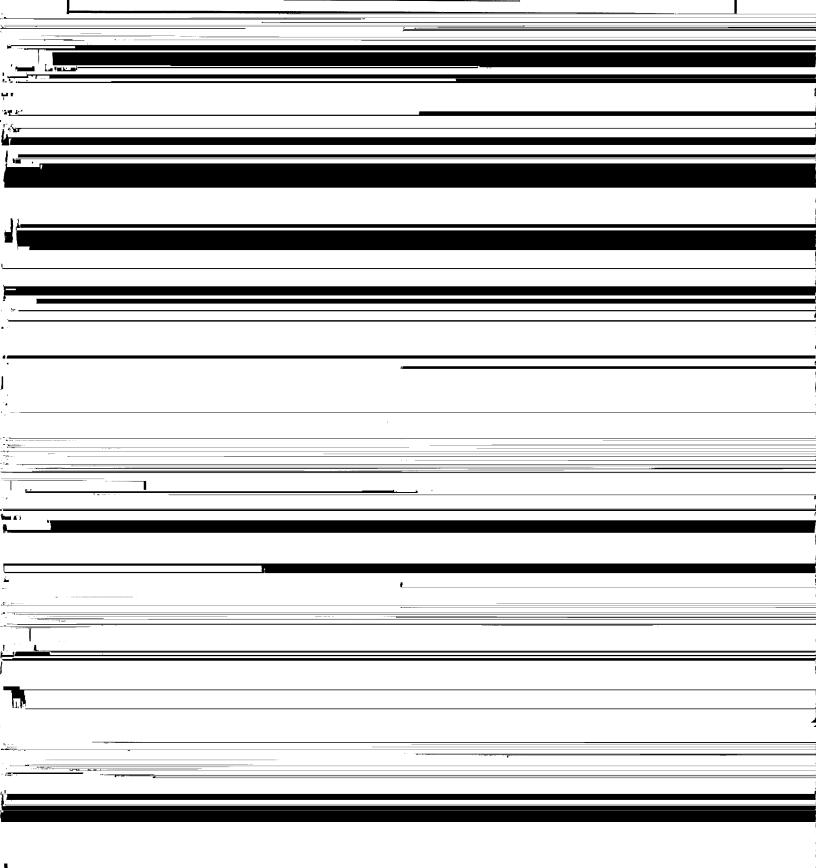
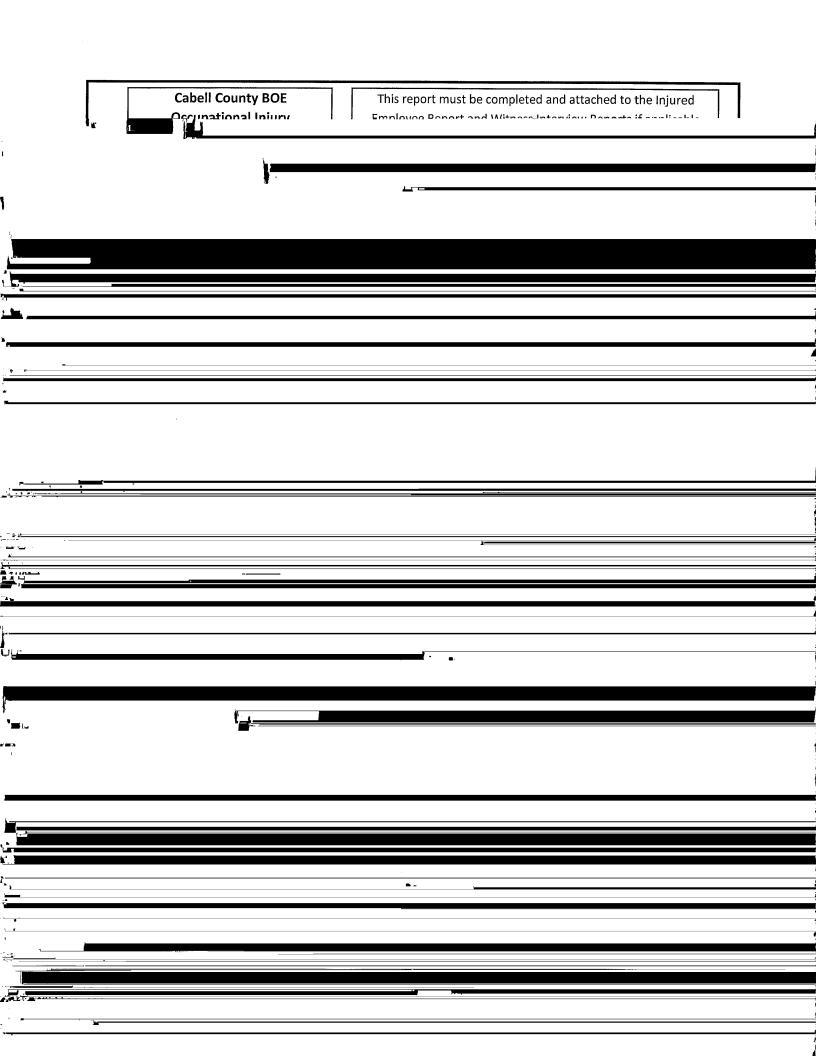
Cabell County School Employees:

	Cabell County Schools has met with the following Healthcare Providers and recommend
	that Il non amaranar treatment he cought at there facilities. There are arrows of
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3	Return to Work Policy and Light Duty Program. Walk-in patients, X-ray machines and Physical Therapy are just a few of the many services that are offered by these healthcare providers. If possible, bypassing the emergency room for non-emergency related
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Cabell County Board of Education Report of Injury <u>Employee's Description of Event</u>





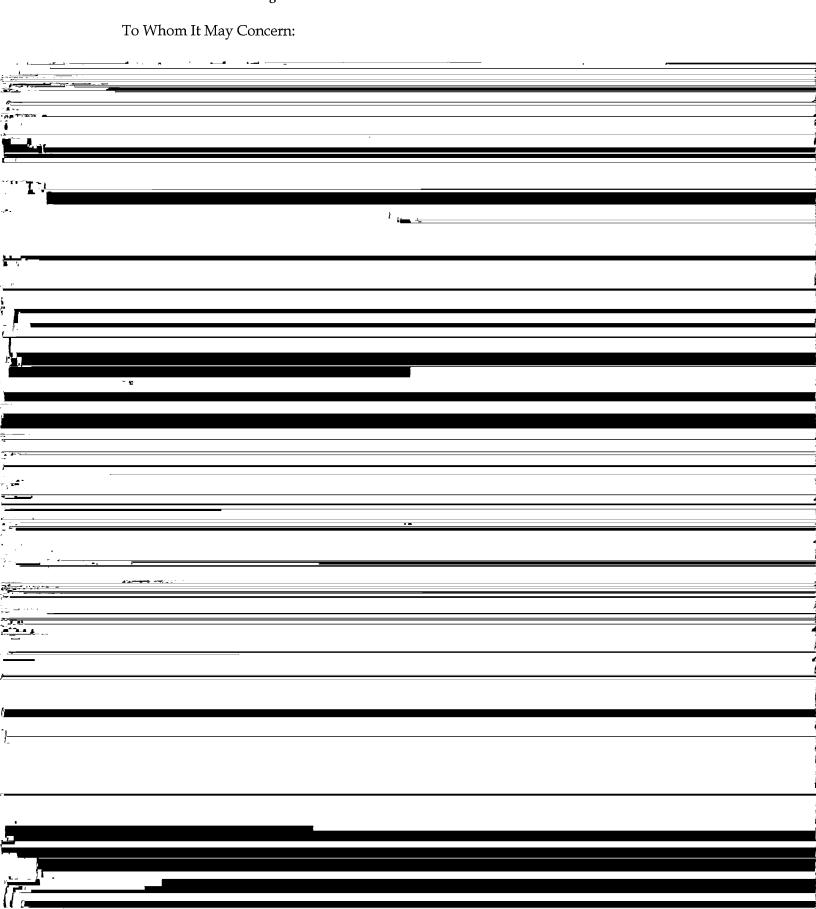
Cabell County BOE Witness Interview Statement

This report must be completed and attached to the Injured Employee Report and Supervisor Injury Reports if applicable and sent to the Safety Manager within 24 hours of accident

To Be Completed By Witness

	To Be Completed By Witness				
	No	ote: Complete a witness report for each witness interviewed.			
	1)	Name of Injured Employee:			
	2)	Date of Injury:			
	3)	Time of Injury:			
	4)	Did the individual appear to be injured? If so, how?			
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13					
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LETTER TO PHYSICIAN *Re: Return-to-Work Program*



ATTENDING PHYSICIAN'S REPORT

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1	Return completed form to Cabell BOE Risk Manager
	Patient's Name:
	Employer: Cabell County Board of Education
	Employer. Cuben County bound of Eddedholf
	D D(
	Dear Doctor:
	Please provide the following information related to this injury/illness. This will assist
	us in returning our employees to work. We have an extensive and comprehensive
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Cabell County Schools Job Function Evaluation

	Job Title:	Teacher Teacher's Aide Librarian Nurse	
	Check one:	X Current Job Alternative / Modified Job	
	Physical De	mands:	_
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Cabell County Schools Job Function Evaluation

Job Title:	Teacher Teacher's Aide		
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Check one	e Current Ich	Y Alternations / N. T. al.C.	- 1 T.1
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Physical D	emands:		
Standing		Carrying	
Sitting	Х		
Driving		Pulling	

Kneeling

Twisting

Walking

Running