



HUMAN RESOURCES DEPARTMENT

E1.2 form This form is to accompany the ill or injured employee to physician's office or emergency room along with the RMDWC2 and RMDWC2 back forms described below. The employee returns the completed form to his or her supervisor immediately upon completing treatment. These forms provide the supervisor and a Safety Officer basis to discuss the accident or illness with the employee, to determine the events and activities leading up to employee being injured or becoming ill, and to develop a plan for returning to work as soon as possible. The original forms are sent to Human Resources the same day of the accident. Attached are guidelines to help complete the new Employer's First Report of Injury or Illness.

RMDWC1 form The treating physician completes the form. The information given will determine if the employee is able to return to work immediately or has work limitations, which will require a restricted work assignment if one is available. The employee must use this form every time he or she visits the doctor.

RMDWC form This form provides authorization to the medical provider to release information about the employee's injury or the illness to NM Tech, to Risk Management Divisions, Workers' Compensation Bureau or to any other party related to the worker's compensation process. The original form is kept in the Human Resources office.

RMDWC form This form explains to the employee in reporting the alleged on-the-job injury/occupational illness.

RMDWC form This form explains to the employee Workers' Compensation benefits.

Notice of Accident Complete this form when an employee has an injury but does not receive medical attention. Send the original to Human Resources and give a copy to the employee.

WCA Approved Pharmacies An employee receiving a prescription medication due to the work related injury or illness must use one of the approved pharmacies on the attached list. No prescription charges will be paid for if prescriptions are filled at any other pharmacy.

In the event the employee is unable to complete any of the required paperwork, the supervisor should accompany the employee to the medical provider to ascertain the extent of the problem and to assure the employee that we are there to help.

The injured employee must follow the prescribed procedures for treatment and reporting in order to be eligible for benefits, under the Workers' Compensation Law. These procedures are as follows:

1. As provided by the New Mexico Worker's Compensation Law, New Mexico Institute of Mining and Technology has elected to designate the healthcare provider to treat workers injured on the job.
2. If you have an accident at work, you should notify you supervisor or department director within fifteen (15) calendar days of that accident.
3. If you do not require treatment, complete the "Notice of Accident" form. Send the original to Human Resources and give a copy to the employee.

4. If you work in Socorro, NM and need medical treatment, you need to go to:

Bhasker Medical Clinic
200 Neel Ave
Socorro, NM 87801
575-835-2940

Presbyterian Medical Group
Hwy 60
Socorro, NM 87801
575-838-4690

Socorro General Hospital
Hwy 60
Socorro, NM 87801
575-835-1140

5. If you work in Albuquerque, NM and need medical treatment, you need to go to:

Concentra
5700 Harper NE
Albuquerque, NM 87109
505-823-9166

Rehabilitation & Occupational Medicine Services
3811 Commons Ave NE
Albuquerque, NM 87109
505-823-8450

Presbyterian Occupational Medicine Clinic
5901 Harper NE
Albuquerque, NM 87109
505-823-8450

6. If you work in Playas, NM, you need to go to:

Hidalgo Medical Services
530 DeMoss St
Lordsburg, NM 88045
575-542-8384

Gila Regional Medical Center
1313 E. 32nd St
Silver City, NM 88061
575-538-4000

Please feel free to call Human Resources at 575-835-5206 or Rosa Jaramillo at 575-835-6962 if you have any questions regarding the use of these forms.