecto a la compensación, usted puede solicitar ayuda a la Oficina para resolver la controversia. Llame a un defensor al **(800) 332-2667**.

## Proteja sus derechos

El derecho a recibir beneficios de compensación a trabajadores no permanece disponible por tiempo indefinido. Para proteger sus derechos, presente un **formulario de Solicitud de determinación de beneficios (PBD)**. Este formulario está disponible en el sitio web de la Oficina. En la mayoría de los casos, el plazo para presentar el formulario es un año a partir de:

- A. La fecha en que ocurrió la lesión; o,
- B. La fecha que se pagaron los últimos beneficios de discapacidad temporal o se proporcionaron beneficios médicos por la lesión, lo que sucediera después.

## ¿Puedo ser despedido por informar una lesión laboral?

Es ilegal que un empleador despidiera a un empleado por informar una lesión laboral. Si usted es despedido y piensa que fue por informar una lesión laboral, quizás deba consultar a un abogado. La Oficina de Compensación a Trabajadores no tiene autoridad para resolver reclamaciones de despido injustificado.

Obtenga mayor información y descargue los formularios en nuestro sitio web:  
[www.tn.gov/workerscomp](http://www.tn.gov/workerscomp)

## Preguntas más frecuentes:

### ¿Tengo que pagar por los tratamientos médicos de una lesión indemnizable?

No. No es su responsabilidad pagar los costos de los tratamientos médicos proporcionados por el médico autorizado por una reclamación indemnizable.

### ¿Qué opciones tengo si no estoy de acuerdo con las conclusiones del médico autorizado o el tratamiento médico recomendado?

Por lo general, el empleador o la empresa aseguradora no están obligados por ley a ofrecer una segunda opinión, pero usted puede pedir una segunda opinión de todos modos. No obstante, usted puede obtener una segunda opinión o tratamiento médico adicional con cualquier médico por su propia cuenta.

### ¿Qué pasa si no recibo los beneficios que merezco?

Llame a un Defensor de Compensación a Trabajadores al (800) 332-2667 para que le ayude. Si presenta una solicitud completada **para Determinación de beneficios**, disponible en el sitio web de la Agencia, esto acelerará el proceso.

### ¿Tendré que usar mi tiempo acumulado para vacaciones o enfermedad, mientras me encuentro de licencia debido a una lesión indemnizable?

Depende. El empleado que es autorizado por el médico tratante para ausentarse del trabajo durante menos de 14 días no tiene derecho a beneficios de discapacidad temporal durante los primeros siete (7) días que se ausente. Consulte las directivas de la empresa acerca de este tiempo no remunerado. Sin embargo, si el médico tratante autorizado le obliga a perder más de 14 días de trabajo; los beneficios son pagaderos a partir del primer día de la discapacidad.

### ¿Me pagan por el tiempo que empleo para asistir a las citas médicas durante los horarios de trabajo?

No, a menos que la política de su empresa autorice para pagar este tiempo.

### ¿Qué empleadores deben proporcionar cobertura de indemnización laboral para sus empleados?

En la mayoría de las industrias, todo empleador con cinco o más empleados a horario completo o parcial tienen que contar con un seguro de compensación a trabajadores. Sin embargo, en la construcción o la industria minera, los empleadores tienen que proporcionar cobertura incluso aunque solo tengan un empleado. Los empleadores de la construcción pueden ser eximidos de los requisitos de cobertura de compensación a trabajadores mediante la solicitud de una exención, pero todos los empleados de la construcción tienen que ser cubiertos.

La información acerca del Registro de Exención de Compensación a Trabajadores está disponible en: <http://tnbear.tn.gov/WC/Default.aspx> o llamando a la oficina del Secretario de Estado de Tennessee al **(615) 741-2286**.

# TENNESSEE WORKERS' COMPENSATION INSURANCE POSTING NOTICE

## How to Report Work-Related Injuries

*What should be done if injured at work?*

### Employee

1. Immediately **report the injury** to the employer representative named below.
2. **Select a treating physician** from a panel provided by your employer.
3. If you have questions or problems, contact the employer representative or the Bureau of Workers' Compensation.

### Employer

1. Complete your company's internal "Workplace Injury form" and **notify your workers' compensation insurance company** immediately, even if you have concerns about the validity of the claim.
2. **Offer a panel of physicians** to the employee via Form C-42 available on the Bureau's website. *In cases of emergency, call an ambulance and provide this form as soon as the injured employee has stabilized.*

\_\_\_\_\_  
*Printed **name and title** of the employer representative to be notified in the event of a work-related injury*

\_\_\_\_\_  
*Printed name of an **alternative employer representative** to be notified in the event of a work-related injury*

\_\_\_\_\_  
***Telephone number** of employer representative to notify in event of a work-related injury*

\_\_\_\_\_  
***Address** of employer representative to notify in event of a work-related injury*

The Tennessee Bureau of Workers' Compensation is available to help both employees and employers.



220 French Landing Dr. 1-B  
Nashville, TN 37243-2667  
**800-332-2667**  
615-532-4812 TTD: 800-332-2257  
[tn.gov/workerscomp](http://tn.gov/workerscomp)

*Workers' Compensation law requires this notice to be posted in a conspicuous place at the work site at all times.*

# SEGURO DE COMPENSACIÓN A TRABAJADORES DE TENNESSEE

# PUBLICACIÓN DE AVISO

## Cómo informar de lesiones laborales

*¿Qué se debe hacer en caso de lesión laboral?*

### Empleado

1. **Informe** inmediatamente de **la lesión** al representante del empleador indicado aquí abajo.
2. **Seleccione un médico tratante** del panel provisto por su empleador.
3. Si tiene alguna pregunta o problema, comuníquese con el representante de empleadores de la Oficina de Compensación a Trabajadores.

### Empleador

1. Complete el formulario interno de su empresa de "Lesión laboral" y **notifique a su aseguradora de compensación a trabajadores** inmediatamente, incluso aunque tenga dudas acerca de la validez de la reclamación.
2. **Ofrezca un panel de médicos** al empleado a través del Formulario C-42, disponible en el sitio web de la Agencia. *En casos de emergencia, llame a una ambulancia y proporcione este formulario en cuanto el empleado lesionado se haya estabilizado.*

\_\_\_\_\_  
*Nombre en letra de molde y título del representante del empleador a ser notificado en caso de una lesión laboral*

\_\_\_\_\_  
*Nombre en letra de molde del representante del empleador alternativo a ser notificado en caso de una lesión laboral*

\_\_\_\_\_  
*Número de teléfono del representante del empleador a ser notificado en caso de una lesión laboral*

\_\_\_\_\_  
*Dirección del representante del empleador a ser notificado en caso de una lesión laboral*

La Oficina de Compensación a Trabajadores de Tennessee está disponible para ayudar a empleados y empleadores.



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615-532-4812 TTD: 800-332-2257  
[tn.gov/workerscomp](http://tn.gov/workerscomp)

*La ley de Compensación a Trabajadores exige que se publique este aviso en un lugar visible en el centro de trabajo en todo momento.*