



OCCUPATIONAL INJURY AND ILLNESS CLASSIFICATION PROCEDURE

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1. PURPOSE

The purpose of this Procedure is to provide clarification on the determination of occupational injury, occupational illness and the criteria for non-work related classifications at IGO in order for consistent reporting across our Organisation.

2. APPLICATION

This Procedure applies to all IGO sites and exploration, construction and development projects (hereafter referred to collectively as 'sites') and to all persons at an IGO site.

2.1 Injury/Illness Process Flow

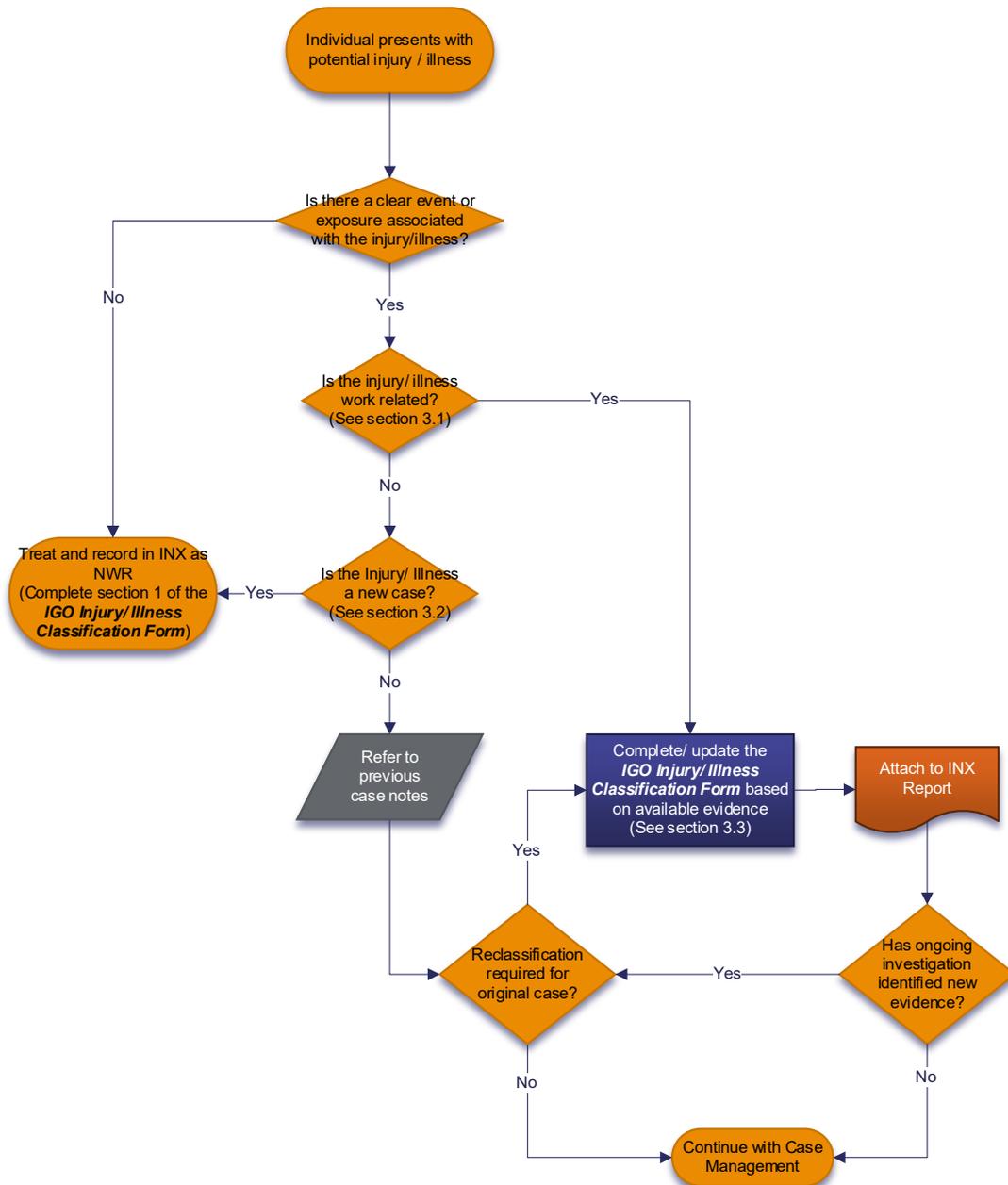


Figure 1 – Injury/ Illness Process Flow

2.2 Is the injury or illness work related?

Work related activities are those where IGO can set safety, health and environmental standards and can supervise and enforce their application.

A case is considered work related if:

- An event or exposure in the work environment (i.e. an IGO controlled site) caused or significantly contributed to an injury or illness
- An event or exposure in the work environment significantly aggravates a disclosed pre-existing condition
- It occurred at the workplace

IGO does not consider (in its statistical indicators) an injury or illness to be work related if it meets any of the exception criteria outlined in Appendix 2.

Structured guidance on the determination of a 'non- work related' is provided in Section 1 of the IGO Injury & Illness Classification Form (see Appendix 3). This should be completed for all 'non-work related' events unless an alternate process has been approved by the relevant General Manager. All non-work related injuries must be recorded as such in INX for information purposes.

Note: Mental illness will not be considered work-related unless the individual voluntarily provides the employer with an opinion from a physician or other licensed health care professional with appropriate training and experience (psychiatrist, psychologist, psychiatric nurse practitioner, etc.) stating that the employee has a mental illness that is work-related.

Note: Although an injury or illness is eligible for Workers' Compensation it does not automatically mean that it is included in IGO's statistical indicators. If there is any uncertainty to the classification being work related, refer to the IGO HSEC Manager or equivalent.

2.3 Is the injury or illness a new case (not a recurrence)?

An injury or illness is considered a new case if:

- It is the first recorded occurrence for the person for the specific injury or illness that affects the same part of the body
- Signs and symptoms experienced caused or aggravated by a workplace event or exposure (e.g. an episode of occupational asthma)
- Reoccurrence of injury/illness affecting the same part of the body, that had previously been declared fully recovered by an appropriate health/medical professional and the worker has returned to their routine job function and then presents with the same signs or symptoms

If the signs or symptoms of an occupational injury or illness may recur or continue in the absence of an exposure in the workplace, then the case is considered a 'reoccurrence' and is only be recorded once (e.g. occupational cancer, silicosis, byssinosis and asbestosis).

If multiple personnel are involved in a work related event or exposure, each person is considered a separate case.

2.4 Classification

The treatment provided will govern the classification for reporting and not who provided the treatment.



IGO has adopted the principles from the International Council on Mining and Metals and OSHA's record keeping rules as guidance for determining work-relatedness and the classification of injuries and illness. For more information on OSHA recordkeeping rules refer to <https://www.osha.gov/recordkeeping/entryfaq.html>.

It is required that in the absence of an alternate process approved by the General Manager, that the IGO Injury & Illness Classification Form (see Appendix 3) is used to determine injury or illness classifications. The form should be utilised for the following classifications and saved with the Incident Event in INX:

- When a workplace event is deemed to be 'non-work related' (see section 2.2)
- Occupational Illness classifications (see section 2.4.1)
- For all recordable injury or illness cases (work related MTI, RWI, LTI, and Fatality), see sections 2.4.2 - 2.4.66.

2.4.1 Occupational Injury or Illness

An occupational injury or illness is an abnormal condition or disorder whose cause is attributed to exposure factors associated with employment. Injuries include cases such as, but not limited to, a cut, fracture, sprain, or amputation. Illness includes both acute and chronic illnesses, such as, but not limited to, a skin disease, respiratory disorder, or poisoning

2.4.2 Fatality

Loss of life caused by a work related accident. For statistical purposes, IGO records fatalities as an LTI with the equivalent of 220 days lost time (adopted from **AS 1885.1-1990: National Standard for workplace injury and disease recording**).

2.4.3 Lost Time Injury/ Illness (LTI)

An injury or illness that results in the employee or contractor being unable to attend work on the next calendar day after the day of the injury, or any day subsequent to that as a consequence of the injury or illness. If a suitably qualified physician or other licensed health care professional advises that the injured person is unable to attend work on the next calendar day after the injury, regardless of the injured person's next rostered shift, a Lost Time Injury (LTI) is deemed to have occurred.

LTI classifications considerations:

- Time spent travelling to/from medical evaluation and for evaluation/diagnosis does not of itself create an LTI but is included in days lost if the medical evaluation determines the person is unable to attend work the following day
- If differing opinions are provided by two (2) or more health professionals, choose the most authoritative diagnosis (e.g. Occupational Physician should have more authority in functional assessment than a General Practitioner)
- If a physician or other licensed health care professional recommend days away, but the person came to work anyway, it is still classified an LTI

2.4.4 Restricted Work Injury/Illness (RWI)

A Restricted Work Injury/ Illness (RWI) is a work-related injury that results in the injured person being unable to perform one or more of their routine functions for a full working day or more due to restrictions directed and certified by advice from a physician or licensed health care professional (including site nurses). Routine functions are those work activities the person regularly performs at least once per week.

An RWI is not incurred for:

- “Voluntary” restrictions are imposed by the Supervisor or Area Manager
- Reduction in efficiency/productivity
- When there are no medically required restriction, but the person is placed on “precautionary duties” (see section 2.4.4.1)

2.4.4.1 Precautionary Duties

Precautionary duties may be assigned by a licensed health care professional (including site nurses) to an injured person who has been assessed ‘fit for the role’ (assessed against the position description), but would benefit from additional recovery time (to return to 100% capacity). The decision and basis for the licensed health care professional assigning the precautionary duties must be recorded on the **IGO Injury & Illness Classification Form**.

Precautionary duties:

- Can be no longer than four days (96 hours)
- An initial fit for role assessment must be conducted and subsequent regular health reviews (every 24 hours) must occur during the 4 days documenting any improvement to the injury and capability during that time
- If an individual is not considered fit at the end of 4 days, a medical review with a physician must be organised
 - Should medical restrictions be required, these should be dated back to the day after injury or illness

2.4.5 Medical Treatment Injury/ Illness

An injury or illness that either requires treatment by or under the specific order of, a physician or could be considered as being one that would normally be treated by a physician. Medical treatment does not include visits to a physician or other licensed health care professional solely for observation, counselling, diagnostic procedures or first aid

MTIs include:

- Insertion of sutures, and/or the use of glue where it is used in lieu of sutures (i.e. used for wound adhesion rather than cosmetic purposes or to maintain the cleanliness of the wound)
- Treatment of fractures or other internal injuries
- Treatment of bruises by drainage of blood
- Treatment of second or third-degree burns
- Surgical debridement
- Treatment of infection (other than the application of non-prescribed topical medications or antibiotics prescribed only for precautionary purposes)
- Removal of foreign bodies embedded in the eye, or requiring removal from the eye by means other than irrigation or removal with cotton swab
- Removal of foreign bodies from a wound (other than the eyes) by means other than irrigation, tweezers, cotton swabs or other simple means
- Use of prescription-only medications (except a single dose administered on the first visit for minor injury or discomfort, or medications used for solely for diagnostic purposes)
- Any work injury that results in a loss of consciousness

The following, by themselves, do not constitute MTIs:

- Visits to physicians or other licensed health care professional solely for observation or counselling
- The conduct of diagnostic procedures, such as X-rays and blood tests, including the administration of prescription medications used solely for diagnostic purposes (e.g. eye drops to dilate pupils etc.)
- Visits to physicians or other licensed health care professionals solely for therapy as a preventative measure (e.g. physiotherapy or massage as a preventative therapy, tetanus or flu shots)
- Placement of wound adhesive glue only for the maintenance of cleanliness or cosmetic purposes

2.4.6 Additional Recordable Cases

2.4.6.1 Foodborne illness

Where 2 or more members of the workforce are made ill by ingesting food contaminated by workplace contaminants (such as lead) or gets food poisoning from the same food service or same food product supplied by the employer, the case would be considered work-related.

2.4.6.2 Needlestick and Sharps Injuries

All work-related needlestick injuries and cuts from sharp objects that are contaminated with another person's blood or other potentially infectious material must be recorded.

Splash or exposure to blood or other potentially infectious material without being cut or scratched should be reported if a person receives medical treatment as a result of the incident (e.g. HIV, Hepatitis B or Hepatitis C) or develops a blood borne or infections transmittable disease.

2.4.6.3 Significant Progressive Disease

There are some significant progressive diseases, such as byssinosis, silicosis, and some types of cancer, for which medical treatment or work restrictions may not be recommended at the time of diagnosis but are likely to be recommended as the disease progresses. Where evidence determines the case to be work related it will be recordable.

2.4.6.4 Vector Born/ or Other Diseases

Where a workforce member is exposed to vector born or other diseases (e.g. Tuberculosis, Malaria, Legionnaires, Measles etc.) and subsequently develops an infection, all efforts must be made to track and trend such occurrences. An investigation is to be conducted by an appropriate medical/ health professional to determine the level of severity, workplace contribution and diagnosis. Where evidence determines the case arose out of the conduct of the business or undertaking, it will be considered work related and is recordable.

2.4.6.5 Noise Induced Hearing Loss

The definition for Noise Induced Hearing Loss (NIHL) has been adopted from OSHA 1910.95 Occupational noise exposure standard (refer to <https://www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.95>). Refer to Figure 2 for the determination of a recordable case.

If the employee has previously experienced a recordable hearing loss, the current audiogram is compared with the employee's revised baseline audiogram (i.e. the audiogram reflecting the employee's previous recordable hearing loss case). If an STS occurs in only one ear, only the revised baseline audiogram for that ear may be utilised.

An audiogram may be adjusted for presbycusis (aging) as set out in OSHA section 1910.95 (<https://www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.95>)

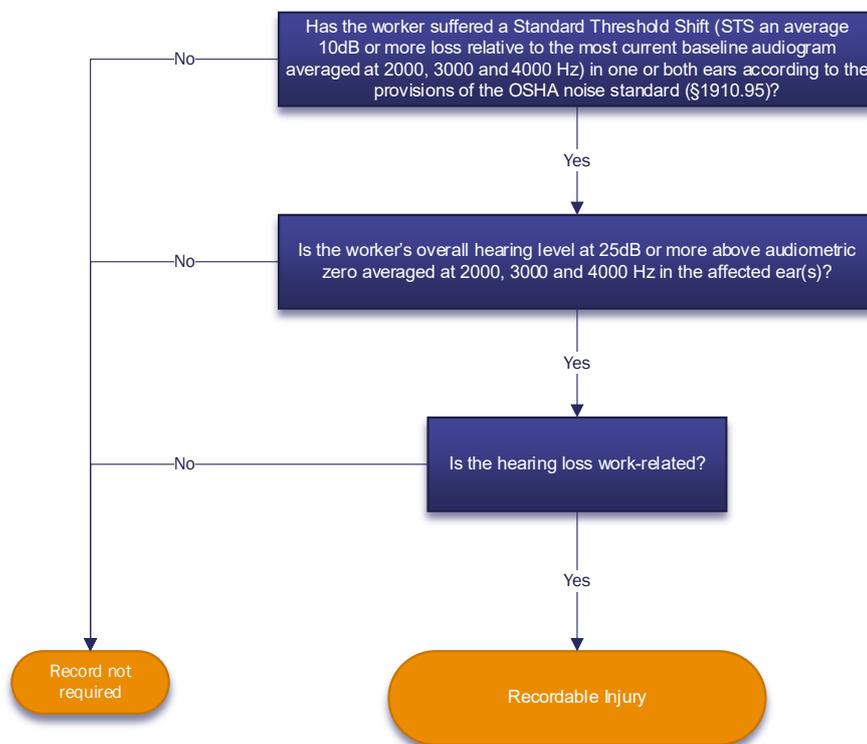


Figure 2 – Decision Tree – Noise Induced Hearing Loss

3. REPORTING

3.1 Days Calculated for Reporting/ Lost Days

Days lost and days on alternative duties (excluding days on precautionary duties; see section 2.4.4.1) are calculated by the number of days the individual was rostered to work but was unable to perform their routine duties (or job modification or job transfer is made permanent)

The reportable days should not include any R&R, Annual leave or any other Non-Injury related leave. For example, if an individual is rostered to work 20 days out of a 30 day calendar month, only the lost or restricted shifts are reported in SRS to DMIRS.

Time spent travelling to/from medical evaluation and for evaluation/diagnosis does not of itself create a lost time injury but is included in days lost if the injury becomes classified as an LTI and RWI.

Time lost solely as a result of an injury occurring in a remote location does not justify an injury that would have been an MTI or minor injury in other circumstances being reclassified as an LTI.

IGO's maximum days for counting is 220 days in total (based on **AS 1885.1-1990: National Standard for workplace injury and disease recording**).



Where a Contractor's employee is demobilised from an IGO workplace and it is no longer feasible to collect this information, the case can be closed by the General Manager or their nominated delegate.

3.2 Late Reporting

When an injury or illness case is reported late (i.e. not within 24 hours of symptom onset or the incident event) the following must be determined for the classification:

- Is the onset of symptoms or injury/illness linked to an event or exposure in the work environment (i.e. work related or NWR)?
- Has the inability to provide early intervention caused symptoms to increase thereby causing an escalation in severity?

Where there is clear evidence that early reporting potentially could have reduced the severity or the case is not work related, the General Manager or their nominated delegate may reconsider the injury classification for IGO's statistical reporting (see section 3.3). Justification for this determination should be recorded on the **IGO Injury & Illness Classification Form** (see Appendix 3).

3.3 Final Accountability for Injury/ Illness Classification

The final accountability for a decision regarding injury classification rests with the General Manager of the site (or their equivalent). It is expected that this accountability will be delegated to the HSEC Manager for all recordable injuries and SPIs. It is strongly advised that this day-to-day responsibility is with one (1) person only to ensure consistency in injury classification.

If there is any debate regarding the classification, the issue should then be referred to the Head of HSEQ & Risk.

4. PRECONDITIONS TO RETURNING TO WORK

Personnel who have a non-work related condition or illness that precludes them from completing their normal duties are responsible for notifying their Supervisor and obtaining approval from the IGO Department Manager prior to returning to an IGO workplace. This is to ensure IGO is able to accommodate duty restrictions and/or support ongoing medical needs.

Where a person is deemed unfit for work, IGO reserves the right to have the individual removed from the IGO work site (having taken reasonable steps to facilitate this). IGO reserves the right to stand-down a worker (on normal pay) or require that they complete alternate duties until they provide adequate proof of their fitness for work. For more information refer to refer to **IGO GSS 3 – Occupational Health and Wellbeing**.

APPENDIX 1: FIRST AID INJURY/ ILLNESS

An injury/ illness that can be managed by first-aid treatment only. First-aid is defined as treatment that falls within the scope of recognised first-aid protocols, regardless of who administers the treatment. First-aid treatment means:

- Visit(s) to a health care provider for the sole purpose of observation or diagnosis
- Diagnostic procedures, including x-rays or the use of prescription medications solely for diagnostic purposes
- Use of non-prescription medications including antiseptics, and administration of a single dose of prescription medication on the first visit for a minor injury or discomfort
- Simple administration of oxygen
- Administration of tetanus/diphtheria shot(s) or booster(s)
- Cleaning, flushing or soaking wounds on the skin surface
- Use of wound coverings such as bandages, gauze pads, etc.
- Use of hot and cold therapy e.g. compresses, soaking, whirlpools, non-prescription creams/lotions for local relief except for musculoskeletal disorders
- Use of any elastic bandages and other common first aid kit equipment
- Drilling of a nail to relieve pressure for subungual hematoma
- Use of eye patches
- Removal of foreign bodies embedded in the eye if only irrigation or removal with cotton swab is required
- Removal of splinters or foreign material from areas other than the eyes by irrigation, tweezers, cotton swabs or other simple means
- The administering of antibiotics as a precautionary measure where no infection is present
- Use of temporary immobilising instruments when moving a patient (i.e. neck brace, etc.)
- Ingestion of oral liquids to relieve heat stress

APPENDIX 2: NON-WORK RELATED CRITERIA

An injury or illness is not generally to be considered as work related if:

- Occurred during travel to and from the normal place of work (commuting)
- The injury or illness occurs outside working hours and they are not associated with deficiencies in equipment or management controls for which the reporting company is responsible
- At the time of the injury or illness, the employee was present in the work environment as a member of the general public rather than as an employee
- The injury or illness involves signs or symptoms that surface at work but result solely from a non-work-related event or exposure that occurs outside the work environment
- The injury or illness results solely from voluntary participation in a wellness program or in a medical, fitness, or recreational activity such as blood donation, physical examination, flu shot, exercise class, or sport. (Activities/examinations required by the company or by legal regulations are not included in this exemption)
- The injury or illness is solely the result of an employee eating, drinking, or preparing food or drink for personal consumption (whether bought on the employer's premises or brought in). For example, if the employee is injured by choking on a sandwich while in the work environment, the case would not be considered work related. Note: If the employee is made ill by ingesting food contaminated by workplace contaminants (such as lead), or gets food poisoning from food supplied by the employer, the case would be considered work related
- The injury or illness is solely the result of an employee doing personal tasks (unrelated to their employment) at the workplace outside of the employee's assigned working hours
- The injury or illness is solely the result of personal grooming, self-medication for a non-work-related condition, or is intentionally self-inflicted
- The illness is the common cold or flu. However, in the case of other infectious diseases such as tuberculosis, brucellosis, and hepatitis C, employers must evaluate reports of such illnesses just as they would any other type of injury or illness
- There is not a clear connection to a specific work activity or work environment
- The workplace or work task did not cause, contribute to or significantly aggravate the injury or occupational illness
- The outcome is inconsistent with the reported event

If an injury is determined to be an aggravation of a previous undisclosed non-work related injury then IGO will not record the event as a work related injury,



APPENDIX 3: IGO INJURY & ILLNESS CLASSIFICATION FORM

Injury & Illness Classification Form

This form is utilised to classify injuries and illness for IGO statistical reporting. This form is not relevant to Workers Compensation Claims.

Injured/ill's Name:	INX Event #:		
Date of Event:	Date Reported:		
Employer:	Form completed by:		
CLASSIFICATION <i>this section is to be filled following the completion of the remainder of this Form</i>			
<input type="checkbox"/> Non-work related Note (1) <i>Section 1 must be completed</i>	<input type="checkbox"/> Work related <input type="checkbox"/> Injury <input type="checkbox"/> Occupational Illness		
<input type="checkbox"/> Injury <input type="checkbox"/> Occupational Illness Note (2) <i>Section 3 must be completed</i>	<input type="checkbox"/> No Treatment Injury - identified health concern/ report only <input type="checkbox"/> FAI <input type="checkbox"/> MTI <input type="checkbox"/> RWI <input type="checkbox"/> LTI Note (3) <i>Complete Section 4-7, as applicable</i>		
Was the injury/illness previously managed via the pre-cautionary duties process?	<input type="checkbox"/> Yes <input type="checkbox"/> No Date Fit for Role assessment conducted: Click or tap to enter a date. Reason for Pre-cautionary duties: Precautionary duties commenced: Click or tap to enter a date. Outcomes of 24hrly reviews completed: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> 24hrs <input type="checkbox"/> 48hrs <input type="checkbox"/> 72hrs <input type="checkbox"/> 96hrs Precautionary duties ceased: Click or tap to enter a date. Reclassification: <input type="checkbox"/> MTI <input type="checkbox"/> RWI <input type="checkbox"/> LTI <input type="checkbox"/> SI <input type="checkbox"/> PDI		
Summarise an explanation/justification supporting any tick in the 'YES' column within sections 1 to 7 of this Form or Re-Classification i.e. information /evidence to support the classification.			
Approval	Name	Signature	Date
Department Manager			Click or tap to enter a date.
Manager - HSE			Click or tap to enter a date.

The completion of Section 1 is only required when an injury or illness is deemed to be Not- Work Related. If it is determined Work Related, continue to Section 2.

1. IS THE INJURY/ ILLNESS NOT WORK RELATED? <i>Any tick in the 'YES' column means it is Not-Work Related and the remainder of this document does not need to be completed.</i>		
Questions	YES	NO
1. Occurred during travel to and from the normal place of work (commuting)?	<input type="checkbox"/>	<input type="checkbox"/>
2. Occurred outside working hours and is not associated with deficiencies in equipment or management controls for which the reporting Company is responsible?	<input type="checkbox"/>	<input type="checkbox"/>
3. At the time of the injury or illness, the employee/contractor was present in the work environment as a member of the general public rather than as an employee/contractor?	<input type="checkbox"/>	<input type="checkbox"/>
4. Involves signs or symptoms that surface at work but result solely from a non-work-related event or exposure that occurred outside the work environment?	<input type="checkbox"/>	<input type="checkbox"/>
5. Results solely from voluntary participation in a wellness program or in a medical, fitness, or recreational activity such as blood donation, physical examination, flu shot, exercise class, or sport?	<input type="checkbox"/>	<input type="checkbox"/>
Note (4) Activities/examinations required by the Company or by legal regulations are work related		

6. Is solely the result of an employee/contractor eating, drinking, or preparing food or drink for personal consumption (whether purchased on the Company's premises or brought in). E.g., if the employee/contractor is injured by choking on a sandwich while in the work environment, the case would not be considered work related.	<input type="checkbox"/>	<input type="checkbox"/>
Note (5) If the employee/contractor is made ill by ingesting food contaminated by workplace contaminants (such as lead) or gets food poisoning from food supplied by the Company, the case would be considered work related		
7. Is solely the result of an employee/contractor doing personal tasks (unrelated to their employment) at the work environment, outside of the employee's/contractor's assigned working hours	<input type="checkbox"/>	<input type="checkbox"/>
8. Is solely the result of personal grooming, self-medication for a non-work-related condition, or is intentionally self-inflicted?	<input type="checkbox"/>	<input type="checkbox"/>
9. The illness is the common cold or flu?		
Note (6) However, in the case of other infectious diseases such as tuberculosis, brucellosis, and hepatitis C, employers must evaluate reports of such illnesses just as they would any other type of injury or illness		
10. There is not a clear connection to a specific work activity or work environment	<input type="checkbox"/>	<input type="checkbox"/>
11. The workplace or work task did not cause, contribute to, or significantly aggravate the injury or occupational illness?	<input type="checkbox"/>	<input type="checkbox"/>
12. The outcome is inconsistent with the reported event?	<input type="checkbox"/>	<input type="checkbox"/>
13. Is the condition a mental illness?		
Note (7) Will not be considered work related unless the person voluntarily provides the Employer with a diagnosis caused by post-traumatic stress event at work or medical opinion that the work		

2. IS THE INJURY / ILLNESS A NEW CASE (NOT RECURRENCE)? Any tick in the "YES" column means it is a new case, continues to Section 3. If not a new case, re-open the original event and update the severity as required

Questions	YES	NO
1. Is this the first recorded occurrence for the employee/contractor for the specific injury or illness affecting the same part of the body?	<input type="checkbox"/>	<input type="checkbox"/>
2. Was the injury or illness caused by a workplace event or exposure?	<input type="checkbox"/>	<input type="checkbox"/>
3. Has the injured employee/contractor received medical treatment, been on restricted or lost workdays or experienced signs or symptoms from a previous incident but fully recovered (i.e. all signs/symptoms disappeared) and a new event or exposure in the work environment caused the signs or symptoms to reappear?	<input type="checkbox"/>	<input type="checkbox"/>

3. IS THE CASE AN INJURY OR OCCUPATIONAL ILLNESS?

Injury		Occupational Illness			
A tick in the "YES" column for BOTH questions means it is an Injury – continue to Section 4.		Any tick in the "YES" means it is an Occupational Illness - continue to Section 4.			
Questions	YES	NO	Questions	YES	NO
1. A wound or other condition of the body caused by external force including stress or strain?	<input type="checkbox"/>	<input type="checkbox"/>	1. Is there physiological harm or loss of capacity produced by systematic infection, continued or repeated stress or strain, exposure to toxins poisons, fume etc.?	<input type="checkbox"/>	<input type="checkbox"/>
2. Is identifiable as to time and place of occurrence and part or function of the body affected and is caused by a specific event or incident or series of incidents within a single day or work shift?	<input type="checkbox"/>	<input type="checkbox"/>	2. Other continued and repeated exposure to conditions of the work environment over a period of time?	<input type="checkbox"/>	<input type="checkbox"/>
E.g. of injuries include but are not limited to: Cuts, fractures, acute sprains and strains, bruises, amputations, contusions, burns, dislocations, concussion.			E.g. of occupational illness include (but are not limited to) acute or chronic conditions such as skin disease, hernia, respiratory disorders, systematic poisoning, NIHL, heat stroke, musculoskeletal disorders caused by reportative exposure.		

4. IS IT A LOST TIME INJURY/ ILLNESS (LTI)? Any tick in the "YES" column means it is an LTI		
Questions	YES	NO
1. Was the injured/ill person unable to attend work on the next calendar day or any subsequent shift following the event?	<input type="checkbox"/>	<input type="checkbox"/>
2. Did a physician or other licensed health care professional recommend days away, but the person came to work anyway?	<input type="checkbox"/>	<input type="checkbox"/>
Note (8) If differing opinions are provided by 2 or more health professionals, choose the most authoritative diagnosis (e.g. Occupational Physician should have more authority in functional assessment than a General Practitioner).		
Note (9) Time spent travelling to/from medical evaluation and for evaluation/diagnosis does not of itself create an LTI but is included in days lost if the medical evaluation determines the person is unable to attend work the following day.		

5. IS IT A RESTRICTED WORK INJURY/ ILLNESS (RWI)? Any tick in the "YES" column means it is an RWI and the remainder of this document does not need to be completed.		
Questions	YES	NO
1. Is unable to perform one or more of the worker's routine functions for a full working day or more due to restrictions directed and certified by advice from a physician or licensed health care professional (including site nurses)?	<input type="checkbox"/>	<input type="checkbox"/>
2. Are restrictions required outside the precautionary duties period of 96 hours (4 days) where the worker remains unable to perform one or more of the routine functions of the worker's job as indicated by a medical certificate?	<input type="checkbox"/>	<input type="checkbox"/>
Note (10) If a person is able to perform all of their normal job functions but at a slower pace and/or with reduced output, it is not considered an RWI.		

6. IS IT A MEDICAL TREATMENT INJURY/ ILLNESS (MTI)? Any tick in the "YES" column means it is an MTI and the remainder of this document does not need to be completed.		
Questions	YES	NO
1. Insertion of sutures, and/or the use of glue where it is used in lieu of sutures (i.e. used for wound adhesion rather than cosmetic purposes or to maintain the cleanliness of the wound)?	<input type="checkbox"/>	<input type="checkbox"/>
2. Treatment of fractures or other internal injuries?	<input type="checkbox"/>	<input type="checkbox"/>
3. Treatment of bruises by drainage of blood?	<input type="checkbox"/>	<input type="checkbox"/>
4. Treatment of second or third-degree burns?	<input type="checkbox"/>	<input type="checkbox"/>
5. Surgical debridement?	<input type="checkbox"/>	<input type="checkbox"/>
6. Treatment of infection (other than the application of non-prescribed topical medications or antibiotics prescribed only for precautionary purposes)?	<input type="checkbox"/>	<input type="checkbox"/>
7. Removal of foreign bodies embedded in the eye, or requiring removal from the eye by means other than irrigation or removal with cotton swab?	<input type="checkbox"/>	<input type="checkbox"/>
8. Removal of foreign bodies from a wound (other than the eyes) by means other than irrigation, tweezers, cotton swabs or other simple means?	<input type="checkbox"/>	<input type="checkbox"/>
9. Use of prescription-only medications (except a single dose administered on the first visit for minor injury or discomfort, or medications used for solely for diagnostic purposes)?	<input type="checkbox"/>	<input type="checkbox"/>
10. Any work injury that results in a loss of consciousness?	<input type="checkbox"/>	<input type="checkbox"/>

7. IS IT A FIRST AID INJURY/ ILLNESS (FAI)? Any tick in the "YES" column means it is a FAI.		
Questions	YES	NO
1. Does the injury/ illness meet the definition a First Aid Injury (refer to Appendix 1, IGO Injury & Occupational Illness Classification and Reporting Procedure	<input type="checkbox"/>	<input type="checkbox"/>
2. Visits to a physician or other licensed health care professional were solely for observation, diagnosis or counselling	<input type="checkbox"/>	<input type="checkbox"/>
3. Visits to physicians or other licensed health care professionals solely for therapy as a preventative measure (e.g. physiotherapy or massage as a preventative therapy, tetanus or flu shots)	<input type="checkbox"/>	<input type="checkbox"/>
4. The conduct of diagnostic procedures, such as X-rays and blood tests, including the administration of prescription medications used solely for diagnostic purposes (e.g. eye drops to dilate pupils etc.)	<input type="checkbox"/>	<input type="checkbox"/>
5. Placement of wound adhesive glue only for the maintenance of cleanliness or cosmetic purposes.	<input type="checkbox"/>	<input type="checkbox"/>
6. The application of non-prescribed topical medications or antibiotics prescribed only for prophylactic treatment of infection	<input type="checkbox"/>	<input type="checkbox"/>
7. Use of a single dose prescription medication administered on the first visit for minor injury or discomfort	<input type="checkbox"/>	<input type="checkbox"/>
8. Simple administration of oxygen (precautionary measure)	<input type="checkbox"/>	<input type="checkbox"/>