



## First Aid Policy

§2440 Employer's compliance with medical services and first aid standards

All employers shall comply with standards relating to the ready availability of medical services and first aid adopted by the Occupational Safety and Health Standards Board, pursuant to Chapter 6 (commencing with section 140).

§5402 As used in this subdivision, "first-aid" means any one time treatment and any follow-up visit for the purpose of observation of minor scratches, cuts, burns, splinters, or other minor industrial injury, which do not ordinarily require medical care. This one-time treatment, and follow-up visit for the purpose of observations, is considered first aid even though provided by a physician or registered professional personnel. "Minor industrial injury" shall not include serious exposure to a hazardous substance as defined in subdivision (i) of Section 6302.

§9780.2 Employer duty to provide First Aid and Emergency Treatment

Where an employee has notified his or her employer in writing prior to date of injury that he or she wishes to be treated by a personal physician pursuant of Labor Code Section 4600, and section 9780.1 of this Article, the employer shall continue to have the duty to provide first aid treatment, and appropriate emergency treatment reasonably required by the nature of the injury or illness. Thereafter, if further medical treatment is reasonably necessary, the employee may be treated by his or her personal physician at the expense of the employer.

§14300.7 (b)(5)(B) What is First Aid?

1. Visit to a physician or other Licensed Health Care provider (LHCP) solely for observation or counseling.
2. Diagnostic procedures, such as x-rays and blood tests, and use of prescriptions medications used solely for diagnostic purposes (e.g. eye drops).

§14300.7(b)(5)(B) Definition of first-aid:

1. Using non-prescription medications at non-prescription strength (for medication available in both prescription and non-prescription form, a recommendation by a physician other licensed health-care professional to use a non-prescription medication at prescription strength is considered medical treatment for record-keeping purposes): When a provider recommends prescription strength for medications available in both prescription and non-prescription form, this is considered Medical Treatment.
2. Administration of tetanus immunizations. ***Other immunizations, such as Hepatitis B or Rabies vaccines are considered Medical Treatment.***
3. Cleaning, flushing or soaking wounds on the surface of the skin
4. Using wound coverings such as band, Band-Aids, gauze pads, etc.; or using butterfly bandages Steri-Strips (other wound closing devices such as sutures, staples, etc. are considered Medical Treatment).
5. Using hot & cold therapy

6. Use of non-rigid means of support, such as elastic bandages, wraps, non-rigid back belts, etc. ***Use of rigid stays or other systems designed to immobilize body parts are considered Medical Treatment for record keeping purposes.***
7. Use of temporary immobilization devices while transporting an accident victim (e.g. splints, slings, neck collars, back boards, etc.)
8. Drilling of a fingernail or toe nail to relieve pressure or draining fluid from a blister. Use of eye patches
9. Removing foreign bodies from the eye using only irrigation or a cotton swab
10. Removing splinters or foreign material from areas other than the eye by irrigation, tweezers, cotton swabs or other simple means
11. Using finger guards
12. Using massage, (physical therapy and/or chiropractic treatments are considered Medical Treatments for recordkeeping purposes); or
13. Drinking fluids for relief of heat stress

The treatment listed in section 14300.7(b)(5)(B) are considered first aid even when a physician or other LHCP provides the care. ***Similarly, OSHA considers treatment beyond first aid to be Medical Treatment even when it is provided by someone other than a physician or LHCP.***

# WCIRB Bulletin

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525 Market Street, Suite 800 • San Francisco, CA 94105-2767 • 415.777.0777 • Fax 415.778.7007 • [www.wcirbonline.org](http://www.wcirbonline.org) • [wcirb@wcirbonline.org](mailto:wcirb@wcirbonline.org)

## Reporting of First Aid Claims

This Bulletin is being issued to reiterate that insurers are required to report all claims, including first aid claims, to the WCIRB.

Between 1979 and 1994, the WCIRB issued four Bulletins, each stating that (1) employers must report all claims to their insurers, even those considered first aid or small claims and (2) insurers must report all losses occurring under a policy to the WCIRB notwithstanding the size of the claim).<sup>1</sup> Although these Bulletins were issued before the advent of open rating in 1995, there have been no significant changes in the laws and regulations governing the reporting of workers' compensation claims that would alter these reporting requirements. California Insurance Code Sections 11651 and 11755, Labor Code Section 3700, the standard insurance policy, and the *California Uniform Statistical Reporting Plan—1995* all continue to require that every loss occurring under a policy be reported.

In addition, Labor Code Section 6409(a) provides that a physician who attends an injured employee "shall file a complete report of every occupational injury or occupational illness to the employee with the employer, or if insured, with the employer's insurer...." The employer or insurer must then file the report with the Department of Industrial Relations (DIR), through its Division of Labor Statistics and Research within five days of the initial examination. There is no "first aid" exception to this requirement. The California Department of Insurance (CDI) posts on its website the *Consumers: Workers' Compensation Insurance Brochure (Revised August 2004)*, stating that, "[I]n conjunction with the Department of Industrial Relations, Division of Workers Compensation, the California Department of Insurance wants to remind all employers, physicians, insurance carriers and self-insurers of the need to comply with Section 6409(a) of the California Labor Code." An insurer that fails to report first aid claims may be in violation of California Insurance Code Section 11755.

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<sup>1</sup> The WCIRB published Bulletins on this issue dated October 31, 1994, October 11, 1988, March 14, 1984 and June 22, 1979.

MODERATE

# UNIVERSAL PAIN ASSESSMENT TOOL

This pain assessment tool is intended to help patient care providers assess pain according to individual patient needs. Explain and use 0-10 Scale for patient self-assessment. Use the faces or behavioral observations to interpret expressed pain when patient cannot communicate his/her pain intensity.

