

Sample Written Program

For

Medical Management

&

First Aid



Medical Management & First Aid

(COMPANY NAME)

General

Occupational health concerns receive high priority. It is essential that each location be able to adequately respond to first-aid events and resolve all other occupational health problems quickly. The health and wellness of each employee is a key segment of the overall safety environment.

OSHA Requirements

OSHA requirements for medical services and first aid are found in Standard Number 1910.151 and are listed below:

- Ensure the ready availability of medical personnel for advice and consultation on matters of plant health.
- In the absence of an infirmary, clinic, or hospital in near proximity to the workplace which is used for the treatment of all injured employees, a person or persons shall be adequately trained to render first aid.
- Where the eyes or body of any person may be exposed to injurious corrosive materials, suitable facilities for quick drenching or flushing of the eyes and body shall be provided within the work area for immediate emergency use.

Responsibilities

Management

- Ensure there is a sufficient number of qualified first-aid providers
- Provide first aid training for all supervisors
- Offer first aid training for all employees

{INSERT JOB TITLE}

- Ensure first-aid and health programs are adequate
- Maintain all required records
- Ensure First-Aid supplies are always well stocked
- Conduct First Aid Training

- Administration of all medical management programs
- Administration of the Return to Work Program
- Maintain Employee Health/Medical Files
- Provide all necessary services in a courteous and professional manner
- Conduct Physical screenings
- Maintain all clinic areas clean, neat, and well stocked.
- Follow accepted medical practices and procedures.
- Adhere to all standards of the Bloodborne Pathogen Program

Records

Treatment Records are permanent records and will be filled out for any of the following:

- All visits to the processing plant First-Aid Station w/ exception of visits for minor cuts, comfort care, etc.
- All accidents that result in any injury
- All Occupational Illnesses
- Prior to referral to any medical provider

Medical Appointment Log will be filled in when any appointment for medical treatment, evaluation, or other medical service is made for an employee.

Modified Duty Assignment forms shall be completed by **{INSERT JOB TITLE}** for any employee who has a condition that prevents them from conducting their normal duties. This form shall be used to notify management of the limitations of the employee. Management will assign tasks consistent with any limitations. Questions concerning the limitations are to be directed to **{INSERT JOB TITLE}**. **{INSERT JOB TITLE}** shall maintain a file for original forms. Copies shall be provided to the employee, the employee's Supervisor and Manager.

Confidentiality: Records of all first-aid and medical events shall be kept in each individual's medical file. All medical record information is confidential and shall not be released to third parties without written authorization by the employee involved or as authorized by law.

First Aid Kits

Well stocked First-Aid kit(s) for employee use will be maintained.

- The basic inventory of each first aid kit must be approved by the company consulting physician. This approval shall be initiated and record maintained by **{INSERT JOB TITLE}**.

- These kits will be located so as to allow easy and quick access. First-aid kits and required contents are to be maintained in a serviceable condition.
- All items which must be kept sterile must be individually wrapped and sealed. Items such as scissors, tweezers, tubes of ointments with caps, or rolls of adhesive tape, need not be individually wrapped, sealed, or disposed of after a single use or application.

Post Accident Substance Abuse Evaluations

For all accidents that result in injuries or property damage or that require off-site medical attention and/or evaluation, a DOT Drug and Alcohol screening will be conducted in accordance with procedures provided by the _____ State Worker's Compensation Program. This screening is part of the company Drug Free Workplace Program.

Minor Care

Comfort providing systems such as wraps, balms, hot-wax and other non-invasive, non-medicative procedures may be employed to provide comfort to the employee experiencing minor work related physiological stresses.

Medical Referrals

{INSERT JOB TITLE} will arrange for employees to see appropriate medical care providers for other than minor work related complaints. A *Medical Referral and Work Release Form* shall be filled in by {INSERT JOB TITLE} all medical referrals. This record shall accompany the employee to the care provider and be returned for use in determining the need for any modified duty.

Modified Duty

When an employee has been identified by proper medical authority as having a condition that would limit them in their normal job function, {INSERT JOB TITLE} shall initiate a *Modified Duty Assignment Sheet*. This sheet will list the limitations and advise management of the need for assignment to duties that will not exceed the limitations. Management will assign limited duties in writing on the *Modified Duty Assignment Sheet*. The original shall remain in a Pending & Review file, held by {INSERT JOB TITLE}, to prompt periodic monitoring of the employees condition. Copies shall be provided to the employee, the employee's supervisor and manager.

Return to Duty

When conditions have changed, such that the Employee no longer has limitations, **{INSERT JOB TITLE}** shall initiate Return To Duty actions by filling out the reverse side of the *Modified Duty Assignment* sheet. **{INSERT JOB TITLE}** shall consult with the employee's manager to provide guidance for any appropriate reconditioning program based on the Employee's normal job functions. Examples of elements that would be considered are normal job functions, length of time away from normal job, type of limitation, etc. If the limitation was caused by physiological stress factors, **{INSERT JOB TITLE}** will provided the employee information to be used to minimize the chance of reoccurrence of the same or similar stress limitation. The original form shall be filed in the employee's Medical Record and copies provided to the employee, supervisor and manager.

The information and suggestions contained in this material have been developed from sources believed to be reliable. However, Frankenmuth accepts no legal responsibility for the correctness or completeness of this material, or its application to specific factual situations.