| NATURE OF INJURY |
|---|
| 01. No Physical Injury |
| 02. Amputation |
| 03. Angina Pectoris |
| 04. Burn |
| 07. Concussion |
| 10. Contusion |
| |
| 13. Crushing |
| 16. Dislocation |
| 19. Electric Shock |
| 22. Enucleation |
| 25. Foreign Body |
| 28. Fracture |
| 30. Freezing |
| 31. Hearing Loss or Impairment |
| 32. Heat Prostration |
| 34. Hernia |
| 36. Infection |
| 37. Inflammation |
| 40. Laceration |
| 41. Myocardial Infarction |
| 42. Poisoning - General |
| 43. Puncture |
| 46. Rupture |
| 47. Severance |
| 49. Sprain or Tear |
| 52. Strain or Tear |
| 53. Syncope |
| 54. Asphyxiation |
| 55. Vascular |
| 58. Vision Loss |
| 59. All Other Specific Injuries, NOC |
| 60. Dust Disease, NOC |
| 61. Asbestosis |
| 62. Black Lung |
| 63. Byssinosis |
| 64. Silicosis |
| 65. Respiratory Disorders |
| 66. Poisoning - Chemical, (Other Than Metals) |
| 67. Poisoning - Metal |
| 68. Dermatitis |
| 69. Mental Disorder |
| 70. Radiation |
| 71. All Other Occupational Disease Injury, NOC |
| 72. Loss of Hearing |
| 73. Contagious Disease |
| 74. Cancer |
| 75. AIDS |
| 76. VDT - Related Diseases |
| 77. Mental Stress |
| 78. Carpal Tunnel Syndrome |
| 79. Hepatitis C |
| 80. All Other Cumulative Injury, NOC |
| 90. Multiple Physical Injuries Only |
| 91. Multiple Injuries Including Both Physical & Psychological |
| |

INSTRUCTIONS FOR FILING WC FIRST REPORT OF IN ILIPY

PART OF BODY

10. Multiple Head Injury

. 11. Skull 12. Brain

13. Ear(s)

14. Eye(s)

15. Nose

16. Teeth

17. Mouth

18. Soft Tissue

21. Vertebrae

22. Disc 23. Spinal Cord

24. Larynx 25. Soft Tissue

26. Trachea

32. Elbow

34. Wrist

35. Hand

43 Disc

44. Chest

46. Pelvis 47. Spinal Cord

49. Heart

51. Hip 52. Upper Leg

53. Knee 54. Lower Leg

55. Ankle 56. Foot

57. Toes 58. Big Toes

60. Lungs

62. Buttocks

36. Finger(s) 38. Shoulder(s)

39. Wrist (s) & Hand(s)

40. Multiple Trunk

41. Upper Back Area

42. Lower Back Area

45. Sacrum and Coccyx

50. Multiple Lower Extremities

61. Abdomen Including Groin

64. Artificial Appliance

66. No Physical Injury

99. Whole Body

90. Multiple Body Parts

63. Lumbar & or Sacral Vertebrae

91. Body Systems and Multiple Body

48. Internal Organs

31. Upper Arm

33. Lower Arm

19. Facial Bones

20. Multiple Neck Injury

30. Multiple Upper Extremities

| INSTRUCTIONS FOR FILING WE FIRST REPORT OF INJURY |
|--|
| Employers should send a completed legible form to the insurance carrier or, if self-insured, to the designated |
| office handling their workers' compensation claims. The insurance carrier or designated office should forward this |
| First Report on to the Workers' Compensation Division, Department of Labor, Montgomery, Alabama 36131 within |
| fifteen (15) days from the date of injury or date of notification to the employer for all injuries for which |
| compensation is claimed or paid. This includes deaths, permanent disabilities or temporary disabilities exceeding |
| |
| three (3) days). |
| Block 1. A number assigned by the insured to identify a specific claim |
| Block 2. An identifier for a specific claim within a claim administrator's claims processing system. |
| Block 3. Case number from log maintained for OSHA |
| Block 4 - Block 14. Self Explanatory |
| Block 15. Employer Federal ID number |
| Block 16. Employer Unemployment Compensation Account Number |
| Block 17. NAICS Industry Codes http://dir.alabama.gov/docs/forms/wc_naics.pdf |
| Block 18. Carrier's name |
| Block 19. Carrier's FEIN |
| Block 20. A code representing the kind of entity providing financial responsibility for the claim, exp: (1) |
| Insurance Carrier (S) Self Insurer (G) Guarantee Fund/Group |
| Block 21 through Block 63. Self Explanatory |
| |
| Block 64. Nature of Injury Codes http://dir.alabama.gov/docs/forms/wcio_nature_table.pdf |
| Block 65. Part of Body Codes http://dir.alabama.gov/docs/forms/wcio_part_table.pdf |
| Block 66. Cause of Injury Codes http://dir.alabama.gov/docs/forms/wcio_cause_table.pdf |
| Block 67 through Block 81. Self Explanatory |
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CAUSE OF INJURY 01. Chemicals 02. Hot Objects or Substances 03. Temperature Extremes 04. Fire or Flame 05. Steam or Hot Fluids 06. Dust. Gases. Fumes or Vapors 07. Welding Operation 08. Radiation 09. Contact With, NOC. 10. Machine or Machinery 11. Cold Objects or Substances 12. Object Handled 13. Caught In, Under or Between, NOC. 14. Abnormal Air Pressure 15. Broken Glass 16. Hand Tool, Utensil; Not Powered 17. Object Being Lifted or Handled 18. Powered Hand Tool, Appliance 19. Caught, Puncture, Scrape, NOC. 20. Collapsing Materials (Slides of Earth) Either Man Made or Natural 25. From Different Level (Elevation) Off Wall, Catwalk, Bridge, Etc. 26. From Ladder or Scaffolding 27. From Liquid or Grease Spills 28. Into Openings Shafts, Excavations, Floor Openings, Etc. 29. On Same Level 30. Slipped, Do Not Fall 31. Fall, Slip or Trip, NOC. 32. On Ice or Snow 33. On Stairs 40. Crash of Water Vehicle 41. Crash of Rail Vehicle 45. Collision or Sideswipe With Another Vehicle 46. Collision with a Fixed Object Standing Vehicle or Stationary Object 47. Crash of Airplane 48. Vehicle Upset Overturned or Jackknifed 50. Motor Vehicle, NOC. 52. Continual Noise 53. Twisting 54. Jumping 55. Holding or Carrying 56. Lifting 57. Pushing or Pulling 58. Reaching 59. Using Tool or Machinery 60. Strain or Injury By, NOC. 61. Wielding or Throwing 65. Moving Part of Machine 66. Object Being Lifted or Handled 67. Sanding, Scraping, Cleaning Operation 68. Stationary Object 65. Insufficient Info to Properly Identify 69. Stepping on Sharp Object 70. Striking Against or Stepping On, NOC. 74. Fellow Worker; Patient 75. Falling or Flving Object 76. Hand Tool or Machine in Use 77. Motor Vehicle 78. Moving Parts of Machine 79. Object Being Lifted or Handled 80. Object Handled By Others 81. Struck or Injured, NOC. 82. Absorption, Ingestion or Inhalation, NOC 84. Electrical Current 85. Animal or Insect 86. Explosion or Flare Back 87. Foreign Matter (Body) in Eye(s) 88. Natural Disasters 89. Person in Act of a Crime 90. Other Than Physical Cause of Injury 91. Mold 94. Repetitive Motion Callous, Blister, Etc. 95. Rubbed or Abraded, NOC. 96. Terrorism 97. Repetitive Motion Carpel Tunnel Syndrome 98. Cumulative, NOC

99. Other - Miscellaneous, NOC