



Der Manouel

INSURANCE GROUP

Changing the Equation

FIRST AID CLAIMS

The California Workers' Compensation system allows employers to pay for treatment provided to employees who sustain minor, "first aid" injuries.

Labor Code Section 5401 defines "first aid" as any one-time treatment of minor scratches, cuts, burns, splinters or other minor industrial injuries.

California Code of Regulations Section 9780 (f) and Section 14311 (c) define "first aid" as any one-time treatment and any follow-up visit for the purpose of observation of minor scratches, cuts, burns, splinters, etc., which do not ordinarily require medical care. Such one-time treatment and follow-up visit for the purpose of observation is considered "first aid" even though provided by a physical or registered medical professional personnel.

Examples of treatment that CAN be considered first aid:

- Non-prescription medication at non-prescription strength
- Cleaning, flushing or soaking surface wounds
- Finger guards
- Eye patches
- Tetanus immunizations
- Removal of foreign bodies from eye using irrigation or cotton swab
- Drinking fluids for relief of heat stress
- Removal of splinters or foreign material from areas other than the eye by irrigation, tweezers, cotton swabs, or other simple means
- Wound coverings, butterfly bandages, Steri-Strips
- Non-rigid means of support
- Drilling of fingernail or toenail, draining fluid from blister
- Massages
- Temporary immobilization device used to transport accident victims
- Hot or cold therapy

Examples of treatment that CANNOT be considered first aid:

- Injections (exception: tetanus shots, if the only treatment given)
- Prescription medication
- Surgical removal of foreign bodies
- Positive X-Rays
- Treatment for blood or other potentially infectious material exposure (OPIM)
- Sutures
- Temporary disability prescribed

Reporting Requirements

Because of conflicting reporting requirements with the California Workers' Compensation system, it is the recommendation of Der Manouel Insurance Group and many Workers' Compensation carriers in the state that all WC claims, including "first aid" claims, be reported to your WC Carrier. This will insure compliance with the Department of Industrial Relations and the Workers' Compensation Insurance Rating Bureau (WCIRB) reporting requirements.

Please keep in mind that a physician who provides treatment to an employee injured on the job is required to complete the Doctors First Report of Injury and file it with the WC carrier or administrator within five days of the initial examination - regardless of the severity of the injury.

The experience modification (ExMod) of a policyholder is not affected by a reported injury if no carrier payment is issued for that injury.

