

SOUTHERN UTE COMMUNITY ACTION PROGRAMS, INC.

To: ALL EMPLOYEES
From: TERESA CAMPBELL, HUMAN RESOURCE DIRECTOR
Subject: DESIGNATED MEDICAL PROVIDER FOR WORK-RELATED INJURIES AND ILLNESS

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All employees must obtain treatment of work-related injuries and illnesses from:

Animas Occupational Medical Clinic or La Plata Family Medicine
450 South Camino Del Rio #106 316 Sawyer Drive
Durango, CO 81301 Durango, Co 81301
Phone: (970)-385-2390 Phone: (970) 259-3110
Fax: (970) 259-6605

In the event of a life- or a limb-threatening emergency, the insured employee will be sent to the nearest emergency medical facility. The workers compensation medical provider must administer follow-up care.

In the event of a non-emergency, or after doctor's office hours injury, the employee will be sent to the Emergency Room Registration at Mercy Medical Center. Again, the designated medical provider must administer follow-up care.

If an unauthorized medical provider treats an employee, the employee will be responsible for payment of said treatment.

All employees must sign below, acknowledging this company policy.

I have read and am fully aware of this company policy regarding medical treatment for work-related injuries and illnesses.

Signature of Employee

Date

Print Employee Name

Witness

Please email this completed form to hr@sucap.org - signatures are requested during orientation.