



champlin

A Subsidiary of Union Pacific Corporation

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PLAINTIFF'S EXHIBIT

UPRC-188

INJURY/ILLNESS REPORTING AND TREATMENT

PROCEDURE NO. 70

EFFECTIVE MAY 1, 1982

I. PURPOSE

To define work related injuries and/or illnesses, and to outline a consistent course of action that assures compliance to applicable Federal, State, County and Corporate regulations.

II. SCOPE

This procedure is applicable to all Champlin employees working at the Corpus Christi Refinery. Supervisors are responsible for implementing the procedure and the Safety Department will audit for timely reporting and compliance.

III. PROCEDURE

A. Definitions

1. On-the-Job Injury/Illness: An on-the-job incident is an injury/illness arising out of and during the course of employment. To qualify as an on-the-job injury/illness, there has to be a specific on-the-assigned-job incident related to the case.
2. Off-the-Job Injury/Illness: Off-the-job injury is an ailment experienced while away from work which may or may not affect the employee's abilities on the job.
3. Personal Illness: Personal illness is an ailment or bodily disorder occurring on or off the job, which may or may not affect work abilities. Examples: diabetes, appendicitis, common cold, etc.
4. Lost Time Injury: For the purpose of this procedure, a lost time injury is defined as an injury resulting from an on-the-job incident that causes an employee to miss a scheduled work day or shift after the date of the injury. A lost time injury must be supported by a physician's diagnosis and is subject to interpretation by a Company authorized physician and/or personnel.
5. First Aid Case: A first aid case is an injury/illness which only requires minor care provided either at the Plant or an outside facility, whereby the employee returns to work immediately or on the shift subsequent to the one on which the injury was inflicted.

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6. Recordable Case: A recordable case is an injury/illness which requires verification or actual treatment by a physician. It may or may not be chargeable for performance ratings.
7. Light Duty: At the Corpus Christi refinery there is no "light duty" work. Therefore, employees having a release prescribing "Light Duty" will not be permitted to work.
8. Physical Limitation: Employees may be permitted to work who have well defined physical limitations which in the opinion of the Plant Nurse and respective supervisor, will not jeopardize health, safety, or job performance.
9. Workers' Compensation Case: A Workers' Compensation case is an on-the-job injury/illness which qualifies under the Workman's Compensation Act and is regulated and controlled through Texas State Laws.
10. Injury Frequency: Number of injuries involving days away from work per 1,000,000 man-hours worked.

$$\frac{\text{Lost Workday Cases} \times 1,000,000}{\text{Man-hours Worked}} = \text{Frequency Rate}$$
11. Injury Incident: Number of recordable injuries per 200,000 man hours worked.

$$\frac{\text{Cases} \times 200,000}{\text{Man-hours Worked}} = \text{Incident Rate}$$

B. General

1. Reporting Job Related Injury/Illness: Employees shall promptly report job incurred injury/illness to their respective supervisor. Cases reported during normal day shift working hours (8:00 a.m. to 4:00 p.m.) will be referred to Safety Department (First Aid) by the supervisor.

Employees shall be instructed to report job related injuries/illnesses that manifest themselves when away from the plant to their respective supervisor or to the on-duty shift superintendent. The supervisor receiving such notification shall instruct the employee to promptly report to the Plant Nurse, if during regular office hours. During other hours the employee should be instructed to call the Plant Nurse at home or one of the Safety personnel as per listing attached. If he refuses, advise him that his time off cannot be classified as "Industrial Sick Leave" until he is under



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the prescription of a licensed physician. The supervisor receiving notification of a job related injury/illness shall initiate a Corpus Christi Refinery Injury Report, providing information given by the employee. The Injury Report must provide the following information:

- Nature of injury/illness (sore back, foreign object in eye, irritation, etc.).
- Accident events causing the injury/ailment.
- Date and time of accident.
- Why accident being reported late.
- Witnesses to accident.
- Doctor and/or hospital where treatment will be received.

The refinery nurse should be notified immediately of such situations, and/or when work time will be lost. Employees may elect to see a physician of their choice. They must make their own arrangements for services, and the necessary medical reports and releases. The classification of time off as "Industrial Sick Leave" does not take effect until after the doctor examines the employee and prescribes time off from work. A physician's prescription for time off work will not be made retroactive. Employees off work, claiming job related injury/illness and under the care of their physician of preference, will be required to report to the Plant Nurse and/or authorized Company Physician for examination, as scheduled by the Plant Nurse. An employee refusing to report to the Nurse or the Company Physician for examination would not be eligible for Industrial Sick Leave.

2. Returning to Work after Job Related Injury/Illness: Employees returning to work after job related injury/illness must be cleared through Safety department (First Aid), regardless of the number of days missed. A release to return to work from the attending physician (if other than Company Physician) is required. The Plant Nurse will evaluate the situation and may require examination by the Company Physician on certain cases. The decision of the Company Physician regarding returning to work is final. Releases provided by non-Company authorized physicians for return to work shall accurately define any physical disabilities and/or work restrictions as well as applicable time periods. A release to "Light Duty" work is not acceptable.

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In cases where the Company Physician authorizes return to work before the attending physician, additional time off the job will not be classified as "Industrial Sick Leave". State Worker's Compensation benefits would continue according to applicable regulations, and upon approval of the responsible supervisor, "Personal Sick Leave" may be authorized as available.

3. Reporting Off-the-Job Injury/Illness: Supervisors shall have their employees report off-the-job related injuries/illnesses that could affect their ability to work safely. An employee who will lose work time due to an off-the-job injury/illness shall be required to notify the on-duty supervisor as soon as practical upon learning that he will not report to work as scheduled.
4. Returning to Work After Off-the-Job Injury/Illness: Employees returning to work after missing less than three scheduled work days because of an off-the-job injury/illness, shall be carefully assessed by the responsible supervisor. Cases of question as to the employee's ability to safely and effectively performed assigned duties, shall be either:
 - a. referred directly to the Plant Nurse if during normal First Aid office working hours.
 - b. Referred to an authorized physician (see C. 3) for examination for fitness to work.
 - c. Allowed to work within specified restrictions provided work on a regular job is available. A member of the Safety Department, preferably the Manager, should be promptly notified of these cases.

Employees returning after having surgery, being hospitalized, and/or missing three (3) or more work days on sick leave, must be cleared through the Safety department (First Aid) before reporting for work. A release to return to work is required from the attending physician stating nature of the injury/illness, and the disability or work restriction. As determined by the Plant Nurse, in some cases it will be necessary to obtain a release from the Company Physician.

The Employee Relations Department should be advised as soon as practical by the responsible supervisor, of cases where employees are not allowed to return to work because of work restrictions.

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C. Instruction

1. Obtaining First Aid/Treatment: Supervisors should instruct their employees to report the injury directly to them. Serious injuries requiring prompt attention may be reported directly to the Safety Department (First Aid) or Dr. Charles R. Craig.
2. Place of First Aid/Treatment: Supervisors should refer the injured employee to the Plant Nurse's office during regular work-days between the hours of 8:00 a.m. to 4:00 p.m. During all other times the Plant Nurse or Safety personnel must be notified. For serious injuries, render life saving first aid as needed, and get help; telephoning extension 320, or using a plant radio on Channel #2 by calling Base 3.
3. Referral: Employee referrals to an outside facility will be coordinated by the Plant Nurse. Transportation will be provided by a member of Security. Medical facilities normally used are:
 - a. Dr. Charles R. Craig
4115 Up River Road
Corpus Christi, Texas
882-9288
 - b. Memorial Hospital Emergency Room
2606 Hospital Blvd.
Corpus Christi, Texas
881-4000
4. Injury/Illness Reporting Form: Injured employee's supervisor will initiate the Injury Report Form (CCR-2, Attachment 1) by completing the top part of the form and having the injured party complete the second part. A supervisor receiving notification from an employee away from the plant who is claiming a job related injury/illness, shall initiate the first aid report shown on Page 7 of this procedure and immediately notify the Plant Nurse and/or Safety personnel. The original copy will be delivered to the Safety Department with a copy of it to the respective Department Manager.

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5. Failure to Report to Work: All employees shall be instructed to notify department supervision, or others as designated, as soon as practical and possible upon learning that they will not report for work as scheduled. Supervisors receiving such notification, shall ask the employee if he is claiming a job related injury/illness, or a personal illness, or injury. If the employee states that he is claiming a job related injury/illness, the supervisor shall advise the employee to report to the Plant Nurse if practical, and if not, refer him as outlined in Section C. 3 of this procedure. If loss of work time is or may be involved, a member of the Safety Department will be notified.
6. Work Limitation or Restrictions: A written statement, from the attending physician, describing the restriction must be provided to the Plant Nurse. Company provided Health Services can be used by the supervisor to assist in evaluating employee physical capabilities. Supervisors permitting employees to return to work with physical restrictions or work limitations, shall advise the employee of the restrictions and assure that his work activities do not violate the physical restriction. An employee with a physical restriction requiring the use of crutches, or prevents the wearing of shoes, should not be permitted in the operating areas of the Plant.

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The responsible supervisor shall complete the first aid report at the time the injury is called to his attention and advise the employee to turn it in at medical services to the nurse.

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NAME			OCCUPATION WHEN INJURED		BADGE NO.		SHIFT	
REASON FOR VISIT								
DESCRIBE WHAT HAPPENED								
DATE OF INJURY		TIME OF INJURY A.M. P.M.		SUPERVISOR SIGNATURE			REPORTED TO FIRST AID DATE TIME A.M. P.M.	
							LEFT FIRST AID DATE TIME A.M. P.M.	
RECOMMENDATIONS AND/OR TREATMENT:								
						PHYSICIAN / NURSE		OTHER FIRST AID ☐
DESCRIBE CAUSE OF ACCIDENT—(BE SPECIFIC)								
WHAT ACTION SHOULD BE TAKEN TO PREVENT RECURRENCE OF THIS ACCIDENT								
WHAT ACTION HAS ALREADY BEEN TAKEN								
WITNESS TO ACCIDENT—NAME(S)				DATE OF REPORT		SUPERVISOR'S SIGNATURE		

DISTRIBUTION: ☐ WHITE-FIRST AID ☐ CANARY-SUPERVISOR ☐ PINK-DEPARTMENT HEAD ☐ GOLD-SAFETY

CCR-2

NCD Systematic Design
A-94819

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Attachment 2

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<u>Safety Department Personnel</u>	<u>Home Phone</u>
Kathryn Gieptner	852-4372
Brack Routh	991-4153
Jim Kucera	991-5032
Bob Koy	854-9042
Dave Fuqua	992-2459
Bill Rolando	888-2079

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