



INJURED WORKER HANDOUTS

As soon as you know one of your employees may have been injured at work, please provide the following documents to the injured worker.

 **DWC Form WC-280 - Report Your Workplace Injury, Occupational Disease, or Repetitive Trauma Injury:**

This form may be used by an injured worker to provide written notice of injury.

 **DWC Form WC-303 - Claimant Authorization to Disclose Worker's Compensation Records:**

This form is used to obtain copies of the claimant's records for any past claims from the Division. Have the injured worker complete and sign this form. Then, send a copy to Omaha National when the injury is reported.

 **Consent and Authorization for Release of Information and Request for Medical History Forms:**

These forms help us to obtain the information and records needed to handle a claim and to make sure that the injured worker receives the best possible medical care. Have the injured worker sign the forms and send them to Omaha National.