

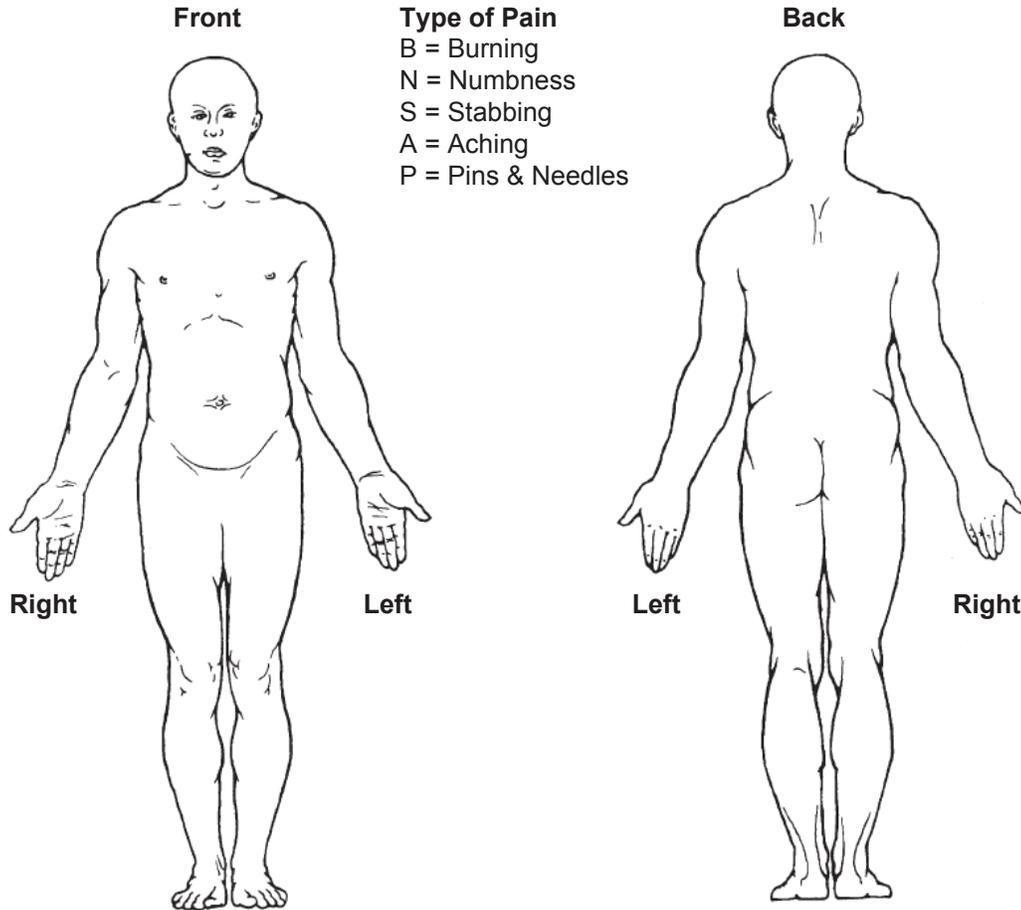


# Pain Diagram

This Pain Diagram needs to be completed and submitted with either an **Incident Report**, an **801 Form**, or both. Mail the completed originals to TRISTAR Risk Management, PO Box 23189, Tigard OR 97281. Please retain a copy for your own records.

Name: \_\_\_\_\_ Employer: \_\_\_\_\_

Please mark the area of injury or discomfort on the chart below using the appropriate symbols:



## Pain Scale

0 = No Pain

10 = Severe Pain

Check one:  0  1  2  3  4  5  6  7  8  9  10

Please use the space below to describe your condition further, if needed:

*I certify, as attested by my signature below, that all information I have given is true and contains no false statements and/or misrepresentations.*

Print Worker's Name: \_\_\_\_\_

Worker's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## A Guide for Workers Recently Hurt on the Job

### How do I file a claim?

- Notify your employer and a health care provider **of your choice** about your job-related injury or illness as soon as possible. Your employer cannot choose your health care provider for you.
- Ask your employer the name of its workers' compensation insurer.
- Complete **Form 801, "Report of Job Injury or Illness,"** available from your employer and **Form 827, "Worker's and Physician's Report for Workers' Compensation Claims,"** available from your health care provider.

### How do I get medical treatment?

- You may receive medical treatment from the health care provider **of your choice**, including:
  - Authorized nurse practitioners
  - Chiropractors
  - Medical doctors
  - Naturopaths
  - Oral surgeons
  - Osteopathic doctors
  - Physician assistants
  - Podiatrists
  - Other health care providers
- The insurance company may enroll you in a managed care organization at any time. If it does, you will receive more information about your medical treatment options.

### Are there limitations to my medical treatment?

- **Health care providers may be *limited* in how long they may treat you and whether they may authorize payments for time off work.** Check with your health care provider about any limitations that may apply.
- **If your claim is denied, you may have to pay for your medical treatment.**

### If I can't work, will I receive payments for lost wages?

- You may be unable to work due to your job-related injury or illness. In order for you to receive payments for time off work, your health care provider must send written authorization to the insurer.
- Generally, you will not be paid for the first three calendar days for time off work.
- You may be paid for lost wages for the first three calendar days if you are off work for 14 consecutive days or hospitalized overnight.
- If your claim is denied within the first 14 days, you will not be paid for any lost wages.
- Keep your employer informed about what is going on and cooperate with efforts to return you to a modified- or light-duty job.

### What if I have questions about my claim?

- The insurance company or your employer should be able to answer your questions.
- If you have questions, concerns, or complaints, you may also call any of the numbers below:

#### **Ombudsman for Injured Workers:**

#### **An advocate for injured workers**

Toll-free: 800-927-1271

E-mail: [oiw.questions@state.or.us](mailto:oiw.questions@state.or.us)

#### **Workers' Compensation Compliance Section**

Toll-free: 800-452-0288

E-mail: [workcomp.questions@state.or.us](mailto:workcomp.questions@state.or.us)

**Do I have to provide my Social Security number on Forms 801 and 827? What will it be used for?** You do not need to have an SSN to get workers' compensation benefits. If you have an SSN, and don't provide it, the Workers' Compensation Division (WCD) of the Department of Consumer and Business Services will get it from your employer, the workers' compensation insurer, or other sources. WCD may use your SSN for: quality assessment, correct identification and processing of claims, compliance, research, injured worker program administration, matching data with other state agencies to measure WCD program effectiveness, injury prevention activities, and to provide to federal agencies in the Medicare program for their use as required by federal law. The following laws authorize WCD to get your SSN: the Privacy Act of 1974, 5 USC § 552a, Section (7)(a)(2)(B); Oregon Revised Statutes chapter 656; and Oregon Administrative Rules chapter 436 (Workers' Compensation Board Administrative Order No. 4-1967).