



Work-Related Injury Reporting Procedure

WORKERS' COMPENSATION PANEL FOR URSINUS COLLEGE

You must select one of the licensed physicians or practitioners of the healing arts listed below to ensure that your medical treatment for your work-related injury will be paid by the college or insurance company.

<p style="text-align: center;"><u>Occupational Medicine</u></p> <p>Patient First Primary and Urgent Care 1441 S. Collegeville Rd. Collegeville, PA 19426 Phone: (484) 902-1893 • Fax: (484) 902-1894 Hours: 8am-10pm every day Obtain authorization form from HR or EHS/Risk Management</p> <p>PMMC Occupational Health 81 Robinson Street Tri-County Business Complex-CarePlex Bldg Pottstown, PA 19464 Phone: (610) 326-2300 • Fax: (610) 970-5889</p> <p>Tower Health Urgent Care 33 W. Ridge Pike Limerick, PA 19468 Phone: (610) 226-6200 Hours: Sunday, M-F – 9am-9pm, Saturday - closed</p> <p style="text-align: center;"><i>All Injuries</i></p>	<p style="text-align: center;"><u>Orthopaedic Surgery</u></p> <p>Rothman Orthopaedic Urgent Care 400 Enterprise Drive Limerick, PA 19468 Phone: 484-932-5065 Hours: M-F, 8am-4pm</p> <p>Rothman Orthopaedics 400 Enterprise Drive, 2nd Floor Limerick, PA 19468 1-800-321-9999 to schedule appointment after visit with Rothman Urgent Care Hours: M-F, 8am-4:30pm</p> <p style="text-align: center;"><i>Injuries of the joints</i></p>
<p style="text-align: center;"><u>Ophthalmology</u></p> <p>Phoenixville Eye Care Specialists 720 South Main Street Phoenixville, PA 19460 Phone: (610) 933-3498 • Fax: (610) 933-5052</p> <p style="text-align: center;"><i>Treats eye injuries</i></p>	<p style="text-align: center;"><u>Chiropractor</u></p> <p>McCormick Chiropractic 553 West Ridge Pike Royersford, PA 19468 Phone: (610) 495-0101</p>
	<p style="text-align: center;"><u>Physical Therapist</u></p> <p>NovaCare Rehabilitation To schedule an appointment: Phone: 1-800-770-6682 <i>You must have a prescription from an above panel provider.</i></p>

In the event of an emergency, please go to the nearest hospital for treatment. You must contact your employer immediately! Submit all claim information and questions to:

**SISCO
PO BOX 42737
Baltimore, MD 21284
Phone: 717-735-3048 /Fax: 410-583-5455**

IF YOUR INJURY IS ON THE WEEKEND OR AFTER HOURS (and NOT an Emergency), notify your supervisor and:

1. Complete the Injury Report Claim Form and Medical Treatment Notice located on the [Human Resources](#) or [EHS & Risk Management](#) webpage.
2. If applicable, review the above panel providers list and seek treatment with one of the panel providers. Provide the panel provider with the insurance company information listed above. Take the completed, signed forms to Human Resources (Corson 019) or EHS & Risk Management (Corson 015C) the following workday.

REPORT ALL INJURIES, NO MATTER HOW MINOR, TO YOUR SUPERVISOR.