

STATEMENT 3.2.32 – STATEMENT ON WORKPLACE INJURIES DURING CLERKSHIP
Undergraduate Medical Education

Approved by:	Clerkship & Electives Committee
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I. PURPOSE

There is always the potential for injury when participating in a clerkship placement and there are specific guidelines that must be followed in any incident.

II. DEFINITIONS:

OHSS	Occupational Health & Safety Services
WSIB	Workplace Health & Insurance Board

III. STATEMENT

1. If an injury occurs on campus, the individual should immediately contact Health Services – Workplace Health for treatment and to arrange follow up (519-661-2047, UCC Rm 25).
2. If injury occurs in an affiliated institution, the individual should immediately contact the Occupational Health & Safety Services (OHSS) office or, if after hours, the Emergency Department, for immediate first aid/treatment and to complete required paperwork (Workplace Occurrence Report). The WOR will be faxed to Health Services – Workplace Health (519-661-2016) and the Undergrad Medicine Office by the student.
3. The treatment and follow up of students who are injured as a result of their clinical placement will be provided by Health Services – Workplace Health.
4. The relevant preceptor and the OHSS office must be notified immediately for first aid, treatment and advice.
5. All workplace related injuries must be reported immediately to the Clerkship Administrator in the UME office (x 86230). A workplace injury includes exposure to communicable diseases and exposure such as puncture wounds, from the blood or body fluids of patients.

In ALL CASES, the following required documentation must be submitted to the UME office within 48 hours of the incident:

1. Immediately obtain and complete a copy of the Workplace Occurrence Report, detailing the specific injury, from the OHSS office at the hospital/institution. Be sure to get the appropriate signatures.

2. Letter of Authorization to Represent Placement Employer (Ontario Ministry of Education and Training). This form is available in *pdf* format on the Year 3 web page. The student's supervisor must sign this form.
3. Work/Education Placement Agreement/Post-Secondary (Ontario Ministry of Education and Training). This form is available in *pdf* format on the Year 3 web page. The student's supervisor, the student, and the Clerkship Administrator must sign this form.
4. Forms must be signed by both the student and the individual who was supervising at the time of the incident. The completed forms may be faxed to the Clerkship Administrator in the UME office at 519-661-4043.

The following information **must** be provided:

- Date of the incident
 - Nature of the incident
 - Location of the incident
 - Name and contact info of the supervisor (phone, email)
 - Student's social insurance number.
5. UME must forward the three completed forms to Human Resources within 3 days following an incident. It is, therefore, extremely important that all incidents are reported immediately. If a claim is made and the forms are not completed, there is a risk that the student may be billed for medical treatment received. These forms are not optional. They are a mandatory requirement to satisfy the WSIB.